

Research Data Distribution Center
Medicare Provider Analysis and Review (MEDPAR)
Record – Data Dictionary
(Updated March 2015)

Short Variable Name

Label

BENE_ID

Beneficiary Identification Number

Beneficiary Identification Number for this data request

LONG SAS NAME: BENE_ID
SHORT SAS NAME: BENE_ID
FIELD TYPE: CHAR
FIELD LENGTH: 15

MEDPAR_ID

MEDPAR ID Number

Unique key for MEDPAR claim.

LONG SAS NAME: MEDPAR_ID
SHORT SAS NAME: MEDPARID
FIELD TYPE: CHAR
FIELD LENGTH: 15

MEDPAR_YR_NUM

MEDPAR Year of Record

Year of the MEDPAR record.

LONG SAS NAME: MEDPAR_YR_NUM
SAS NAME: MEDPAR_YR_NUM
FIELD TYPE: CHAR
FIELD LENGTH: 4

CLM_TYPE

MEDPAR NCH Claim Type Code

The code used to identify the type of claim record being processed in NCH.

NOTE1: During the Version H conversion this field was populated with data throughout history (back to service year 1991).

NOTE2: During the Version I conversion this field was expanded to include inpatient 'full' encounter claims (for service dates after 6/30/97).

NOTE3: Effective with Version 'J', 3 new code values have been added to include a type code for the Medicare Advantage claims (IME/GME, no-pay and paid as FFS). During the Version 'J' conversion, these type codes were populated throughout history.

LONG SAS NAME: NCH_CLM_TYPE_CD
SAS NAME: CLM_TYPE
FIELD TYPE: CHAR
FIELD LENGTH: 2

DERIVATIONS:
FFS CLAIM TYPE CODES DERIVED FROM:
NCH CLM_NEAR_LINE_RIC_CD
NCH PMT_EDIT_RIC_CD

NCH CLM_TRANS_CD
NCH PRVDR_NUM

INPATIENT 'FULL' ENCOUNTER TYPE CODE DERIVED
FROM:

(Pre-HDC processing -- AVAILABLE IN NCH)

CLM_MCO_PD_SW
CLM_RLT_COND_CD
MCO_CNTRCT_NUM
MCO_OPTN_CD
MCO_PRD_EFCTV_DT
MCO_PRD_TRMNTN_DT

SOURCE:
NCH

EQ_BIC

Equated BIC

The code categorizing groups of BICs representing similar relationships between the beneficiary and primary wage earner

LONG SAS NAME: EQTBL_BIC_CD
SHORT SAS NAME: EQ_BIC
FIELD TYPE: CHAR
FIELD LENGTH: 2

NOTE:

The equitable BIC module electronically matches two records that contain different BICs where it is apparent both are records for the same beneficiary. It validates the BIC and returns a base BIC under which to house the record in the National Claims History (NCH) databases. (All records for a beneficiary are stored under a single BIC).

SOURCE:
NCH

AGE_CNT

MEDPAR Beneficiary Age Count

The beneficiary's age as of date of admission.

LONG SAS NAME: BENE_AGE_CNT
SHORT SAS NAME: AGE_CNT
FIELD TYPE: NUM
FIELD LENGTH: 4

NOTE: This field is derived by subtracting the beneficiary date of birth from the admission date, present on the first claim record included in the stay. Exception: If the resulting age is 64, and the MSC = 10 or 11, the age is changed to 65.

SOURCE:
NCH

SEX

MEDPAR Beneficiary Sex Code

The sex of a beneficiary.

LONG SAS NAME: BENE_SEX_CD
SHORT SAS NAME: SEX
FIELD TYPE: CHAR
FIELD LENGTH: 1

CODES:
0 = Unknown
2 = Female

1 = Male

NOTE: This field comes from the sex code that is present on the first claim record included in the stay.

SOURCE:
NCH

RACE

MEDPAR Beneficiary Race Code

The race of the beneficiary.

LONG SAS NAME: BENE_RACE_CD
SHORT SAS NAME: RACE
FIELD TYPE: CHAR
FIELD LENGTH: 1

CODES:
1 = White
2 = Black
3 = Other
4 = Asian
5 = Hispanic
6 = North American Native
0 = Unknown

NOTE: This field comes from the race code that is present on the first claim record included in the stay.

SOURCE:
NCH

MS_CD

MEDPAR Beneficiary Medicare Status Code

The CWF-derived reason for a beneficiary's entitlement to Medicare benefits, as of the reference date.

LONG SAS NAME: BENE_MDCR_STUS_CD
SHORT SAS NAME: MS_CD
FIELD TYPE: CHAR
FIELD LENGTH: 2

DERIVATIONS:
CWF derives MSC from the following:
1. Date of birth
2. Claim through date
3. Original/Current reasons for entitlement
4. ESRD indicator
5. Beneficiary claim number

Items 1,3,4,5 come from the CWF beneficiary master record; Item 2 comes from the FI/Carrier claim record. MSC is assigned as follows:

MSC	OASI	DIB	ESRD	AGE	BIC
10	YES	N/A	NO	65 AND OVER	N/A
11	YES	N/A	YES	65 AND OVER	N/A
20	NO	YES	NO	UNDER 65	N/A
21	NO	YES	YES	UNDER 65	N/A
31	NO	NO	YES	ANY AGE	T.

SOURCE:
NCH

STATE_CD

MEDPAR Beneficiary Residence SSA Standard State Code

The SSA standard state code of a beneficiary's residence.

LONG SAS NAME: BENE_RSDNC_SSA_STATE_CD
SHORT SAS NAME: STATE_CD
FIELD TYPE: CHAR
FIELD LENGTH: 2

NOTE: This field comes from the state code that is present on the first claim record included in the stay.

SOURCE:
NCH

CNTY_CD

MEDPAR Beneficiary Residence SSA Standard County Code

The SSA standard county code of a beneficiary's residence.

LONG SAS NAME: BENE_RSDNC_SSA_CNTY_CD
SHORT SAS NAME: CNTY_CD
FIELD TYPE: CHAR
FIELD LENGTH: 3

NOTE: This field comes from the county code that is present on the first claim record included in the stay.

SOURCE:
NCH

BENE_ZIP

MEDPAR Beneficiary Mailing Contact Zip Code

The zip code of the mailing address where the beneficiary may be contacted.

LONG SAS NAME: BENE_MLG_CNTCT_ZIP_CD
SHORT SAS NAME: BENE_ZIP
FIELD TYPE: CHAR
FIELD LENGTH: 5

NOTE: This field comes from the zip code that is present on the first claim record included in the stay.

SOURCE:
NCH

ADMSNDAY

MEDPAR Admission Day Code

The code indicating the day of the week on which the beneficiary was admitted to a facility.

LONG SAS NAME: ADMSN_DAY_CD
SHORT SAS NAME: ADMSNDAY
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived from the admission date that is present on the first claim record included in the stay.

SOURCE:
NCH

DSCHRGCD

MEDPAR Beneficiary Discharge Status Code

The code used to identify the status of the patient as of the CLM_THRU_DT.

LONG SAS NAME:
BENE_DSCHRG_STUS_CD
SHORT SAS NAME: DSCHRGCD
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived from the claim status code that is present on the last claim record included in the stay.

SOURCE:
NCH

GHOPDCD

MEDPAR GHO Paid Code

The code indicating whether or not a GHO has paid the provider for the claim(s).

LONG SAS NAME: GHO_PD_CD
SHORT SAS NAME: GHOPDCD
FIELD TYPE: CHAR
FIELD LENGTH: 1

NOTE: This field comes from the GHO-paid indicator that is present on the first claim record included in the stay.

SOURCE:
NCH

PPS_IND

MEDPAR PPS Indicator Code

The code indicating whether or not the facility is being paid under the prospective payment system (PPS).

LONG SAS NAME: PPS_IND_CD
SHORT SAS NAME: PPS_IND
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
If the condition code not equal 65 on all of the claims included in the stay and the third position of the provider number is numeric set MEDPAR_PPS_IND_CD to 2 (PPS). Otherwise set it to 0 (Non PPS.)

SOURCE:
NCH

ORGNPINM

Organization NPI Number

On an institutional claim, the National Provider Identifier (NPI) number assigned to uniquely identify the institutional provider certified by Medicare to provide services to the beneficiary.

LONG SAS NAME: ORG_NPI_NUM
SHORT SAS NAME: ORGNPINM
FIELD TYPE: CHAR
FIELD LENGTH: 10

NOTE: This field comes from the organization NPI that is present on the first claim record included in the stay.

SOURCE:

NCH

PRVDRNUM

MEDPAR Provider Number

MEDPAR provider number.

LONG SAS NAME: PRVDR_NUM
SHORT SAS NAME: PRVDRNUM
FIELD TYPE: CHAR
FIELD LENGTH: 6

SOURCE:
NCH

SPCLUNIT

MEDPAR Provider Number Special Unit Code

The code identifying the special numbering system for units of hospitals that are excluded from PPS or hospitals with SNF swing-bed designation.

LONG SAS NAME: PRVDR_NUM_SPCL_UNIT_CD
SHORT SAS NAME: SPCLUNIT
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
If the third position of the provider number from the first claim record included in the stay equals 'M', 'R', 'S', 'T', 'U', 'W', 'Y' OR 'Z', it is moved to this field, otherwise it is blank.

SOURCE: NCH

SSLSSNF

MEDPAR Short Stay/Long Stay/SNF Indicator Code

The code indicating whether the stay is a short stay, long stay, or SNF.

LONG SAS NAME: SS_LS_SNF_IND_CD
SHORT SAS NAME: SSLSSNF
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived from the third position of the provider number that is present on the first claim record included in the stay.

SOURCE:
NCH

ACTV_XREF_IND

MEDPAR Active Cross Reference Indicator

LONG SAS NAME: ACTV_XREF_IND
SHORT SAS NAME: ACTV_XREF_IND
FIELD TYPE: CHAR
FIELD LENGTH: 1

SLCT_RSN_CD

MEDPAR Case or Control Record.

Specifies whether this record is a case or control record.

LONG SAS NAME: SLCT_RSN_CD
SHORT SAS NAME: SLCT_RSN_CD
FIELD TYPE: CHAR
FIELD LENGTH: 1

FACLMCNT

MEDPAR Stay Final Action Claims Count

The count of the number of claim records (final action) included in the stay.

LONG SAS NAME: STAY_FINL_ACTN_CLM_CNT
SHORT SAS NAME: FACLMCNT
FIELD TYPE: NUM
FIELD LENGTH: 5

DERIVATIONS:
This field is derived by counting the number of final action claims used to create the stay.

SOURCE:
NCH

ACRTNDT

MEDPAR Latest Claim Accretion Date

The date the latest claim record included in the stay was accreted (posted/processed) to the beneficiary master record at the CWF host.

LONG SAS NAME: LTST_CLM_ACRTN_DT
SHORT SAS NAME: ACRTNDT
FIELD TYPE: DATE
FIELD LENGTH: 8

DERIVATIONS:
This field comes from the highest accretion date that is present on the claim records included in the stay.

SOURCE:
NCH

EXHST_DT

MEDPAR Beneficiary Medicare Benefit Exhausted Date

The last date for which the beneficiary had Medicare coverage. This field is completed only where benefits were exhausted before the discharge date and during the period covered by stay.

LONG SAS NAME: BENE_MDCR_BNFT_EXHST_DT
SHORT SAS NAME: EXHST_DT
FIELD TYPE: DATE
FIELD LENGTH: 8

DERIVATIONS:
This field comes from the highest benefits exhausted date that is present on the claim records included in the stay.

SOURCE:
NCH

QLFYFROM

MEDPAR SNF Qualification From Date

The beginning date of the beneficiary's qualifying stay. For Inpatient claims, the date relates to the PPS portion of the inlier for which there is no utilization to benefits. For SNF claims, the date relates to the qualifying stay from a hospital that is at least two days in a row if the source of admission is an 'a', or at least three days in a row if the source of admission is other than an 'a'.

LONG SAS NAME: SNF_QUALN_FROM_DT
SHORT SAS NAME: QLFYFROM
FIELD TYPE: DATE
FIELD LENGTH: 8

DERIVATIONS:
This field comes from occurrence span code = 70 and related occurrence span from date, if present on any of the claim records included in the stay. If more than one record has an occurrence span code = 70, with different span dates, the date from the last claim record included in the stay is used.

SOURCE:
NCH

QLFYTHRU

MEDPAR SNF Qualification Through Date

The ending date of the beneficiary's qualifying stay. For Inpatient claims, the date relates to the PPS portion of the inlier for which there is no utilization to benefits. For SNF claims, the date relates to the qualifying stay from a hospital that is at least two days in a row if the source of admission is an 'A', or at least three days in a row if the source of admission is other than an 'A'.

LONG SAS NAME: SNF_QUALN_THRU_DT
SHORT SAS NAME: QLFYTHRU
FIELD TYPE: DATE
FIELD LENGTH: 8

DERIVATIONS:
This field comes from the occurrence span code = 70 and related occurrence span thru date, if present on any of the claims included in the stay. If more than one record has an occurrence span code = 70, with different span dates, the date from the last claim record included in the stay is used.

SOURCE:
NCH

ADMSNDT

MEDPAR Admission Date

The date the beneficiary was admitted for Inpatient care or the date that care started.

LONG SAS NAME: ADMSN_DT
SHORT SAS NAME: ADMSNDT
FIELD TYPE: DATE
FIELD LENGTH: 8

NOTE: This field comes from the admission date that is present on the first claim record included in the stay.

SOURCE:
NCH

DSCHRGDT

MEDPAR Discharge Date

The date on which the beneficiary was discharged or died.

LONG SAS NAME: DSCHRG_DT
SHORT SAS NAME: DSCHRGDT
FIELD TYPE: DATE
FIELD LENGTH: 8

NOTE: This field comes from the highest claim thru date that is present on the claim records included in the stay, where the claim status code is other than '30' (still patient) on the last claim record included in the stay. Inpatient claims will always have a discharge date; SNF claims could have a zero date.

SOURCE:
NCH

CVRLVLDT

MEDPAR Covered Level Care Thru Date

The date on which a covered level of care ended in a SNF.

LONG SAS NAME: CVRD_LVL_CARE_THRU_DT
SHORT SAS NAME: CVRLVLDT
FIELD TYPE: DATE
FIELD LENGTH: 8

DERIVATIONS:
This field comes from the date associated with occurrence code = 22 if present on any of the claims included in the stay. If multiple dates, the highest date is used. This field is only applicable to SNF claims.

SOURCE:
NCH

DEATHDT

MEDPAR Beneficiary Death Date

The date the beneficiary died.

LONG SAS NAME: BENE_DEATH_DT
SHORT SAS NAME: DEATHDT
FIELD TYPE: DATE
FIELD LENGTH: 8

DERIVATIONS:
This field comes from the beneficiary death date, if present on the enrollment database, which is accessed prior to creation of the quarterly MEDPAR file.

SOURCE:
NCH

DEATHCD

MEDPAR Beneficiary Death Date Verified Code

The code indicating whether the beneficiary's date of death has been verified (SOURCE: SSA's MBR) or originated from a claim record.

LONG SAS NAME: BENE_DEATH_DT_VRFY_CD
SHORT SAS NAME: DEATHCD
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived from the enrollment database's beneficiary source death date code, or from the presence of a claim status code = '20' (expired) on the last claim record included in the stay.

SOURCE:
NCH

SSICD

MEDPAR Internal Use SSI Indicator Code

Internal use SSI Indicator code.

LONG SAS NAME: INTRNL_USE_SSI_IND_CD
SHORT SAS NAME: SSICD
FIELD TYPE: CHAR
FIELD LENGTH: 1

COMMENTS:
Limited availability; for internal use only; applicable to
Inpatient claims only. Where not available, this field is
blank.

SSIDAY

MEDPAR Internal Use SSI Day Count

Internal use SSI Day count.

LONG SAS NAME: INTRNL_USE_SSI_DAY_CNT
SHORT SAS NAME: SSIDAY
FIELD TYPE: NUM
FIELD LENGTH: 7

COMMENTS: Limited availability; for internal use;
applicable to inpatient claims only. Where not applicable,
this field will contain zeroes.

INTRNL_USE_SSI_DATA

MEDPAR Internal Use SSI Data

Internal Use SSI Data.

LONG SAS NAME: INTRNL_USE_SSI_DATA
SHORT SAS NAME: INTRNL_USE_SSI_DATA
FIELD TYPE: CHAR
FIELD LENGTH: 1

COMMENTS: Limited availability; for internal use;
applicable to inpatient claims only. Where not applicable,
this field will contain zeroes.

LOSCNT

MEDPAR Length of Stay Day Count

The count in days of the total length of a beneficiary's
stay in a hospital or SNF.

LONG SAS NAME: LOS_DAY_CNT
SHORT SAS NAME: LOSCNT
FIELD TYPE: NUM
FIELD LENGTH: 7

DERIVATIONS:
This field is derived by subtracting the date of
discharge (or thru date in SNF cases where beneficiary
is still a patient) from the date of admission. If
difference is '0,' the value becomes a '1.'

SOURCE:
NCH

OUTLRDAY

MEDPAR Outlier Day Count

The count of the number of days paid as outliers (either a
day or cost outlier) under PPS beyond the DRG threshold.

LONG SAS NAME: OUTLIER_DAY_CNT
SHORT SAS NAME: OUTLRDAY
FIELD TYPE: NUM
FIELD LENGTH: 5

DERIVATIONS:

This field is derived by checking the MEDPAR utilization day count against the DRG threshold table (DRG weights file).

SOURCE:

NCH

UTIL_DAY

MEDPAR Utilization Day Count

The count of the number of covered days of care that are chargeable to Medicare utilization for the stay.

LONG SAS NAME: UTLZTN_DAY_CNT

SHORT SAS NAME: UTIL_DAY

FIELD TYPE: NUM

FIELD LENGTH: 7

DERIVATIONS:

This field is derived by accumulating the utilization day count that is present on any of the claim records included in the stay (i.e., the sum of utilization days reported on the claims that comprise the stay).

SOURCE:

NCH

COIN_DAY

MEDPAR Beneficiary Total Coinsurance Day Count

The count of the total number of coinsurance days involved with the beneficiary's stay in a facility. For Inpatient services, the beneficiary is liable for a daily coinsurance amount after the 60th day and before the 91st day in a single spell of illness; for SNF services, the beneficiary is liable for a daily coinsurance amount after the 20th day and before the 101st day in a single spell of illness.

LONG SAS NAME: TOT_COINSRNC_DAY_CNT

SHORT SAS NAME: COIN_DAY

FIELD TYPE: NUM

FIELD LENGTH: 5

DERIVATIONS:

This field is derived by accumulating the coinsurance day count that is present on any of the claim records included in the stay (i.e., the sum of coinsurance days reported on the claims that comprise the stay).

SOURCE:

NCH

LRD_USE

MEDPAR Beneficiary LRD Used Count

The count of the number of lifetime reserve days (LRD) used by the beneficiary for this stay.

LONG SAS NAME: BENE_LRD_USE_CNT

SHORT SAS NAME: LRD_USE

FIELD TYPE: NUM

FIELD LENGTH: 5

DERIVATIONS:

This field is derived by accumulating the lifetime reserve days used count that is present on any of the claim records included in the stay (i.e., the sum of LRD reported on the claims that comprise the stay).

SOURCE:
NCH

COIN_AMT

MEDPAR Beneficiary Part A Coinsurance Liability Amount

The amount of money (rounded to whole dollars) identified as the beneficiary's liability for part A coinsurance for the stay.

LONG SAS NAME: BENE_PTA_COINSRNC_AMT
SHORT SAS NAME: COINT_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the beneficiary's part a coinsurance liability amount that is present on any of the claim records included in the stay (i.e., the sum of coinsurance amounts reported on the claims that comprise the stay).

SOURCE:
NCH

DED_AMT

MEDPAR Beneficiary Inpatient Deductible Liability Amount

The amount of money (rounded to whole dollars) identified as the beneficiary's liability for the Inpatient deductible for the stay.

LONG SAS NAME: BENE_IP_DDCTBL_AMT
SHORT SAS NAME: DED_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the beneficiary Inpatient deductible amount that is present on any of the claim records included in the stay (i.e., the sum of the Inpatient deductibles reported on the claims that comprise the stay).

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ Rounded; On-size (overflow) Situation = All nines

BLDDEDAM

MEDPAR Beneficiary Blood Deductible Liability Amount

The amount of money (rounded to whole dollars) identified as the beneficiary's liability for the blood deductible for the stay.

LONG SAS NAME: BENE_BLOOD_DDCTBL_AMT
SHORT SAS NAME: BLDDEDAM
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the beneficiary blood deductible liability amount that is present on any

of the claim records included in the stay (i.e., the sum of the blood deductibles reported on the claims that comprise the stay).

SOURCE:
NCH

PRPAYAMT

MEDPAR Beneficiary Primary Payer Amount

The amount of payment (rounded to whole dollars) made on behalf of the beneficiary by a primary payer other than Medicare, which has been applied to the covered Medicare charges for the stay.

LONG SAS NAME: BENE_PRMRY_PYR_AMT
SHORT SAS NAME: PRPAYAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the beneficiary primary payer payment amount that is present on any of the claim records included in the stay (i.e., the sum of the primary payer amounts reported on the claims that comprise the stay).

EDIT RULES:

+\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SOURCE:
NCH

OUTLRAMT

MEDPAR DRG Outlier Approved Payment Amount

The amount of additional payment (rounded to whole dollars) approved due to an outlier situation over the DRG allowance for the stay.

LONG SAS NAME: DRG_OUTLIER_PMT_AMT
SHORT SAS NAME: OUTLRAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the DRG outlier approved payment amount (value code = 17 amount) that is present on any of the claim records included in the stay (i.e., the sum of outlier amounts reported on the claims that comprise the stay).

COMMENTS:

This amount is already included in the MEDPAR Medicare payment amount.

EDIT RULES:

+\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SOURCE:
NCH

DISP_SHR

MEDPAR Inpatient Disproportionate Share Amount

The amount paid over the DRG amount (rounded to whole dollars) for the disproportionate share hospital for the stay.

LONG SAS NAME: IP_DSPRPTNT_SHR_AMT
SHORT SAS NAME: DISP_SHR
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the value amount associated with value code = 18 that is present on any of the claim records included in the stay (i.e., the sum of value code 18 amounts reported on the claims that comprise the stay).

COMMENTS:
This amount is already included in the MEDPAR Medicare payment amount.

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

SOURCE:
NCH

IME_AMT

MEDPAR Indirect Medical Education (IME) Amount

The amount of additional payment (rounded to whole dollars) made to teaching hospitals for IME for the stay.

LONG SAS NAME: IME_AMT
SHORT SAS NAME: IME_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the value amount associated with value code = 19 that is present on any of the claim records included in the stay (i.e., the sum of IME amounts - value code 19 amounts - reported on the claims that comprise the stay).

COMMENTS:
This amount is already included in the MEDPAR Medicare payment amount.

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

SOURCE:
NCH

DRGPRICE

MEDPAR DRG Price Amount

The amount (called the 'DRG price' for purposes of MEDPAR analysis) that would have been paid if no deductibles, coinsurance, primary payers, or outliers were involved (rounded to whole dollars).

LONG SAS NAME: DRG_PRICE_AMT
SHORT SAS NAME: DRGPRICE
FIELD TYPE: NUM

FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the following amounts: MEDPAR Medicare payment amount, MEDPAR beneficiary primary payer payment amount, MEDPAR beneficiary coinsurance liability amount, MEDPAR beneficiary Inpatient deductible liability amount, MEDPAR beneficiary blood deductible amount; and then subtracting from the sum the MEDPAR DRG outlier approved payment amount.

EDIT RULES:

+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

SOURCE:

NCH

PASSTHRU

MEDPAR Total Pass Through Amount

The total of all claim pass through amounts (rounded to whole dollars) for the stay.

LONG SAS NAME: PASS_THRU_AMT

SHORT SAS NAME: PASSTHRU

FIELD TYPE: NUM

FIELD LENGTH: 9

DERIVATIONS:

This field is derived by multiplying the pass thru per diem amount that is present on the last claim record included in the stay times the MEDPAR utilization day count (the sum of the utilization (covered) days reported on the claims that comprise the stay).

COMMENTS:

Items reimbursed as pass through include capital-related costs, direct medical education costs, kidney acquisition costs for hospitals approved as rtc's, and bad debts (per provider reimbursement manual, part 1, section 2405.2). The MEDPAR pass thru amount is not included in the MEDPAR Medicare payment amount.

EDIT RULES:

+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

SOURCE:

NCH

PPS_CPTL

MEDPAR Total PPS Capital Amount

The total amount (rounded to whole dollars) that is payable for capital PPS (e.g., reimbursement for depreciation, rent, certain interest, real estate taxes for hospital buildings/equipment subject to PPS).

LONG SAS NAME: TOT_PPS_CPTL_AMT

SHORT SAS NAME: PPS_CPTL

FIELD TYPE: NUM

FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the total PPS capital amount that is present on any of the claim records

included in the stay (i.e., the sum of total PPS capital amounts reported on the claims that comprise the stay).

COMMENTS:
This field is already included in the MEDPAR Medicare payment amount.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

IP_LOW_VOL_PYMT_AMT *MEDPAR Inpatient Low Volume Payment Amount*

The amount field used to identify a payment adjustment given to hospitals to account for the higher costs per discharge for low income hospitals under the Inpatient Prospective Payment System (IPPS).

LONG SAS NAME: IP_LOW_VOL_PYMT_AMT
SHORT SAS NAME: IP_LOW_VOL_PYMT_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the IP Low Volume Amount that is present on any of the claim records included in the stay (i.e. the sum of the low volume amounts reported on the claims that comprise the stay).

SOURCE:
NCH

TOTCHRG *MEDPAR Total Charge Amount*

The total amount (rounded to whole dollars) of all charges (covered and non-covered) for all services provided to the beneficiary for the stay.

LONG SAS NAME: TOT_CHRG_AMT
SHORT SAS NAME: TOTCHRG
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the total charge amount from all claim records included in the stay (i.e. the sum of total charges reported on the claims that comprise the stay).

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

CVRCHRG *MEDPAR Total Covered Charge Amount*

The portion of the total charges amount (rounded to whole dollars) that is covered by Medicare for the stay.

LONG SAS NAME: TOT_CVR_CHRG_AMT
SHORT SAS NAME: CVRCHRG
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by calculating the covered charges from all claim records included in the stay (i.e., subtract the revenue center non-covered charge amount from the revenue center total charge amount for revenue center code = 0001 that is reported on the claims that comprise the stay; sum the results). Exception: if there exists an erroneous condition relative to revenue center code 0001, the calculation will be made for each revenue center code included on the claims that comprise the stay with the results summed to create the total.

SOURCE:

NCH

EDIT RULES:

+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)

SITUATION = ALL NINES

PMT_AMT

MEDPAR Medicare Payment Amount

Amount of payment made from the Medicare trust fund for the services covered by the claim record. Generally, the amount is calculated by the fi; and represents what was paid to the institutional provider, with the exceptions noted below.

NOTE: In some situations, a negative claim payment amount may be present; e.g., (1) when a beneficiary is charged the full deductible during a short stay and the deductible exceeded the amount Medicare pays; or (2) when a beneficiary is charged a coinsurance amount during a long stay and the coinsurance amount exceeds the amount Medicare pays (most prevalent situation involves psych hospitals who are paid a daily per diem rate no matter what the charges are.)

Under IP PPS, Inpatient hospital services are paid based on a predetermined rate per discharge, using the DRG patient classification system and the pricer program. On the IP PPS claim, the payment amount includes the DRG outlier approved payment amount, disproportionate share (since 05/1/86), in- direct medical education (since 10/1/88), total PPS capital (since 10/1/91). It does not include the pass thru amounts (i.e., capital-related costs, direct medical education costs, kidney acquisition costs, bad debts); or any beneficiary-paid amounts (i.e., deductibles and coinsurance); or any other payer reimbursement.

Under SNF PPS, SNFs will classify beneficiaries using the patient classification system known as rugs III. For the SNF PPS claim, the SNF pricer will calculate/return the rate for each revenue center line item with revenue center code = '0022'; multiply the rate times the units count; and then sum the amount payable for all lines with revenue center code '0022' to determine the total claim payment amount.

Exceptions: For claims involving demos and BBA encounter data, the amount reported in this field May not just represent the actual provider payment.

For demo ids '01','02','03','04' -- claims contain amount paid to the provider, except that special 'differentials' paid outside the normal payment system are not included.

For demo ids '05','15' -- encounter data 'claims' contain amount Medicare would have paid under FFS, instead of the actual payment to the MCO.

For demo ids '06','07','08' -- claims contain actual provider payment but represent a special negotiated bundled payment for both part A and part B services. To identify what the conventional provider part a payment would have been, check value code = 'y4'.

For BBA encounter data (non-demo) -- 'claims' contain amount Medicare would have paid under FFS, instead of the actual payment to the BBA plan.

LONG SAS NAME: MDCR_PMT_AMT
SHORT SAS NAME: PMT_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the payment amount that is present on all of the claim records included in the stay (i.e., the sum of payment (reimbursement) reported on the claims that comprise the stay).

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

ACMDTNS

MEDPAR All Accommodations Total Charge Amount

The total charge amount (rounded to whole dollars) for all accommodations (routine hospital room and board charges for general care, coronary care and/or intensive care units) related to a beneficiary's stay.

LONG SAS NAME: ACMDTNS_TOT_CHRG_AMT
SHORT SAS NAME: ACMDTNS
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is the sum of MEDPAR private room charge amounts, MEDPAR semiprivate room charge amount, MEDPAR ward charge amount, MEDPAR intensive care charge amount, and MEDPAR coronary care charge amount (i.e., the accumulation of the revenue center total charge amount associated with revenue center codes 0100 - 0219 from all claim records included in the stay).

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

DPRTMNTL

MEDPAR Departmental Total Charge Amount

The total charge amount (rounded to whole dollars) for all ancillary departments (other than routine room and board, CCU, and ICU) related to a beneficiary's stay.

LONG SAS NAME: DPRTMNTL_TOT_CHRG_AMT
SHORT SAS NAME: DPRTMNTL

FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 0220 - 0999 from all claim records included in the stay (i.e., the sum of charges for all revenue centers other than accommodations 0100 - 0219).

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

SOURCE:
NCH

PRVTDAY

MEDPAR Private Room Day Count

The count of the number of private room days used by the beneficiary for the stay.

LONG SAS NAME: PRVT_ROOM_DAY_CNT
SHORT SAS NAME: PRVTDAY
FIELD TYPE: NUM
FIELD LENGTH: 5

DERIVATIONS:
This field is derived by accumulating the revenue center unit count associated with accommodation revenue center codes 011x and 014x from all claim records included in the stay.
Exception for SNF rugs demo effective 3/96 SNF update: field is derived from revenue center codes in the 9033-9044 series.

SOURCE:
NCH

SPRVTDAY

MEDPAR Semiprivate Room Day Count

The count of the number of semi-private room days used by the beneficiary for the stay.

LONG SAS NAME: SEMIPRVT_ROOM_DAY_CNT
SHORT SAS NAME: SPRVTDAY
FIELD TYPE: NUM
FIELD LENGTH: 5

DERIVATIONS:
This field is derived by accumulating the revenue center unit count associated with accommodation revenue center codes 010X, 012X, 013X, 016X - 019X from all claim records included in the stay.

Exception for SNF rugs demo eff 3/96 SNF update: field is derived from revenue center codes in the 9019-9032 series.

SOURCE:
NCH

WARDDAY

MEDPAR Ward Day Count

The count of the number of ward days used by the beneficiary for the stay.

LONG SAS NAME: WARD_DAY_CNT

SHORT SAS NAME: WARDDAY
FIELD TYPE: NUM
FIELD LENGTH: 5

DERIVATIONS:

This field is derived by accumulating the revenue center unit count associated with accommodation revenue center code 015x from all claim records included in the stay.

Exception for SNF rugs demo eff 3/96 SNF update: field is derived from revenue center codes in the 9000-9018 series.

SOURCE:
NCH

ICARECNT

MEDPAR Intensive Care Day Count

The count of the number of intensive care days used by the beneficiary for the stay.

LONG SAS NAME: INTNSV_CARE_DAY_CNT
SHORT SAS NAME: ICARECNT
FIELD TYPE: NUM
FIELD LENGTH: 5

DERIVATIONS:

This field is derived by accumulating the revenue center unit count associated with accommodation revenue center codes 020X (all 9 subcategories) from all claims included in the stay.

SOURCE:
NCH

LIMITATIONS:

There is approximately a 20% error rate in the revenue center code category 0206 due to coders misunderstanding the term 'post ICU' as including any day after an ICU stay rather than just days in a step-down/lower case version of an ICU. 'Post' was removed from the revenue center code 0206 description, effective 10/1/96 (12/96 MEDPAR update). 0206 is now defined as 'intermediate ICU'.

CRNRYDAY

MEDPAR Coronary Care Day Count

The charge amount (rounded to whole dollars) for coronary care accommodations related to a beneficiary's stay.

LONG SAS NAME: CRNRY_CARE_CHRG_AMT
SHORT SAS NAME: CRNRYDAY
FIELD TYPE: NUM
FIELD LENGTH: 5

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount associated with accommodation revenue center code 021X from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)

SITUATION = ALL NINES

PRVTAMT

MEDPAR Private Room Charge Amount

The charge amount (rounded to whole dollars) for private room accommodations related to a beneficiary's stay.

LONG SAS NAME: PRVT_ROOM_CHRG_AMT
SHORT SAS NAME: PRVTAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 011x and 014x from all claim records included in the stay.

Exception for SNF rugs demo effective 3/96 SNF update: this field is derived from revenue center codes in the 9033-9044 series.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

SPRVTAMT

MEDPAR Semi-Private Room Charge Amount

The charge amount (rounded to whole dollars) for semi-private room accommodations related to a beneficiary's stay.

LONG SAS NAME: SEMIPRVT_ROOM_CHRG_AMT
SHORT SAS NAME: SPRVTAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 010x, 012x, 013x, and 016x - 019x from all claim records included in the stay.

Exception for SNF rugs demo effective 03/96 SNF update: field is derived from revenue center codes in the 9019-9032 series.

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

SOURCE:
NCH

WARDAMT

MEDPAR Ward Charge Amount

The charge amount (rounded to whole dollars) for ward accommodations related to a beneficiary's stay.

LONG SAS NAME: WARD_CHRG_AMT
SHORT SAS NAME: WARDAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount associated with revenue center code 015x from all claim records included in the stay.

Exception for SNF rugs demo effective 03/96 SNF update: this field is derived from revenue center codes in the 9000-9018 series.

EDIT RULES:

+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

SOURCE:

NCH

ICAREAMT

MEDPAR Intensive Care Charge Amount

The charge amount (rounded to whole dollars) for intensive care accommodations related to a beneficiary's stay.

LONG SAS NAME: INTNSV_CARE_CHRG_AMT

SHORT SAS NAME: ICAREAMT

FIELD TYPE: NUM

FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount associated with accommodation revenue center code 020x from all claim records included in the stay.

SOURCE:

NCH

EDIT RULES:

+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

CRNRYAMT

MEDPAR Coronary Care Charge Amount

The charge amount (rounded to whole dollars) for coronary care accommodations related to a beneficiary's stay.

LONG SAS NAME: CRNRY_CARE_CHRG_AMT

SHORT SAS NAME: CRNRYAMT

FIELD TYPE: NUM

FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount associated with accommodation revenue center code 021X from all claim records included in the stay.

SOURCE:

NCH

EDIT RULES:

+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

OTHRAMT

MEDPAR Other Service Charge Amount

The charge amount (rounded to whole dollars) for other

services (revenue centers that do not fit into other categories) related to a beneficiary's stay.

LONG SAS NAME: OTHR_SRVC_CHRG_AMT
SHORT SAS NAME: OTHRAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with the 'other' revenue center codes from all claim records included in the stay. The 'other' codes include 0002-0099, 022x, 023x, 024x, 052x, 053x, 055x - 060x, 064x - 070x, 076x - 078x, 090x - 095x, and 099x. (Some of these codes are not yet assigned.)

SOURCE: NCH

PHRMCAMT

MEDPAR Pharmacy Charge Amount

The charge amount (rounded to whole dollars) for pharmaceutical costs related to the beneficiary's stay.

LONG SAS NAME: PHRMCY_CHRG_AMT
SHORT SAS NAME: PHRMCAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 025x, 026x, and 063x from all claims records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SUPLYAMT

MEDPAR Medical/Surgical Supplies Charge Amount

The charge amount (rounded to whole dollars) for medical/surgical supplies related to the beneficiary's stay.

LONG SAS NAME: MDCL_SUPLY_CHRG_AMT
SHORT SAS NAME: SUPLYAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 027x and 062x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

DME_AMT

MEDPAR DME Charge Amount

The charge amount (rounded to whole dollars) for DME (purchase of new DME and rentals) related to the beneficiary's stay.

LONG SAS NAME: DME_CHRG_AMT

SHORT SAS NAME: DME_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 0290, 0291, 0292, and 0294 - 0299 from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

UDME_AMT

MEDPAR Used DME Charge Amount

The charge amount (rounded to whole dollars) for used DME (purchase of used DME) related to the beneficiary's stay.

LONG SAS NAME: USED_DME_CHRG_AMT
SHORT SAS NAME: UDME_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 0293 from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

PHYTHAMT

MEDPAR Physical Therapy Charge Amount

The charge amount (rounded to whole dollars) for physical therapy services provided during the beneficiary's stay.

LONG SAS NAME: PHYS_THRPY_CHRG_AMT
SHORT SAS NAME: PHYTHAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 042x from all claims records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

OCPTLAMT

MEDPAR Occupational Therapy Charge Amount

The charge amount (rounded to whole dollars) for occupational therapy services provided during the beneficiary's stay.

LONG SAS NAME: OCPTNL_THRPY_CHRG_AMT

SHORT SAS NAME: OCPTLAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 043x from all claims records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SPCH_AMT

MEDPAR Speech Pathology Charge Amount

The charge amount (rounded to whole dollars) for speech pathology services (speech, language, audiology) provided during the beneficiary's stay.

LONG SAS NAME: SPCH_PTHLGY_CHRG_AMT
SHORT SAS NAME: SPCH_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 044x and 047x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

INHLTAMT

MEDPAR Inhalation Therapy Charge Amount

The charge amount (rounded to whole dollars) for inhalation therapy services (respiratory and pulmonary function) provided during the beneficiary's stay.

LONG SAS NAME: INHLTN_THRPY_CHRG_AMT
SHORT SAS NAME: INHLTAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 041x and 046x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

BLOODAMT

MEDPAR Blood Charge Amount

The charge amount (rounded to whole dollars) for blood provided during the beneficiary's stay.

LONG SAS NAME: BLOOD_CHRG_AMT
SHORT SAS NAME: BLOODAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 038x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

BLDADMIN

MEDPAR Blood Administration Charge Amount

The charge amount (rounded to whole dollars) for blood storage and processing related to the beneficiary's stay.

LONG SAS NAME: BLOOD_ADMIN_CHRG_AMT
SHORT SAS NAME: BLDADMIN
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 039x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

OROOMAMT

MEDPAR Operating Room Charge Amount

The charge amount (rounded to whole dollars) for the operating room, recovery room, and labor room delivery used by the beneficiary during the stay.

LONG SAS NAME: OPRTG_ROOM_CHRG_AMT
SHORT SAS NAME: OROOMAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 036X, 071X, and 072X from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

LTHTRPSY

MEDPAR Lithotripsy Charge Amount

The charge amount (rounded to whole dollars) for

lithotripsy services provided during the beneficiary's stay.

LONG SAS NAME: LTHTRPSY_CHRG_AMT
SHORT SAS NAME: LTHTRPSY
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 079X from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

CRDLGY

MEDPAR Cardiology Charge Amount

The charge amount (rounded to whole dollars) for cardiology services and electrocardiogram(s) provided during the beneficiary's stay.

LONG SAS NAME: CRDLGY_CHRG_AMT
SHORT SAS NAME: CRDLGY
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 048X and 073X from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

ANSTHSA

MEDPAR Anesthesia Charge Amount

The charge amount (rounded to whole dollars) for anesthesia services provided during the beneficiary's stay.

LONG SAS NAME: ANSTHSA_CHRG_AMT
SHORT SAS NAME: ANSTHSA
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 037X from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

LAB_AMT

MEDPAR Laboratory Charge Amount

The charge amount (rounded to whole dollars) for laboratory costs related to the beneficiary's stay.

LONG SAS NAME: LAB_CHRG_AMT
SHORT SAS NAME: LAB_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 030x, 031x, 074x, and 075x from all claim records included in the stay.

SOURCE:
NCH

RDLGYAMT

MEDPAR Radiology Charge Amount

The charge amount (rounded to whole dollars) for radiology costs (including oncology, excluding MRI) related to a beneficiary's stay.

LONG SAS NAME: RDLGY_CHRG_AMT
SHORT SAS NAME: RDLGYAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating revenue center total charge amount associated with revenue center codes 028x, 032x, 033x, 034x, 035x, and 040x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

MRI_AMT

MEDPAR MRI Charge Amount

The charge amount (rounded to whole dollars) for MRI services provided during the beneficiary's stay.

LONG SAS NAME: MRI_CHRG_AMT
SHORT SAS NAME: MRI_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount associated with revenue center 061x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

OPSRVC

MEDPAR Outpatient Service Charge Amount

The charge amount (rounded to whole dollars) for outpatient services provided during the beneficiary's

stay.

LONG SAS NAME: OP_SRVC_CHRG_AMT
SHORT SAS NAME: OPSRVC
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 049x and 050x from all claim records included in the stay.

SOURCE:
NCH

ER_AMT

MEDPAR Emergency Room Charge Amount

The charge amount (rounded to whole dollars) for emergency room services provided during the beneficiary's stay.

LONG SAS NAME: ER_CHRG_AMT
SHORT SAS NAME: ER_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 045X from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

AMBLNC

MEDPAR Ambulance Charge Amount

The charge amount (rounded to whole dollars) for ambulance services related to a beneficiary's stay.

LONG SAS NAME: AMBLNC_CHRG_AMT
SHORT SAS NAME: AMBLNC
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 054x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

PROFFEES

MEDPAR Professional Fees Charge Amount

The charge amount (rounded to whole dollars) for professional fees related to a beneficiary's stay.

LONG SAS NAME: PROFNL_FEES_CHRG_AMT
SHORT SAS NAME: PROFFEES
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 096x, 097x, and 098x from all claims records included in the stay.

SOURCE:
NCH

ORGNAMT

MEDPAR Organ Acquisition Charge Amount

The charge amount (rounded to whole dollars) for organ acquisition or other donor bank services related to a beneficiary's stay.

LONG SAS NAME: ORGN_ACQSTN_CHRG_AMT
SHORT SAS NAME: ORGNAMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center codes 081x and 089x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

ESRDSETG

MEDPAR ESRD Revenue Setting Charge Amount

The code indicating the type of dialysis received by the beneficiary during the stay. Up to 5 2-position codes may be present.

LONG SAS NAME: ESRD_SETG_IND_CD
SHORT SAS NAME: ESRDSETG
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived from the presence of the dialysis revenue center codes listed below on any of the claim records included in the stay.

SOURCE:
NCH

CLNC_AMT

MEDPAR Clinic Visit Charge Amount

The charge amount (rounded to whole dollars) for clinic visits (e.g., visits to chronic pain or dental centers or to clinics providing psychiatric, ob-gyn, pediatric services) related to the beneficiary's stay.

LONG SAS NAME: CLNC_VISIT_CHRG_AMT
SHORT SAS NAME: CLNC_AMT
FIELD TYPE: NUM
FIELD LENGTH: 9

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount associated with revenue center code 051x from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$ ROUNDED; ON-SIZE (OVERFLOW)
SITUATION = ALL NINES

ICUINDCD

MEDPAR Intensive Care Unit (ICU) Indicator Code

The code indicating that the beneficiary has spent time under intensive care during the stay. It also specifies the type of ICU.

LONG SAS NAME: ICU_IND_CD
SHORT SAS NAME: ICUINDCD
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for the presence of ICU revenue center codes (listed below) on any of the claim records included in the stay. If more than one of the revenue center codes listed below are included on these claims; the code with the highest revenue center total charge amount is used.

SOURCE:
NCH

LIMITATIONS:
There is approximately a 20% error rate in the revenue center code category 0206 due to coders misunderstanding the term 'post ICU' as including any day after an ICU stay rather than just days in a step-down/lower case version of an ICU. 'Post' was removed from the revenue center code 0206 description, effective 10/1/96 (12/96 MEDPAR update). 0206 is now defined as 'intermediate ICU'.

CRNRY_CD

MEDPAR Coronary Care Indicator Code

The code indicating that the beneficiary has spent time under coronary care during the stay. It also specifies the type of coronary care unit.

LONG SAS NAME: CRNRY_CARE_IND_CD
SHORT SAS NAME: CRNRY_CD
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for the presence of coronary care revenue center codes (listed below) on any of the claim records included in the stay. If more than one of the revenue center codes listed below are included on these claims, the code with the highest revenue center total charge amount is used.

SOURCE:
NCH

LIMITATIONS:
There is approximately a 20% error rate in the revenue center code category 0214 due to coders misunderstanding the term 'post CCU' as including any day after a CCU stay rather than just days in a step-down/lower case version of a CCU. 'Post' was removed from the revenue center code 0214 description, effective 10/1/96 (12/96 MEDPAR update). 0214 is now defined as 'intermediate CCU'.

PHRMCYCD

MEDPAR Pharmacy Indicator Code

The code indicating whether or not the beneficiary received drugs during the stay. It also specifies the type of drugs.

LONG SAS NAME: PHRMCY_IND_CD
SHORT SAS NAME: PHRMCYCD
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for the presence of drug-specific revenue center codes (listed below) on any of the claim records included in the stay.

SOURCE:
NCH

TRNSPLNT

MEDPAR Transplant Indicator Code

The code indicating whether or not the beneficiary received a organ transplant during the stay.

LONG SAS NAME: TRNSPLNT_IND_CD
SHORT SAS NAME: TRNSPLNT
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for the presence of the transplant revenue center code (listed below) on any of the claim records included in the stay.

SOURCE:
NCH

ONCLGYSW

MEDPAR Radiology Oncology Indicator Switch

The switch indicating whether or not the beneficiary received radiology oncology services during the stay.

LONG SAS NAME: RDLGY_ONCLGY_IND_SW
SHORT SAS NAME: ONCLGYSW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for revenue center code 028X on any of the claim records included in the stay.

DGNSTCSW

SOURCE:
NCH

MEDPAR Radiology Diagnostic Indicator Switch

The switch indicating whether or not the beneficiary received radiology diagnostic services during the stay.

LONG SAS NAME: RDLGY_DGNSTC_IND_SW
SHORT SAS NAME: DGNSTCSW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for revenue center code 032x on any of the claim records included in the stay.

SOURCE:
NCH

THRPTCSW

MEDPAR Radiology Therapeutic Indicator Switch

The switch indicating whether or not the beneficiary received radiology therapeutic services during the stay.

LONG SAS NAME: RDLGY_THRPTC_IND_SW
SHORT SAS NAME: THRPTCSW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for revenue center code 033X on any of the claim records included in the stay.

SOURCE:
NCH

NUCLR_SW

MEDPAR Radiology Nuclear Medicine Indicator Switch

The switch indicating whether or not the beneficiary received radiology nuclear medicine services during the stay.

LONG SAS NAME: RDLGY_NUCLR_MDCN_IND_SW
SHORT SAS NAME: NUCLR_SW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for revenue center code 034x on any of the claim records included in the stay.

SOURCE:
NCH

CTSCANSW

MEDPAR Radiology CT Scan Indicator Switch

The switch indicating whether or not the beneficiary received radiology computed tomographic (CT) scan services during the stay.

LONG SAS NAME: RDLGY_CT_SCAN_IND_SW
SHORT SAS NAME: CTSCANSW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for revenue center code 035X on any of the claim records included in the stay.

SOURCE:
NCH

IMGNG_SW

MEDPAR Radiology Other Imaging Indicator Switch

The switch indicating whether or not the beneficiary received radiology other imaging services during the stay.

LONG SAS NAME: RDLGY_OTHR_IMGNG_IND_SW
SHORT SAS NAME: IMGNG_SW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for revenue center code 040X on any of the claim records included in the stay.

SOURCE:
NCH

OPSRVCCD

MEDPAR Outpatient Services Indicator Code

The code indicating whether or not the beneficiary has received outpatient services, ambulatory surgical care, or both.

LONG SAS NAME: OP_SRVC_IND_CD
SHORT SAS NAME: OPSRVCCD
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for the presence of the outpatient services revenue center codes listed below on any of the claim records included in the stay.

SOURCE:
NCH

ORGNCN

MEDPAR Organ Acquisition Indicator Code

The code indicating the type of organ acquisition received by the beneficiary during the stay.

LONG SAS NAME: ORGN_ACQSTN_IND_CD
SHORT SAS NAME: ORGNCD
FIELD TYPE: CHAR
FIELD LENGTH: 2

DERIVATIONS:
This field is derived by checking for the presence of the organ acquisition indicator revenue center codes listed below on any of the claim records included in the stay.

SOURCE:
NCH

ESRDSTG{x}

where { x } 1:5

MEDPAR ESRD Setting Indicator Code

The code indicating the type of dialysis received by the beneficiary during the stay. Up to 5 2-position codes may be present.

LONG SAS NAME: ESRD_SETG_IND_{x}_CD
SHORT SAS NAME: ESRDSTG{x}
FIELD TYPE: CHAR
FIELD LENGTH: 2

DERIVATIONS:

This field is derived from the presence of the dialysis revenue center codes listed below on any of the claim records included in the stay.

SOURCE:
NCH

DGNSCNT

MEDPAR Diagnosis Code Count

The count of the number of diagnosis codes included in the stay.

LONG SAS NAME: DGNS_CD_CNT
SHORT SAS NAME: DGNSCNT
FIELD TYPE: NUM
FIELD LENGTH: 3

DERIVATIONS:

This field is derived by adding '1' to the count of the other diagnosis codes reported on the last claim record included in the stay. The '1' represents the principal diagnosis code, which is reported separately from the other diagnosis.

SOURCE:
NCH

DGNS_VRSN_CD_{x}
where { x } 1:25

MEDPAR Diagnosis Version Code

Effective with Version 'J', the code used to indicate if the diagnosis code is ICD-9 or ICD-10.

LONG SAS NAME: DGNS_VRSN_CD_{x}
SHORT SAS NAME: DGNS_VRSN_CD_{x}
FIELD TYPE: CHAR
FIELD LENGTH: 1

SOURCE:
NCH

DGNS_E_CD_CNT

MEDPAR Diagnosis E Code Count

Effective with Version 'J', the count of the number of diagnosis E codes reported on the Inpatient/SNF claim. The purpose of this count is to indicate how many diagnosis E trailers are present.

LONG SAS NAME: DGNS_E_CD_CNT
SHORT SAS NAME: DGNS_E_CD_CNT
FIELD TYPE: NUM
FIELD LENGTH: 3

SOURCE: CWF

EDIT RULES:
Range: 0 to 12

DGNS_E_VRSN_CD_{x}
where { x } 1:12

MEDPAR Diagnosis E Version Code

Effective with Version 'J', the code used to indicate if the diagnosis code is ICD-9 or ICD-10.

LONG SAS NAME: DGNS_E_VRSN_CD_{x}
SHORT SAS NAME: DGNS_E_VRSN_CD_{x}

FIELD TYPE: CHAR
FIELD LENGTH: 1

SOURCE:
NCH

DGNSCD{x}
where { x } 1:25

MEDPAR Diagnosis Code

The diagnosis code identifying the beneficiary's principal or other diagnosis (including E code).

NOTE:
Prior to Version H, the principal diagnosis code was not stored with the 'OTHER' diagnosis codes. During the Version H conversion the

CLM_PRNCPAL_DGNS_CD was added as the first occurrence.

NOTE1: Effective with Version 'J', this field has been expanded from 5 bytes to 7 bytes to accommodate the future implementation of ICD-10.

NOTE2: Effective with Version 'J', the diagnosis E codes are stored in a separate trailer (CLM_DGNS_E_GRP).

LONG SAS NAME: DGNS_{x}_CD
SHORT SAS NAME: DGNSCD{x}
FIELD TYPE: CHAR
FIELD LENGTH: 7

OCCURS MIN: 0 OCCURS MAX: 25

DGNS_POA

MEDPAR Diagnosis Code POA Array

Diagnosis code POA array.

LONG SAS NAME: DGNS_POA_CD
SHORT SAS NAME: DGNS_POA
FIELD TYPE: CHAR
FIELD LENGTH: 10

DERIVATIONS:
This field is the actual principal diagnosis code (1st occurrence) or one of up to 9 other diagnosis codes that are present on the last claim record included in the stay.

SOURCE:
NCH

POA_DGNS_E_CD_CNT

MEDPAR Claim Present on Admission Diagnosis E Code Count

Effective with Version 'J', the count of the number of Present on Admission (POA) codes associated with the diagnosis E codes reported on the Inpatient/SNF claim. The purpose of this count is to indicate how many claim POA diagnosis E trailers are present.

LONG SAS NAME: POA_DGNS_E_CD_CNT
SHORT SAS NAME: POA_DGNS_E_CD_CNT
FIELD TYPE: NUM
FIELD LENGTH: 3

SOURCE: CWF

EDIT RULES:
Range: 0 to 12

POA_DGNS_E_{x}_IND_CD
where { x } 1:12

MEDPAR Diagnosis E Code Present on Admission Indicator

Effective with Version 'J', the code used to identify the present on admission(POA) indicator code associated with the diagnosis E codes.

LONG SAS NAME: POA_DGNS_E_{x}_IND_CD
SHORT SAS NAME: POA_DGNS_E_{x}_IND_CD
FIELD TYPE: CHAR
FIELD LENGTH: 1

OCCURS MIN: 0 OCCURS MAX: 12

POA_DGNS_CD_CNT

MEDPAR Claim Present on Admission Diagnosis Code Count

Effective with Version 'J', the count of the number of Present on Admission (POA) codes reported on the Inpatient/SNF claim. The purpose of this count is to indicate how many claim POA diagnosis trailers are present.

LONG SAS NAME: POA_DGNS_CD_CNT
SHORT SAS NAME: POA_DGNS_CD_CNT
FIELD TYPE: NUM
FIELD LENGTH: 3

SOURCE: CWF

EDIT RULES :
Range: 0 to 25

POA_DGNS_{x}_IND_CD
where { x } 1:25

MEDPAR Diagnosis Present on Admission Indicator Code

Effective with Version 'J', the code used to identify the present on admission (POA) indicator code associated with the diagnosis codes (principal and secondary). The present on admission indicators for the diagnosis E codes are stored in the present on admission diagnosis E trailer.

LONG SAS NAME: POA_DGNS_{x}_IND_CD
SHORT SAS NAME: POA_DGNS_{x}_IND_CD
FIELD TYPE: CHAR
FIELD LENGTH: 1

OCCURS MIN: 0 OCCURS MAX: 25

PRCDRSW

MEDPAR Surgical Procedure Indicator Switch

The switch indicating whether or not there were any surgical procedures performed during the beneficiary's stay.

LONG SAS NAME: SRGCL_PRCDR_IND_SW
SHORT SAS NAME: PRCDRSW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is derived by checking for the presence of procedure codes on the last claim record included in the stay.

SOURCE:
NCH

PRCDRCNT

MEDPAR Surgical Procedure Code Count

The count of the number of surgical procedure codes included in the stay.

LONG SAS NAME: SRGCL_PRCDR_CD_CNT
SHORT SAS NAME: PRCDCRCNT
FIELD TYPE: NUM
FIELD LENGTH: 3

DERIVATIONS:
This field is derived by counting the procedure codes that are reported on the last claim record included in the stay.

SOURCE:
NCH

PRCDTCNT

MEDPAR Surgical Procedure Performed Date Count

The count of the number of dates associated with the surgical procedures included in the stay.

LONG SAS NAME: SRGCL_PRCDR_DT_CNT
SHORT SAS NAME: PRCDTCNT
FIELD TYPE: NUM
FIELD LENGTH: 3

DERIVATIONS:
This field is derived by counting the surgical procedure dates that are reported on the last claim record included in the stay.

SOURCE:
NCH

SRGCL_PRCDR_VRSN_CD_{x}
where { x } 1:25

MEDPAR Surgical Procedure Version Code

Effective with Version 'J', the code used to indicate if the surgical procedure code is ICD-9 or ICD-10.

LONG SAS NAME: SRGCL_PRCDR_VRSN_CD_{x}
SHORT SAS NAME: SRGCL_PRCDR_VRSN_CD_{x}
FIELD TYPE: CHAR
FIELD LENGTH: 1

SOURCE:
NCH

PRCDRCDC{x}
where { x } 1:25

MEDPAR Surgical Procedure Code

The ICD-9-CM code identifying the principal or other surgical procedure performed during the beneficiary's stay. This element is part of the MEDPAR surgical procedure group. It may occur up to 25 times.

NOTE1: Effective with Version 'J', this field has been expanded from 5 bytes to 7 bytes to accommodate the future implementation of ICD-10.

LONG SAS NAME: SRGCL_PRCDR_{x}_CD
SHORT SAS NAME: PRCDRCDC{x}
FIELD TYPE: CHAR
FIELD LENGTH: 7

DERIVATIONS :
This field is the actual principal surgical procedure code (1st occurrence) or one of up to 24 other surgical procedure codes that may be present on the last claim record included in the stay.

SOURCE:
NCH

EDIT RULES:
4 POSITION Surgical Procedure Code LEFT JUSTIFIED
OCCURS MIN: 0 OCCURS MAX: 25

PRCDRDT{x}
where { x } 1:25

MEDPAR Surgical Procedure Performed Date

The date on which the icd-9-cm surgical procedure was performed during the beneficiary's stay. This element is part of the MEDPAR surgical procedure group. It can occur up to 25 times.

LONG SAS NAME: SRGCL_PRCDR_PRFRM_{x}_DT
SHORT SAS NAME: PRCDRDT{x}
FIELD TYPE: DATE
FIELD LENGTH: 8

DERIVATIONS:
This field is the actual date associated with the principal or one of up to 24 other surgical procedure codes that is present on the last claim record included in the stay.

SOURCE: NCH

EDIT RULES:
+YYYYDDD

OCCURS MIN: 0 OCCURS MAX: 25

BLDFRNSH

MEDPAR Blood Pints Furnished Quantity

The quantity of blood (number of whole pints) furnished to the beneficiary during the stay. Note: this includes blood pints replaced as well as not replaced.

LONG SAS NAME: BLOOD_PT_FRNSH_QTY
SHORT SAS NAME: BLDFRNSH
FIELD TYPE: NUM
FIELD LENGTH: 5

DERIVATIONS:
his field is derived by accumulating the blood pints furnished quantity from all claim records included in the stay.

SOURCE:
NCH

BIC

MEDPAR Beneficiary Identification Code

The BIC reported on the first claim record included in the stay, representing the values existing on the CWF beneficiary master record on the date the CWF host site processed the claim.

LONG SAS NAME: BENE_IDENT_CD
SHORT SAS NAME: BIC
FIELD TYPE: CHAR
FIELD LENGTH: 2

SOURCE:
NCH

DRG_CD

MEDPAR DRG Code

The code indicating the DRG to which the claims that comprise the stay belong for payment purposes.

LONG SAS NAME: DRG_CD
SHORT SAS NAME: DRG_CD
FIELD TYPE: CHAR
FIELD LENGTH: 3

DERIVATIONS:
This field comes from the actual DRG code that is present on the last claim record included in the stay.
exception: if the DRG code is not present (e.g., claims from Maryland and PPS-exempt hospital units do not have a DRG), a valid DRG is obtained using the grouper software and is moved to this field.

SOURCE:
NCH

DSTNTNCD

MEDPAR Discharge Destination Code

The code primarily indicating the destination of the beneficiary upon discharge from a facility; also denotes death or SNF/still patient situations.

LONG SAS NAME: DSCHRG_DSTNTN_CD
SHORT SAS NAME: DSTNTNCD
FIELD TYPE: CHAR
FIELD LENGTH: 2

DERIVATIONS:
This field comes from the claim status code that is present on the last claim record included in the stay.

SOURCE:
NCH

OUTLR_CD

MEDPAR DRG/Outlier Stay Code

The code identifying (1) for PPS providers if the stay has an unusually long length (day outlier) or high cost (cost outlier); or (2) for non-PPS providers the source for developing the DRG.

LONG SAS NAME: DRG_OUTLIER_STAY_CD
SHORT SAS NAME: OUTLR_CD
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field is the actual DRG outlier stay code that is present on the last claim record included in the stay.
Applicable to PPS providers:

0 = No Outlier
1 = Day Outlier
2 = Cost Outlier

Applicable to Non-PPS Providers:
6 = Valid DRG Received From Intermediary
7 = HCFA-Developed DRG
8 = HCFA-Developed DRG Using Claim Status Code
9 = Not Groupable

SOURCE:
NCH

PRPAY_CD

MEDPAR Beneficiary Primary Payer Code

The code indicating the type of payer who has primary responsibility for the payment of the Medicare beneficiary's claims related to the stay.

LONG SAS NAME: BENE_PRMRY_PYR_CD
SHORT SAS NAME: PRPAY_CD
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field comes from the primary payer code that is present on the first claim record included in the stay.

SOURCE:
NCH

ESRD_CD

MEDPAR ESRD Condition Code

The code indicating if the beneficiary had an ESRD condition reported during the stay.

LONG SAS NAME: ESRD_COND_CD
SHORT SAS NAME: ESRD_CD
FIELD TYPE: CHAR
FIELD LENGTH: 2

DERIVATIONS:
This field is derived by checking for condition codes 70 - 76 on any of the claim records included in the stay.

SOURCE:
NCH

SRC_ADMS

MEDPAR Source Inpatient Admission Code

The code indicating the source of the beneficiary's admission to an Inpatient facility or, for newborn admission, the type of delivery.

LONG SAS NAME: SRC_IP_ADMSN_CD
SHORT SAS NAME: SRC_ADMS
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field comes from the source Inpatient admission code that is present on the last claim record included in the stay.

SOURCE:
NCH

TYPE_ADM

MEDPAR Inpatient Admission Type Code

The code indicating the type and priority of the beneficiary's admission to a facility for the Inpatient hospital stay.

LONG SAS NAME: IP_ADMSN_TYPE_CD
SHORT SAS NAME: TYPE_ADM
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field comes from the Inpatient admission type code that is present on the last claim record included in the stay.

SOURCE:
NCH

FICARR

MEDPAR Fiscal Intermediary/Carrier Identification Number

The identification of the intermediary processing the beneficiary's claims related to the stay.

NOTE: This field comes from the intermediary number that is present on the first claim record included in the stay.

LONG SAS NAME: FICARR_IDENT_NUM
SHORT SAS NAME: FICARR
FIELD TYPE: CHAR
FIELD LENGTH: 5

SOURCE:
NCH

AD_DGNS

MEDPAR Admitting Diagnosis Code

The ICD-9-CM code indicating the beneficiary's initial diagnosis at the time of admission.

NOTE: This field comes from the admitting diagnosis code that is present on the last claim record included in the stay.

LONG SAS NAME: ADMTG_DGNS_CD
SHORT SAS NAME: AD_DGNS
FIELD TYPE: CHAR
FIELD LENGTH: 5

SOURCE:
NCH

ADMTG_DGNS_VRSN_CD

MEDPAR Admitting Diagnosis Version Code

Effective with Version 'J', the code used to indicate if the diagnosis code is ICD-9 or ICD-10.

NOTE: With 5010 the diagnosis and procedure codes have been expanded to accommodate ICD-10, even though ICD-10 is not scheduled for implementation until 10/2013.

LONG SAS NAME: ADMTG_DGNS_VRSN_CD
SHORT SAS NAME: ADMTG_DGNS_VRSN_CD
FIELD TYPE: CHAR
FIELD LENGTH: 1

SOURCE:
NCH

DEATHDAY

MEDPAR Admission Death Day Count

The count of the number of days from the date the beneficiary was admitted to a facility to the beneficiary's date of death (DOD).

LONG SAS NAME: ADMSN_DEATH_DAY_CNT
SHORT SAS NAME: DEATHDAY
FIELD TYPE: NUM
FIELD LENGTH: 7

DERIVATIONS:

This field is derived by counting the number of days between the MEDPAR admission date (the admission date present on the first claim record included in the stay) and MEDPAR beneficiary death date (the death date present on the enrollment database, which is accessed prior to creation of the quarterly MEDPAR file).

SOURCE:
NCH/EDB

IPSBCD

MEDPAR Internal Use (By IPSB) Code

Limited availability; for internal use only. Where not available, this field will contain zeroes.

LONG SAS NAME: INTRNL_USE_IPSB_CD
SHORT SAS NAME: IPSBCD
FIELD TYPE: CHAR
FIELD LENGTH: 3

FILDTC

MEDPAR Internal Use File Date Code

Limited availability; for internal use only to identify fiscal year/calendar year segments. Where not available, this field will contain a zero.

LONG SAS NAME: INTRNL_USE_FIL_DT_CD
SHORT SAS NAME: FILDTC
FIELD TYPE: CHAR
FIELD LENGTH: 1

SMPLSIZE

MEDPAR Internal Use Sample Size Code

Limited availability; for internal use only to identify the MEDPAR sample size: 20% (HIC 9th digit = 0, 5); 20% (HIC 9th digit = 4, 8; 60% (remainder). Where not available, this field will contain a zero.

LONG SAS NAME: INTRNL_USE_SMPL_SIZE_CD
SHORT SAS NAME: SMPLSIZE
FIELD TYPE: CHAR
FIELD LENGTH: 1

WRNGCD

MEDPAR Warning Indicators Code

The codes (commonly called warning indicators) specifying detailed billing information obtained from the claims analyzed for the stay process. The purpose of these codes is to provide additional information for the MEDPAR user; i.e., let the user know whether or not the stay included adjustments, a single claim or multiple claims, any error conditions, etc.

LONG SAS NAME: WRNG_IND_CD
SHORT SAS NAME: WRNGCD
FIELD TYPE: CHAR
FIELD LENGTH: 18

DERIVATIONS:

This field is packed. Each of the digits identify a specific item of interest to users of the MEDPAR file. Warning indicators 1 and 6, and the first two values of indicator 8, are set early in the process – while processing all claims through the final action algorithm, prior to the creation of the stay record. The other indicators are derived from the claims remaining after the final action processing, which are used to create the stay record.

SOURCE:
MEDPAR

CLM_PTNT_RLTNSHP_CD

MEDPAR Claim Patient Relationship Code

The code used to identify the patient relationship to the beneficiary.

LONG SAS NAME: CLM_PTNT_RLTNSHP_CD

SHORT SAS NAME: CLM_PTNT_RLTNSHP_CD
FIELD TYPE: CHAR
FIELD LENGTH: 2

DERIVATIONS:

This field comes from the patient relationship code (CLM-PTNT-RLTNSHP-CD) that is present on the first claim record included in the stay.

If there is no patient relationship code on the 1st claim then take the first found code on any of the other claims that make up the stay.

SOURCE:
NCH

CARE_IMPRVMT_MODEL_{x}_CD
where { x } 1:4

MEDPAR Care Improvement Model Code

The code used to identify that the care improvement model is being used for bundling payments. The valid value for care improvement model 1 is '61'. The valid value for care improvement model 2 is '62'. The valid value for care improvement model 3 is '63'. The valid value for care improvement model 4 is '64'. This value is also reflected in the demonstration trailer.

LONG SAS NAME: CARE_IMPRVMT_MODEL_{x}_CD
SHORT SAS NAME: CARE_IMPRVMT_MODEL_{x}_CD
FIELD TYPE: CHAR
FIELD LENGTH: 2

DERIVATIONS:

This field comes from the Claim Care Improvement Model (CLM- CARE-IMPRVMT-MODEL-{x}-CD) code that is present on the first claim record included in the stay. If there is no Claim Care Improve Model code on the 1st claim then take the first found code on a the other claims that make up the stay.

SOURCE:
NCH

VBP_PRTCPNT_IND_CD

MEDPAR VBP Participant Indicator Code

The code used to identify a reason a hospital is excluded from the Hospital Value Based Purchasing (HVBP) program. The ACA (Section 3001) excludes from HVBP program hospitals that meet certain conditions.

LONG SAS NAME: VBP_PRTCPNT_IND_CD
SHORT SAS NAME: VBP_PRTCPNT_IND_CD
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:

This field comes from the Claim VBP Participant Indicator code (CLM-VBP-PRTCPNT-IND-CD) that is present on the first claim record included in the stay. If there is no Claim VBP Participant Indicator code on the first claim then take the first found code on any of the other claims that make up the stay.

SOURCE:
NCH

HRR_PRTCPNT_IND_CD

MEDPAR HRR Participant Indicator Code

The code used to identify whether the facility is participating in the Hospital Readmission Reduction Program.

LONG SAS NAME: HRR_PRTCNT_IND_CD SHORT
SAS NAME: HRR_PRTCNT_IND_CD SHORT
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
This field comes from the Claim HRR Participant Indicator code (CLM-HRR-PRTCNT-IND-CD) that is present on the first claim record included in the stay. If there is no Claim HRR Participant Indicator code on the first claim then take the first found code on any of the other claims that make up the stay.

SOURCE:
NCH

BNDLD_MODEL_DSCNT_PCT

MEDPAR Bundled Model Discount Percent

The field used to identify the discount percentage that will be applied to the payment for all of the hospitals' DRG over the lifetime of the initiative. The hospital must be participating in the Model 1 Bundled Payments for Care Improvement initiative.

LONG SAS NAME: BNDLD_MODEL_DSCNT_PCT
SAS NAME: BNDLD_MODEL_DSCNT_PCT
FIELD TYPE: NUM
FIELD LENGTH: 4

DERIVATIONS:
This field comes from the Claim Bundled Model Discount (CLM-BNDLD-MODEL-1-DSCNT-PCT) that is present on the last record included in the stay.

SOURCE:
NCH

VBP_ADJSTMT_PCT

MEDPAR VBP Adjustment Percent

Under the Hospital Value Based Purchasing (HVBP) program, the percent used to identify an adjustment made to certain subsection (d) IPPS hospitals base operating DRG amount, in accordance with their Total Performance Score (TPS) as required by the Affordable Care Act (ACA). This is the Value Based Purchasing Score.

LONG SAS NAME: VBP_ADJSTMT_PCT
SAS NAME: VBP_ADJSTMT_PCT
FIELD TYPE: NUM
FIELD LENGTH: 13

DERIVATIONS:
This field comes from the Claim VBP Adjustment Percent (CLM-VBP-CLM-ADJSTMT-PCT) that is present on the last claim record included in the stay.

SOURCE:
NCH

HRR_ADJSTMT_PCT

MEDPAR HRR Adjustment Percent

Under the Hospital Readmission Reduction (HRR) Program, the percent used to identify the readmission adjustment factor that will be applied in determining a 'subsection (d) hospital's operating IPPS payment amount in accordance with Section 3025 of the Affordable Care Act (ACA).

LONG SAS NAME: HRR_ADJSTMT_PCT
SAS NAME: HRR_ADJSTMT_PCT
FIELD TYPE: NUM
FIELD LENGTH: 6

DERIVATIONS:
This field comes from the Claim HRR Adjustment Percent (CLM-HRR-ADJSTMT-PCT) that is present on the last claim record included in the stay.

SOURCE:
NCH

INFRMTL_ENCTR_IND_SW *MEDPAR Informational Encounter Indicator Switch*

The switch used to identify if a beneficiary is enrolled in a Managed Care Organization.

LONG SAS NAME: INFRMTL_ENCTR_IND_SW
SAS NAME: INFRMTL_ENCTR_IND_SW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
If any claim that comprises the Stay has a condition code (CLM-RLT-COND-CD) equal to '04' populate the MEDPAR Informational Encounter Switch with a 'Y'. If no '04' condition code, populate field with an 'N'.

SOURCE:
NCH

MA_TCHNG_IND_SW *MEDPAR MA Teaching Indicator Switch*

The code used to identify whether the claim contains any request for supplemental IME/DGME/N&AH payment.

LONG SAS NAME: MA_TCHNG_IND_SW
SAS NAME: MA_TCHNG_IND_SW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
If any claim that comprises the Stay has a condition code (CLM-RLT-COND-CD) equal to '69' populate the MEDPAR MA Teaching Indicator Switch with a 'Y'. If no '69' condition code, populate field with an 'N'.

SOURCE:
NCH

PROD_RPLCMT_LIFECYC_SW *MEDPAR Product Replacement within Product Lifecycle Switch*

The switch used to identify whether a claim involves the replacement of a product earlier than the anticipated lifecycle due to an indication the product is not functioning properly.

LONG SAS NAME: PROD_RPLCMT_LIFECYC_SW
SAS NAME: PROD_RPLCMT_LIFECYC_SW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
If any claim that comprises the Stay has a condition code (CLM-RLT-COND-CD) equal to '49' populate the MEDPAR Product Replacement within Product Lifecycle

Switch with a 'Y'. If no '49' condition code, populate field with an 'N'.

SOURCE:
NCH

PROD_RPLCMT_RCLL_SW *MEDPAR Product Replacement for known Recall of Product Switch*

The switch used to identify whether a claim involves the replacement of a product as a result of the Manufacturer or FDA having identified the product for recall and therefore a replacement.

LONG SAS NAME: PROD_RPLCMT_RCLL_SW
SAS NAME: PROD_RPLCMT_RCLL_SW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
If any claim that comprises the Stay has a Condition code (CLM-RLT-COND-CD) equal to '50' populate the MEDPAR Product Replacement Recall Switch with a 'Y'. If no '50' condition code, populate field with an 'N'.

SOURCE:
NCH

CRED_RCVD_RPLCD_DVC_SW *MEDPAR Credit Received Replaced Device Switch*

The switch used to identify whether the provider received a credit from the Manufacturer for a replaced medical device.

LONG SAS NAME: CRED_RCVD_RPLCD_DVC_SW
SAS NAME: CRED_RCVD_RPLCD_DVC_SW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
If any claim that comprises the Stay has a value code (CLM-VAL-CD) equal to 'FD' populate the MEDPAR Credit Received from Manufacturer for Replaced Medical Device Switch with a 'Y'. If no 'FD' value code, populate field with an 'N'.

SOURCE:
NCH

OBSRVTN_SW *MEDPAR Observation Switch*

The switch used to identify whether the claim involves treatment or observation in an observation room.

LONG SAS NAME: OBSRVTN_SW
SAS NAME: OBSRVTN_SW
FIELD TYPE: CHAR
FIELD LENGTH: 1

DERIVATIONS:
If any claim that comprises the Stay has a revenue center code (REV-CNTR-CD) equal to '0762' populate the MEDPAR Observation Switch with a 'Y'. If no '0762' revenue center code populate field with an 'N'.

SOURCE:
NCH

NEW_TCHNLGY_ADD_ON_AMT

MEDPAR New Technology Add On Amount

The amount of payments made for discharges involving approved new technologies. If the total covered costs of the discharge exceeds the DRG payment for the case (including adjustments for IME and disproportionate share hospitals (DSH) but excluding outlier payments) an add-on amount is made indicating a new technology was used in the treatment of the beneficiary.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: NEW_TCHNLGY_ADD_ON_AMT
SAS NAME: NEW_TCHNLGY_ADD_ON_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the amount field (CLM-VAL-AMT) found in the value code trailer for value code (CLM-VAL-CD) equal to '77' for any claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

BASE_OPRTG_DRG_AMT

MEDPAR Base Operating DRG Amount

The sum of the claim base operating DRG amounts reported on the claims that comprise the stay. The base operating DRG amount used to identify the wage-adjusted DRG operating payment plus the new technology add-on payment.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: BASE_OPRTG_DRG_AMT
SAS NAME: BASE_OPRTG_DRG_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the Claim Base Operating DRG amount (CLM-BASE-OPRTG-DRG-AMT) that is present on any of the claim records included in the stay (i.e. the sum of the claim base operating DRG amounts reported on the claims that comprise the stay).

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

OPRTG_HSP_AMT

MEDPAR Operating Hospital Amount

The sum of the claim operating HSP amounts reported on the claims that comprise the stay. The operating HSP amount is used to identify the difference between the HSP rate payment (updated HSP x DRG weight) and the federal rate payment (includes DSH, IME, outliers, etc. as applicable) when HSP rate payment exceeds Federal rate payment (otherwise \$0).

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: OPRTG_HSP_AMT
SAS NAME: BASE_OPRTG_HSP_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the Claim Operating HSP Amount (CLM_OPRTG_HSP_AMT) that is present on any of the claim records included in the stay (i.e. the sum of the claim operating HSP amounts reported on the claims that comprise the stay).

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

MDCL_SRGCL_GNRL_AMT

MEDPAR Medical Surgical General Amount

The charge amount (rounded to whole dollars) for the medical/surgical general supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: MDCL_SRGCL_GNRL_AMT
SAS NAME: MDCL_SRGCL_GNRL_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV CNTR CD) '0270' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

MDCL_SRGCL_NSTRL_AMT

MEDPAR Medical Surgical Non-Sterile Supplies Amount

The charge amount (rounded to whole dollars) for the medical/surgical non-sterile supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: MDCL_SRGCL_NSTRL_AMT
SAS NAME: MDCL_SRGCL_NSTRL_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0271' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

MDCL_SRGCL_STRL_AMT

MEDPAR Medical Surgical Sterile Supplies Amount

The charge amount (rounded to whole dollars) for the medical/surgical sterile supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: MDCL_SRGCL_STRL_AMT
SAS NAME: MDCL_SRGCL_STRL_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0272' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

TAKE_HOME_AMT

MEDPAR Take Home Amount

The charge amount (rounded to whole dollars) for the medical/surgical take home supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: TAKE_HOME_AMT
SAS NAME: TAKE_HOME_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue

center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0273' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

PRSTHTC_ORTHTC_AMT

MEDPAR Prosthetic Orthotic Amount

The charge amount (rounded to whole dollars) for the medical/surgical prosthetic/orthotic supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: PRSTHTC_ORTHTC_AMT
SAS NAME: PRSTHTC_ORTHTC_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0274' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

MDCL_SRGCL_PCMKR_AMT

MEDPAR Medical Surgical Pacemaker Amount

The charge amount (rounded to whole dollars) for the medical/surgical pacemaker supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: MDCL_SRGCL_PCMKR_AMT
SAS NAME: MDCL_SRGCL_PCMKR_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0275' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
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ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL

NINES

INTRAOCULAR_LENS_AMT

MEDPAR Intraocular Lens Amount

The charge amount (rounded to whole dollars) for the medical/surgical intraocular lens supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: INTRAOCULAR_LENS_AMT
SAS NAME: INTRAOCULAR_LENS_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0276' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

OXYGN_TAKE_HOME_AMT

MEDPAR Oxygen Take Home Amount

The charge amount (rounded to whole dollars) for the medical/surgical oxygen take home supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: OXYGN_TAKE_HOME_AMT
SAS NAME: OXYGN_TAKE_HOME_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0277' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

OTHR_IMPLANTS_AMT

MEDPAR Other Implants Amount

The charge amount (rounded to whole dollars) for the medical/surgical other implant supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all

amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: OTHR_IMPLANTS_AMT
SAS NAME: OTHR_IMPLANTS_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0278' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

OTHR_SUPLIES_DVC_AMT

MEDPAR Other Supplies Device Amount

The charge amount (rounded to whole dollars) for the medical/surgical other devices supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: OTHR_SUPLIES_DVC_AMT
SAS NAME: OTHR_SUPLIES_DVC_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0279' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

INCDNT_RDLGY_AMT

MEDPAR Incident to Radiology Amount

The charge amount (rounded to whole dollars) for the medical/surgical supplies incident to radiology related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: INCDNT_RDLGY_AMT
SAS NAME: INCDNT_RDLGY_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT)

associated with revenue center code (REV-CNTR-CD) '0621' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

INCDNT_DGNSTC_SRVCS_AMT

MEDPAR Incident to Other Diagnostic Services Amount

The charge amount (rounded to whole dollars) for the medical/surgical supplies incident to other diagnostic services related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: INCDNT_DGNSTC_SRVCS_AMT
SAS NAME: INCDNT_DGNSTC_SRVCS_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0622' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

MDCL_SRGCL_DRSNG_AMT

MEDPAR Medical Surgical Dressing Amount

The charge amount (rounded to whole dollars) for the medical/surgical dressing supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: MDCL_SRGCL_DRSNG_AMT
SAS NAME: MDCL_SRGCL_DRSNG_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV CNTR CD) '0623' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

INVSTGTNL_DVC_AMT

MEDPAR Investigational Device Amount

The charge amount (rounded to whole dollars) for the medical/surgical investigational devices supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: INVSTGTNL_DVC_AMT

SAS NAME: INVSTGTNL_DVC_AMT

FIELD TYPE: NUM

FIELD LENGTH: 10

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0624' from all claim records included in the stay.

SOURCE:

NCH

EDIT RULES:

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ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

MDCL_SRGCL_MISC_AMT

MEDPAR Medical Surgical Miscellaneous Amount

The charge amount (rounded to whole dollars) for the medical/surgical miscellaneous supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: MDCL_SRGCL_MISC_AMT

SAS NAME: MDCL_SRGCL_MISC_AMT

FIELD TYPE: NUM

FIELD LENGTH: 10

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center codes (REV-CNTR-CD_ '0620', '0625', '0626', '0627', '0628' & '0629' from all claim records included in the stay.

SOURCE:

NCH

EDIT RULES:

+\$\$\$\$\$\$\$\$

ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

RDLGY_ONCOLOGY_AMT

MEDPAR Radiology Oncology Amount

The charge amount (rounded to whole dollars) for the oncology services/supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all

amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: RDLGY_ONCOLOGY_AMT
SAS NAME: RDLGY_ONCOLOGY_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center codes (REV-CNTR-CD) '0280', '0281', '0282', '0283', '0284', '0285', '0286', '0287', '0288' & '0289' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

RDLGY_DGNSTC_AMT

MEDPAR Radiology Diagnostic Amount

The charge amount (rounded to whole dollars) for the radiology diagnostic services related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: RDLGY_DGNSTC_AMT
SAS NAME: RDLGY_DGNSTC_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center codes (REV-CNTR-CD) '0320', '0321', '0322', '0323', '0324', '0325', '0326', '0327', '0328' & '0329' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

RDLGY_THRPTC_AMT

MEDPAR Radiology Therapeutic Amount

The charge amount (rounded to whole dollars) for the radiology therapeutic services/supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: RDLGY_THRPTC_AMT
SAS NAME: RDLGY_THRPTC_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:

This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center codes (REV-CNTR-CD) '0330', '0331', '0332', '0333', '0334', '0335', '0336', '0337', '0338' & '0339' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

RDLGY_NUCLR_MDCN_AMT

MEDPAR Radiology Nuclear Medicine Amount

The charge amount (rounded to whole dollars) for the nuclear medicine services/supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: RDLGY_NUCLR_MDCN_AMT
SAS NAME: RDLGY_NUCLR_MDCN_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center codes (REV-CNTR-CD) '0340', '0341', '0342', '0343', '0344', '0345', '0346', '0347', '0348' & '0349' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

RDLGY_CT_SCAN_AMT

MEDPAR Radiology CT Scan Amount

The charge amount (rounded to whole dollars) for the Computed Tomographic (CT) services related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: RDLGY_CT_SCAN_AMT
SAS NAME: RDLGY_CT_SCAN_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center codes (REV-CNTR-CD) '0350', '0351', '0352', '0353', '0354', '0355', '0356', '0357', '0358' & '0359' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

RDLGY_OTHR_IMGNG_AMT

MEDPAR Radiology Other Imaging Amount

The charge amount (rounded to whole dollars) for the radiology other imaging services related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: RDLGY_OTHR_IMGNG_AMT
SAS NAME: RDLGY_OTHR_IMGNG_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center codes (REV-CNTR-CD) '0400', '0401', '0402', '0403', '0404', '0405', '0406', '0407', '0408' & '0409' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

OPRTG_ROOM_AMT

MEDPAR Operating Room Amount

The charge amount (rounded to whole dollars) for the operating room services/supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: OPRTG_ROOM_AMT
SAS NAME: OPRTG_ROOM_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center codes (REV-CNTR-CD) '0360', '0361', '0362', '0363', '0364', '0365', '0366', '0367', '0368', '0369', '0710', '0711', '0712', '0713', '0714', '0715', '0717', '0718' & '0719' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL
NINES

OR_LABOR_DLVRY_AMT

MEDPAR Operating Room Labor and Delivery Amount

The charge amount (rounded to whole dollars) for the labor room/delivery services/supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: OR_LABOR_DLVRY_AMT
SAS NAME: OR_LABOR_DLVRY_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center code (REV-CNTR-CD) '0720', '0721', '0722', '0723', '0724', '0725', '0726', '0727', '0728' & '0729' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

CRDC_CATHRZTN_AMT

MEDPAR Cardiac Catheterization Amount

The charge amount (rounded to whole dollars) for the cardiac catheterization services/supplies related to the beneficiary's stay.

NOTE: Effective with MEDPAR2000 expansion, all amount fields were expanded from S9(7) to S9(9)

LONG SAS NAME: CRDC_CATHRZTN_AMT
SAS NAME: CRDC_CATHRZTN_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the revenue center total charge amount (REV-CNTR-TOT-CHRG-AMT) associated with revenue center codes (REV-CNTR-CD) '0481' from all claim records included in the stay.

SOURCE:
NCH

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SQSTRTN_RDCTN_AMT

MEDPAR Sequestration Reduction Amount

This field represents the sequestration reduction amount (rounded to whole dollars)

LONG SAS NAME: SQSTRTN_RDCTN_AMT
SAS NAME: SQSTRTN_RDCTN_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:

This field is derived by accumulating the amount field (CLM-VAL-AMT) found in the value code trailer for value code (CLM-VAL-CD) equal to '73' for any claim records included in the stay.

EDIT RULES: +\$\$\$\$\$\$\$\$

ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SOURCE:

NCH

UNCOMPD_CARE_PYMT_AMT

MEDPAR Uncompensated Care Payment Amount

The field represents the uncompensated care amount (rounded to whole dollars) of the payment for DSH hospitals. Uncompensated care payments are effective for claims with discharge dates on or after 10/1/13 forward. For payment policies, see the Affordable Care Act section 3133 and the FY2014 IPPS final rule.

LONG SAS NAME: UNCOMPD_CARE_PYMT_AMT

SAS NAME: UNCOMPD_CARE_PYMT_AMT

FIELD TYPE: NUM

FIELD LENGTH: 10

DERIVATIONS:

This field is derived by accumulating the Claim IPPS Flex Payment 1 Amount field (CLM_IPPS_FLEX_PMT_1_AMT) that is present on any of the claim records included in the stay.

EDIT RULES:

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ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SOURCE:

NCH

BNDLD_ADJSTMT_AMT

MEDPAR Bundled Adjustment Amount

This field represents the amount (rounded to whole dollars) the claim was reduced by. This field only applies to providers participating in the CMMI model 1 bundled payment program and the adjustment is calculated off the base operating DRG amount field. See CMMI webpage for details on the Model 1 bundled payment program. <http://innovation.cms.gov/initiatives/bundled-payments/>

LONG SAS NAME: BNDLD_ADJSTMT_AMT

SAS NAME: BNDLD_ADJSTMT_AMT

FIELD TYPE: NUM

FIELD LENGTH: 10

DERIVATIONS:

This field is derived by accumulating the Claim IPPS Flex Payment 2 Amount field (CLM_IPPS_FLEX_PMT_2_AMT) that is present on any of the claim records included in the stay.

EDIT RULES:

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ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SOURCE:

NCH

VBP_ADJSTMT_AMT

MEDPAR Hospital Value Based Purchasing (VBP) Amount

This field represents the amount (rounded to whole dollars) of the Hospital Value Based Purchasing (VBP) Amount. This could be an additional payment on the claim or a reduction, depending on the hospital's score. For details on the VBP program see the website: <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-assessment-Instruments/hospital-value-based-purchasing/index.html?redirect=/hospital-value-based-purchasing>

LONG SAS NAME: VBP_ADJSTMT_AMT
SAS NAME: VBP_ADJSTMT_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the Claim IPPS Flex Payment 3 Amount field (CLM_IPPS_FLEX_PMT_3_AMT) that is present on any of the claim records included in the stay.

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SOURCE:
NCH

HRR_ADJSTMT_AMT

MEDPAR Hospital Readmission Reduction (HRR) Adjustment Amount

The amount field (rounded to whole dollars) that represents the Hospital Readmission Reduction (HRR) Program amount. This is a reduction to the claim for readmissions. This field holds a negative amount. For details on the readmission program see website: <http://www.cms.gov/Medicare/Medicare-Fee-For-Service-Payment/AcuteInpatientPPS/Readmissions-Reduction-Program.html>

LONG SAS NAME: HRR_ADJSTMT_AMT
SAS NAME: HRR_ADJSTMT_AMT
FIELD TYPE: NUM
FIELD LENGTH: 10

DERIVATIONS:
This field is derived by accumulating the Claim IPPS Flex Payment 4 Amount field (CLM_IPPS_FLEX_PMT_4_AMT) that is present on any of the claim records included in the stay.

EDIT RULES:
+\$\$\$\$\$\$\$\$
ROUNDED; ON-SIZE (OVERFLOW) SITUATION = ALL NINES

SOURCE:
NCH