# NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
# Home Health Agency (HHA) Fee-For-Service Revenue Center
**Date Created: 29JAN2021**
**Number of Variables: 39**

| Variable Name | Variable (VAR) Label | VAR Type | Range of Values[1] | Value Description |
|---|---|---|---|---|
| PATIENT_ID | NHCS Patient ID | Char | ID | Patient Identifier assigned by NCHS. Researchers requesting linked NHCS-CMS data should use PATIENT_ID. |
| PUBLICID | NHIS Public Use ID | Char | ID | Public-use survey participant identifier assigned by NCHS. Researchers requesting linked NHIS/LSOA II-Medicare data should use PUBLICID. |
| SEQN | NHANES Respondent Sequence Number | Num | ID | Public-use survey participant identifier assigned by NCHS. Researchers requesting linked NHEFS/NHANES III/NHANES-Medicare data should use SEQN. |
| RESNUM | NNHS Resident Record (Case) Number | Num | ID | Public-use survey participant identifier assigned by NCHS. Researchers requesting linked 2004 NNHS-Medicare data should use RESNUM. |
| SURVEY | Survey Name and survey year/cycle | Char | | |
| FILE_YEAR4 | Year of Medicare Fee-for-Service Claim (YYYY) | Num | 2016-2018 | 2016 NHCS has been linked to only 2016-2017 Medicare Data. |
| NCHS_CLM_ID | NCHS CLAIM ID | Num | | |
| CLM_THRU_DT | Claim Through Date | Num | | Date provided in SAS date (numeric) format. |
| CLM_LINE_NUM | Claim Line Number | Num | 1-348 | |
| NCH_CLM_TYPE_CD | NCH Claim Type Code | Char | 10 | HHA claim |
| REV_CNTR | Revenue Center Code | Char | | For value description please see website: https://www.resdac.org/cms-data/variables/revenue-center-code-ffs (accessed on 06/22/2020) |
| REV_CNTR_DT | Revenue Center Date | Num | | Date provided in SAS date (numeric) format. |

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| REV_CNTR_1ST_ANSI_CD | Revenue Center 1st ANSI Code | Char | | For value description please see website: https://www.resdac.org/cms-data/variables/revenue-center-1st-ansi-code (accessed on 06/22/2020) |
| REV_CNTR_APC_HIPPS_CD | Revenue Center APC or HIPPS Code | Char | | For value description please see website: https://www.resdac.org/cms-data/variables/revenue-center-apc-or-hipps-code (accessed on 06/22/2020) |
| HCPCS_CD | HCFA Common Procedure Coding System (HCPCS) Code | Char | | |
| HCPCS_1ST_MDFR_CD | HCPCS Initial Modifier Code | Char | | |
| HCPCS_2ND_MDFR_CD | HCPCS Second Modifier Code | Char | | |
| HCPCS_3RD_MDFR_CD | HCPCS Third Modifier Code | Char | | |
| REV_CNTR_PMT_MTHD_IND_CD | Revenue Center Payment Method Indicator Code | Char | 1 | Paid standard hospital OPPS amount (status indicators K, S,T,V,X) |
| | | | 2 | Services not paid under OPPS (status indicator A, or no HCPCS code and not certain revenue center codes) |
| | | | 3 | Not paid (status indicator M,W,Y,E) or not paid under OPPS (status indicator B,C & Z) |
| | | | 9 | No additional payment, payment included in line items with APCs (status indicator N, or no HCPCS code and certain revenue center codes, or HCPCS codes G0176 (activity therapy), G0129 (occupational therapy) or G0177 (partial hospitalization program services) |
| REV_CNTR_UNIT_CNT | Revenue Center Unit Count | Num | 0-80,100 | Number of units (count) |
| REV_CNTR_RATE_AMT | Revenue Center Rate Amount | Num | 0-700 | Payment/Chagred Amount, in dollars. |

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|---|---|---|---|---|
| REV_CNTR_PMT_AMT_AMT | Revenue Center (Medicare) Payment Amount | Num | 0-11,100 | Payment/Chagred Amount, in dollars. |
| | | | | |
| REV_CNTR_TOT_CHRG_AMT | Revenue Center Total Charge Amount | Num | 0-262,400 | Payment/Chagred Amount, in dollars. |
| | | | | |
| REV_CNTR_NCVRD_CHRG_AMT | Revenue Center Non-Covered Charge Amount | Num | 0-104,600 | Payment/Chagred Amount, in dollars. |
| | | | | |
| REV_CNTR_DDCTBL_COINSRNC_CD | Revenue Center Deductible Coinsurance Code | Char | | Missing Value |
| | | | 1 | Charges are not subject to deductible |
| | | | 3 | Charges are not subject to deductible or coinsurance |
| | | | M | REV_CNTR='0001': Override code; EGHP services involved (eff 12/90 for non-institutional claims; 10/93 for institutional claims) |
| | | | N | REV_CNTR='0001': Override code; non-EGHP services involved (eff 12/90 for non-institutional claims; 10/93 for institutional claims) |
| | | | | |
| REV_CNTR_STUS_IND_CD | Revenue Center Status Indicator Code | Char | **OTHER** | Miscoded |
| | | | A | Services not paid under OPPS |
| | | | B | Non-allowed item or service for OPPS |
| | | | E | Non-allowed item or service (not paid by OPPS or any other Medicare payment system) |
| | | | M | Service not billable to fiscal intermediary (FI) [now a MAC] |
| | | | N | Packaged incidental service |
| | | | P | Paid partial hospitalization per diem |
| | | | Q1 | Separate payment made; OPPS - APC (effective 2009) |
| | | | Q3 | May be paid through a composite APC-based on composite-specific criteria or separately through single code APCs when the criteria are not met (effective 2009) |
| | | | S | Significant procedure not subject to multiple procedure discounting |
| | | | T | Significant procedure subject to multiple procedure discounting |

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| Variable Name | Variable (VAR) Label | VAR Type | Range of Values[1] | Value Description |
|---|---|---|---|---|
| | | | W | Invalid HCPCS or invalid revenue code with blank HCPCS |
| | | | Y | Non-implantable DME, Therapeutic shoes |
| | | | Z | Valid revenue with blank HCPCS and no other SI assigned |
| | | | | |
| REV_CNTR_NDC_QTY | Revenue Center National Drug Code (NDC) Quantity | Num | | The unit of measurement for the drug that was administered (e.g., grams, liters) is indicated in the variable called REV_CNTR_NDC_QTY_QLFR_CD. |
| | | | | |
| REV_CNTR_NDC_QTY_QLFR_CD | Revenue Center NDC Quantity Qualifier Code | Char | | Missing Value |
| | | | | |
| RNDRNG_PHYSN_UPIN | Revenue Center Rendering Physician UPIN | Char | | |
| | | | | |
| RNDRNG_PHYSN_NPI | Revenue Center Rendering Physician NPI | Char | | |
| | | | | |
| RNDRNG_PHYSN_SPCLTY_CD | Revenue Center Rendering Physician Specialty Code | Char | | For value description please see website: https://www.resdac.org/cms-data/variables/claim-or-revenue-center-rendering-physician-specialty-code (accessed on 06/22/2020) |
| | | | | |
| REV_CNTR_DSCNT_IND_CD | Revenue Center Discount Indicator Code | Char | | Missing Value |
| | | | 1 | 1.0 |
| | | | | |
| REV_CNTR_IDE_NDC_UPC_NUM | Revenue Center IDE, NDC, or UPC Number | Char | | |
| | | | | |
| REV_CNTR_PRVDR_PMT_AMT | Revenue Center (Medicare) Provider Payment Amount | Num | 0-11,100 | Payment/Chagred Amount, in dollars. |
| | | | | |
| REV_CNTR_PTNT_RSPNSBLTY_PMT | Revenue Center Patient Responsibility Payment Amount | Num | 0-100 | Payment/Chagred Amount, in dollars. |

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| REV_CNTR_PRCNG_IND_CD | Revenue Center Pricing Indicator Code | Char | | For value description please see website:<br>https://www.resdac.org/cms-data/variables/<br>revenue-center-pricing-indicator-code (accessed on 06/22/2020) |
| | | | | |
| THRPY_CAP_IND_CD1 | Revenue Center Therapy Cap Indicator 1 Code | Char | | Missing Value |
| | | | | |
| THRPY_CAP_IND_CD2 | Revenue Center Therapy Cap Indicator 2 Code | Char | | Missing Value |
| | | | | |
| REV_CNTR_RP_IND_CD | Revenue Center Representative Payee (RP)<br>Indicator Code | Char | | Missing Value |
| | | | | |

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