

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

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 MDS 3.0 Assessment (YYYY)	Num	2016-2018	2016 NHCS has been linked to only 2016-2017 Medicare Data.
FACILITY_ID	Facility Internal ID	Char		This variable is needed to merge the Assessment file and Facility file.
TRGT_DT	Target Date (Date of Assessment)	Num		Date provided in SAS date (numeric) format.
STATE_CD	State Code	Char		This variable is needed to merge the Assessment file and Facility file.
MDS_ITM_SBST_CD	Item Subset Code (ISC)	Char	**OTHER**	Miscoded
			NC	Nursing Home: Comprehensive
			ND	Nursing Home: Discharge
			NO	Nursing Home: OMRA Other
			NOD	Nursing Home: OMRA Other + Discharge
			NP	Nursing Home: PPS

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			NQ	Nursing Home: Quarterly
			NS	Nursing Home: OMRA Start of Therapy
			NSD	Nursing Home: OMRA Start of Therapy + Discharge
			NT	Nursing Home: Tracking (entry/expired)
SUBMSN_DT	Submission Date	Num		Date provided in SAS date (numeric) format.
RQRD_SUBMSN_CD	Submission Required Code (SUB_REQ)	Char		Missing Value
			3	Federal required submission
C_BIRTH_DT_SBMT_CD	Birth Date Submit Code	Char		Date provided in SAS date (numeric) format.
CRCTN_NUM	Correction Number	Num	0-4	
MDS_CRCTN_STUS_CD	Correction Status Code	Char		Missing Value
			C	Current Assessment
SPEC_VRSN_CD	Data Submission Specification Version Code	Char		
ITM_SET_VRSN_CD	Item Set Version Code	Char		
V0100F_PRIOR_STF_MOOD_SCRE_NUM	Prior Assessment Staff Assessment of Resident Mood (PHQ-9) Total Severity Score Number	Char		
PRCSD_TS	Processed Timestamp	Num		Date provided in SAS date (numeric) format.
C_RSDNT_AGE_NUM	Resident Age	Char		
RSDNT_MATCH_CRITIA_ID	Resident Match Criteria ID	Num	0-11	

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
C_URBN_RRL_CD	CBSA Urban/Rural Code	Char		
C_MDCR_HIPPS_TXT	Recalculated Z0100A	Char		
C_MDCR_RUG_VRSN_TXT	Recalculated Z0100B	Char		
C_MDCR_STAY_CD	Recalculated Z0100C	Char		
C_MDCR_SET_CD	CMI Set for Recalculated Z0100A	Char		
C_MDCR_CMI_TXT	CMI Value for Recalculated Z0100A	Char		
C_MDCR_NT_HIPPS_TXT	Recalculated Z0150A	Char		
C_MDCR_NT_RUG_VRSN_TXT	Recalculated Z0150B	Char		
C_MDCR_NT_SET_CD	CMI Set for Recalculated Z0150A	Char		
C_MDCR_NT_CMI_TXT	CMI Value for Recalculated Z0150A	Char		
C_STATE_RUG_GRP_TXT	Recalculated Z0200A	Char		
C_STATE_RUG_VRSN_TXT	Recalculated Z0200B	Char		
C_STATE_SET_CD	CMI Set for Recalculated Z0200A	Char		
C_STATE_CMI_TXT	CMI Value for Recalculated Z0200A	Char		
C_STATE_2_RUG_GRP_TXT	Recalculated Z0250A	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
C_STATE_2_RUG_VRSN_TXT	Recalculated Z0250B	Char		
C_STATE_2_SET_CD	CMI Set for Recalculated Z0250A	Char		
C_STATE_2_CMI_TXT	CMI Value for Recalculated Z0250A	Char		
C_MDCR_RUG3_IDX_MAX_GRP_TXT	Medicare RUG III Index Maximized Group	Char		
C_MDCR_RUG3_IDX_MAX_VRSN_TXT	Medicare RUG III Index Maximized Version	Char		
C_MDCR_RUG3_IDX_MAX_CMI_SET_CD	Medicare RUG III Index Maximized CMI Set	Char		
C_MDCR_RUG3_IDX_MAX_CMI_TXT	Medicare RUG III Index Maximized CMI Value	Char		
C_MDCR_RUG3_HIRCHCL_GRP_TXT	Medicare RUG III Hierarchical Group	Char		
C_MDCR_RUG3_HIRCHCL_VRSN_TXT	Medicare RUG III Hierarchical Version	Char		
C_MDCR_RUG4_HIRCHCL_GRP_TXT	Medicare RUG IV Hierarchical Group	Char		
C_MDCR_RUG4_HIRCHCL_VRSN_TXT	Medicare RUG IV Hierarchical Version	Char		
A0050_TRANS_TYPE_CD	A0050 Type of Record Code	Char	-	Modify existing record
			1	Add a new record
A0100A_NPI_NUM	A0100A Facility National Provider Identifier (NPI)	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
A0100B_CMS_CRTFACTN_NUM	A0100B Facility CMS Certification Number (CCN)	Char		
A0100C_STATE_PRVDR_NUM	A0100C State Provider Number	Char		
A0200_PRVDR_TYPE_CD	A0200 Type of Provider	Char	1	Nursing home (SNF/NF)
A0310A_FED_OBRA_CD	A0310A Federal OBRA Reason for Assessment Code	Char	01	Admission assessment (required by day 14)
			02	Quarterly review assessment
			03	Annual assessment
			04	Significant change in status assessment
			05	Significant correction to prior comprehensive assessment
			06	Significant correction to prior quarterly assessment
			99	None of the above
A0310B_PPS_CD	A0310B PPS Assessment Code	Char	01	5-day scheduled assessment
			02	14-day scheduled assessment
			03	30-day scheduled assessment
			04	60-day scheduled assessment
			05	90-day scheduled assessment
			07	Unscheduled assessment used for PPS (OMRA, significant or clinical change, or significant correction assessment)
			99	None of the above
A0310C_PPS_OMRA_CD	A0310C PPS Other Medicare Required Assessment (OMRA) Code	Char	0	No
			1	Start of therapy assessment

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			2	End of therapy assessment
			3	Both Start and End of therapy assessment
			4	Change of therapy assessment
A0310D_SB_CLNCL_CHG_CD	A0310D Swing Bed Clinical Change Code	Char		Missing Value
A0310E_FIRST_SINCE_ADMSN_CD	A0310E First Assessment Since Most Recent Admission Code	Char	0	No
			1	Yes
A0310F_ENTRY_DSCHRG_CD	A0310F Entry/Discharge Code	Char	01	Entry tracking record
			10	Discharge assessment - return not anticipated
			11	Discharge assessment - return anticipated
			12	Death in facility record tracking record
			99	None of the above
A0310G_PLND_DSCHRG_CD	A0310G Planned Discharge Code	Char		Missing Value
			1	Planned
			2	Unplanned
A0410_RQRD_SUBMSN_CD	A0410 Submission Required Code	Char	3	Federal required submission
A0800_GNDR_CD	A0800 Gender	Char	1	Male
			2	Female
A0900_BIRTH_DT	A0900 Birth Date	Num		Date provided in SAS date (numeric) format.

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
A1000A_AMRCN_INDN_AK_NTV_CD	A1000A Race/Ethnicity: American Indian or Alaskan Native Code	Char	-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
A1000B_ASN_CD	A1000B Race/Ethnicity: Asian Code	Char	-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
A1000C_AFRCN_AMRCN_CD	A1000C Race/Ethnicity: African American Code	Char	-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
A1000D_HSPNC_CD	A1000D Race/Ethnicity: Hispanic Code	Char	-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
A1000E_NTV_HI_PCFC_ISLNR_CD	A1000E Race/Ethnicity: Native Hawaiian/Pacific Islander Code	Char	-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
A1000F_WHT_CD	A1000F Race/Ethnicity: White Code	Char	-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
A1100A_NEED_INTRPTR_CD	A1100A Resident Need Interpreter Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

**Date Created: 29JAN2021
Number of Variables: 760**

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No
			1	Yes
			9	Unable to Determine
A1100B_INTRPTR_LANG_TXT	A1100B Preferred Language	Char		
A1200_MRTL_STUS_CD	A1200 Marital Status Code	Char	-	Not assessed/no information
			1	Never married
			2	Married
			3	Widowed
			4	Separated
			5	Divorced
A1300A_MDCL_REC_NUM	A1300A Medical Record Number	Char		
A1300B_ROOM_NUM	A1300B Room Number	Char		
A1300D_LFTM_OCPTN_TXT	A1300D Lifetime Occupation(s) Text	Char		
A1500_PASRR_CD	A1500 Preadmission Screening and Resident Review (PASRR) Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
			9	Not a Medicaid certified unit

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
A1510A_SRUS_MENTL_ILL_CD	A1510A Serious Mental Illness Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
A1510B_MENTL_RTRDTN_CD	A1510B Intellectual Disability Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
A1510C_OTHR_PASSR_RLTD_CD	A1510C Other Related Condition Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
A1550A_DOWN_SYNDRM_CD	A1550A MR/DD Status: Down Syndrome Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
A1550B_AUTSM_CD	A1550B MR/DD Status: Autism Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
A1550C_EPLPSY_CD	A1550C MR/DD Status: Epilepsy Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No
			1	Yes
A1550D_OTHR_ORGNC_MR_DD_CD	A1550D MR/DD Status: Other Organic MR/DD Condition Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
A1550E_OTHR_MR_DD_CD	A1550E MR/DD Status: MR/DD With No Organic Condition Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
A1550Z_NO_MR_DD_CD	A1550Z MR/DD Status: None of the Above	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
A1600_ENTRY_DT	A1600 Entry Date	Num		Date provided in SAS date (numeric) format.
A1700_ENTRY_TYPE_CD	A1700 Type of Entry Code	Char	1	Admission
			2	Reentry

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
A1800_ENTRD_FROM_TXT	A1800 Entered From Code	Char	01	Community (private home/apt.,board/care,assisted living, group home)
			02	Another nursing home or swing bed
			03	Acute hospital
			04	Psychiatric hospital
			05	Inpatient rehabilitation facility
			06	ID/DD facility
			07	Hospice
			09	Long Term Care Hospital (LTC)
			99	Other
A2000_DSCHRG_DT	A2000 Discharge Date	Char		Date provided in SAS date (numeric) format.
A2100_DSCHRG_STUS_CD	A2100 Discharge Status Code	Char		Missing Value
			01	Community (private home/apt.,board/care,assisted living, group home)
			02	Another nursing home or swing bed
			03	Acute hospital
			04	Psychiatric hospital
			05	Inpatient rehabilitation facility
			06	ID/DD facility
			07	Hospice
			08	Deceased
			09	Long Term Care Hospital (LTCH)
			99	Other

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
A2200_PRVS_ASMT_RFRNC_DT	A2200 Previous Assessment Reference Date For Significant Correction	Char		Date provided in SAS date (numeric) format.
A2300_ASMT_RFRNC_DT	A2300 Assessment Reference Date	Num		Date provided in SAS date (numeric) format.
A2400A_MDCR_STAY_CD	A2400A Has Resident Had a Medicare Stay Code Since Most Recent Admission	Char	0 1	No Yes
A2400B_MDCR_STAY_STRT_DT	A2400B Start Date of Most Recent Medicare Stay	Char		Date provided in SAS date (numeric) format.
A2400C_MDCR_STAY_END_DT	A2400C End Date of Most Recent Medicare Stay	Char		Date provided in SAS date (numeric) format.
B0100_CMTS_CD	B0100 Comatose Code	Char	- 0 1	Missing Value Not assessed/no information No Yes
B0200_HEARG_CD	B0200 Hearing Code	Char	- 0 1 2 3	Missing Value Not assessed/no information Adequate-no difficulty in normal conversation, social interaction, listening to TV Minimal difficulty-difficulty in some environments (e.g.,when person speaks softly or setting is noisy) Moderate difficulty-speaker has to increase volume and speak distinctly High impaired-absence of useful hearing

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
B0300_HEARG_AID_CD	B0300 Hearing Aide Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
B0600_SPCH_CLRTY_CD	B0600 Speech Clarity Code	Char		Missing Value
			-	Not assessed/no information
			0	Clear Speech-distinct intelligible words
			1	Unclear speech-slurred or mumbled words
			2	No speech-absence of spoken word
B0700_SELF_UNDRSTOD_CD	B0700 Makes Self Understood Code	Char		Missing Value
			-	Not assessed/no information
			0	Understood
			1	Usually understood-difficulty communicating some words or finishing thoughts but is able to if prompted or given time
			2	Sometimes understood-ability is limited to making concrete requests
			3	Rarely/never understood
B0800_UNDRST_OTHR_CD	B0800 Ability to Understand Others Code	Char		Missing Value
			-	Not assessed/no information
			0	Understands-clear comprehension
			1	Usually understands-misses some part/intent of message but comprehends most conversation
			2	Sometimes understands-responds adequately to simple, direct communication only

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			3	Rarely/never understands
B1000_VSN_CD	B1000 Vision Code	Char		Missing Value
			-	Not assessed/no information
			0	Adequate-sees fine detail, including regular print in newspapers/books
			1	Impaired-sees large print, but not regular print in newspapers/books
			2	Moderately impaired-limited vision; not able to see newspaper headlines but can identify objects
			3	Highly impaired-object identification in question, but eyes appear to follow objects
			4	Severely impaired-no vision or sees only light, colors or shapes; eyes do not appear to follow objects
B1200_CRCTV_LENS_CD	B1200 Corrective Lenses Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
C0100_CNDCT_MENTL_STUS_CD	C0100 Brief Interview for Mental Status Be Conducted Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
C0200_WORD_RPET_FIRST_ATMPT_CD	C0200 BIMS: Number of Words Repeated After First Attempt	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	None
			1	One
			2	Two
			3	Three
C0300A_RPT_CRCT_YR_CD	C0300A BIMS: Temporal Orientation - Able to Report Correct Year	Char		Missing Value
			-	Not assessed/no information
			0	Missed by > 5 years or no answer
			1	Missed by 2-5 years
			2	Missed by 1 year
			3	Correct
C0300B_RPT_CRCT_MO_CD	C0300B BIMS: Temporal Orientation - Able to Report Correct Month	Char		Missing Value
			-	Not assessed/no information
			0	Missed by > 1 month or no answer
			1	Missed by 6 days to 1 month
			2	Accurate within 5 days
C0300C_RPT_CRCT_DAY_CD	C0300C BIMS: Temporal Orientation - Able to Report Correct Day of Week	Char		Missing Value
			-	Not assessed/no information
			0	Incorrect or no answer
			1	Correct
C0400A_RCALL_FIRST_WORD_CD	C0400A BIMS: Recall - Able to Recall Sock	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021
 Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No-could not recall
			1	Yes, after cueing ("a color")
			2	Yes, no cue required
C0400B_RCALL_SCND_WORD_CD	C0400B BIMS: Recall - Able to Recall Blue	Char		Missing Value
			-	Not assessed/no information
			0	No-could not recall
			1	Yes, after cueing ("a color")
			2	Yes, no cue required
C0400C_RCALL_THRD_WORD_CD	C0400C BIMS: Recall - Able to Recall Bed	Char		Missing Value
			-	Not assessed/no information
			0	No-could not recall
			1	Yes, after cueing ("a color")
			2	Yes, no cue required
C0500_BIMS_SCRE_NUM	C0500 Brief Interview for Mental Status (BIMS) Score Number	Char		
C0600_CNDCT_STF_MENTL_STUS_CD	C0600 Staff to Conduct Brief Interview for Mental Status	Char		Missing Value
			-	Not assessed/no information
			0	No (resident was able to complete interview)
			1	Yes (resident was unable to complete interview)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
C0700_SHRT_TERM_MEMRY_CD	C0700 Staff Assessment of Mental Status - Short Term Memory Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			1	Memory OK
C0800_LT_MEMRY_CD	C0800 Staff Assessment of Mental Status - Long Term Memory Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			1	Memory OK
C0900A_RCALL_CRNT_SEASN_CD	C0900A Staff Assessment of Mental Status - Recalls Current Season Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
C0900B_RCALL_LCTN_ROOM_CD	C0900B Staff Assessment of Mental Status - Recalls Location of Room Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
C0900C_RCALL_STF_NAME_CD	C0900C Staff Assessment of Mental Status - Recalls Staff Name Code	Char		Missing Value
			-	Not assessed/no information
			0	No

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Yes
C0900D_RCALL_NH_CD	C0900D Staff Assessment of Mental Status - Recalls Nursing Home Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
C0900Z_RCALL_NONE_CD	C0900Z Staff Assessment of Mental Status - Recalls None of Above Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
C1000_DCSN_MKNG_CD	C1000 Cognitive Skills for Decision Making Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent-decisions consistent/reasonable
			1	Modified independence-some difficulty in new situations only
			2	Moderately impaired-decisions poor; cues/supervision required
			3	Severely impaired-never / rarely made decisions
C1300A_INATTNTN_CD	C1300A Signs and Symptoms of Delirium - Inattention	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not present
			1	Behavior continuously present, does not fluctuate

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			2	Behavior present, fluctuates (comes and goes, changes in severity)
C1300B_DISORGNZ_THNKG_CD	C1300B Signs and Symptoms of Delirium - Disorganized Thinking	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not present
			1	Behavior continuously present, does not fluctuate
			2	Behavior present, fluctuates (comes and goes, changes in severity)
C1300C_ALTRD_CONSCS_CD	C1300C Signs and Symptoms of Delirium - Altered Level of Consciousness	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not present
			1	Behavior continuously present, does not fluctuate
			2	Behavior present, fluctuates (comes and goes, changes in severity)
C1300D_PSYCHMTR_RTRDTN_CD	C1300D Signs and Symptoms of Delirium - Psychomotor Retardation	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not present
			1	Behavior continuously present, does not fluctuate
			2	Behavior present, fluctuates (comes and goes, changes in severity)
C1600_CHG_MENTL_STUS_CD	C1600 Acute Onset Mental Status Change	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
D0100_CNDCT_MOOD_CD	D0100 Resident Mood Interview Be Conducted Code	Char		Missing Value
			-	Not assessed/no information
			0	No(resident is rarely/never understood)
			1	Yes
D0200A1_INTRST_LOSS_CD	D0200A1 Resident Mood Interview - Interest Loss Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
			9	No response (leave column 2 blank)
D0200A2_INTRST_LOSS_FREQ_CD	D0200A2 Resident Mood Interview - Interest Loss Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0200B1_FEEL_DOWN_CD	D0200B1 Resident Mood Interview - Feel Down Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			0	Never or 1 day

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	2-6 days (several days)
D0200B2_FEEL_DOWN_FREQ_CD	D0200B2 Resident Mood Interview - Feel Down Frequency Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0200C1_TRBL_SLEEP_CD	D0200C1 Resident Mood Interview - Trouble Sleep Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
D0200C2_TRBL_SLEEP_FREQ_CD	D0200C2 Resident Mood Interview - Trouble Sleep Frequency Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0200D1_LTL_ENRGY_CD	D0200D1 Resident Mood Interview - Little Energy Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	Never or 1 day
			1	2-6 days (several days)
D0200D2_LTL_ENRGY_FREQ_CD	D0200D2 Resident Mood Interview - Little Energy Frequency Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0200E1_POOR_APTIT_CD	D0200E1 Resident Mood Interview - Poor Appetite Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
D0200E2_POOR_APTIT_FREQ_CD	D0200E2 Resident Mood Interview - Poor Appetite Frequency Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0200F1_SELF_DPRCTN_CD	D0200F1 Resident Mood Interview - Self Depreciation Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
			9	No response (leave column 2 blank)
D0200F2_SELF_DPRCTN_FREQ_CD	D0200F2 Resident Mood Interview - Self Depreciation Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0200G1_CNCNTRTN_CD	D0200G1 Resident Mood Interview - Lack of Concentration Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
			9	No response (leave column 2 blank)
D0200G2_CNCNTRTN_FREQ_CD	D0200G2 Resident Mood Interview - Lack of Concentration Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
D0200H1_MVMT_DFRNT_CD	D0200H1 Resident Mood Interview - Movement Different Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
			9	No response (leave column 2 blank)
D0200H2_MVMT_DFRNT_FREQ_CD	D0200H2 Resident Mood Interview - Movement Different Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0200I1_NGTV_STATE_CD	D0200I1 Resident Mood Interview - Negative Statement Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
			9	No response (leave column 2 blank)
D0200I2_NGTV_STATE_FREQ_CD	D0200I2 Resident Mood Interview - Negative Statement Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0300_MOOD_SCRE_NUM	D0300 Resident Mood Interview - Total Severity Mood Score Code	Char		
D0350_NGTV_STATE_NTIFY_STF_CD	D0350 Resident Mood Interview - Negative Statements Notify Staff Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
D0500A1_STF_INTRST_LOSS_CD	D0500A1 Staff Assessment of Resident Mood - Interest Loss Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500A2_STF_INTRSTLOSS_FREQ_CD	D0500A2 Staff Assessment of Resident Mood - Interest Loss Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0500B1_STF_FEEL_DOWN_CD	D0500B1 Staff Assessment of Resident Mood - Feel Down Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500B2_STF_FEEL_DOWN_FREQ_CD	D0500B2 Staff Assessment of Resident Mood - Feel Down Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0500C1_STF_TRBL_SLEEP_CD	D0500C1 Staff Assessment of Resident Mood - Trouble Sleep Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500C2_STF_TRBL_SLEEP_FREQ_CD	D0500C2 Staff Assessment of Resident Mood - Trouble Sleep Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
D0500D1_STF_LTL_ENRGY_CD	D0500D1 Staff Assessment of Resident Mood - Little Energy Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500D2_STF_LTL_ENRGY_FREQ_CD	D0500D2 Staff Assessment of Resident Mood - Little Energy Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0500E1_STF_POOR_APTIT_CD	D0500E1 Staff Assessment of Resident Mood - Poor Appetite Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500E2_STF_POOR_APTIT_FREQ_CD	D0500E2 Staff Assessment of Resident Mood - Poor Appetite Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
D0500F1_STF_SELF_DPRCTN_CD	D0500F1 Staff Assessment of Resident Mood - Self Depreciation Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500F2_STF_SELFDPRCTN_FREQ_CD	D0500F2 Staff Assessment of Resident Mood - Self Depreciation Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0500G1_STF_CNCNTRTN_CD	D0500G1 Staff Assessment of Resident Mood - Concentration Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500G2_STF_CNCNTRTN_FREQ_CD	D0500G2 Staff Assessment of Resident Mood - Concentration Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			3	12-14 days (nearly every day)
D0500H1_STF_MVMT_DFRNT_CD	D0500H1 Staff Assessment of Resident Mood - Movement Different Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500H2_STF_MVMT_DFRNT_FREQ_CD	D0500H2 Staff Assessment of Resident Mood - Movement Different Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0500I1_STF_NGTV_STATE_CD	D0500I1 Staff Assessment of Resident Mood - Negative Statement Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500I2_STF_NGTV_STATE_FREQ_CD	D0500I2 Staff Assessment of Resident Mood - Negative Statement Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0500J1_STF_SHRT_TMPR_CD	D0500J1 Staff Assessment of Resident Mood - Short Temper Code	Char		Missing Value
			-	Not assessed/no information
			0	No (enter 0 in column 2)
			1	Yes (enter 0-3 in column 2)
D0500J2_STF_SHRT_TMPR_FREQ_CD	D0500J2 Staff Assessment of Resident Mood - Short Temper Frequency Code	Char		Missing Value
			-	Not assessed/no information
			0	Never or 1 day
			1	2-6 days (several days)
			2	7-11 days (half or more of the days)
			3	12-14 days (nearly every day)
D0600_STF_MOOD_SCRE_NUM	D0600 Staff Assessment Total Severity Mood Score	Char		
D0650_STF_NGTV_STATE_NOTIFY_CD	D0650 Staff Assessment of Resident Mood - Negative Statement Notify Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E0100A_HLLCNTN_CD	E0100A Behavior: Hallucinations Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	No
			1	Yes
E0100B_DLSN_CD	E0100B Behavior: Delusion Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E0100Z_NO_PSYCHOSIS_CD	E0100Z Behavior: No Psychosis Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E0200A_PHYS_BHVRL_CD	E0200A Behavior: Physical Behavioral Code	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not exhibited
			1	Behavior of this type occurred 1 to 3 days
			2	Behavior of this type occurred 4 to 6 days, but less than daily
			3	Behavior of this type occurred daily
E0200B_VRBL_BHVRL_CD	E0200B Behavior: Verbal Behavioral Code	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not exhibited
			1	Behavior of this type occurred 1 to 3 days
			2	Behavior of this type occurred 4 to 6 days, but less than daily

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			3	Behavior of this type occurred daily
E0200C_OTHR_BHVRL_CD	E0200C Behavior: Other Behavioral Code	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not exhibited
			1	Behavior of this type occurred 1 to 3 days
			2	Behavior of this type occurred 4 to 6 days, but less than daily
			3	Behavior of this type occurred daily
E0300_BHVR_PRSNT_CD	E0300 Overall Presence of Behavioral Symptoms	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E0500A_BHVR_INJR_SELF_CD	E0500A Behavior Impact on Resident: Risk to Injure Self	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E0500B_BHVR_INTRFR_CARE_CD	E0500B Behavior Impact on Resident: Interferes With Care	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
E0500C_BHVR_INTRFR_PRTCPTN_CD	E0500C Behavior Impact on Resident: Interferes With Participation	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E0600A_BHVR_INJR_OTHR_CD	E0600A Behavior Impact on Others: Risk to Injure Others	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E0600B_BHVR_INTRD_PRIVCY_CD	E0600B Behavior Impact on Others: Intrude On Privacy of Others	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E0600C_BHVR_DSURPT_ENVRMNT_CD	E0600C Behavior Impact on Others: Disrupt Care or Living Environment	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E0800_RJCT_EVALTN_CD	E0800 Rejection of Care: Presence and Frequency	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not exhibited

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Behavior of this type occurred 1 to 3 days
			2	Behavior of this type occurred 4 to 6 days, but less than daily
			3	Behavior of this type occurred daily
E0900_WNDR_CD	E0900 Wandering: Presence and Frequency	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not exhibited
			1	Behavior of this type occurred 1 to 3 days
			2	Behavior of this type occurred 4 to 6 days, but less than daily
			3	Behavior of this type occurred daily
E1000A_WNDR_RISK_CD	E1000A Wander Risk Impact	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E1000B_WNDR_INTRD_PRIVCY_CD	E1000B Wandering Intrudes on Privacy of Others	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
E1100_BHVR_CHG_PRIOR_CD	E1100 Change in Behavior or Other Symptoms	Char		Missing Value
			-	Not assessed/no information
			0	Same
			1	Improved

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			2	Worse
			3	N/A because not prior MDS assessment
F0300_CNDCT_ACTVTY_CD	F0300 Should Daily and Activity Preference Interview Be Conducted	Char		Missing Value
			-	Not assessed/no information
			0	No (resident is rarely/never understood and family / significant other not available)
			1	Yes
F0400A_DRESS_CD	F0400A Interview for Daily Preferences: Chooses Clothes Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0400B_CARE_PRSNL_ITM_CD	F0400B Interview for Daily Preferences: Care Personal Items Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0400C_BATHG_OPTN_CD	F0400C Interview for Daily Preferences: Bathing Option Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0400D_SNACK_BTWN_CD	F0400D Interview for Daily Preferences: Snack Between Meals Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0400E_BED_TIME_CD	F0400E Interview for Daily Preferences: Choose Bed Time Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0400F_FMLY_INVLVMT_CD	F0400F Interview for Daily Preferences: Family Involvement Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0400G_PRVT_PHNE_CD	F0400G Interview for Daily Preferences: Private Phone Time Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			9	No response or non-responsive
F0400H_LOCK_ITM_CD	F0400H Interview for Daily Preferences: Lock Item Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0500A_READG_AVLBL_CD	F0500A Interview for Activity Preferences: Reading Materials Available Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0500B_MUSIC_CD	F0500B Interview for Activity Preferences: Music Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0500C_ANML_CD	F0500C Interview for Activity Preferences: Animal Presence Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0500D_NEWS_CD	F0500D Interview for Activity Preferences: News Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
F0500E_GRP_ACTVTY_CD	F0500E Interview for Activity Preferences: Group Activity Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0500F_FVRT_ACTVTY_CD	F0500F Interview for Activity Preferences: Favorite Activity Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0500G_FRSH_AIR_CD	F0500G Interview for Activity Preferences: Time Outdoors Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0500H_RLGN_CD	F0500H Interview for Activity Preferences: Religion Code	Char		Missing Value
			-	Not assessed/no information
			1	Very important
			2	Somewhat important
			3	Not very important
			4	Not important at all
			5	Important, but can't do or no choice
			9	No response or non-responsive
F0600_RSPNDT_ACTVTY_CD	F0600 Daily and Activity Preferences Primary Respondent Code	Char		Missing Value
			-	Not assessed/no information
			1	Resident
			2	Family or significant other (close friend or other representative)
			9	Interview could not be completed by resident or family/significant other (No response to 3 or more items)
F0700_STF_CNDCT_ACTVTY_CD	F0700 Conduct Staff Assessment of Daily and Activity Preferences Code	Char		Missing Value
			-	Not assessed/no information
			0	No (because Interview for Daily Activity Preferences (F0400 and F0500) was completed by resident or family/significant other)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Yes (because 3 or more items in Interview for Daily Activity Preferences (F0400 and F0500) were not completed by resident or family/significant other
F0800A_STF_DRESS_CD	F0800A Staff Assessment: Chooses Clothes Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800B_STF_CARE_PRSNL_ITM_CD	F0800B Staff Assessment: Care Personal Item Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800C_STF_TUB_BATH_CD	F0800C Staff Assessment: Tub Bath Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800D_STF_SHWR_CD	F0800D Staff Assessment: Shower Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800E_STF_BED_BATH_CD	F0800E Staff Assessment: Bed Bath Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	No
			1	Yes
F0800F_STF_SPNG_BATH_CD	F0800F Staff Assessment: Sponge Bath Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800G_STF_SNACK_BTWN_CD	F0800G Staff Assessment: Snacks Between Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800H_STF_BED_TIME_CD	F0800H Staff Assessment: Bed Time Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800I_STF_FMLY_INVLVMT_CD	F0800I Staff Assessment: Family Involvement Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800J_STF_PRVT_PHNE_CD	F0800J Staff Assessment: Private Phone Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	No
			1	Yes
F0800K_STF_LOCK_ITM_CD	F0800K Staff Assessment: Lock Item Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800L_STF_READG_AVLBL_CD	F0800L Staff Assessment: Reading Materials Available Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800M_STF_MUSIC_CD	F0800M Staff Assessment: Music Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800N_STF_ANML_CD	F0800N Staff Assessment: Animal Presence Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800O_STF_NEWS_CD	F0800O Staff Assessment: News Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	No
			1	Yes
F0800P_STF_GRP_ACTVTY_CD	F0800P Staff Assessment: Group Activity Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800Q_STF_FVRT_ACTVTY_CD	F0800Q Staff Assessment: Favorite Activity Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800R_STF_TIME_AWAY_NH_CD	F0800R Staff Assessment: Time Away Nursing Home Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800S_STF_FRSH_AIR_CD	F0800S Staff Assessment: Time Outdoors Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
F0800T_STF_RLGN_CD	F0800T Staff Assessment: Participating in Religious Activities Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No
			1	Yes
F0800Z_STF_NO_ACTVTY_CD	F0800Z Staff Assessment: None of Above Activity Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
G0110F2_LOCOMTN_OFF_SPRT_CD	G0110F2 ADL Assistance: Locomotion Off Support Provided Code	Char		
G0110A1_BED_MBLTY_SELF_CD	G0110A1 ADL Assistance: Bed Mobility Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support
			4	Total Dependence - full staff performance every time during entire 7-day period
			7	Activity occurred only once or twice - activity did occur but only once or twice
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
G0110A2_BED_MBLTY_SPRT_CD	G0110A2 ADL Assistance: Bed Mobility Support Provided Code	Char		Missing Value
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only
			2	One person physical assist
			3	Two+ persons physical assist
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110B1_TRNSFR_SELF_CD	G0110B1 ADL Assistance: Transfer Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support
			4	Total Dependence - full staff performance every time during entire 7-day period
			7	Activity occurred only once or twice - activity did occur but only once or twice
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110B2_TRNSFR_SPRT_CD	G0110B2 ADL Assistance: Transfer Self Support Provided Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only
			2	One person physical assist
			3	Two+ persons physical assist
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110C1_WLK_ROOM_SELF_CD	G0110C1 ADL Assistance: Walk In Room Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support
			4	Total Dependence - full staff performance every time during entire 7-day period
			7	Activity occurred only once or twice - activity did occur but only once or twice
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110C2_WLK_ROOM_SPRT_CD	G0110C2 ADL Assistance: Walk In Room Support Provided Code	Char		Missing Value
			-	Not assessed/no information
			0	No setup or physical help from staff

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021
 Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Setup help only
			2	One person physical assist
			3	Two+ persons physical assist
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110D1_WLK_CRDR_SELF_CD	G0110D1 ADL Assistance: Walk In Corridor Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support
			4	Total Dependence - full staff performance every time during entire 7-day period
			7	Activity occurred only once or twice - activity did occur but only once or twice
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110D2_WLK_CRDR_SPRT_CD	G0110D2 ADL Assistance: Walk In Corridor Self Support Provided Code	Char		Missing Value
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only
			2	One person physical assist

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			3	Two+ persons physical assist
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110E1_LOCOMTN_ON_SELF_CD	G0110E1 ADL Assistance: Locomotion On Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support
			4	Total Dependence - full staff performance every time during entire 7-day period
			7	Activity occurred only once or twice - activity did occur but only once or twice
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110E2_LOCOMTN_ON_SPRT_CD	G0110E2 ADL Assistance: Locomotion On Support Provided Code	Char		Missing Value
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only
			2	One person physical assist
			3	Two+ persons physical assist

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110F1_LOCOMTN_OFF_SELF_CD	G0110F1 ADL Assistance: Locomotion Off Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support
			4	Total Dependence - full staff performance every time during entire 7-day period
			7	Activity occurred only once or twice - activity did occur but only once or twice
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110G1_DRESS_SELF_CD	G0110G1 ADL Assistance: Dress Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			4	Total Dependence - full staff performance every time during entire 7-day period
			7	Activity occurred only once or twice - activity did occur but only once or twice
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110G2_DRESS_SPRT_CD	G0110G2 ADL Assistance: Dress Support Provided Code	Char		Missing Value
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only
			2	One person physical assist
			3	Two+ persons physical assist
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110H1_EATG_SELF_CD	G0110H1 ADL Assistance: Eating Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support
			4	Total Dependence - full staff performance every time during entire 7-day period

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			7	Activity occurred only once or twice - activity did occur but only once or twice
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110H2_EATG_SPRT_CD	G0110H2 ADL Assistance: Eating Support Provided Code	Char		Missing Value
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only
			2	One person physical assist
			3	Two+ persons physical assist
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110I1_TOILTG_SELF_CD	G0110I1 ADL Assistance: Toileting Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support
			4	Total Dependence - full staff performance every time during entire 7-day period
			7	Activity occurred only once or twice - activity did occur but only once or twice

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110I2_TOILTG_SPRT_CD	G0110I2 ADL Assistance: Toileting Support Provided Code	Char		Missing Value
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only
			2	One person physical assist
			3	Two+ persons physical assist
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0110J1_PRSNL_HYGNE_SELF_CD	G0110J1 ADL Assistance: Personal Hygiene Self Performance Code	Char		Missing Value
			-	Not assessed/no information
			0	Independent - no help or staff oversight at any time
			1	Supervision - oversight, encouragement or cueing
			2	Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
			3	Extensive assistance - resident involved in activity, staff provide weight-bearing support
			4	Total Dependence - full staff performance every time during entire 7-day period
			7	Activity occurred only once or twice - activity did occur but only once or twice
			8	Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
G0110J2_PRSNL_HYGNE_SPRT_CD	G0110J2 ADL Assistance: Personal Hygiene Support Provided Code	Char		Missing Value
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only
			2	One person physical assist
			3	Two+ persons physical assist
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0120A_BATHG_SELF_CD	G0120A ADL Assistance: Bathing Self Performance Code	Char		Missing Value
			OTHER	Miscoded
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only
			2	One person physical assist
			3	Two+ persons physical assist
			8	ADL activity itself did not occur or family and/or facility staff provided care 100% of the entire 7-day period
G0120B_BATHG_SPRT_CD	G0120B ADL Assistance: Bathing Support Provided Code	Char		Missing Value
			-	Not assessed/no information
			0	No setup or physical help from staff
			1	Setup help only

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			2	One person physical assist
			3	Two+ persons physical assist
			8	ADL activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
G0300A_BAL_SEAT_STNDG_CD	G0300A Balance During Seated to Standing Position Code	Char		Missing Value
			-	Not assessed/no information
			0	Steady at all times
			1	Not steady, but able to stabilize without human assistance
			2	Not steady, only able to stabilize with human assistance
			8	Activity did not occur
G0300B_BAL_WLKG_CD	G0300B Balance During Walking Code	Char		Missing Value
			-	Not assessed/no information
			0	Steady at all times
			1	Not steady, but able to stabilize without human assistance
			2	Not steady, only able to stabilize with human assistance
			8	Activity did not occur
G0300C_BAL_TRNG_ARND_CD	G0300C Balance When Turning Around Code	Char		Missing Value
			-	Not assessed/no information
			0	Steady at all times
			1	Not steady, but able to stabilize without human assistance
			2	Not steady, only able to stabilize with human assistance
			8	Activity did not occur

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
G0300D_BAL_TOILT_CD	G0300D Balance Moving On and Off Toilet Code	Char		Missing Value
			-	Not assessed/no information
			0	Steady at all times
			1	Not steady, but able to stabilize without human assistance
			2	Not steady, only able to stabilize with human assistance
			8	Activity did not occur
G0300E_BAL_SRFC_TRNSFR_CD	G0300E Balance With Surface to Surface Transfer Code	Char		Missing Value
			-	Not assessed/no information
			0	Steady at all times
			1	Not steady, but able to stabilize without human assistance
			2	Not steady, only able to stabilize with human assistance
			8	Activity did not occur
G0400A_UPR_XTRMTY_MTN_CD	G0400A Functional Limitation in ROM: Upper Extremity Motion Code	Char		Missing Value
			-	Not assessed/no information
			0	No impairment
			1	Impairment on one side
			2	Impairment on both sides
G0400B_LWR_XTRMTY_MTN_CD	G0400B Functional Limitation in ROM: Lower Extremity Motion Code	Char		Missing Value
			-	Not assessed/no information
			0	No impairment

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Impairment on one side
			2	Impairment on both sides
G0600A_CANE_CD	G0600A Mobility Devices: Cane Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
G0600B_WLKR_CD	G0600B Mobility Devices: Walker Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
G0600C_WHLCHR_CD	G0600C Mobility Devices: Wheelchair Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
G0600D_LIMB_PRSTHTC_CD	G0600D Mobility Devices: Limb Prosthesis Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
G0600Z_NO_MBLTY_CD	G0600Z Mobility Devices: None of Above Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Checked (Yes)
G0900A_INCRS_INDPNDNC_CD	G0900A Functional Rehabilitation Potential: Resident Increased Independence Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
			9	Unable to Determine
G0900B_STF_INCRS_INDPNDNC_CD	G0900B Functional Rehabilitation Potential: Staff Increased Independence Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
H0100A_INDWLG_CTHTR_CD	H0100A Bladder and Bowel Appliances: Indwelling Catheter Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
H0100B_EXTRNL_CTHTR_CD	H0100B Bladder and Bowel Appliances: External Catheter Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
H0100C_OSTMY_CD	H0100C Bladder and Bowel Appliances: Ostomy Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
H0100D_INTRMTNT_CTHTR_CD	H0100D Bladder and Bowel Appliances: Intermittent Catheter Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
H0100Z_NO_URNRY_APLNC_CD	H0100Z Bladder and Bowel Appliances: No Urinary Appliance Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
H0200A_TRIL_TOILTG_PGM_CD	H0200A Urinary Toileting Program: Trial Toileting Program Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
			9	Unable to Determine
H0200B_RSPNS_TOILTG_PGM_CD	H0200B Urinary Toileting Program: Response To Toileting Program Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	No improvement
			1	Decreased wetness
			2	Completely dry (continent)
			9	Unable to determine or trial in progress
H0200C_CRNT_TOILTG_PGM_CD	H0200C Urinary Toileting Program: Current Toileting Program Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
H0300_URNRY_CNTNC_CD	H0300 Urinary Continence Code	Char		Missing Value
			-	Not assessed/no information
			0	Always continent
			1	Occasionally incontinent (less than 7 episodes of incontinence)
			2	Frequently incontinent (7 or more episodes of urinary incontinence, but at least one episode of continent voiding)
			3	Always incontinent (no episode of continent voiding)
			9	Not rated, resident had a catheter (indwelling, condom), urinary ostomy, or no urine output for entire 7 days
H0400_BWL_CNTNC_CD	H0400 Bowel Continence Code	Char		Missing Value
			-	Not assessed/no information
			0	Always continent
			1	Occasionally incontinent (one episode of bowel incontinence)
			2	Frequently incontinent (2 or more episodes of bowel incontinence, but at least one continent bowel movement)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			3	Always incontinent (no episodes of continent bowel movements)
			9	Not rated, resident had an ostomy or did not have a bowel movement for the entire 7 days
H0500_BWL_TOILTG_PGM_CD	H0500 Bowel Toileting Program Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
H0600_CONSTPTN_CD	H0600 Constipation Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
I0100_CNCR_CD	I0100 Active Diagnoses: Cancer Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I0200_ANEMIA_CD	I0200 Active Diagnoses: Anemia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I0300_DYSRHYTHMIA_CD	I0300 Active Diagnoses: Dysrhythmia Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	Not checked (No)
			1	Checked (Yes)
I0400_CAD_CD	I0400 Active Diagnoses: Coronary Artery Disease (CAD) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I0500_DVT_CD	I0500 Active Diagnoses: Deep Vein Thrombosis (DVT) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I0600_HRT_FAILR_CD	I0600 Active Diagnoses: Heart Failure (CHF) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I0700_HYPRTNSN_CD	I0700 Active Diagnoses: Hypertension Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I0800_HYPOTNSN_CD	I0800 Active Diagnoses: Hypotension Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I0900_PVD_CD	I0900 Active Diagnoses: Peripheral Vascular Disease (PVD) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I1100_CRRHS_CD	I1100 Active Diagnoses: Cirrhosis Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I1200_GERD_CD	I1200 Active Diagnoses: Gastroesophageal Reflux Disease (GERD) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I1300_ULCRTV_CLTS_CD	I1300 Active Diagnoses: Ulcerative Colitis Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

**Date Created: 29JAN2021
Number of Variables: 760**

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
I1400_BPH_CD	I1400 Active Diagnoses: Benign Prostatic Hyperplasia (BPH) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I1500_ESRD_CD	I1500 Active Diagnoses: End Stage Renal Disease (ESRD) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I1550_NRGNC_BLADR_CD	I1550 Active Diagnoses: Neurogenic Bladder Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I1650_OBSTRCT_URPTHY_CD	I1650 Active Diagnoses: Obstructive Uropathy Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I1700_MDRO_CD	I1700 Active Diagnoses: Multi-drug Resistant Drug Organism (MDRO) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Checked (Yes)
I2000_PNEUMO_CD	I2000 Active Diagnoses: Pneumonia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I2100_SPTCMIA_CD	I2100 Active Diagnoses: Septicemia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I2200_TB_CD	I2200 Active Diagnoses: Tuberculosis Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I2300_UTI_CD	I2300 Active Diagnoses: Urinary Tract Infection (UTI) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I2400_VRL_HPT_CD	I2400 Active Diagnoses: Viral Hepatitis Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Checked (Yes)
I2500_WND_INFCTN_CD	I2500 Wound Infection Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I2900_DM_CD	I2900 Active Diagnoses: Diabetes Mellitus (DM) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I3100_HYPONATREMIA_CD	I3100 Active Diagnoses: Hyponatremia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I3200_HYPERKALEMIA_CD	I3200 Active Diagnoses: Hyperkalemia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I3300_HYPERLIPIDMIA_CD	I3300 Active Diagnoses: Hyperlipidemia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Checked (Yes)
I3400_THYRD_CD	I3400 Active Diagnoses: Thyroid Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I3700_ARTHTS_CD	I3700 Active Diagnoses: Arthritis Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I3800_OSTPRS_CD	I3800 Active Diagnoses: Osteoporosis Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I3900_HIP_FRCTR_CD	I3900 Active Diagnoses: Hip Fracture Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I4000_OTHR_FRCTR_CD	I4000 Active Diagnoses: Other Fracture Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
I4200_ALZHMR_CD	I4200 Active Diagnoses: Alzheimers Disease Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I4300_APHASIA_CD	I4300 Active Diagnoses: Aphasia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I4400_CRBRL_PLSY_CD	I4400 Active Diagnoses: Cerebral Palsy Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I4500_STRK_CD	I4500 Active Diagnoses: Stroke (CVA or TIA or Stroke) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I4800_DMNT_CD	I4800 Active Diagnoses: Dementia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
I4900_HEMIPLG_CD	I4900 Active Diagnoses: Hemiplegia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5000_PARAPLG_CD	I5000 Active Diagnoses: Paraplegia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5100_QUADPLG_CD	I5100 Active Diagnoses: Quadriplegia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5200_MS_CD	I5200 Active Diagnoses: Multiple Sclerosis Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5250_HNTGTN_CD	I5250 Active Diagnoses: Huntingtons Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
I5300_PRKNSN_CD	I5300 Active Diagnoses: Parkinsons Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5350_TOURT_CD	I5350 Tourettes Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5400_SZRE_CD	I5400 Active Diagnoses: Seizure Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5500_BRN_INJURY_CD	I5500 Active Diagnoses: Traumatic Brain Injury (TBI) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5600_MALNTRTN_CD	I5600 Active Diagnoses: Malnutrition Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
I5700_ANXTY_DSORDR_CD	I5700 Active Diagnoses: Anxiety Disorder Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5800_DPRSN_CD	I5800 Active Diagnoses: Depression Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5900_MNC_DPRSN_CD	I5900 Active Diagnoses: Manic Depression Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I5950_PSYCHTC_CD	I5950 Active Diagnoses: Psychotic Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I6000_SCHZOPRNI_CD	I6000 Active Diagnoses: Schizophrenia Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
I6100_PTSD_CD	I6100 Active Diagnoses: Post-traumatic Stress Disorder (PTSD) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I6200_ASTHMA_CD	I6200 Active Diagnoses: Asthma COPD Chronic Lung Disease Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I6300_RSPRTRY_FAILR_CD	I6300 Active Diagnoses: Respiratory Failure Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I6500_CTRCT_CD	I6500 Active Diagnoses: Cataracts Glaucoma or Macular Degeneration Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
I7900_NO_ACTV_DEASE_CD	I7900 Active Diagnoses: No Active Disease Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Checked (Yes)
I8000A_ICD_1_CD	I8000A Additional Active Diagnoses: ICD 1 Code	Char		
I8000B_ICD_2_CD	I8000B Additional Active Diagnoses: ICD 2 Code	Char		
I8000C_ICD_3_CD	I8000C Additional Active Diagnoses: ICD 3 Code	Char		
I8000D_ICD_4_CD	I8000D Additional Active Diagnoses: ICD 4 Code	Char		
I8000E_ICD_5_CD	I8000E Additional Active Diagnoses: ICD 5 Code	Char		
I8000F_ICD_6_CD	I8000F Additional Active Diagnoses: ICD 6 Code	Char		
I8000G_ICD_7_CD	I8000G Additional Active Diagnoses: ICD 7 Code	Char		
I8000H_ICD_8_CD	I8000H Additional Active Diagnoses: ICD 8 Code	Char		
I8000I_ICD_9_CD	I8000I Additional Active Diagnoses: ICD 9 Code	Char		
I8000J_ICD_10_CD	I8000J Additional Active Diagnoses: ICD 10 Code	Char		
J0100A_SCHLD_PAIN_MDCTN_CD	J0100A Pain management: Scheduled Pain Medication Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No
			1	Yes
J0100B_PRN_PAIN_MDCTN_CD	J0100B Pain management: PRN Pain Medication Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
J0100C_OTHR_PAIN_INTRVTN_CD	J0100C Pain management: Other Pain Intervention Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
J0200_CNDCT_PAIN_ASMT_CD	J0200 Should Pain Assessment be Conducted Code	Char		Missing Value
			-	Not assessed/no information
			0	No(resident is rarely/never understood)
			1	Yes
J0300_PAIN_CD	J0300 Pain Assessment Interview: Pain Presence Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			9	Unable to Determine
J0400_PAIN_FREQ_CD	J0400 Pain Assessment Interview: Pain Frequency Code	Char		Missing Value
			-	Not assessed/no information
			1	Almost constantly
			2	Frequently
			3	Occasionally
			4	Rarely
			9	Unable to answer
J0500A_PAIN_EFCT_SLEEP_CD	J0500A Pain Assessment Interview: Pain Effect Sleep Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
			9	Unable to Determine
J0500B_PAIN_EFCT_ACTVTY_CD	J0500B Pain Assessment Interview: Pain Effect Activity Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
			9	Unable to Determine
J0600A_PAIN_INTNSTY_NUM	J0600A Pain Intensity Numeric Rating Scale Number	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
J0600B_VRBL_DSCRPTR_SCALE_NUM	J0600B Pain Intensity Verbal Descriptor Scale Number	Char		Missing Value
			-	Not assessed/no information
			1	Mild
			2	Moderate
			3	Severe
			4	Very severe, horrible
			9	Unable to answer
J0700_STF_CNDCT_PAIN_ASMT_CD	J0700 Staff Conduct Pain Assessment Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
J0800A_NVRBL_SND_CD	J0800A Staff Assessment for Pain: Nonverbal Sound Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
J0800B_VCL_CMLNT_CD	J0800B Staff Assessment for Pain: Vocal Complaint Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
J0800C_FACE_EXPRSN_CD	J0800C Staff Assessment for Pain: Facial Expression Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
J0800D_PRTCTV_MVMT_CD	J0800D Staff Assessment for Pain: Protective Movement Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
J0800Z_NO_SGN_PAIN_CD	J0800Z Staff Assessment for Pain: None of Above Signs of Pain Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
J0850_STF_PAIN_FREQ_CD	J0850 Staff Frequency of Indicator of Pain or Possible Pain Frequency Code	Char		Missing Value
			-	Not assessed/no information
			1	Indicators of pain or possible pain observed 1 to 2 days
			2	Indicators of pain or possible pain observed 3 to 4 days
			3	Indicators of possible pain observed daily
J1100A_SOB_EXRTN_CD	J1100A Shortness of Breath With Exertion Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	Not checked (No)
			1	Checked (Yes)
J1100B_SOB_SITG_CD	J1100B Shortness of Breath When Sitting Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
J1100C_SOB_LYG_CD	J1100C Shortness of Breath When Lying Flat Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
J1100Z_NO_SOB_CD	J1100Z None of Above Shortness of Breath Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
J1300_TOBCO_CD	J1300 Tobacco Use Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
J1400_LIFE_PRGNS_CD	J1400 Life Prognosis Less Than Six Months Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No
			1	Yes
J1550A_FVR_CD	J1550A Problem Conditions: Fever Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
J1550B_VMTG_CD	J1550B Problem Conditions: Vomiting Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
J1550C_DHYDRT_CD	J1550C Problem Conditions: Dehydration Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
J1550D_INTRNL_BLEDG_CD	J1550D Problem Conditions: Internal Bleeding Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
J1550Z_NO_PRBLM_COND_CD	J1550Z Problem Conditions: None of Above Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
J1700A_FALL_30_DAY_CD	J1700A Fall History on Admission: Fall 30 Day Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
			9	Unable to Determine
J1700B_FALL_31_180_DAY_CD	J1700B Fall History on Admission: Fall 31-180 Day Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
			9	Unable to Determine
J1700C_FRCTR_SIX_MO_CD	J1700C Fall History on Admission: Fall Six Month Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
			9	Unable to Determine
J1800_FALL_LAST_ASMT_CD	J1800 Falls Since Admission or Prior Assessment Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No
			1	Yes
J1900A_FALL_NO_INJURY_CD	J1900A Number of Falls Since Admission or Prior Assessment With No Injury Code	Char		Missing Value
			-	Not assessed/no information
			0	None
			1	One
			2	Two or more
J1900B_FALL_INJURY_CD	J1900B Number of Falls Since Admission or Prior Assessment With Injury Except Major Code	Char		Missing Value
			-	Not assessed/no information
			0	None
			1	One
			2	Two or more
J1900C_FALL_MAJ_INJURY_CD	J1900C Number of Falls Since Admission or Prior Assessment With Major Injury Code	Char		Missing Value
			-	Not assessed/no information
			0	None
			1	One
			2	Two or more
K0100A_LOSS_MOUTH_EATG_CD	K0100A Swallowing Disorder: Loss Mouth Eating Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0100B_HLD_FOOD_MOUTH_CD	K0100B Swallowing Disorder: Hold Food Mouth Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0100C_CHOK_DRNG_MEAL_CD	K0100C Swallowing Disorder: Choke Drinking Meal Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0100D_CMPLNT_SWLWG_CD	K0100D Swallowing Disorder: Complaint Swallowing Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0100Z_NO_SWLWG_CD	K0100Z Swallowing Disorder: None of Above Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
K0200A_HGT_NUM	K0200A Height Number	Char		
K0200B_WT_NUM	K0200B Weight Number	Char		
K0300_WT_LOSS_CD	K0300 Weight Loss Code	Char		Missing Value
			-	Not assessed/no information
			0	No or unknown
			1	Yes, on physician-prescribed weight-loss regimen
			2	Yes, not on physician-prescribed weight-loss regimen
K0310_WT_GAIN_CD	K0310 Weight Gain Code	Char		Missing Value
			-	Not assessed/no information
			0	No or unknown
			1	Yes, on physician-prescribed weight-gain regimen
			2	Yes, not on physician-prescribed weight- gain regimen
K0500A_PEN_CD	K0500A Nutritional Approaches: Parenteral/IV Feeding Code	Char		Missing Value
K0500B_FEEDG_TUBE_CD	K0500B Nutritional Approaches: Feeding Tube Code	Char		Missing Value
K0500C_ALTR_FOOD_CD	K0500C Nutritional Approaches: Mechanically Altered Diet Code	Char		Missing Value
K0500D_THRPTC_DIET_CD	K0500D Nutritional Approaches: Therapeutic Diet Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
K0500Z_NO_FEEDG_CD	K0500Z Nutritional Approaches: None of Above Code	Char		Missing Value
K0510A1_PEN_PRIOR_CD	K0510A1 Nutritional Approaches: Prior Parenteral/IV Feeding Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0510A2_PEN_POST_CD	K0510A2 Nutritional Approaches: Post Parenteral/IV	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0510B1_FEEDG_TUBE_PRIOR_CD	K0510B1 Nutritional Approaches: Prior Feeding Tube Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0510B2_FEEDG_TUBE_POST_CD	K0510B2 Nutritional Approaches: Post Feeding Tube Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0510C1_ALTR_FOOD_PRIOR_CD	K0510C1 Nutritional Approaches: Prior Mechanically Altered Diet Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0510C2_ALTR_FOOD_POST_CD	K0510C2 Nutritional Approaches: Post Mechanically Altered Diet Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0510D1_THRPTC_DIET_PRIOR_CD	K0510D1 Nutritional Approaches: Prior Therapeutic Diet Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0510D2_THRPTC_DIET_POST_CD	K0510D2 Nutritional Approaches: Post Therapeutic Diet Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0510Z1_NO_FEEDG_PRIOR_CD	K0510Z1 Nutritional Approaches: Prior None of Above Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
K0510Z2_NO_FEEDG_POST_CD	K0510Z2 Nutritional Approaches: Post None of Above Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
K0700A_CAL_PEN_CD	K0700A Percent Caloric Intake Through Parenteral/Tube Feeding Code	Char		Missing Value
K0700B_IV_TUBE_DAILY_CD	K0700B Average Fluid Intake by IV Or Tube Feeding Code	Char		
K0710A1_CAL_PRNTRL_PRIOR_CD	K0710A1 Percent Caloric Intake Through Parenteral/Tube Feeding While Not a Resident Code.	Char		Missing Value
			-	Not assessed/no information
			1	25% or less
			2	26-50%
			3	51% or more
K0710A2_CAL_PRNTRL_PST_CD	K0710A2 Percent Caloric Intake Through Parenteral/Tube Feeding While a Resident Code.	Char		Missing Value
			-	Not assessed/no information
			1	25% or less
			2	26-50%
			3	51% or more

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
K0710A3_CAL_PRNTRL_7_DAY_CD	K0710A3 Percent Caloric Intake Through Parenteral/Tube Feeding During the Entire Seven Days.	Char		Missing Value
			-	Not assessed/no information
			1	25% or less
			2	26-50%
			3	51% or more
K0710B1_IV_TUBE_DAILY_PRIOR_CD	K0710B1 Average Fluid Intake per Day by IV or Tube Feeding While Not a Resident.	Char		Missing Value
			-	Not assessed/no information
			1	500 cc/day or less
			2	501 cc/day or more
K0710B2_IV_TUBE_DAILY_PST_CD	K0710B2 Average Fluid Intake per Day by IV or Tube Feeding While a Resident.	Char		Missing Value
			-	Not assessed/no information
			1	500 cc/day or less
			2	501 cc/day or more
K0710B3_IV_TUBE_DAILY_7_DAY_CD	K0710B3 Average Fluid Intake per Day by IV or Tube Feeding During the Entire Seven Days.	Char		Missing Value
			-	Not assessed/no information
			1	500 cc/day or less
			2	501 cc/day or more
L0200A_BRKN_DNTR_CD	L0200A Dental Status: Broken Denture Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	Not checked (No)
			1	Checked (Yes)
L0200B_NO_TEETH_CD	L0200B Dental Status: No Teeth Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
L0200C_ABNRML_MOUTH_TISUE_CD	L0200C Dental Status: Abnormal Mouth Tissue Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
L0200D_CVTY_CD	L0200D Dental Status: Cavity Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
L0200E_INFLMD_GUM_CD	L0200E Dental Status: Inflamed Gum Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
L0200F_MOUTH_PAIN_CD	L0200F Dental Status: Mouth or Facial Pain Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	Not checked (No)
			1	Checked (Yes)
L0200G_DNTL_UNK_CD	L0200G Dental Status: Unable to Examine Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
L0200Z_NO_DNTL_CD	L0200Z Dental Status: None of Above Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M0100A_RISK_VSBL_CD	M0100A Determination of Pressure Ulcer Risk: Ulcer Visible Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M0100B_RISK_FRML_ASMT_CD	M0100B Determination of Pressure Ulcer Risk: Formal Assessment/Instrument Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M0100C_RISK_CLNCL_JDGMNT_CD	M0100C Determination of Pressure Ulcer Risk: Clinical Assessment Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M0100Z_NO_RISK_DTMNTN_CD	M0100Z Determination of Pressure Ulcer Risk: None of Above	Char		Date provided in SAS date (numeric) format.
M0150_PRSR_ULCR_RISK_CD	M0150 Pressure Ulcer Risk Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
M0210_STG_1_HGHR_ULCR_CD	M0210 One or More Stage 1 or Higher Unhealed Pressure Ulcer Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
M0300A_STG_1_ULCR_NUM	M0300A Stage 1 Pressure Ulcer Number	Char		
M0300B1_STG_2_ULCR_NUM	M0300B1 Stage 2 Pressure Ulcer Number	Char		
M0300B2_STG_2_ULCR_ADMSN_NUM	M0300B2 Stage 2 Pressure Ulcer Present on Admission Number	Char		
M0300B3_STG_2_ULCR_OLD_DT	M0300B3 Date of Oldest Stage 2 Pressure Ulcer	Char		Date provided in SAS date (numeric) format.
M0300C1_STG_3_ULCR_NUM	M0300C1 Stage 3 Pressure Ulcer Number	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
M0300C2_STG_3_ULCR_ADMSN_NUM	M0300C2 Stage 3 Pressure Ulcer Present on Admission Number	Char		
M0300D1_STG_4_ULCR_NUM	M0300D1 Stage 4 Pressure Ulcer Number	Char		
M0300D2_STG_4_ULCR_ADMSN_NUM	M0300D2 Stage 4 Pressure Ulcer Present on Admission Number	Char		
M0300E1_UNSTGBL_ULCR_DRNG_NUM	M0300E1 Unstageable Pressure Ulcer Due To Dressing Number	Char		
M0300E2_U_ULCR_DRNG_ADMSN_NUM	M0300E2 Unstageable Pressure Ulcer Due To Dressing on Admission Number	Char		
M0300F1_UNSTGBL_ULCR_ESC_NUM	M0300F1 Unstageable Pressure Ulcer With Slough or Eschar Number	Char		
M0300F2_U_ULCR_ESC_ADMSN_NUM	M0300F2 Unstageable Pressure Ulcer With Slough or Eschar on Admission Number	Char		
M0300G1_UNSTGBL_ULCR_DEEP_NUM	M0300G1 Unstageable Pressure Ulcer With Deep Tissue Injury Number	Char		
M0300G2_U_ULCR_DEEP_ADMSN_NUM	M0300G2 Unstageable Pressure Ulcer With Deep Tissue Injury on Admission Number	Char		
M0610A_STG_3_4_ULCR_LNGTH_NUM	M0610A Unhealed Stage 3-4 Pressure Ulcer Length Number	Char		
M0610B_STG_3_4_ULCR_WDTH_NUM	M0610B Unhealed Stage 3-4 Pressure Ulcer Width Number	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
M0610C_STG_3_4_ULCR_DPTH_NUM	M0610C Unhealed Stage 3-4 Pressure Ulcer Depth Number	Char		
M0700_ULCR_TISUE_TYPE_CD	M0700 Most Severe Pressure Ulcer Tissue Type Code	Char		Missing Value
			-	Not assessed/no information
			1	Epithelial tissue-new skin growing in superficial ulcer. It can be light pink and shiny, even in persons with pigmented skin.
			2	Granulation tissue-pink or red tissue with skiny, moist, granular appearance.
			3	Slough-yellow or white tissue that adhere to the ulcer bed in strings orthick clumps,or is mucinous.
			4	(Eschar)-black, brown, or tan tissue that adheres firmly to the wound bed or ulcer edges, may be softer or harder than surrounding skin.
			9	None of the above
M0800A_WRSNG_STG_2_ULCR_NUM	M0800A Worsening Stage 2 Pressure Ulcer Since Prior Assessment Number	Char		
M0800B_WRSNG_STG_3_ULCR_NUM	M0800B Worsening Stage 3 Pressure Ulcer Since Prior Assessment Number	Char		
M0800C_WRSNG_STG_4_ULCR_NUM	M0800C Worsening Stage 4 Pressure Ulcer Since Prior Assessment Number	Char		
M0900A_PRSR_ULCR_PRIOR_CD	M0900A Healed Pressure Ulcer Present on Prior Assessment Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
M0900B_HEALD_STG_2_ULCR_NUM	M0900B Healed Stage 2 Pressure Ulcer Number	Char		
M0900C_HEALD_STG_3_ULCR_NUM	M0900C Healed Stage 3 Pressure Ulcer Number	Char		
M0900D_HEALD_STG_4_ULCR_NUM	M0900D Healed Stage 4 Pressure Ulcer Number	Char		
M1030_ARTRL_ULCR_NUM	M1030 Venous and Arterial Ulcer Number	Char		
M1040A_FT_INFCTN_CD	M1040A Other Foot Skin Problems: Foot Infection Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1040B_DBTC_FT_ULCR_CD	M1040B Other Foot Skin Problems: Diabetic Foot Ulcer Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1040C_OTHR_LSN_FT_CD	M1040C Other Foot Skin Problems: Other Open Lesion on Foot Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1040D_OPEN_LSN_CD	M1040D Other Skin Problems: Open Lesions Other Than Ulcers Rashes Cuts Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1040E_SRGL_WND_CD	M1040E Other Skin Problems: Surgical Wound(s) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1040F_BRN_CD	M1040F Other Skin Problems: Burn(s) Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1040G_SKIN_TEAR_CD	M1040G Other Skin Problems: Skin Tear(s)	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1040H_MASD_CD	M1040H Other Skin Problems: Moisture Associated Skin Damage	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
M1040Z_NO_OTHR_SKIN_PRBLM_CD	M1040Z Other Skin Problems: None of Above Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1200A_PRSR_RDC_CHR_CD	M1200A Skin and Ulcer Treatments: Pressure Reducing Device in Chair Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1200B_PRSR_RDC_BED_CD	M1200B Skin and Ulcer Treatments: Pressure Reducing Device in Bed Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1200C_TRNG_PGM_CD	M1200C Skin and Ulcer Treatments: Turning/Repositioning Program Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1200D_HYDRTN_CD	M1200D Skin and Ulcer Treatments: Nutrition/Hydration Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Checked (Yes)
M1200E_ULCR_CARE_CD	M1200E Skin and Ulcer Treatments: Ulcer Care Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1200F_SRGL_WND_CARE_CD	M1200F Skin and Ulcer Treatments: Surgical Wound Care Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1200G_APLCTN_DRSNG_CD	M1200G Skin and Ulcer Treatments: Application Nonsurgical Dressing Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1200H_APLCTN_ONTMNT_CD	M1200H Skin and Ulcer Treatments: Application Ointments/Medications Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1200I_APLCTN_DRSNG_FOOT_CD	M1200I Skin and Ulcer Treatments: Application Dressings to Foot Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
M1200Z_NO_SKIN_TRMNT_CD	M1200Z Skin and Ulcer Treatments: None of Above Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
N0300_INJCT_MDCTN_DAY_NUM	N0300 Number of Days Injections of Any Type	Char		Number of days (count)
N0350A_INSLN_INJCT_DAY_NUM	N0350A Number of Days Insulin Injections	Char		Number of days (count)
N0350B_INSLN_ORDR_DAY_NUM	N0350B Number of Days Insulin Orders Changed	Char		Number of days (count)
N0400A_ANTIPSYCHTC_CD	N0400A Medications Received: Antipsychotic Code	Char		Missing Value
N0400B_ANTINXTY_CD	N0400B Medications Received: Antianxiety Code	Char		Missing Value
N0400C_ANTIDPRSNT_CD	N0400C Medications Received: Antidepressant Code	Char		Missing Value
N0400D_HPNTC_CD	N0400D Medications Received: Hypnotic Code	Char		Missing Value
N0400E_ANTICOAGLNT_CD	N0400E Medications Received: Anticoagulant Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
N0400F_ANTBTC_CD	N0400F Medications Received: Antibiotic Code	Char		Missing Value
N0400G_DRTC_CD	N0400G Medications Received: Diuretic Code	Char		Missing Value
N0400Z_NO_MDCTN_RCVD_CD	N0400Z Medications Received: None of Above	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
N0410A_ANTIPSYCHTC_DAY_NUM	N0410A Medications Received: Antipsychotic Number Days	Char		Number of days (count)
N0410B_ANTINXTY_DAY_NUM	N0410B Medications Received: Antianxiety Number Days	Char		Number of days (count)
N0410C_ANTIDPRSNT_DAY_NUM	N0410C Medications Received: Antidepressant Number Days	Char		Number of days (count)
N0410D_HPNTC_DAY_NUM	N0410D Medications Received: Hypnotic Number Days	Char		Number of days (count)
N0410E_ANTICOAGLNT_DAY_NUM	N0410E Medications Received: Anticoagulant Number Days	Char		Number of days (count)
N0410F_ANTBTC_DAY_NUM	N0410F Medications Received: Antibiotic Number Days	Char		Number of days (count)
N0410G_DRTC_DAY_NUM	N0410G Medications Received: Diuretic Number Days	Char		Number of days (count)
O0100A1_CHMTHRPHY_PRIOR_CD	O0100A1 Special Treatments/Programs: Chemotherapy Pre-admit Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100A2_CHMTHRPY_POST_CD	O0100A2 Special Treatments/Programs: Chemotherapy Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0100B1_RDTN_PRIOR_CD	O0100B1 Special Treatments/Programs: Radiation Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100B2_RDTN_POST_CD	O0100B2 Special Treatments/Programs: Radiation Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0100C1_OXGN_PRIOR_CD	O0100C1 Special Treatments/Programs: Oxygen Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
O0100C2_OXGN_POST_CD	O0100C2 Special Treatments/Programs: Oxygen Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0100D1_SCTNG_PRIOR_CD	O0100D1 Special Treatments/Programs: Suctioning Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100D2_SCTNG_POST_CD	O0100D2 Special Treatments/Programs: Suctioning Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0100E1_TRCHOSTMY_PRIOR_CD	O0100E1 Special Treatments/Programs: Tracheostomy Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100E2_TRCHOSTMY_POST_CD	O0100E2 Special Treatments/Programs: Tracheostomy Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Yes
O0100F1_VNTLTR_PRIOR_CD	O0100F1 Special Treatments/Programs: Ventilator Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100F2_VNTLTR_POST_CD	O0100F2 Special Treatments/Programs: Ventilator Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0100G1_CPAP_PRIOR_CD	O0100G1 Special Treatments/Programs: Continuous Positive Airway Pressure Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100G2_CPAP_POST_CD	O0100G2 Special Treatments/Programs: Continuous Positive Airway Pressure Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
O0100H1_IV_MDCTN_PRIOR_CD	O0100H1 Special Treatments/Programs: Intravenous Medication Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100H2_IV_MDCTN_POST_CD	O0100H2 Special Treatments/Programs: Intravenous Medication Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0100I1_TRNSFSN_PRIOR_CD	O0100I1 Special Treatments/Programs: Transfusion Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100I2_TRNSFSN_POST_CD	O0100I2 Special Treatments/Programs: Transfusion Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0100J1_DLYS_PRIOR_CD	O0100J1 Special Treatments/Programs: Dialysis Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			1	Checked (Yes)
00100J2_DLYS_POST_CD	00100J2 Special Treatments/Programs: Dialysis Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
00100K1_HOSPC_PRIOR_CD	00100K1 Special Treatments/Programs: Hospice Pre-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
00100K2_HOSPC_POST_CD	00100K2 Special Treatments/Programs: Hospice Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
00100L2_RESP_POST_CD	00100L2 Special Treatments/Programs: Respite Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
00100M1_ISLTN_PRIOR_CD	00100M1 Special Treatments/Programs: Isolation Pre-admit Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100M2_ISLTN_POST_CD	O0100M2 Special Treatments/Programs: Isolation Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0100Z1_NO_TRTMT_PRIOR_CD	O0100Z1 Special Treatments/Programs: None of Above Pre-admit Treatment Prior Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
O0100Z2_NO_TRTMT_POST_CD	O0100Z2 Special Treatments/Programs: None of Above Treatment Post-admit Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0250A_INFLNZ_RCVD_CD	O0250A Influenza Received Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
O0250B_INFLNZ_RCVD_DT	O0250B Influenza Received Date	Char		Date provided in SAS date (numeric) format.
O0250C_RSN_INFLNZ_NOT_RCV_CD	O0250C Reason Influenza Not Received Code	Char		Missing Value
			-	Not assessed/no information
			1	Resident not in facility during this years flu season
			2	Recieved outside of this facility
			3	Not elgible - medical contraindication
			4	Offered and declined
			5	Not offered
			6	Inability to obtain vaccine due to declared shortage
			9	None of the above
O0300A_PPV_CD	O0300A Pneumococcal Vaccination Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0300B_RSN_PPV_NOT_RCVD_CD	O0300B Reason Pneumococcal Vaccination Not Received Code	Char		Missing Value
			-	Not assessed/no information
			1	Not elgible - medical contraindication
			2	Offered and declined
			3	Not offered
O0400A1_SPCH_THRPY_IND_MIN_NUM	O0400A1 Speech Therapy/Audiology Individual Minutes Number	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
O0400A2_SPCH_THRPY_CNC_MIN_NUM	O0400A2 Speech Therapy/Audiology Concurrent Minutes Number	Char		
O0400A3_SPCH_THRPY_GRP_MIN_NUM	O0400A3 Speech Therapy/Audiology Group Minutes Number	Char		
O0400A3A_ST_TRTMT_MINUTE_NUM	O0400A3A Therapy/Audiology Co-Treatment Minutes Number	Char		Missing Value
			OTHER	Miscoded
O0400A4_SPCH_THRPY_DAY_NUM	O0400A4 Number of Days Speech Therapy/Audiology Administered	Char		Number of days (count)
O0400A5_SPCH_THRPY_STRT_DT	O0400A5 Speech Therapy/Audiology Start Date	Char		Date provided in SAS date (numeric) format.
O0400A6_SPCH_THRPY_END_DT	O0400A6 Speech Therapy/Audiology End Date	Char		Date provided in SAS date (numeric) format.
O0400B1_OT_INVDL_MIN_NUM	O0400B1 Occupational Therapy Individual Minutes Number	Char		
O0400B2_OT_CNCRNT_MIN_NUM	O0400B2 Occupational Therapy Concurrent Minutes Number	Char		
O0400B3_OT_GRP_MIN_NUM	O0400B3 Occupational Therapy Group Minutes Number	Char		
O0400B3A_OT_TRTMT_MINUTE_NUM	O0400B3A Occupational Therapy Co-Treatment Minutes Number	Char		Missing Value
			OTHER	Miscoded
O0400B4_OT_DAY_NUM	O0400B4 Number of Days Occupational Therapy Administered	Char		Number of days (count)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
O0400B5_OT_STRT_DT	O0400B5 Occupational Therapy Start Date	Char		Date provided in SAS date (numeric) format.
O0400B6_OT_END_DT	O0400B6 Occupational Therapy End Date	Char		Date provided in SAS date (numeric) format.
O0400C1_PT_INVDL_MIN_NUM	O0400C1 Physical Therapy Individual Minutes Number	Char		
O0400C2_PT_CNCRNT_MIN_NUM	O0400C2 Physical Therapy Concurrent Minutes Number	Char		
O0400C3_PT_GRP_MIN_NUM	O0400C3 Physical Therapy Group Minutes Number	Char		
O0400C3A_PT_TRTMT_MINUTE_NUM	O0400B3A Physical Therapy Co-Treatment Minutes Number	Char		Missing Value
			OTHER	Miscoded
O0400C4_PT_DAY_NUM	O0400C4 Number of Days Physical Therapy Administered	Char		Number of days (count)
O0400C5_PT_STRT_DT	O0400C5 Physical Therapy Start Date	Char		Date provided in SAS date (numeric) format.
O0400C6_PT_END_DT	O0400C6 Physical Therapy End Date	Char		Date provided in SAS date (numeric) format.
O0400D1_RT_MIN_NUM	O0400D1 Respiratory Therapy Minutes Number	Char		
O0400D2_RT_DAY_NUM	O0400D2 Number of Days Respiratory Therapy Administered	Char		Number of days (count)
O0400E1_PSYCH_THRPY_MIN_NUM	O0400E1 Psychological Therapy Minutes Number	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
O0400E2_PSYCH_THRPY_DAY_NUM	O0400E2 Number of Days Psychological Therapy Administered	Char		Number of days (count)
O0400F1_RCRTNL_THRPY_MIN_NUM	O0400F1 Recreational Therapy Minutes Number	Char		
O0400F2_RCRTNL_THRPY_DAY_NUM	O0400F2 Number of Days Recreational Therapy Administered	Char		Number of days (count)
O0420_DSTNCT_THRPY_DAY_NUM	O0420 Number of Distinct Calendar Days of Therapy Administered	Char		Number of days (count)
O0450A_RSMPNTN_THRPY_CD	O0450A Has Therapy Resumed Code	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
O0450B_RSMPNTN_THRPY_DT	O0450B Date Therapy Resumed	Num		Date provided in SAS date (numeric) format.
O0500A_PSV_ROM_NUM	O0500A Restorative Nursing: Passive Range of Motion Number	Char		
O0500B_ACTV_ROM_NUM	O0500B Restorative Nursing: Active Range of Motion Number	Char		
O0500C_BRC_ASTNC_NUM	O0500C Restorative Nursing: Splint/Brace Assistance Number	Char		
O0500D_BED_MBLTY_TRNG_NUM	O0500D Restorative Nursing: Bed Mobility Training Number	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
O0500E_TRNSFR_TRNG_NUM	O0500E Restorative Nursing: Transfer Training Number	Char		
O0500F_WLKG_TRNG_NUM	O0500F Restorative Nursing: Walking Training Number	Char		
O0500G_DRSG_TRNG_NUM	O0500G Restorative Nursing: Dressing/Grooming Training Number	Char		
O0500H_EATG_TRNG_NUM	O0500H Restorative Nursing: Eating/Swallowing Training Number	Char		
O0500I_AMPUTTN_TRNG_NUM	O0500I Restorative Nursing: Amputation/Prosthesis Care Training Number	Char		
O0500J_COMMUN_TRNG_NUM	O0500J Restorative Nursing: Communication Training Number	Char		
O0600_PHYSN_EXMN_NUM	O0600 Physician Examination Day Number	Char		
O0700_PHYSN_ORDR_NUM	O0700 Physician Order Day Number	Char		
P0100A_BED_RAIL_CD	P0100A Physical Restraints in Bed: Bed Rail Code	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0100B_TRNK_RSTRNT_BED_CD	P0100B Physical Restraints in Bed: Trunk Restraint Bed Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0100C_LMB_RSTRNT_BED_CD	P0100C Physical Restraints in Bed: Limb Restraint Bed Code	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0100D_OTHR_RSTRNT_BED_CD	P0100D Physical Restraints in Bed: Other Restraint Bed Code	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0100E_TRNK_RSTRNT_CHR_CD	P0100E Physical Restraints in Chair: Trunk Restraint Chair Code	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
P0100F_LMB_RSTRNT_CHR_CD	P0100F Physical Restraints in Chair: Limb Restraint Chair Code	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0100G_CHR_PRVNT_RISE_CD	P0100G Physical Restraints in Chair: Chair Prevent Rise Code	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0100H_OTHR_RSTRNT_CHR_CD	P0100H Physical Restraints in Chair: Other Restraint Chair Code	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
V0100A_PRIOR_FED_OBRA_CD	V0100A Prior Assessment Federal OBRA Reason for Assessment Code	Char		Missing Value
			01	Admission assessment (required by day 14)
			02	Quarterly review assessment
			03	Annual assessment
			04	Significant change in status assessment

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			05	Significant correction to prior comprehensive assessment
			06	Significant correction to prior quarterly assessment
			99	None of the above
V0100B_PRIOR_PPS_CD	V0100B Prior Assessment PPS Reason for Assessment Code	Char		Missing Value
			01	5-day scheduled assessment
			02	14-day scheduled assessment
			03	30-day scheduled assessment
			04	60-day scheduled assessment
			05	90-day scheduled assessment
			06	Readmission/return assessment
			07	Unscheduled assessment used for PPS (OMRA, significant or clinical change, or significant correction assessment)
			99	None of the above
V0100C_PRIOR_ASMT_RFRNC_DT	V0100C Prior Assessment Reference Date	Char		Date provided in SAS date (numeric) format.
V0100D_PRIOR_BIMS_SCRE_NUM	V0100D Prior Assessment Brief Interview for Mental Status (BIMS) Summary Score Number	Char		
V0100E_PRIOR_MOOD_SCRE_NUM	V0100E Prior Assessment Resident Mood Interview (PHQ-9) Total Severity Score Number	Char		
V0200A01A_DLRM_CTR_CD	V0200A01A Delirium Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
V0200A01B_DLRM_CPL_CD	V0200A01B Delirium Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A02A_DMNT_CTR_CD	V0200A02A Dementia Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A02B_DMNT_CPL_CD	V0200A02B Dementia Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A03A_VISL_FUNC_CTR_CD	V0200A03A Visual Function Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A03B_VISL_FUNC_CPL_CD	V0200A03B Visual Function Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
V0200A04A_COMMUN_CTR_CD	V0200A04A Communication Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A04B_COMMUN_CPL_CD	V0200A04B Communication Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A05A_ADL_CTR_CD	V0200A05A ADL Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A05B_ADL_CPL_CD	V0200A05B ADL Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A06A_URNRY_CTR_CD	V0200A06A Urinary Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A06B_URNRY_CPL_CD	V0200A06B Urinary Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	Not checked (No)
			1	Checked (Yes)
V0200A07A_PSYCHSOC_CTR_CD	V0200A07A Psychosocial Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A07B_PSYCHSOC_CPL_CD	V0200A07B Psychosocial Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A08A_MOOD_CTR_CD	V0200A08A Mood Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A08B_MOOD_CPL_CD	V0200A08B Mood Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A09A_BHVRL_CTR_CD	V0200A09A Behavioral Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
V0200A09B_BHVRL_CPL_CD	V0200A09B Behavioral Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A10A_ACTVTY_CTR_CD	V0200A10A Activity Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A10B_ACTVTY_CPL_CD	V0200A10B Activity Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A11A_FALL_CTR_CD	V0200A11A Fall Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A11B_FALL_CPL_CD	V0200A11B Fall Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A12A_NTRNT_CTR_CD	V0200A12A Nutritional Care Area Trigger Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	Not checked (No)
			1	Checked (Yes)
V0200A12B_NTRNT_CPL_CD	V0200A12B Nutritional Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A13A_FEEDG_TUBE_CTR_CD	V0200A13A Feeding Tube Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A13B_FEEDG_TUBE_CPL_CD	V0200A13B Feeding Tube Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A14A_DHYDRTN_CTR_CD	V0200A14A Dehydration Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A14B_DHYDRTN_CPL_CD	V0200A14B Dehydration Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	Not checked (No)
			1	Checked (Yes)
V0200A15A_DNTL_CTR_CD	V0200A15A Dental Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A15B_DNTL_CPL_CD	V0200A15B Dental Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A16A_PRSR_ULCR_CTR_CD	V0200A16A Pressure Ulcer Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A16B_PRSR_ULCR_CPL_CD	V0200A16B Pressure Ulcer Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A17A_PSYCH_DRUG_CTR_CD	V0200A17A Psychotropic Drug Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
V0200A17B_PSYCH_DRUG_CPL_CD	V0200A17B Psychotropic Drug Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A18A_RSTRNT_CTR_CD	V0200A18A Restraint Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A18B_RSTRNT_CPL_CD	V0200A18B Restraint Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200A19A_PAIN_CTR_CD	V0200A19A Pain Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A19B_PAIN_CPL_CD	V0200A19B Pain Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
V0200A20A_RTN_CMNTY_CTR_CD	V0200A20A Return to Community Care Area Trigger Code	Char		Missing Value
			0	Not checked (No)
			1	Checked (Yes)
V0200A20B_RTN_CMNTY_CPL_CD	V0200A20B Return to Community Addressed in Care Plan Code	Char		Missing Value
			-	Not assessed/no information
			0	Not checked (No)
			1	Checked (Yes)
V0200B2_CAT_DT	V0200B2 Care Area Assessment Completion Date	Char		Date provided in SAS date (numeric) format.
V0200C2_CARE_PLN_DT	V0200C2 Care Plan Completion Date	Char		Date provided in SAS date (numeric) format.
X0100_TRANS_TYPE_CD	X0100 Type of Record Code	Char		Missing Value
X0150_CRCTN_PRVDR_TYPE_CD	X0150 Correction Provider Type Code	Char		Missing Value
			1	Nursing home (SNF/NF)
X0300_CRCTN_GNDR_CD	X0300 Correction Gender Code	Char		Missing Value
			1	Male
			2	Female
X0400_CRCTN_BIRTH_DT	X0400 Correction Birth Date	Char		Date provided in SAS date (numeric) format.
X0600A_CRCTN_FED_OBRA_CD	X0600A Correction Federal OBRA Reason for Assessment Code	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			01	Admission assessment (required by day 14)
			02	Quarterly review assessment
			03	Annual assessment
			04	Significant change in status assessment
			05	Significant correction to prior comprehensive assessment
			99	None of the above
X0600B_CRCTN_PPS_CD	X0600B Correction PPS Reason for Assessment Code	Char		Missing Value
			01	5-day scheduled assessment
			02	14-day scheduled assessment
			03	30-day scheduled assessment
			04	60-day scheduled assessment
			05	90-day scheduled assessment
			07	Unscheduled assessment used for PPS (OMRA, significant or clinical change, or significant correction assessment)
			99	None of the above
X0600C_CRCTN_PPS_OMRA_CD	X0600C PPS Other Medicare Required Assessment (OMRA) Code	Char		Missing Value
			0	No
			1	Start of therapy assessment
			2	End of therapy assessment
			3	Both Start and End of therapy assessment
			4	Change of therapy assessment

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
X0600D_CRCTN_SB_CLNCL_CHG_CD	X0600D Correction Swing Bed Clinical Change Code	Char		Missing Value
X0600F_CRCTN_ENTRY_DSCHRG_CD	X0600F Correction Entry/Discharge Code	Char		Missing Value
			01	Entry tracking record
			10	Discharge assessment - return not anticipated
			11	Discharge assessment - return anticipated
			12	Death in facility tracking record
			99	None of the above
X0700A_CRCTN_ASMT_RFRNC_DT	X0700A Correction Assessment Reference Date	Char		Date provided in SAS date (numeric) format.
X0700B_CRCTN_DSCHRG_DT	X0700B Correction Discharge Date	Char		Date provided in SAS date (numeric) format.
X0700C_CRCTN_ENTRY_DT	X0700C Correction Entry Date	Char		Date provided in SAS date (numeric) format.
X0800_CRCTN_NUM	X0800 Correction Number	Char		
X0900A_MDFCTN_TRNSCRPT_ERR_CD	X0900A Reason for Modification: Transcription Error Code	Char		Missing Value
			0	No
			1	Yes
X0900B_MDFCTN_ENTRY_ERR_CD	X0900B Reason for Modification: Data Entry Error Code	Char		Missing Value
			0	No
			1	Yes

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
X0900C_MDFCTN_SFTWR_ERR_CD	X0900C Reason for Modification: Software Product Error Code	Char		Missing Value
			0	No
			1	Yes
X0900D_MDFCTN_ITM_ERR_CD	X0900D Reason for Modification: Item Coding Error Code	Char		Missing Value
			0	No
			1	Yes
X0900E_MDFCTN_ADD_THRPY_DT	X0900E Reason for Modification: Add Resume Therapy Date	Char		Date provided in SAS date (numeric) format.
X0900Z_MDFCTN_OTHR_CD	X0900Z Reason for Modification: Other Error Requiring Modification Code	Char		Missing Value
			0	No
			1	Yes
X1050A_INACTV_NO_EVNT_CD	X1050A Reason for Inactivation: Event Did Not Occur Code	Char		Missing Value
X1050Z_INACTV_OTHR_CD	X1050B Reason for Inactivation: Other Error Requiring Inactivation Code	Char		Missing Value
X1100E_ATSTN_DT	X1100E Attestation Date	Char		Date provided in SAS date (numeric) format.
Z0100A_MDCR_HIPPS_TXT	Z0100A Medicare Part A HIPPS Code Text	Char		
Z0100B_MDCR_RUG_VRSN_TXT	Z0100B Medicare Part A RUG Version Text	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
Z0100C_MDCR_SHRT_STAY_CD	Z0100C Medicare Part A Short Stay Assessment Code	Char		Missing Value
			0	No
			1	Yes
Z0150A_MDCR_NTHRPY_HIPPS_TXT	Z0150A Medicare Part A Non-therapy HIPPS Code Text	Char		
Z0150B_MDCR_NTHRPY_RUGVRSN_TXT	Z0150B Medicare Non-therapy Part A RUG Version Text	Char		
Z0200A_STATE_RUG_GRP_TXT	Z0200A State Medicaid RUG Case Mix Group Text	Char		
Z0200B_STATE_RUG_VRSN_TXT	Z0200B State Medicaid RUG Version Text	Char		
Z0250A_STATE_2_RUG_GRP_TXT	Z0250A Alternate State Medicaid RUG Case Mix Group Text	Char		
Z0250B_STATE_2_RUG_VRSN_TXT	Z0250B Alternate State Medicaid RUG Version Text	Char		
Z0500B_RN_SGN_CMPLT_DT	Z0500B Date RN Assessment Coordinator Signed Assessment as Complete	Num		Date provided in SAS date (numeric) format.
A0310H_PTA_DSCHRG_ASMT_IND	A0310H SNF PPS Part A Discharge Assessment	Char		Missing Value
			0	No
			1	Yes
C1310A_MENTL_STUS_CHG_IND	C1310A Acute Mental Status Change	Char		Missing Value

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			-	Not assessed/no information
			0	No
			1	Yes
C1310B_INTNTN_IND	C1310B Signs and Symptoms of Delirium: Inattention	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not present
			1	Behavior continuously present, does not fluctuate
			2	Behavior present, fluctuates (comes and goes, changes in severity)
C1310C_DSRGNZD_THKNG_IND	C1310C Signs and Symptoms of Delirium: Disorganized Thinking	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not present
			1	Behavior continuously present, does not fluctuate
			2	Behavior present, fluctuates (comes and goes, changes in severity)
C1310D_LVL_OF_CNCSNS_IND	C1310D Signs and Symptoms of Delirium: Altered Level of Consciousness	Char		Missing Value
			-	Not assessed/no information
			0	Behavior not present
			1	Behavior continuously present, does not fluctuate
			2	Behavior present, fluctuates (comes and goes, changes in severity)
GG0130A1_EATG_ABILITY_STRT_CD	GG0130A1 Self Care: Eating Ability at Start of SNF PPS Part A Stay	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
GG0130A2_EATG_GOAL_BY_END_CD	GG0130A2 Self Care: Eating Goal by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
GG0130A3_EATG_ABILITY_END_CD	GG0130A3 Self Care: Eating Ability at End of SNF PPS Part A Stay	Char		
GG0130B1_ORAL_ABILITY_STRT_CD	GG0130B1 Self Care: Oral Hygiene Ability at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
GG0130B2_ORAL_GOAL_BY_END_CD	GG0130B2 Self Care: Oral Hygiene Goal by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
GG0130B3_ORAL_ABILITY_END_CD	GG0130B3 Self Care: Oral Hygiene Ability at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0130C1_TOILT_ABILITY_STRT_CD	GG0130C1 Self Care: Toileting Hygiene Ability at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0130C2_TOILT_GOAL_BY_END_CD	GG0130C2 Self Care: Toileting Hygiene Goal by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
GG0130C3_TOILT_ABILITY_END_CD	GG0130C3 Self Care: Toileting Hygiene Ability at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170B1_SIT_LYNG_STRT_CD	GG0170B1 Mobility: Sit to Lying Ability at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170B2_SIT_LYNG_GOAL_END_CD	GG0170B2 Mobility: Sit to Lying Goal by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
GG0170B3_SIT_LYNG_END_CD	GG0170B3 Mobility: Sit to Lying Ability at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170C1_STTG_BED_SIDE_STRT_CD	Lying to Sitting at Side of Bed Ability at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170C2_STTG_BED_SIDE_GOAL_CD	Lying to Sitting at Side of Bed Goal by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
GG0170C3_STTG_BED_SIDE_END_CD	Lying to Sitting at Side of Bed Ability at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170D1_STTG_STNDG_STRT_CD	GG0170D1 Mobility: Sitting to Standing Ability at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170D2_STTG_STNDG_GOAL_CD	GG0170D2 Mobility: Sitting to Standing Goal by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			05	Setup or clean-up assistance
			06	Independent
GG0170D3_STTG_STNDG_END_CD	GG0170D3 Mobility: Sitting to Standing Ability at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170E1_TRNSFR_STRT_CD	Chair/Bed to Chair Transfer Ability at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170E2_TRNSFR_GOAL_BY_END_CD	Chair/Bed to Chair Transfer Goal by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
GG0170E3_TRNSFR_END_CD	Chair/Bed to Chair Transfer Ability at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			88	Not attempted due to medical condition or safety concerns
GG0170F1_TOILT_TRNSFR_STRT_CD	GG0170F1 Mobility: Toilet Transfer at Start of SNF PPS Part A Stay	Char		
GG0170F2_TOILT_TRNSFR_GOAL_CD	GG0170F2 Mobility: Toilet Transfer Goal by End of SNF PPS Part A Stay	Char		
GG0170F3_TOILT_TRNSFR_END_CD	GG0170F3 Mobility: Toilet Transfer at End of SNF PPS Part A Stay	Char		
GG0170H1_RSDNT_WLK_STRT_CD	GG0170H1 Mobility: Does Resident Walk at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			0	No, and walking goal is not clinically indicated
			1	No, and walking goal is clinically indicated
			2	Yes
GG0170H3_RSDNT_WLK_END_CD	GG0170H3 Mobility: Does Resident Walk at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			0	No, and walking goal is not clinically indicated
			2	Yes
GG0170J1_WLK_50_2_TURN_STRT_CD	Mobility: Ability to Walk 50 Feet With Two Turns at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170J2_WLK_50_2_TURN_GOAL_CD	Mobility: Goal to Walk 50 Feet With Two Turns by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
GG0170J3_WLK_50_2_TURN_END_CD	Mobility: Ability to Walk 50 Feet With Two Turns at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170K1_WLK_150_STRT_CD	GG0170K1 Mobility: Ability to Walk 150 Feet at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170K2_WLK_150_BYGOAL_CD	GG0170K2 Mobility: Goal to Walk 150 Feet by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
 Long-Term Care Facility Resident Assessment Instrument MDS 3.0

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
GG0170K3_WLK_150_END_CD	GG0170K3 Mobility: Ability to Walk 150 Feet at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170Q1_USE_WLCHR_STRT_CD	GG0170Q1 Mobility: Uses Wheelchair/Scooter at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			0	No
			1	Yes
GG0170Q3_USE_WLCHR_END_CD	GG0170Q3 Mobility: Uses Wheelchair/Scooter at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			0	No
			1	Yes
GG0170R1_WHEEL_50_2_TURN_STRT	Ability to Wheel 50 Feet With Two Turns at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170R2_WHEEL_50_2_TURN_GOAL	Mobility: Goal to Wheel 50 Feet With Two Turns by End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
GG0170R3_WHEEL_50_2_TURN_END_C	Mobility: Ability to Wheel 50 Feet With Two Turns at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170RR1_TYPE_OF_WLCHR_STRT_C	GG0170RR1 Type of Wheelchair Used to Propel 50 Feet at SNF PPS Part A Admission	Char		Missing Value
			-	Not assessed/no information
			1	Manual
			2	Motorized
GG0170RR3_TYPE_OF_WLCHR_END_CD	Type of Wheelchair Used to Propel 50 Feet at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			1	Manual
			2	Motorized
GG0170S1_WHEEL_150_STRT_CD	Ability to Wheel at Least 150 Feet in Corridor at Start of SNF PPS Part A Stay	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
GG0170S2_WHEEL_150_GOAL_CD	GG0170S2 Mobility: Goal to Wheel at Least 150 Feet by End of SNF PPS Part A Stay	Char		
GG0170S3_WHEEL150_END_CD	Ability to Wheel at Least 150 Feet in Corridor at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			01	Dependent
			02	Substantial/maximal assistance
			03	Partial/moderate assistance
			04	Supervision or touching assistance
			05	Setup or clean-up assistance
			06	Independent
			07	Resident refused
			09	Not applicable
			88	Not attempted due to medical condition or safety concerns
GG0170SS1_TYPE_OF_WLCHR_150_ST	Type of Wheelchair Used to Propel 150 Feet at Start of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			1	Manual
			2	Motorized
GG0170SS3_TYPE_OF_WLCHR150_END	Type of Wheelchair Used to Propel 150 Feet at End of SNF PPS Part A Stay	Char		Missing Value
			-	Not assessed/no information
			1	Manual

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
			2	Motorized
X0600H_CRCTN_TYPE_OF_ASMT_IND	X0600H Correction Type of Assessment: SNF PPS Part A Discharge Assessment	Char		Missing Value
			0	No
			1	Yes
N0410H_RCVD_OPIOID_DAYS_NUM	N0410H Medications Received: Opioid Number Days	Num	0-100	Number of days (count)
N0450A_ANTPSYCT_MDCTNS_CNT	N0450A Resident Received Antipsychotic Medications	Num		Missing Value
			0	No - Antipsychotics were not received
			1	Yes - Antipsychotics were received on a routine basis only
			2	Yes - Antipsychotics were received on a PRN basis only
			3	Yes - Antipsychotics were received on a routine and PRN basis
N0450B_DOSE_RDCTN_SW	N0450B Gradual Dose Reduction	Char		Missing Value
			0	No
			1	Yes
N0450C_LAST_ATMPTED_GDR_DT	N0450C Date of Last Attempted GDR	Num		Date provided in SAS date (numeric) format.
N0450D_GDR_DOCD_CONTRA_SW	N0450D GDR Physician Documented Contraindicated	Char		Missing Value
			0	No
			1	Yes

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
N0450E_GRADUAL_PHYSN_DOCDD_DT	N0450E Gradual Physician Documented Date	Num		Date provided in SAS date (numeric) format.
P0200A_BED_ALARM_IND	P0200A Bed Alarm	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0200B_CHR_ALARM_IND	P0200B Chair Alarm	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0200C_FLR_MAT_ALARM_IND	P0200C Floor Mat Alarm	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0200D_MTN_SENSOR_ALARM_IND	P0200D Motion Sensor Alarm	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
P0200E_WNDR_ALARM_IND	P0200E Wander/Elopement Alarm	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
P0200F_OTHR_ALARM_IND	P0200F Other Alarm	Char		Missing Value
			-	Not assessed/no information
			0	Not used
			1	Used less than daily
			2	Used Daily
GG0100A_PRIOR_SELF_CARE_IND	GG0100A Prior Self Care Indicator	Char		
GG0100B_PRIOR_INDR_MBLTY_IND	GG0100B Prior Indoor Mobility Indicator	Char		
GG0100C_PRIOR_STRS_IND	GG0100C Prior Stairs Indicator	Char		
GG0100D_PRIOR_FNCTNL_CGNTN_IND	GG0100D Prior Functional Cognition Indicator	Char		
GG0110A_PRIOR_MNL_WLCHR_IND	GG0110A Prior Manual Wheelchair Indicator	Char		
GG0110B_PRIOR_MTRZD_WLCHR_IND	GG0110B Prior Motorized Wheelchair Indicator	Char		
GG0110C_PRIOR_MCHNCL_LIFT_IND	GG0110C Prior Mechaniccl Lift Indicator	Char		
GG0110D_PRIOR_WLKR_IND	GG0110D Prior Walker Indicator	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0**

Date Created: 29JAN2021

Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
GG0110E_PRIOR_ORHTHTCS_IND	GG0110E Prior Orthotics Indicator	Char		
GG0110Z_PRIOR_NONE_OF_THE_ABV	GG0110Z Prior None Of The Above Indicator	Char		
GG0130E1_BTHE_SELF_STRT_CD	GG0130E1 Bathe Self Start Indicator	Char		Missing Value
GG0130E2_BTHE_SELF_GOAL_CD	GG0130E2 Bathe Self Goal Indicator	Char		Missing Value
GG0130E3_BTHE_SELF_END_CD	GG0130E3 Bathe Self End Indicator	Char		Missing Value
GG0130F1_UPR_DRNG_STRT_CD	GG0130F1 Upper Dressing Start Indicator	Char		
GG0130F2_UPR_DRNG_GOAL_CD	GG0130F2 Upper Dressing Goal Indicator	Char		
GG0130F3_UPR_DRNG_END_CD	GG0130F3 Upper Dressing End Indicator	Char		
GG0130G1_LWR_DRNG_STRT_CD	GG0130G1 Lower Dressing Start Indicator	Char		
GG0130G2_LWR_DRNG_GOAL_CD	GG0130G2 Lower Dressing Goal Indicator	Char		
GG0130G3_LWR_DRNG_END_CD	GG0130G3 Lower Dressing End Indicator	Char		
GG0130H1_ON_OFF_FTWR_STRT_CD	GG0130H1 On Off Footwear Start Indicator	Char		Missing Value
GG0130H2_ON_OFF_FTWR_GOAL_CD	GG0130H2 On Off Footwear Goal Indicator	Char		Missing Value
GG0130H3_ON_OFF_FTWR_END_CD	GG0130H3 On Off Footwear End Indicator	Char		Missing Value
GG0170A1_ROLL_STRT_CD	GG0170A1 Roll Start Indicator	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
GG0170A2_ROLL_GOAL_CD	GG0170A2 Roll Goal Indicator	Char		
GG0170A3_ROLL_END_CD	GG0170A3 Roll End Indicator	Char		
GG0170G1_CAR_TRNSFR_STRT_CD	GG0170G1 Car Transfer Start Indicator	Char		
GG0170G2_CAR_TRNSFR_GOAL_CD	GG0170G2 Car Transfer Goal Indicator	Char		
GG0170G3_CAR_TRNSFR_END_CD	GG0170G3 Car Transfer End Indicator	Char		
GG0170I1_WLK_10_FEET_STRT_CD	GG0170I1 Once Standing, Walk 10 Feet Start Indicator	Char		
GG0170I2_WLK_10_FEET_GOAL_CD	GG0170I2 Walk 10 Feet Goal Indicator	Char		
GG0170I3_WLK_10_FEET_END_CD	GG0170I3 Once Standing, Walk 10 Feet End Indicator	Char		
GG0170L1_WLKG_UNEVEN_STRT_CD	GG0170L1 Walking Uneven Start Indicator	Char		
GG0170L2_WLKG_UNEVEN_GOAL_CD	GG0170L2 Walking Uneven Goal Indicator	Char		
GG0170L3_WLKG_UNEVEN_END_CD	GG0170L3 Wlkg Uneven End Indicaty to	Char		
GG0170M1_1_STP_STRT_CD	GG0170M1 1 Step Start Indicator	Char		
GG0170M2_1_STP_GOAL_CD	GG0170M2 1 Step Goal Indicator	Char		
GG0170M3_1_STP_END_CD	GG0170M3 1 Step End Indicator	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.

NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Long-Term Care Facility Resident Assessment Instrument MDS 3.0
Date Created: 29JAN2021
Number of Variables: 760

Variable Name	Variable (VAR) Label	VAR Type	Range of Values ¹	Value Description
GG0170N1_4_STP_STRT_CD	GG0170N1 4 Step Start Indicator	Char		
GG0170N2_4_STP_GOAL_CD	GG0170N2 4 Step Goal Indicator	Char		
GG0170N3_4_STP_END_CD	GG0170N3 4 Step End Indicator	Char		
GG0170O1_12_STP_STRT_CD	GG0170O1 12 Step Start Indicator	Char		
GG0170O2_12_STP_GOAL_CD	GG0170O2 12 Stp Goal Indicato	Char		Missing Value
GG0170O3_12_STP_END_CD	GG0170O3 12 Stp End Indicaty to	Char		
GG0170P1_PCKNG_UP_OBJ_STRT_CD	GG0170P1 Picking Up Object Start Indicator	Char		
GG0170P2_PCKNG_UP_OBJ_GOAL_CD	GG0170P2 Picking Up Object Goal Indicator	Char		
GG0170P3_PCKNG_UP_OBJ_END_CD	GG0170P3 Picking Up Object End Indicator	Char		
I0020A_OTHR_MDCL_COND_ICD_CD	I0020A Other Medical Condition ICD Code	Char		
I0020_PRMRY_MDCL_COND_CTGRY_CD	I0020 Primary Medical Condition Category	Char		
J2000_PRIOR_SRGRY_IND	J2000 Prior Surgry Indicator	Char		Missing Value
N2001_DRUG_RGMM_RVW_IND	N2001 Drug Regimen Review Indicator	Char		
N2003_MDCTN_FLW_UP_IND	N2003 Medicationn Follow Up Indicator	Char		
N2005_MDCTN_INTRVTN_IND	N2005 Medication Intervention Indicator	Char		

¹The range of values field contain approximate values for the payment, cost, and count variables. The actual values may include extreme outliers (positive or negative). Users may wish to consider applying top or bottom coding.