

**NCHS Survey Data Linked to CMS MBSF, Claims/Encounters, and Assessment Data
Skilled Nursing Facility (SNF) Encounter Occurrence Codes**

Date Created: 29JAN2021

Number of Variables: 11

Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
PATIENT_ID	NHCS Patient ID	Char	ID	Patient Identifier assigned by NCHS. Researchers requesting linked NHCS-CMS data should use PATIENT_ID.
PUBLICID	NHIS Public Use ID	Char	ID	Public-use survey participant identifier assigned by NCHS. Researchers requesting linked NHIS/LSOA II-Medicare data should use PUBLICID.
SEQN	NHANES Respondent Sequence Number	Num	ID	Public-use survey participant identifier assigned by NCHS. Researchers requesting linked NHEFS/NHANES III/NHANES-Medicare data should use SEQN.
RESNUM	NNHS Resident Record (Case) Number	Num	ID	Public-use survey participant identifier assigned by NCHS. Researchers requesting linked 2004 NNHS-Medicare data should use RESNUM.
SURVEY	Survey Name and survey year/cycle	Char		
FILE_YEAR4	Year of Medicare Advantage (MA) Encounter (YYYY)	Num	2016	2016 NHCS has been linked to only 2016-2017 Medicare Data.
NCHS_ENC_JOIN_KEY	NCHS ENCOUNTER JOIN KEY	Num		
CLM_TYPE_CD	Claim Type Code	Char	4018	Hospital Swing Beds
			4021	SNF Skilled Nursing Inpatient
RLT_OCRNC_CD_SEQ	Claim Related Occurrence Code Sequence	Char		
CLM_RLT_OCRNC_CD	Claim Related Occurrence Code	Char	**OTHER**	Miscoded
			01	Auto accident - The date of an auto accident.
			02	No-fault insurance involved, including auto accident/other - The date of an accident where the state has applicable no-fault liability laws, (i.e., legal basis for settlement without admission or proof of guilt).
			03	Accident/tort liability - The date of an accident resulting from a third party's action that may involve a civil court process in an attempt to require payment by the third party, other than no-fault liability.

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			05	Other accident - The date of an accident not described by the codes 01 thru 04.
			06	Crime victim - Code indicating the date on which a medical condition resulted from alleged criminal action committed by one or more parties.
			07-08	Reserved for national assignment.
			11	Onset of symptoms/illness - The date the patient first became aware of symptoms/illness.
			13-16	Reserved for national assignment.
			17	Date outpatient occupational therapy plan established or last reviewed - Code indicating the date an occupational therapy plan was established or last reviewed (eff 3/93)
			18	Date of retirement (patient/bene) - Code indicates the date of retirement for the patient/bene.
			19	Date of retirement spouse - Code indicates the date of retirement for the patient's spouse.
			20	Guarantee of payment began - The date on which the provider began claiming Medicare payment under the guarantee of payment provision.
			21	UR notice received - Code indicating the date of receipt by the hospital & SNF of the UR committee's finding that the admission or future stay was not medically necessary.
			22	Active care ended - The date on which a covered level of care ended in a SNF or general hospital, or date active care ended in a psychiatric or tuberculosis hospital or date on which patient was released on a trial basis from a residential facility. Code is not required if code '21' is used.
			24	Date insurance denied - The date the insurer's denial of coverage was received by a higher priority payer.
			25	Date benefits terminated by primary payer - The date on which coverage (including worker's compensation benefits or no-fault coverage) is no longer available to the patient.
			26	Date skilled nursing facility (SNF) bed available - The date on which a SNF bed became available to a hospital inpatient who required only SNF level of care.

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			27	Date of Hospice Certification or Re-Certification -- code indicates the date of certification or recertification of the hospice benefit period, beginning with the first two initial benefit periods of 90 days each and the subsequent 60-day benefit periods. (eff. 9/01)
			29	Date OPT plan established or last reviewed - the date a plan of treatment was established for outpatient physical therapy. Not used by hospital unless owner of facility
			30	Date speech pathology plan treatment established or last reviewed - The date a speech pathology plan of treatment was established or last reviewed. Not used by hospital unless owner of facility
			35	Date treatment started for physical therapy - Code indicates the date services were initiated by the billing provider for physical therapy.
			42	Date of discharge/termination of hospice care - for the final bill for hospice care. Eff 5/93, definition revised to apply only to date patient revoked hospice election.
			44	Date treatment started for occupational therapy - Code indicates the date services were initiated by the billing provider for occupational therapy.
			45	Date treatment started for speech therapy - Code indicates the date services were initiated by the billing provider for speech therapy.
			50-55	Reserved for state assignment
			57-69	Reserved for state assignment
			A1	Birthdate, Insured A - The birthdate of the individual in whose name the insurance is carried. (Eff 10/93)
			A2	Effective date, Insured A policy - A code indicating the first date insurance is in force. (eff 10/93)
			A3	Benefits exhausted - Code indicating the last date for which benefits are available and after which no payment can be made to payer A. (eff 10/93)
			B1	Birthdate, Insured B - The birthdate of the individual in whose name the insurance is carried. (eff 10/93)
			B2	Effective date, Insured B policy - A code indicating the first date insurance is in force. (eff 10/93)
			C1	Birthdate, Insured C - The birthdate of the individual in whose name the insurance is carried. (eff 10/93)

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Variable Name	Variable (VAR) Label	VAR Type	Range of Values	Value Description
			C2	Effective date, Insured C policy - A code indicating the first date insurance is in force. (eff 10/93)
CLM_RLT_OCRNC_DT	Claim Related Occurrence Date	Num		Date provided in SAS date (numeric) format.