

Medicaid Summary of Variables for Claims Datasets

Available Claims Data Sets: In = Institutional, Pr = Professional, Rx = Pharmacy, De = Dental

Category of Variables	Variable Name	Variable Label	Data Type	Claims Data sets
1) Patient Variables	ALT_MBR_ID_ENCRYPT	Alternate Member ID Encrypted	Character 30	In Pr Rx De
	HDRDENTAL_MBR_GNDR_CD	Member Gender Code	Character 20	De
	HDRDENTAL_MBR_GNDR_DESC	Member Gender Description	Character 200	De
	HDRIN_MBR_GNDR_CD	Member Gender Code	Character 1	In
	HDRIN_MBR_GNDR_DESC	Member Gender Description	Character 200	In
	HDRPR_MBR_GNDR_CD	Member Gender Code	Character 20	Pr
	HDRPR_MBR_GNDR_DESC	Member Gender Description	Character 200	Pr
	HDRRX_MBR_GNDR_CD	Member Gender Code	Character 20	Rx
	HDRRX_MBR_GNDR_DESC	Member Gender Description	Character 200	Rx
	MBR_AGE_NBR	Member Age	Numeric 8	In Pr Rx De
	MBR_BNFT_SVC_GRP_ID	Member Group Number	Numeric 8	In Pr Rx De
	MBR_DOB_DT	Member Date of Birth	Numeric 8	In Pr Rx De
	MBR_HLTHPLN_DESC	Health Plan Description	Character 200	In Pr Rx De
	MBR_HLTHPLN_ID	Health Plan ID	Numeric 8	In Pr Rx De
	MBR_LIV_ARRGMNT_CD	Living Arrangement Code	Character 20	In Pr De
	MBR_LIV_ARRGMNT_DESC	Member Living Arrangement Description	Character 200	In Pr De
	MBR_MCAID_CLSFN_CD	Medicaid Classification Code	Character 20	In Pr Rx De
	MBR_PRGNCY_IND	Pregnancy Indicator	Character 1	In Pr Rx De
	MBR_REF_CNTRY_DESC	Member Country Description	Character 200	In Pr Rx De
	MBR_REF_CNTY_CD	Member County Code	Character 20	In Pr Rx De
	MBR_REF_CNTY_NM	Member County Name	Character 40	In Pr Rx De
	MBR_REF_CTY	Member City	Character 50	In Pr Rx De
	MBR_REF_ELGB_CVRG_CD	Member Eligibility Coverage Code	Character 20	In Pr Rx De
	MBR_REF_ELGB_CVRG_DESC	Member Eligibility Coverage Description	Character 200	In Pr Rx De
	MBR_REF_ST_ABBREV	Member State Code	Character 20	In Pr Rx De
	MBR_REF_ZIP_CD	Member Zip Code	Character 20	In Pr Rx De
	MBR_SSI_STAT_CD	SSI Status Code	Character 20	In Pr Rx De
	MNG_CAR_COHORT_ID	Managed Care Cohort ID	Numeric 8	Pr
	NCPDP_BASIS_OF_CST_DTRM_CD	Basis of Cost Determination	Character 20	Rx
2) Time Variables	ADMSN_DT	Admission Date	Numeric 8	In De
	CALCD_DAY_NBR	Calculated Days Number	Numeric 8	In
	CLM_HDR_PD_DT	Claim Header Paid Date	Numeric 8	In Pr Rx De
	CLM_LNE_NBR	Claim Line Number	Numeric 8	In Pr Rx De
	CVR_DAY_NBR	Number of Days Covered	Numeric 8	In Pr De
	DSCHRG_DT	Discharge Date	Numeric 8	In De
	HDR_SVC_BGN_DT	Header Starting Date of Service	Numeric 8	In Pr Rx De
	HDR_SVC_END_DT	Header Ending Date of Service	Numeric 8	In Pr Rx De
	LNE_SVC_BGN_DT	Line Starting Date of Service	Numeric 8	In Pr Rx De

	LNE_SVC_END_DT	Line Ending Date of Service	Numeric 8	In Pr Rx De
	MBR_REF_ELGB_AUTH_BGN_DT	Member Eligibility Authorization Begin Date	Numeric 8	In Pr Rx De
	MBR_REF_ELGB_BGN_DT	Member Eligibility Begin Date	Numeric 8	In Pr Rx De
	MBR_REF_ELGB_END_DT	Member Eligibility End Date	Numeric 8	In Pr Rx De
3) Clinical Variables	ADMT_DIAG_CD	Admitting Diagnosis Code	Character 20	In
	DIAG_CD_01	Diagnosis Code 1	Character 20	In Pr De
	DIAG_CD_01_DESC	Diagnosis Code 1 Description	Character 200	In Pr De
	DIAG_CD_02	Diagnosis Code 2	Character 20	In Pr De
	DIAG_CD_02_DESC	Diagnosis Code 2 Description	Character 200	In Pr De
	DIAG_CD_03	Diagnosis Code 3	Character 20	In Pr De
	DIAG_CD_03_DESC	Diagnosis Code 3 Description	Character 200	In Pr De
	DIAG_CD_04	Diagnosis Code 4	Character 20	In Pr De
	DIAG_CD_04_DESC	Diagnosis Code 4 Description	Character 200	In Pr De
	DIAG_CD_05	Diagnosis Code 5	Character 20	In Pr De
	DIAG_CD_05_DESC	Diagnosis Code 5 Description	Character 200	In Pr De
	DIAG_CD_06	Diagnosis Code 6	Character 20	In Pr De
	DIAG_CD_06_DESC	Diagnosis Code 6 Description	Character 200	In Pr De
	DIAG_CD_07	Diagnosis Code 7	Character 20	In Pr De
	DIAG_CD_07_DESC	Diagnosis Code 7 Description	Character 200	In Pr De
	DIAG_CD_08	Diagnosis Code 8	Character 20	In Pr De
	DIAG_CD_08_DESC	Diagnosis Code 8 Description	Character 200	In Pr De
	DIAG_CD_09	Diagnosis Code 9	Character 20	In Pr De
	DIAG_CD_09_DESC	Diagnosis Code 9 Description	Character 200	In Pr De
	DIAG_CD_10	Diagnosis Code 10	Character 20	In Pr De
	DIAG_CD_10_DESC	Diagnosis Code 10 Description	Character 200	In Pr De
	DIAG_PRI_POA_CD	Admitting Diagnosis Present on Admission Indicator	Character 20	In
	DNTL_CVTY_CD	Dental First Cavity Code	Character 20	De
	DRG_CD	Diagnosis Related Group	Character 20	In
	DRG_DRG_GRP_VER_NBR	Diagnosis Related Group DRG Grouper Version Number	Character 30	In
	ICD_VER_CD	ICD Version Code	Character 20	In Pr De
	PAT_STAT_CD	Discharge Status Code	Character 20	In De
	PROC_ADJDC_CD	Adjudicated Procedure Code	Character 20	In Pr De
	PROC_MOD_1_CD	Procedure modifier 1	Character 20	In Pr De
	PROC_MOD_1_DESC	Procedure modifier 1 Description	Character 80	In Pr De
	PROC_MOD_2_CD	Procedure modifier 2	Character 20	In Pr De
	PROC_MOD_2_DESC	Procedure modifier 2 Description	Character 80	In Pr De
	PROC_MOD_3_CD	Procedure modifier 3	Character 20	In Pr De
	PROC_MOD_3_DESC	Procedure modifier 3 Description	Character 80	In Pr De
	PROC_MOD_4_CD	Procedure modifier 4	Character 20	In Pr De
	PROC_MOD_4_DESC	Procedure modifier 4 Description	Character 80	In Pr De
	RSN_VST_DIAG_2_CD	Reference Diagnosis Code 2_Reason for Visit	Character 20	In
	RSN_VST_DIAG_3_CD	Reference Diagnosis Code 3_Reason for Visit	Character 20	In

	RSN_VST_DIAG_CD	Reference Diagnosis Code 1_Reason for Visit	Character 20	In
4) Provider Variables	ATND_PRVDR_ID	Attending Provider Identification Number	Character 30	In
	ATND_PRVDR_NPI	Attending Provider NPI	Character 20	In
	ATND_PRVDR_REF_ALT_ID	Attending Provider Medicaid Legacy Provider ID	Character 15	In
	ATND_PRVDR_REF_CNTY_CD	Attending Provider County Code	Character 20	In
	ATND_PRVDR_REF_CNTY_NM	Attending Provider County Name	Character 40	In
	ATND_PRVDR_REF_CTY	Attending Provider City	Character 80	In
	ATND_PRVDR_REF_FRST_NM	Attending Provider First Name	Character 40	In
	ATND_PRVDR_REF_LST_NM	Attending Provider Last Name	Character 40	In
	ATND_PRVDR_REF_MDL_NM	Attending Provider Middle Name	Character 20	In
	ATND_PRVDR_REF_ST_CD	Attending Provider State	Character 20	In
	ATND_PRVDR_REF_ZIP_CD	Attending Provider zip	Character 20	In
	ATTD_PRVDR_LOC_CD	Attending Provider Location Code	Character 20	In
	BILL_PRVDR_ATYP_PRVDR_NBR	Billing Provider Atypical NPI	Character 30	In Pr Rx De
	BILL_PRVDR_CTY	Billing Provider City	Character 25	In Pr Rx De
	BILL_PRVDR_ID	Billing Provider Identification Number	Character 20	In Pr Rx De
	BILL_PRVDR_LOC_CD	Billing Provider Location Code	Character 20	In Pr Rx De
	BILL_PRVDR_NPI	Billing Provider NPI	Character 30	In Pr Rx De
	BILL_PRVDR_REF_ALT_ID	Billing Provider Medicaid Legacy Provider ID	Character 15	In Pr Rx De
	BILL_PRVDR_REF_CNTY_CD	Billing Provider County Code	Character 20	In Pr Rx De
	BILL_PRVDR_REF_CNTY_NM	Billing Provider County Name	Character 40	In Pr Rx De
	BILL_PRVDR_REF_FRST_NM	Billing Provider First Name	Character 40	In Pr Rx De
	BILL_PRVDR_REF_LST_NM	Billing Provider Last Name	Character 40	In Pr Rx De
	BILL_PRVDR_REF_MDL_NM	Billing Provider Middle Name	Character 20	In Pr Rx De
	BILL_PRVDR_REF_STAT_CD	Billing Provider Status Code	Character 20	In Pr Rx De
	BILL_PRVDR_REF_TITL	Billing Provider Title	Character 30	In Pr Rx De
	BILL_PRVDR_ST_CD	Billing Provider State Code	Character 20	In Pr Rx De
	BILL_PRVDR_TXNMY_CD	Billing Provider Taxonomy Code	Character 20	In Pr Rx De
	BILL_PRVDR_TXNMY_QLFR_CD	Billing Provider Taxonomy Qualifier Code	Character 20	In Pr Rx De
	BILL_PRVDR_ZIP_CD	Billing Provider Zip Code	Character 20	In Pr Rx De
	HDRDENTAL_BILL_PRVDR_NM	Billing Provider Name	Character 40	De
	HDRIN_BILL_PRVDR_NM	Billing Provider Name	Character 40	In
	HDRIN_RFR_PRVDR_ID	Referring Provider Identification Number	Character 30	In
	HDRIN_RFR_PRVDR_NPI	Referring Provider NPI	Character 20	In
	HDRPR_BILL_PRVDR_NM	Billing Provider Name	Character 40	Pr
	LINE_RFR_PRVDR_ID	Referring Provider Identification Number	Character 20	In Pr De
	LINE_RFR_PRVDR_NPI	Referring Provider NPI	Character 20	In Pr De
	OPRT_PRVDR_ID	Operating Provider Identification Number	Character 20	In
	OPRT_PRVDR_NPI	Operating Provider NPI	Character 20	In
	OPRT_PRVDR_REF_FRST_NM	Operating Provider First Name	Character 40	In
	OPRT_PRVDR_REF_LST_NM	Operating Provider Last Name	Character 40	In
	OPRT_PRVDR_REF_MDL_NM	Operating Provider Middle Name	Character 20	In

	OPRT_PRVDR_REF_TITL	Operating Provider Title	Character 30	In
	PRSCR_PRVDR_ID	Prescribing Provider Identification Number	Character 30	Rx
	PRSCR_PRVDR_NPI	Prescribing Provider NPI	Character 20	Rx
	PRSCR_PRVDR_REF_ALT_ID	Prescribing Provider Medicaid Legacy Provider ID	Character 15	Rx
	PRSCR_PRVDR_REF_FRST_NM	Prescribing Provider First Name	Character 40	Rx
	PRSCR_PRVDR_REF_LST_NM	Prescribing Provider Last Name	Character 40	Rx
	PRSCR_PRVDR_REF_MDL_NM	Prescribing Provider Middle Name	Character 20	Rx
	RFR_PRVDR_REF_FRST_NM	Referring Provider First Name	Character 40	In Pr De
	RFR_PRVDR_REF_LST_NM	Referring Provider Last Name	Character 40	In Pr De
	RFR_PRVDR_REF_MDL_NM	Referring Provider Middle Name	Character 20	In Pr De
	RFR_PRVDR_REF_TITL	Referring Provider Title	Character 30	In Pr De
	RFR_PRVDR_TXNMY_CD	Referring Provider Taxonomy	Character 20	In Pr De
	RNDR_PRVDR_ID	Rendering Provider Identification Number	Character 20	In Pr De
	RNDR_PRVDR_LOC_CD	Rendering Provider Location Code	Character 20	In Pr De
	RNDR_PRVDR_NPI	Rendering Provider NPI	Character 20	In Pr De
	RNDR_PRVDR_REF_ALT_ID	Rendering Provider Medicaid Legacy Provider ID	Character 15	In Pr De
	RNDR_PRVDR_REF_ATYPICAL_NPI	Rendering Provider Atypical NPI	Character 30	In Pr De
	RNDR_PRVDR_REF_CNTY_CD	Rendering Provider County Code	Character 20	In Pr De
	RNDR_PRVDR_REF_CNTY_NM	Rendering Provider County Name	Character 40	In Pr De
	RNDR_PRVDR_REF_CTY	Rendering Provider City	Character 80	In Pr De
	RNDR_PRVDR_REF_DTH_DT	Rendering Provider Date of Death	Numeric 8	In Pr De
	RNDR_PRVDR_REF_FRST_NM	Rendering Provider First Name	Character 40	In Pr De
	RNDR_PRVDR_REF_LST_NM	Rendering Provider Last Name	Character 40	In Pr De
	RNDR_PRVDR_REF_MDL_NM	Rendering Provider Middle Name	Character 20	In Pr De
	RNDR_PRVDR_REF_STAT_CD	Rendering Provider Status Code	Character 20	In Pr De
	RNDR_PRVDR_REF_STAT_EFF_DT	Rendering Provider Status Effective Date	Numeric 8	In Pr De
	RNDR_PRVDR_REF_STAT_END_DT	Rendering Provider Status End Date	Numeric 8	In Pr De
	RNDR_PRVDR_REF_ST_CD	Rendering Provider State	Character 20	In Pr De
	RNDR_PRVDR_REF_SVC_LOC_NM	Rendering Provider Site Location Name	Character 40	In Pr De
	RNDR_PRVDR_REF_TITL	Rendering Provider Title	Character 30	In Pr De
	RNDR_PRVDR_REF_ZIP_CD	Rendering Provider Zip	Character 20	In Pr De
	RNDR_PRVDR_TXNMY_CD	Rendering Provider Taxonomy	Character 20	In Pr De
	SVC_PRVDR_ID	Servicing Facility Provider Identification Number	Character 30	In
	SVC_PRVDR_LOC_CD	Servicing Facility Provider Location Code	Character 20	In
	SVC_PRVDR_NPI	Servicing Facility NPI	Character 30	In
	SVC_PRVDR_REF_CNTY_CD	Servicing Facility Provider County Code	Character 20	In
	SVC_PRVDR_REF_CNTY_NM	Servicing Facility Provider County Code	Character 40	In
	SVC_PRVDR_REF_CTY	Servicing Facility Provider City	Character 80	In
	SVC_PRVDR_REF_FRST_NM	Servicing Facility Provider First Name	Character 40	In
	SVC_PRVDR_REF_LST_NM	Servicing Facility Provider Last Name	Character 40	In
	SVC_PRVDR_REF_MDL_NM	Servicing Facility Provider Middle Name	Character 20	In
	SVC_PRVDR_REF_ST_CD	Servicing Facility Provider State	Character 20	In
	SVC_PRVDR_REF_ZIP_CD	Servicing Facility Provider Zip	Character 20	In

5) Drug Variables	CLM_RX_NBR	Drug Prescription Number	Character 30	Rx
	DEA_SCHED_CD	Drug Schedule Code	Character 20	Rx
	DRUG_CD	National Drug Code	Character 20	Rx
	DRUG_GNRC_NM	Drug Generic Name	Character 80	Rx
	DRUG_GNRC_PRDCT_CD	Drug Generic Product Code	Character 20	Rx
	DRUG_NM	Drug Name	Character 200	Rx
	DRUG_PD_QTY_CT	Paid Quantity Count (Drug)	Numeric 8	Rx
	DRUG_REF_FRMLRY_CVRG_CD	Drug Formulary Coverage Code	Character 20	Rx
	DRUG_REF_GNRC_CNTL_SEQ_NBR	Drug Sequence Number	Character 30	Rx
	DRUG_REF_GNRC_SRCS_CD	Drug Generic Sources Code	Character 20	Rx
	DRUG_REF_THRPTC_CLS_SPCFC_CD	Drug Therapeutic Class Code	Character 20	Rx
	DRUG_RFL_CD	Drug Refill Code	Character 20	Rx
	DRUG_RX_DT	Prescribed Date	Numeric 8	Rx
	DRUG_STRNGT_DESC	Drug Strength	Character 200	Rx
	DSPN_AS_WRTN_CD	Dispensed As Written Code	Character 20	Rx
	NCPDP_CMPND_DRUG_CD	NCPDP Compound Drug Code	Character 20	Rx
	PD_DAY_SPLY_CT	Days Supply	Numeric 8	Rx
	SPEC_THERA_DESC	Drug Therapeutic Class Code Description	Character 100	Rx
6) Financial Variables	CLM_LNE_PRLMNR_ALLW_AMT	Claim Line Preliminary Allowed Amount	Numeric 8	In Pr Rx De
	CR_CD	Credit Code	Character 20	In Pr Rx De
	GRS_DUE_AMT	Gross Amount due	Numeric 8	Rx
	HDRDENTAL_TTL_TPL_AMT	Total Third Party Liability Amount	Numeric 8	De
	HDRIN_TTL_TPL_AMT	Total Third Party Liability Amount	Numeric 8	In
	HDRPR_TTL_TPL_AMT	Total Third Party Liability Amount	Numeric 8	Pr
	HDRRX_TTL_TPL_AMT	Total Third Party Liability Amount	Numeric 8	Rx
	HDR_TRNSCT_TYP_CD	Header Transaction Type Code	Character 20	In Pr Rx De
	HDR_TTL_TPL_AMT	Total Third Party Liability Amount	Numeric 8	In Pr Rx De
	LINEDE_LNE_COPAY_AMT	Claim Line Copay Amount	Numeric 8	De
	LNEIN_LNE_COPAY_AMT	Claim Line Copay Amount	Numeric 8	In
	LNEPR_LNE_COPAY_AMT	Claim Line Copay Amount	Numeric 8	Pr
	LNE_ALLW_CHRG_AMT	Claim Line Allowed Amount	Numeric 8	In Pr Rx De
	LNE_ALLW_INGRD_AMT	Claim Line Allowed Ingredient Cost Amount	Numeric 8	Rx
	LNE_ALLW_UNT_NBR	Line Allowed Units	Numeric 8	In Pr Rx De
	LNE_DRG_DIR_AMT	DRG DME Amount	Numeric 8	In
	LNE_DRG_INDIR_AMT	DRG IME Amount	Numeric 8	In
	LNE_NET_PAY_AMT	Net Payment	Numeric 8	In Pr Rx De
	LNE_RMBRS_AMT	Line Reimbursement Amount	Numeric 8	In Pr Rx De
	LNE_RMBRS_UNT_NBR	Units Paid	Numeric 8	In Pr Rx De
	LNE_SBMT_CHRG_AMT	Line Submit Charge Amount	Numeric 8	In Pr Rx De
	LNE_TPL_AMT	Third Party Liability Amount	Numeric 8	In Pr Rx De
	PYR_REF_ID	Payer ID	Numeric 8	In Pr Rx De

	REV_DESC	Revenue Code Description	Character 40	In Pr De
	RPLCD_TRNSCT_CNTL_NBR	Replaced Transaction Control Number	Character 30	In Pr Rx De
	RPLCM_TRNSCT_CNTL_NBR	Replacement Transaction Control Number	Character 30	In Pr Rx De
	RVN_CD	Revenue Code	Character 20	In Pr De
	TRNSCT_CNTL_NBR	Transaction Control Number	Character 30	In Pr Rx De
	TTL_ALLW_AMT	Claim Header Allowed Amount	Numeric 8	In Pr Rx De
	TTL_ALLW_INGRD_AMT	Total Allowed Ingredient Cost Amount	Numeric 8	Rx
	TTL_CHRG_AMT	Total Billed or Charged Amount	Numeric 8	In Pr Rx De
	TTL_CLM_CALCD_ALLW_AMT	Total Calculated Allowed Amount	Numeric 8	In Pr Rx De
	TTL_DRG_DIR_AMT	Total DRG DME Amount	Numeric 8	In
	TTL_DRG_INDIR_AMT	Total DRG IME Amount	Numeric 8	In
	TTL_DRUG_PD_AMT	Total Drug Paid Amount	Numeric 8	Rx
	TTL_DSPN_FEE_AMT	Dispensing Fee Amount	Numeric 8	Rx
	TTL_NET_PAY_AMT	Total Amount Paid	Numeric 8	In Pr Rx De
	TTL_RMBRSD_AMT	Total Reimbursed Amount	Numeric 8	In Pr Rx De
	TYP_OF_BILL_DIGITS_1_AND_2_CD	Type of Bill Facility Type Code	Character 20	In
	TYP_OF_BILL_DIGIT_3_CD	Type of Bill Frequency Code	Character 20	In
Other Variables	BNFTPLN_ID	Benefit Plan	Numeric 8	In Pr Rx De
	CHD_SVC_AUTH_SA_TYP_SVC_CD	Type of Service Code	Character 20	De
	CHI_SVC_AUTH_SA_TYP_SVC_CD	Type of Service Code	Character 20	In
	CHP_SVC_AUTH_SA_TYP_SVC_CD	Type of Service Code	Character 20	Pr
	CLM_BTCH_DOC_TYP_CD	Specifies the classification of claims in a batch	Character 20	In Pr Rx De
	HDR_STAT_CD	Header status code	Character 20	In Pr Rx De
	HDR_TYP_CD	Claim Type Code	Character 20	In Pr Rx De
	LNE_STAT_CD	Line Status Code	Character 20	In Pr Rx De
	MBR_AID_CTG_CD	Aid Category Code	Character 20	In Pr Rx De
	MBR_AID_CTG_DESC	Aid Category Description	Character 200	Pr
	MBR_AID_CTG_DESC	Aid Category Description	Character 200	In Rx De
	MBR_AID_PGM_CD	Aid Program Code	Character 20	In Pr Rx De
	MBR_AID_PGM_DESC	Aid Program Description	Character 200	In Pr Rx De
	MBR_BNFTPLN_DESC	Benefit Plan Description	Character 200	In Pr Rx De
	MBR_REF_PCP_ID	Primary Care Physician ID	Character 30	In Pr Rx De
	MBR_REF_REL_TO_PAY_CD	Member Relationship Code	Character 20	In Pr Rx De
	MBR_REF_SPCL_CVRG_CD	Special Coverage Code	Character 20	In Pr Rx De
	NCPDP_LVL_OF_SVC	Type of Service Code	Character 20	Rx
	POS_CD	Place of Service Code	Character 20	In Pr Rx De
	PRI_APRV_NBR	Prior Authorization Number	Character 20	Rx
	PRI_APRV_REF_TYP_CD	Prior Approval Type Code	Character 20	Rx