Appendix III: Data Elements

Table 1. Data Elements in the NIS Inpatient Core Files

Data elements that are *italicized* are not included in the 2009 NIS Inpatient Core files, but are only available in previous years' files.

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
Admission day of week or weekend	AWEEKEND	1998-2009	Admission on weekend: (0) admission on Monday-Friday, (1) admission on Saturday-Sunday	
	ADAYWK	*1988-1997*	*Admission day of week: (1) Sunday, (2) Monday, (3) Tuesday, (4) Wednesday, etc.*	
Admission month	AMONTH	1988-2009	Admission month coded from (1) January to (12) December	FL
Admission source	ASOURCE	1988-2009	Admission source, uniform coding: (1) ER, (2) another hospital, (3) another facility including long-term care, (4) court/law enforcement, (5) routine/birth/other	AZ, CT, FL, GA, HI, IA, KS, KY, ME, MI, MN, MO, MT, NC, NE, NM, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, WA, WI, WY
	ASOURCE_X	1998-2009	Admission source, as received from data source using State-specific coding	AZ, CT, FL, GA, HI, IA, KS, KY, ME, MI, MN, MO, MT, NC, NE, NM, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, WA, WI, WY

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	ASOURCEUB92	2003-2009	Admission source (UB-92 standard coding). For newborn admissions (ATYPE = 4): (1) normal newborn, (2) premature delivery, (3) sick baby, (4) extramural birth; For non-newborn admissions (ATYPE NE 4): (1) physician referral, (2) clinic referral, (3) HMO referral, (4) transfer from a hospital, (5) transfer from a skilled nursing facility, (6) transfer from a another health care facility, (7) emergency room, (8) court/law enforcement, (A) transfer from a critical access hospital, (B) transfer from another home health agency, (C) readmission to same home health agency, (D) transfer from one distinct unit of the hospital to another distinct unit of the same hospital resulting in a separate claim to the payer, (E) transfer from ambulatory surgery center, (F) transfer from hospice and under hospice plan	AZ, CA, CT, FL, GA, HI, IA, KS, KY, MD, ME, MI, MN, MO, MT, NC, NE, NM, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, WA, WI, WY
	POINTOFORIGIN X	2009	Point of origin for admission or visit, as received from source	CA, MA, MD, ME, NH
	POINTOFORIGIN _UB04	2007-2009	Point of origin for admission or visit, UB-04 standard coding. For newborn admission (ATYPE = 4): (5) Born inside this hospital, (6) Born outside of this hospital; For non-newborn admissions (ATYPE NE 4): (1) Non-health care facility point of origin, (2) Clinic, (4) Transfer from a hospital (different facility), (5) Transfer from a skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF), (6) Transfer from another health care facility, (7) Emergency room, (8) Court/law enforcement, (B) Transfer from another Home Health Agency, (C) Readmission to Same Home Health Agency, (D) Transfer from one distinct unit of the hospital to another distinct unit of the same hospital resulting in a separate claim to the payer, (E) Transfer from ambulatory surgery center, (F) Transfer from hospice and is under a hospice plan of care or enrolled in a hospice program	CA, MA, MD, ME, NH

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	TRAN_IN	2008-2009	Transfer In Indicator: (0) not a transfer, (1) transferred in from a different acute care hospital [ATYPE NE 4 & (ASOURCE=2 or POO=4)], (2) transferred in from another type of health facility [ATYPE NE 4 & (ASOURCE=3 or POO=5,6)]	
Admission type	ATYPE	1988-2009	Admission type, uniform coding: (1) emergency, (2) urgent, (3) elective, (4) newborn, (5) Delivery (coded in 1988-1997 data only), (5) trauma center beginning in 2003 data, (6) other	CA
	ELECTIVE	2002-2009	Indicates elective admission: (1) elective, (0) non-elective admission	
Age at admission	AGE	1988-2009	Age in years coded 0-124 years	
	AGEDAY	1988-2009	Age in days coded 0-365 only when the age in years is less than 1	FL, MA, ME, NH, SC, TX
Chronic Conditions	NCHRONIC	2008-2009	Number of chronic conditions	
Clinical Classifications Software (CCS) category	DXCCS1 – DXCCS25	1998-2009	CCS category for all diagnoses for NIS beginning in 1998. Beginning in 2009, the diagnosis array was increased from 15 to 25.	
	DCCHPR1	1988-1997	*CCS category for principal diagnosis for NIS prior to 1998. CCS was formerly called the Clinical Classifications for Health Policy Research (CCHPR).*	
	PRCCS1 – PRCCS15	1998-2009	CCS category for all procedures for NIS beginning in 1998	
	PCCHPR1	1988-1997	*CCS category for principal procedure for NIS prior to 1998. CCS was formerly called the Clinical Classifications for Health Policy Research (CCHPR).*	
Data source information	*DSNUM*	1988-1997	*Data source number*	
	DSTYPE	1988-1997	*Data source type: (1) State data organization, (2) Hospital association, (3) Consortia*	
Diagnosis information	DX1 – DX25	1988-2009	Diagnoses, principal and secondary (ICD-9-CM). Beginning in 2003, the diagnosis array does not include any external cause of injury codes. These codes have been stored in a separate array ECODEn. Beginning in 2009, the diagnosis array was increased from 15 to 25.	
	NDX	1988-2009	Number of diagnoses coded on the original record	
	DSNDX	1988-1997	*Number of diagnosis fields provided by the data source*	

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	DXSYS	1988-1997	Diagnosis coding system (ICD-9-CM)	
	DXV1 - DXV15	1988-1997	Diagnosis validity flags	
Diagnosis Related Group (DRG)	DRG	1988-2009	DRG in use on discharge date	
	DRG_NoPOA	2008-2009	DRG in use on discharge date, calculated without Present On Admission (POA) indicators	
	DRGVER	1988-2009	Grouper version in use on discharge date	
	DRG10	1988-1999	DRG Version 10 (effective October 1992 - September 1993)	
	DRG18	1998-2005	DRG Version 18 (effective October 2000 - September 2001)	
	DRG24	2006-2009	DRG Version 24 (effective October 2006 - September 2007)	
Discharge quarter	DQTR	1988-2009	Coded: (1) First quarter, Jan - Mar, (2) Second quarter, Apr - Jun, (3) Third quarter, Jul - Sep, (4) Fourth quarter, Oct - Dec	
	DQTR_X	2006-2009	Discharge quarter, as received from data source	
Discharge weights (Weights for 1988-1993 are on Hospital Weights file)	DISCWT	1998-2009	Discharge weight on Core file and Hospital Weights file for NIS beginning in 1998. In all data years except 2000, this weight is used to create national estimates for all analyses. In 2000 only, this weight is used to create national estimates for all analyses, excluding those that involve total charges.	
	DISCWT_U	1993-1997	Discharge weight on Core file and Hospital Weights file for NIS prior to 1998	
	DISCWTcharge	2000	Discharge weight for national estimates of total charges. In 2000 only, this weight is used to create national estimates for analyses that involve total charges.	
	DISCWT10	1998-2004	Discharge weight on 10% subsample Core file for NIS from 1998 to 2004. In all data years except 2000, this weight is used to create national estimates for all analyses. In 2000 only, this weight is used to create national estimates for all analyses, excluding those that involve total charges.	
	D10CWT_U	1993-1997	Discharge weight on 10% subsample Core file for NIS prior to 1998	

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	DISCWTcharge10	2000	*Discharge weight for national estimates of total charges on 10% subsample file. In 2000 only, this weight is used to create national estimates for analyses that involve total charges.*	
Discharge year	YEAR	1988-2009		
Disposition of patient (discharge status)	DISP	1988-1997	*Disposition of patient, uniform coding used prior to 1998: (1) routine, (2) short-term hospital, (3) skilled nursing facility, (4) intermediate care facility, (5) another type of facility, (6) home health care, (7) against medical advice, (20) died*	
	DIED	1988-2009	Indicates in-hospital death: (0) did not die during hospitalization, (1) died during hospitalization	
	DISPUB92	1998-2006	*Disposition of patient, UB-92 coding: (1) routine, (2) short-term hospital, (3) skilled nursing facility, (4) intermediate care, (5) another type of facility, (6) home health care, (7) against medical advice, (8) home IV provider, (20) died in hospital, (40) died at home, (41) died in a medical facility, (42) died, place unknown, (43) alive, Federal health facility, (50) Hospice, home, (51) Hospice, medical facility, (61) hospital-based Medicare approved swing bed, (62) another rehabilitation facility, (63) long-term care hospital, (64) certified nursing facility, (65) psychiatric hospital, (66) critical access hospital (71) another institution for outpatient services, (72) this institution for outpatient services, (99) discharged alive, destination unknown*	

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	DISPUB04	2006-2009	Disposition of patient, UB04 standard coding: (1)Discharged to Home or Self Care (Routine Discharge), (2) Discharged/transferred to a Short-Term Hospital for Inpatient Care, (3) Discharged/transferred to a Skilled Nursing Facility (SNF), (4) Discharged/transferred to an Intermediate Care Facility (ICF), (5) Discharged/transferred to a Designated Cancer Center or Children's Hospital (Effective 10/1/07), (5) Discharged/transferred to another type of institution not defined elsewhere (Effective prior to 10/1/07), (6) Discharged/transferred to Home under care of Organized Home Health Service Organization, (7) Left Against Medical Advice or Discontinued Care, (8) home IV provider, (9) Admitted as an inpatient to this hospital - valid only on outpatient data, (20) Expired, (40) Expired at home, (41) Expired in a Medical Facility, (42) Expired - place unknown, (43) Discharged/transferred to a Federal Health Care Facility, (50) Hospice – Home, (51) Hospice - Medical Facility , (61) Discharged/transferred to a Hospital-Based Medicare approved Swing Bed, (62) Discharged/transferred to an Inpatient Rehabilitation Facility (IRF) including Rehabilitation Distinct part unit of a hospital, (63) Discharged/transferred to a Medicare certified Long Term Care Hospital (LTCH), (64) Discharged/transferred to a Nursing Facility certified by Medicaid, but not certified by Medicare, (65) Discharged/transferred to a Psychiatric Hospital or Psychiatric distinct part unit of a hospital, (66) Discharged/transferred to a Critical Access Hospital (CAH), (70) Discharged/transferred to another type of institution not defined elsewhere (Effective 10/1/07), (71) Another institution for outpatient services, (72) This institution for outpatient services, (99) Discharged alive, destination unknown	CA, MD, ME

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	DISPUNIFORM	1998-2009	Disposition of patient, uniform coding used beginning in 1998: (1) routine, (2) transfer to short-term hospital, (5) other transfers, including skilled nursing facility, intermediate care, and another type of facility, (6) home health care, (7) against medical advice, (20) died in hospital, (99) discharged alive, destination unknown	
External causes of injury and poisoning	ECODE1 - ECODE4	2003-2009	External cause of injury and poisoning code, primary and secondary (ICD-9-CM). Beginning in 2003, external cause of injury codes are stored in a separate array ECODEn from the diagnosis codes in the array DXn. Prior to 2003, these codes are contained in the diagnosis array (DXn).	
	E_CCS1 - E_CCS4	2003-2009	CCS category for the external cause of injury and poisoning codes	
	NECODE	2003-2009	Number of external cause of injury codes on the original record. A maximum of 4 codes are retained on the NIS.	
Gender of patient	FEMALE	1998-2009	Indicates gender for NIS beginning in 1998: (0) male, (1) female	
	SEX	*1988-1997*	*Indicates gender for NIS prior to 1998: (1) male, (2) female*	
Hospital Information	DSHOSPID	1988-2009	Hospital number as received from the data source	GA, HI, IN, KS, LA, ME, MI, MO, NE, NM, OH, OK, SC, SD, TN, TX, WY
	HOSPID	1988-2009	HCUP hospital number (links to Hospital Weights file)	
	HOSPST	1988-2009	State postal code for the hospital (e.g., AZ for Arizona)	
	HOSPSTCO	*1988-2002*	*Modified Federal Information Processing Standards (FIPS) State/county code for the hospital links to Area Resource File (available from the Bureau of Health Professions, Health Resources and Services Administration). Beginning in 2003, this data element is available only on the Hospital Weights file.*	
	NIS_STRATUM	1998-2009	Stratum used to sample hospitals, based on geographic region, control, location/teaching status, and bed size. Stratum information is also contained in the Hospital Weights file.	

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
Indicates Emergency Department service	HCUP_ED	2007-2009	Indicator that discharge record includes evidence of emergency department (ED) services: (0) Record does not meet any HCUP Emergency Department criteria, (1) Emergency Department revenue code on record, (2) Positive Emergency Department charge (when revenue center codes are not available), (3) Emergency Department CPT procedure code on record, (4) Admission source of ED, (5) State-defined ED record; no ED charges available	
Indicates in-hospital birth	HOSPBRTH	2006-2009	Indicator that discharge record includes diagnosis of birth that occurred in the hospital: (0) Not an in-hospital birth, (1) In-hospital birth	
Length of stay	LOS	1988-2009	Length of stay, edited	
	LOS_X	1988-2009	Length of stay, as received from data source	ME
Location of the patient	PL_UR_CAT4	2003-2006	*Urban–rural designation for patient's county of residence: (1) large metropolitan, (2) small metropolitan, (3) micropolitan, (4) non-metropolitan or micropolitan*	
	PL_NCHS2006	2007-2009	Patient Location: NCHS Urban-Rural Code (V2006). This is a six-category urban-rural classification scheme for U.S. counties: (1) "Central" counties of metro areas of >=1 million population,(2) "Fringe" counties of metro areas of >=1 million population,(3) Counties in metro areas of 250,000-999,999 population,(4) Counties in metro areas of 50,000-249,999 population,(5) Micropolitan counties,(6) Not metropolitan or micropolitan counties	MA
Major Diagnosis Category (MDC)	MDC	1988-2009	MDC in use on discharge date	
	MDC_noPOA	2009	MDC in use on discharge date, calculated without Present on Admission (POA) indicators	
	MDC10	1988-1999	*MDC Version 10 (effective October 1992 - September 1993)*	
	MDC18	1998-2005	*MDC Version 18 (effective October 2000 - September 2001)*	
	MDC24	2006-2009	MDC Version 24 (effective October 2006 - September 2007)	

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
Median household income for patient's ZIP Code	ZIPINC_QRTL	2003-2009	Median household income quartiles for patient's ZIP Code. For 2008, the median income quartiles are defined as: (1) $1 - $38,999; (2) $39,000 - $47,999; (3) $48,000 - 62,999; and (4) $63,000 or more.	
	ZIPINC	1998-2002	Median household income category in files beginning in 1998: (1) $1-$24,999, (2) $25,000-$34,999, (3) $35,000-$44,999, (4) $45,000 and above	
	ZIPINC4	1988-1997	Median household income category in files prior to 1998: (1) $1-$25,000, (2) $25,001-$30,000, (3) $30,001-$35,000, (4) $35,001 and above	
	ZIPINC8	1988-1997	Median household income category in files prior to 1998: (1) $1-$15,000, (2) $15,001-$20,000, (3) $20,001-$25,000, (4) $25,001-$30,000, (5) $30,001-$35,000, (6) $35,001-$40,000, (7) $40,001-$45,000, (8) $45,001 or more	
Neonatal/ maternal flag	NEOMAT	1988-2009	Assigned from diagnoses and procedure codes: (0) not maternal or neonatal, (1) maternal diagnosis or procedure, (2) neonatal diagnosis, (3) maternal and neonatal on same record	
Payer information	PAY1	1988-2009	Expected primary payer, uniform: (1) Medicare, (2) Medicaid, (3) private including HMO, (4) self-pay, (5) no charge, (6) other	
	PAY1_N	1988-1997	Expected primary payer, nonuniform: (1) Medicare, (2) Medicaid, (3) Blue Cross, Blue Cross PPO, (4) commercial, PPO, (5) HMO, PHP, etc., (6) self-pay, (7) no charge, (8) Title V, (9) Worker's Compensation, (10) CHAMPUS, CHAMPVA, (11) other government, (12) other	
	PAY1_X	1998-2009	Expected primary payer, as received from the data source	ME
	PAY2	1988-2009	Expected secondary payer, uniform: (1) Medicare, (2) Medicaid, (3) private including HMO, (4) self-pay, (5) no charge, (6) other	AZ, CA, CO, FL, HI, IA, NH, OH, OK, RI, SD, VA

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable In 2009 for:
	PAY2_N	1988-1997	Expected secondary payer, nonuniform: (1) Medicare, (2) Medicaid, (3) Blue Cross, Blue Cross PPO, (4) commercial, PPO, (5) HMO, PHP, etc., (6) self-pay, (7) no charge, (8) Title V, (9) Worker's Compensation, (10) CHAMPUS, CHAMPVA, (11) other government, (12) other	
	PAY2_X	1998-2009	Expected secondary payer, as received from the data source	AZ, CA, CO, FL, HI, IA, ME, NH, OH, OK, RI, SD, VA
Physician Identifiers, synthetic	MDID_S	1988-2000	Synthetic attending physician number in files prior to 2001	
	MDNUM1_R	2003-2009	Re-identified attending physician number in files starting in 2003	CA, CT, HI, IL, IN, LA, MA, NC, OH, OK, UT, VT, WI, WV
	MDNUM1_S	2001-2002	Synthetic attending physician number in files beginning in 2001 and discontinued in 2003	
	SURGID_S	1988-2000	Synthetic primary surgeon number in files prior to 2001	
	MDNUM2_R	2003-2009	Re-identified secondary physician number in files starting in 2003	CA, CT, HI, IL, IN, LA, MA, NC, OH, OK, UT, VT, WI, WV
	MDNUM2_S	2001-2002	Synthetic secondary physician number in files beginning in 2001 and discontinued in 2003	
Procedure Information	PR1 - PR15	1988-2009	Procedures, principal and secondary (ICD-9-CM)	
	NPR	1988-2009	Number of procedures coded on the original record	
	ORPROC	2009	Major operating room procedure indicator: (0) no major operating room procedure, (1) major operating room procedure	
	DSNPR	1988-1997	Number of procedure fields in this data source	
	PRSYS	1988-1997	Procedure system (1) ICD-9-CM, (2) CPT-4, (3) HCPCS/CPT-4	
	PRV1 -PRV15	1988-1997	Procedure validity flag: (0) Indicates a valid and consistent procedure code, (1) Indicates an invalid code for the discharge date	

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	PRDAY1	1988-2009	Number of days from admission to principal procedure.	OH, OK, UT, WV
	PRDAY2 - PRDAY15	1998-2009	Number of days from admission to secondary procedures	CO, IN, OH, OK, UT, VA, WI, WV
Race of patient	RACE	1988-2009	Race, uniform coding: (1) white, (2) black, (3) Hispanic, (4) Asian or Pacific Islander, (5) Native American, (6) other	MN, NC, OH, WV
Record identifier, synthetic	KEY	1998-2009	Unique record number for file beginning in 1998	
	SEQ	1988-1997	Unique record number for NIS prior to 1998	
	SEQ_SID	1994-1997	Unique record number for NIS and SID prior to 1998	
	PROCESS	1988-1997	Processing number for NIS prior to 1998	
Total charges	TOTCHG	1988-2009	Total charges, edited	
	TOTCHG_X	1988-2009	Total charges, as received from data source	ME

Return to Introduction

Table 2. Data Elements in the NIS Hospital Weights Files

Data elements that are *italicized* are not included in the 2008 NIS Hospital Weights File, but are only available in previous years' files.

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
Discharge counts	N_DISC_U	1988-2009	Number of AHA universe discharges in the stratum	
	S_DISC_U	1988-2009	Number of sampled discharges in the sampling stratum (NIS_STRATUM or STRATUM)	
	S_DISC_S	*1988-1997*	*Number of sampled discharges in the stratum STRAT_ST*	
	N_DISC_F	*1988-1997*	*Number of frame discharges in the stratum*	
	N_DISC_S	*1988-1997*	*Number of State's discharges in the stratum*	
	TOTAL_DISC	1998-2009	Total number of discharges from this hospital in the NIS	
	TOTDSCHG	*1988-1997*	*Total number of discharges from this hospital in the NIS*	
Discharge weights	DISCWT	1998-2009	Discharge weight used in the NIS beginning in 1998. In all data years except 2000, this weight is used to create national estimates for all analyses. In 2000 only, this weight is used to create national estimates for all analyses, excluding those that involve total charges.	
	DISCWT_U	*1988-1997*	*Discharge weights used in the NIS prior to 1998.*	
	DISCWT_F	*1988-1997*	*Discharge weights to the sample frame are available only in 1988-1997*	
	DISCWT_S	*1988-1997*	*Discharge weights to the State are available only in 1988-1997*	
	DISCWTcharge	*2000*	*Discharge weight for national estimates of total charges for 2000 only.*	
Discharge Year	YEAR	1988-2009	Discharge year	
Hospital counts	*N_HOSP_F*	*1988-1997*	*Number of frame hospitals in the stratum*	
	N_HOSP_S	*1988-1997*	*Number of State's hospitals in the stratum*	
	N_HOSP_U	1988-2009	Number of AHA universe hospitals in the stratum	
	S_HOSP_S	*1988-1997*	*Number of sampled hospitals in STRAT_ST*	
	S_HOSP_U	1988-2009	Number of sampled hospitals in the stratum (NIS_STRATUM or STRATUM)	
Hospital identifiers	HOSPID	1988-2009	HCUP hospital number (links to Inpatient Core files)	
	AHAID	1988-2009	AHA hospital identifier that matches AHA Annual Survey Database (not available for all States)	GA, HI, IN, KS, LA, ME, MI, MO, NE, NM, OH, OK, SC, SD, TN, TX, WY

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	IDNUMBER	1988-2009	AHA hospital identifier without the leading 6 (not available for all States)	GA, HI, IN, KS, LA, ME, MI, MO, NE, NM, OH, OK, SC, SD, TN, TX, WY
	HOSPNAME	1993-2009	Hospital name from AHA Annual Survey Database (not available for all States)	AR, GA, HI, IN, KS, LA, ME, MI, MO, NE, NM, OH, OK, SC, SD, TN, TX, WY
Hospital location	HOSPADDR	1993-2009	Hospital address from AHA Annual Survey Database (not available for all States)	AR, GA, HI, IN, KS, LA, ME, MI, MO, NE, NM, OH, OK, SC, SD, TN, TX, WY
	HOSPCITY	1993-2009	Hospital city from AHA Annual Survey Database (not available for all States)	AR, GA, HI, IN, KS, LA, ME, MI, MO, NE, NM, OH, OK, SC, SD, TN, TX, WY
	HOSPST	1988-2009	Hospital State postal code for hospital (e.g., AZ for Arizona)	
	HOSPSTCO	2002-2009	Modified Federal Information Processing Standards (FIPS) State/county code	GA, HI, IN, KS, LA, ME, MI, MO, NE, NM, OH, OK, SC, SD, TN, TX, WY
	HFIPSSTCO	2005-2009	Unmodified Federal Information Processing Standards (FIPS) State/county code for the hospital. Links to the Area Resource File (available from the Bureau of Health Professions, Health Resources and Services Administration)	GA, HI, IN, KS, LA, ME, MI, MO, NE, NM, OH, OK, SC, SD, TN, TX, WY
	HOSPZIP	1993-2009	Hospital ZIP Code from AHA Annual Survey Database (not available for all States)	AR, GA, HI, IN, KS, LA, ME, MI, MO, NE, NM, OH, OK, SC, SD, TN, TX, WY
Hospital characteristics	HOSP_BEDSIZE	1998-2009	Bed size of hospital (STRATA): (1) small, (2) medium, (3) large	
	H_BEDSZ	1993-1997	Bed size of hospital: (1) small, (2) medium, (3) large	

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	ST_BEDSZ	1988-1992	Bed size of hospital: (1) small, (2) medium, (3) large	
	HOSP_CONTROL	1998-2009	Control/ownership of hospital, collapsed (STRATA): (0) government or private, collapsed category, (1) government, nonfederal, public, (2) private, non-profit, voluntary, (3) private, invest-own, (4) private, collapsed category	
	H_CONTRL	1993-1997, 2008-2009	Control/ownership of hospital: (1) government, nonfederal (2) private, non-profit (3) private, investor-own	
	ST_OWNER	1988-1992	Control/ownership of hospital: (1) public (2) private, non-profit (3) private for profit	
	HOSP_LOCATION	1998-2009	Location: (0) rural, (1) urban	
	H_LOC	1993-1997	Location: (0) rural, (1) urban	
	HOSP_LOCTEACH	1998-2009	Location/teaching status of hospital (STRATA): (1) rural, (2) urban non-teaching, (3) urban teaching	
	HOSP_MHSMEMBER	2007-2009	Multi-hospital system membership: (0) non-member, (1) member	CO, CT, SC
	HOSP_MHSCLUSTER	2007-2009	Multi-hospital system cluster code: (1) centralized health system, (2) centralized physician/insurance health system, (3) moderately centralized health system, (4) decentralized health system, (5) independent hospital system, (6) unassigned	CO, CT, SC
	HOSP_RNPCT	2007-2009	Percentage of RNs among all nurses (RNs and LPNs)	CO, CT, GA, SC
	HOSP_RNFTEAPD	2007-2009	RN FTEs per 1000 adjusted inpatient days	CO, CT, GA, SC
	HOSP_LPNFTEAPD	2007-2009	LPN FTEs per 1000 adjusted inpatient days	CO, CT, GA, SC
	HOSP_NAFTEAPD	2007-2009	Nurse aides per 1000 adjusted inpatient days	CO, CT, GA, SC
	HOSP_OPSURGPCT	2007-2009	Percentage of all surgeries performed in outpatient setting	CO, CT
	H_LOCTCH	1993-1997	Location/teaching status of hospital: (1) rural, (2) urban non-teaching, (3) urban teaching	
	LOCTEACH	1988-1992	Location/teaching status of hospital: (1) rural, (2) urban non-teaching, (3) urban teaching	
	HOSP_REGION	1998-2009	Region of hospital (STRATA): (1) Northeast, (2) Midwest, (3) South, (4) West	
	H_REGION	1993-1997	Region of hospital: (1) Northeast, (2) Midwest, (3) South, (4) West	
	ST_REG	1988-1992	Region of hospital: (1) Northeast, (2) Midwest, (3) South, (4) West	

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes	Unavailable in 2009 for:
	HOSP_TEACH	1998-2009	Teaching status of hospital: (0) non-teaching, (1) teaching	
	H_TCH	*1993-1997*	*Teaching status of hospital: (0) non-teaching, (1) teaching*	
	NIS_STRATUM	1988-2009	Stratum used to sample hospitals beginning in 1998; includes geographic region, control, location/teaching status, and bed size	
	STRATUM	*1988-1997*	*Stratum used to sample hospitals prior to 1998; includes geographic region, control, location/teaching status, and bed size*	
	STRAT_ST	*1988-1997*	*Stratum for State-specific weights*	
Hospital weights	HOSPWT	1998-2009	Weight to hospitals in AHA universe (i.e., total U.S.) beginning in 1998	
	HOSPWT_U	*1988-1997*	*Weight to hospitals in AHA universe (i.e., total U.S.) prior to 1998*	
	HOSPWT_F	*1988-1997*	*Weight to hospitals in the sample frame*	
	HOSPWT_S	*1988-1997*	*Weight to hospitals in the State*	

Return to Introduction

Table 3. Data Elements in the NIS Disease Severity Measures Files [1]

All data elements listed below are available for all States in the 2009 NIS Disease Severity Measures files.

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes
AHRQ Comorbidity Software (AHRQ)	CM_AIDS	2002-2009	AHRQ comorbidity measure: Acquired immune deficiency syndrome : (0) Comorbidity is not present, (1) Comorbidity is present
	CM_ALCOHOL	2002-2009	AHRQ comorbidity measure: Alcohol abuse: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_ANEMDEF	2002-2009	AHRQ comorbidity measure: Deficiency anemias : (0) Comorbidity is not present, (1) Comorbidity is present
	CM_ARTH	2002-2009	AHRQ comorbidity measure: Rheumatoid arthritis/collagen vascular diseases : (0) Comorbidity is not present, (1) Comorbidity is present
	CM_BLDLOSS	2002-2009	AHRQ comorbidity measure: Chronic blood loss anemia: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_CHF	2002-2009	AHRQ comorbidity measure: Congestive heart failure: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_CHRNLUNG	2002-2009	AHRQ comorbidity measure: Chronic pulmonary disease: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_COAG	2002-2009	AHRQ comorbidity measure: Coagulopathy: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_DEPRESS	2002-2009	AHRQ comorbidity measure: Depression: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_DM	2002-2009	AHRQ comorbidity measure: Diabetes, uncomplicated: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_DMCX	2002-2009	AHRQ comorbidity measure: Diabetes with chronic complications: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_DRUG	2002-2009	AHRQ comorbidity measure: Drug abuse: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_HTN_C	2002-2009	AHRQ comorbidity measure: Hypertension, (combine uncomplicated and complicated): (0) Comorbidity is not present, (1) Comorbidity is present
	CM_HYPOTHY	2002-2009	AHRQ comorbidity measure: Hypothyroidism: (0) Comorbidity is not present, (1) Comorbidity is present

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes
	CM_LIVER	2002-2009	AHRQ comorbidity measure: Liver disease: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_LYMPH	2002-2009	AHRQ comorbidity measure: Lymphoma : (0) Comorbidity is not present, (1) Comorbidity is present
	CM_LYTES	2002-2009	AHRQ comorbidity measure: Fluid and electrolyte disorders: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_METS	2002-2009	AHRQ comorbidity measure: Metastatic cancer: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_NEURO	2002-2009	AHRQ comorbidity measure: Other neurological disorders: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_OBESE	2002-2009	AHRQ comorbidity measure: Obesity: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_PARA	2002-2009	AHRQ comorbidity measure: Paralysis: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_PERIVASC	2002-2009	AHRQ comorbidity measure: Peripheral vascular disorders: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_PSYCH	2002-2009	AHRQ comorbidity measure: Psychoses: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_PULMCIRC	2002-2009	AHRQ comorbidity measure: Pulmonary circulation disorders: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_RENLFAIL	2002-2009	AHRQ comorbidity measure: Renal failure: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_TUMOR	2002-2009	AHRQ comorbidity measure: Solid tumor without metastasis : (0) Comorbidity is not present, (1) Comorbidity is present
	CM_ULCER	2002-2009	AHRQ comorbidity measure: Peptic ulcer disease excluding bleeding: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_VALVE	2002-2009	AHRQ comorbidity measure: Valvular disease: (0) Comorbidity is not present, (1) Comorbidity is present
	CM_WGHTLOSS	2002-2009	AHRQ comorbidity measure: Weight loss: (0) Comorbidity is not present, (1) Comorbidity is present

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes
All Patient Refined DRG (3M)	APRDRG	2002-2009	All Patient Refined DRG
	APRDRG_Risk_Mortality	2002-2009	All Patient Refined DRG: Risk of Mortality Subclass: (0) No class specified,(1) Minor likelihood of dying,(2) Moderate likelihood of dying,(3) Major likelihood of dying,(4) Extreme likelihood of dying
	APRDRG_Severity	2002-2009	All Patient Refined DRG: Severity of Illness Subclass: (0) No class specified,(1) Minor loss of function (includes cases with no comorbidity or complications),(2) Moderate loss of function,(3) Major loss of function,(4)Extreme loss of function
All-Payer Severity-adjusted DRG (HSS, Inc.)	APSDRG	2002-2009	All-Payer Severity-adjusted DRG
	APSDRG_Mortality_Weight	2002-2009	All-Payer Severity-adjusted DRG: Mortality Weight
	APSDRG_LOS_Weight	2002-2009	All-Payer Severity-adjusted DRG: Length of Stay Weight
	APSDRG_Charge_Weight	2002-2009	All-Payer Severity-adjusted DRG: Charge Weight
Disease Staging (Medstat)	DS_DX_Category1	2002-2009	Disease Staging: Principal Disease Category
	DS_Stage1	2002-2009	Disease Staging: Stage of Principal Disease Category
	DS_LOS_Level	2002-2007	Disease Staging: Length of Stay Level: (1) Very low (less than 5% of patients),(2) Low (5 - 25% of patients),(3) Medium (25 - 75% of patients),(4) High (75 - 95% of patients),(5) Very high (greater than 95% of patients)
	DS_LOS_Scale	2002-2007	Disease Staging: Length of Stay Scale
	DS_Mrt_Level	2002-2007	Disease Staging: Mortality Level: (0) Extremely low - excluded from percentile calculation (mortality probability less than .0001), (1) Very low (less than 5% of patients), (2) Low (5 - 25% of patients), (3) Medium (25 - 75% of patients), (4) High (75 - 95% of patients), (5) Very high (greater than 95% of patients)
	DS_Mrt_Scale	2002-2007	Disease Staging: Mortality Scale
	DS_RD_Level	2002-2007	Disease Staging: Resource Demand Level : (1) Very low (less than 5% of patients),(2) Low (5 - 25% of patients),(3) Medium (25 - 75% of patients),(4) High (75 - 95% of patients),(5) Very high (greater than 95% of patients)
	DS_RD_Scale	2002-2007	Disease Staging: Resource Demand Scale
Linkage Variables	HOSPID	2002-2009	HCUP hospital identification number
	KEY	2002-2009	HCUP record identifier

Return to Introduction

Table 4. Data Elements In the NIS Diagnosis and Procedure Groups Files

All data elements listed below are available for all States in the 2009 NIS Diagnosis and Procedure Groups files.

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes
Clinical Classifications Software category for Mental Health and Substance Abuse (CCS-MHSA)	CCSMGN1 – CCSMGN15	2005-2006	CCS-MHSA general category for all diagnoses
	CCSMSP1 – CCSMSP15	2005-2006	CCS-MHSA specific category for all diagnoses
	ECCSMGN1 – ECCSMGN4	2005-2006	CCS-MHSA general category for all external cause of injury codes
Chronic Condition Indicator	CHRON1 – CHRON25	2005-2009	Chronic condition indicator for all diagnoses: (0) non-chronic condition, (1) chronic condition. Beginning in 2009, the diagnosis array was increased from 15 to 25.
	CHRONB1 – CHRONB25	2005-2009	Chronic condition indicator body system for all diagnoses: (1) Infectious and parasitic disease, (2) Neoplasms, (3) Endocrine, nutritional, and metabolic diseases and immunity disorders, (4) Diseases of blood and blood-forming organs, (5) Mental disorders, (6) Diseases of the nervous system and sense organs, (7) Diseases of the circulatory system, (8) Diseases of the respiratory system, (9) Diseases of the digestive system, (10) Diseases of the genitourinary system, (11) Complications of pregnancy, childbirth, and the puerperium, (12) Diseases of the skin and subcutaneous tissue, (13) Diseases of the musculoskeletal system, (14) Congenital anomalies, (15) Certain conditions originating in the perinatal period, (16) Symptoms, signs, and ill-defined conditions, (17) Injury and poisoning, (18) Factors influencing health status and contact with health services. Beginning in 2009, the diagnosis array was increased from 15 to 25.
Multi-Level Clinical Classifications Software (CCS) Category	DXMCCS1	2009	Multi-level clinical classification software (CCS) for principal diagnosis. Four levels for diagnoses presenting both the general groupings and very specific conditions
	E_MCCS1	2009	Multi-level clinical classification software (CCS) for first listed E Code. Four levels for E codes presenting both the general groupings and very specific conditions
	PRMCCS1	2009	Multi-level clinical classification software (CCS) for principal procedure. Three levels for procedures presenting both the general groupings and very specific conditions
Procedure Class	PCLASS1 – PCLASS15	2005-2009	Procedure Class for all procedures: (1) Minor Diagnostic, (2) Minor Therapeutic, (3) Major Diagnostic, (4) Major Therapeutic
Linkage	HOSPID	2002-2009	HCUP hospital identification number

Type of Data Element	HCUP Variable Name	Years Available	Coding Notes
Variables	KEY	2002-2009	HCUP record identifier

Return to Introduction