

## **CMS 2010 Basic Stand Alone (BSA) Outpatient Procedures Public Use File (PUF)**

### **Data Dictionary and Codebook**

This is a profile-level file with the following variables. See the General Documentation for an overview of file contents, data source, information about exclusions, and analytic utility.

#### **BENE\_SEX\_IDENT\_CD**

This field indicates the sex of the beneficiary.

<b>Variable Value</b>	<b>Formatted Value</b>	<b>Frequency</b>	<b>Frequency (%)</b>
1	Male	14,310,823	42.591
2	Female	19,289,371	57.409

Note: Percentages may not add up to 100% due to rounding.

#### **BENE\_AGE\_CAT\_CD**

This categorical variable is based on the beneficiary's age at end of the reference year (2010). In the event the beneficiary died during the reference year, the age at the date of death is used.

<b>Variable Value</b>	<b>Formatted Value</b>	<b>Frequency</b>	<b>Frequency (%)</b>
1	Under 65	8,895,586	26.495
2	65 - 69	5,040,196	14.971
3	70 - 74	5,233,686	15.576
4	75 - 79	4,758,921	14.163
5	80 - 84	4,386,169	13.054
6	85 & Older	5,895,636	15.761

Note: Percentages may not add up to 100% due to rounding.

#### **OP\_CLM\_ICD9\_DIAG\_CD**

The ICD-9-CM code indicates the primary diagnosis code associated with the claim. ICD-9-CM diagnosis codes are provided at the three-character level by truncation of the ICD9\_DGNS\_CD\_1. These codes serve to classify diagnosis of disease. Actual ICD-9-CM diagnosis codes (ICD9\_DGNS\_CD\_1) in Medicare outpatient claims include up to five digits. There are

869 unique ICD-9 diagnosis codes in the PUF. The frequencies by ranges of ICD-9 diagnosis codes are provided below.

<b>Variable Value Range<sup>(1)</sup></b>	<b>Formatted Value</b>	<b>Frequency</b>	<b>Frequency (%)</b>
	Missing/Unknown	66	0.000
001 - 139	Infectious and parasitic diseases	238,860	0.711
140 - 239	Neoplasms	1,461,467	4.350
240 - 279	Endocrine, nutritional and metabolic diseases, and immunity disorders	2,781,991	8.280
280 - 289	Diseases of the blood and blood-forming organs	915,169	2.724
290 - 319	Mental disorders	749,151	2.230
320 - 389	Diseases of the nervous system and sense organs	758,335	2.257
390 - 459	Diseases of the circulatory system	3,797,393	11.302
460 - 519	Diseases of the respiratory system	965,649	2.874
520 - 579	Diseases of the digestive system	778,574	2.317
580 - 629	Diseases of the genitourinary system	8,262,801	24.592
630 - 679	Complications of pregnancy, childbirth, and the puerperium	12,996	0.039
680 - 709	Diseases of the skin and subcutaneous tissue	369,163	1.099
710 - 739	Diseases of the musculoskeletal system and connective tissue	3,089,153	9.194
740 - 759	Congenital anomalies	15,151	0.045
760 - 779	Certain conditions originating in the perinatal period	1	0.000
780 - 799	Symptoms, signs, and ill-defined conditions	4,326,261	12.876
800 - 999	Injury and poisoning	1,154,181	3.435
V codes	Supplementary Classification Of Factors Influencing Health Status And Contact With Health Services	3,923,832	11.678

Note: Percentages may not add up to 100% due to rounding.

(1) Not all values in a range may appear in the PUF.

The ten most frequent 3-digit ICD-9 diagnosis codes and their frequencies are provided below.

<b>Variable Value</b>	<b>Formatted Value</b>	<b>Frequency</b>	<b>Frequency (%)</b>
585	Chronic renal failure	7,225,070	21.503
V58	Encounter for other and unspecified procedures and aftercare	1,220,406	3.632
786	Symptoms involving respiratory system and other chest symptoms	1,180,931	3.515
V57	Care involving use of rehabilitation procedures	1,146,467	3.412
250	Diabetes mellitus	1,127,662	3.356
401	Essential hypertension	1,098,266	3.269
780	General symptoms	965,211	2.873
272	Disorders of lipid metabolism	851,782	2.535
427	Cardiac dysrhythmias	748,169	2.227
719	Other and unspecified disorders of joint	720,716	2.145
-	All other values	17,315,514	51.534

Note: Percentages may not add up to 100% due to rounding.

### **OP\_HCPCS\_CD**

The outpatient claims file uses Healthcare Common Procedure Coding System (HCPCS) codes to identify procedures. HCPCS is divided into two subsystems: (1) HCPCS Level I codes are numeric Current Procedural Terminology (CPT) codes that identify medical services and procedures furnished by physicians and (2) HCPCS Level II codes are alpha-numeric codes that identify products, supplies, and services not included in the CPT codes (such as drugs and biological or durable medical equipment). There are 3,867 unique HCPCS codes in the PUF. The ten most frequent HCPCS codes and their frequencies are listed below.

<b>Variable Value</b>	<b>Frequency</b>	<b>Frequency (%)</b>
36415	2,091,040	6.223
90999	1,971,246	5.867
97110	1,600,020	4.762
A4657	1,501,133	4.468
Q4081	1,360,653	4.050
85025	1,258,721	3.746
80053	978,438	2.912

Variable Value	Frequency	Frequency (%)
J2501	893,088	2.658
85610	849,395	2.528
97530	709,211	2.111
All other values	20,387,249	60.676

Note: Percentages may not add up to 100% due to rounding.

### OP\_HCPCS\_UNIT\_CNT

This variable provides the count of total number of units/services of a particular procedure (such as outpatient therapy visits and clinical diagnostic laboratory tests) that was administered. It is based on the REV\_CNTR\_UNIT\_CNT variable in the Medicare Outpatient claims file. The frequencies by ranges are provided below.

Variable Value Range	Frequency	Frequency (%)
0 - 99	32,886,904	97.877
100 - 199	561,515	1.671
200 - 299	131,429	0.391
300 - 399	9,379	0.028
400 - 499	7,089	0.021
500 - 599	2,401	0.007
600 or more	1,477	0.004

### OP\_HCPCS\_PMT\_AMT

This field contains the payment made by Medicare for the procedure. It is based on REV\_CNTR\_PMT\_AMT\_AMT in the outpatient claims file. Please refer to the General Documentation for details of the rounding rules.

Variable Value <sup>(1)</sup> (\$)	Frequency	Frequency (%)
0	5,566,547	16.567
10	8,846,757	26.329
20	5,372,986	15.991
30	2,489,147	7.408

<b>Variable Value<sup>(1)</sup> (\$)</b>	<b>Frequency</b>	<b>Frequency (%)</b>
40	1,606,761	4.782
50	1,842,958	5.485
60	1,246,238	3.709
70	857,369	2.552
80	513,981	1.53
90	397,715	1.184
100	1,669,546	4.969
150	1,662,759	4.949
200	417,757	1.243
250	162,641	0.484
300	147,623	0.439
350	160,648	0.478
400	102,427	0.305
450	82,706	0.246
500	71,324	0.212
550	56,696	0.169
600	45,060	0.134
650	19,619	0.058
700	15,795	0.047
750	10,203	0.03
800	13,276	0.04
850	13,909	0.041
900	7,558	0.022
950	5,865	0.017
1,000	9,827	0.029
1,100	22,596	0.067
1,200	16,559	0.049
1,300	13,839	0.041
1,400	9,900	0.029
1,500	8,330	0.025
1,600	10,506	0.031
1,700	11,605	0.035
1,800	11,197	0.033
1,900	13,234	0.039
2,000	8,465	0.025
2,100	5,708	0.017

<b>Variable Value<sup>(1)</sup> (\$)</b>	<b>Frequency</b>	<b>Frequency (%)</b>
2,200	3,868	0.012
2,300	4,848	0.014
2,400	3,855	0.011
2,500	3,364	0.01
2,600	3,363	0.01
2,700	2,378	0.007
2,800	1,739	0.005
2,900	811	0.002
3,000	1,120	0.003
3,100	735	0.002
3,200	1,470	0.004
3,300	921	0.003
3,400	516	0.002
3,500	646	0.002
3,600	950	0.003
3,700	766	0.002
3,800	364	0.001
3,900	408	0.001
4,000	513	0.002
4,100	483	0.001
4,200	298	0.001
4,300	348	0.001
4,400	334	0.001
4,500	554	0.002
4,600	641	0.002
4,700	468	0.001
4,800	563	0.002
4,900	383	0.001
5,000	607	0.002
5,100	440	0.001
5,200	354	0.001
5,300	534	0.002
5,400	378	0.001
5,500	392	0.001
5,600	469	0.001
5,700	712	0.002

<b>Variable Value<sup>(1)</sup> (\$)</b>	<b>Frequency</b>	<b>Frequency (%)</b>
5,800	484	0.001
5,900	836	0.002
6,000	556	0.002
6,100	539	0.002
6,200	656	0.002
6,300	375	0.001
6,400	337	0.001
6,500	389	0.001
6,600	232	0.001
6,700	174	0.001
6,800	169	0.001
6,900	130	0.000
7,000	206	0.001
7,100	51	0.000
7,200	146	0.000
7,300	60	0.000
7,400	95	0.000
7,500	71	0.000
7,600	181	0.001
7,700	129	0.000
7,800	179	0.001
7,900	146	0.000
8,000	71	0.000
8,100	159	0.000
8,200	207	0.001
8,300	136	0.000
8,400	150	0.000
8,500	101	0.000
8,600	102	0.000
8,700	216	0.001
8,800	98	0.000
8,900	66	0.000
9,000	49	0.000
9,100	108	0.000
9,200	89	0.000
9,300	84	0.000

<b>Variable Value<sup>(1)</sup> (\$)</b>	<b>Frequency</b>	<b>Frequency (%)</b>
9,400	32	0.000
9,500	93	0.000
9,600	36	0.000
9,700	42	0.000
9,800	27	0.000
9,900	15	0.000
10,000	140	0.000
11,000	196	0.001
12,000	609	0.002
13,000	223	0.001
14,000	105	0.000
15,000	168	0.000
16,000	14	0.000
17,000	34	0.000
18,000	62	0.000
19,000	386	0.001
20,000	462	0.001
21,000	276	0.001
22,000	142	0.000
23,000	148	0.000
24,000	174	0.001
25,000	247	0.001
26,000	255	0.001
27,000	156	0.000
28,000	42	0.000
29,000	43	0.000
30,000	39	0.000
31,000	15	0.000
32,000	3	0.000
33,000	3	0.000

Note: Percentages may not add up to 100% due to rounding.

(1) Note that a Medicare payment amount between \$0 and \$4.99 is rounded to \$0 according to the rounding rules. Hence, the corresponding value for \$10 in the PUF is a value between \$5 and \$14.99 in the initial 5% sample file.



**PROC\_CNT**

This field contains the number of outpatient procedures associated with each profile. The sum of this variable (33,600,194) is the total number of procedures (defined by HCPCS codes) for a random sample of 5% FFS beneficiaries in 2010.