

Medicare Post-Acute Care Utilization - SNF Supplemental Data Dictionary

Variable Name	Term Name	Definition
YEAR	Year	The year of data.
YEAR_TYPE	Year Type	Identifies if the data is for calendar year (CY) or fiscal year (FY).
SMRY_CTGRY	Summary Category	Identifies if the data is at the national, state, or provider level.
SRVC_CTGRY	Service Category	Identifies the PAC setting: HH, hospice, SNF, IRF, or LTCH.
PRVDR_ID	Provider ID	The 6-digit CCN for the provider.
PRVDR_NAME	Facility Name	The provider name, as reported in the Provider of Services file.
PRVDR_CITY	City	The city where the provider is located, as reported in the Provider of Services file.
STATE	State	The state where the provider is located, as reported in Provider of Services file. The fifty U.S. states, the District of Columbia, and Puerto Rico are reported by their postal abbreviation. Note for national level, no state is reported.
PRVDR_ZIP	ZIP	The provider's ZIP code, as reported in the POS file. Note, for state and national levels, ZIP code is not reported.
TOT_PT_MNTS_STAY	Total Physical Therapy Minutes	Total number of physical therapy minutes administered to the resident during the stay by the SNF provider. Physical therapy minutes identified using O0425 in MDS.
INDVDL_PT_MNTS_STAY	Individual Physical Therapy Minutes	Number of physical therapy minutes administered to the resident individually during the stay by the SNF provider. Physical therapy minutes identified using O0425 in MDS.
CNCRNT_GRP_PT_MNTS_STAY	Concurrent and Group Physical Therapy Minutes	Number of physical therapy minutes administered to the resident concurrently with one other resident or a part of a group of residents during the stay by the SNF provider. Physical therapy minutes identified using O0425 in MDS.
TOT_OT_MNTS_STAY	Total Occupational Therapy Minutes	Total number of occupational therapy minutes administered to the resident during the stay by the SNF provider. Occupational therapy minutes identified using O0425 in MDS.
INDVDL_OT_MNTS_STAY	Individual Occupational Therapy Minutes	Number of occupational therapy minutes administered to the resident individually during the stay by the SNF provider. Occupational therapy minutes identified using O0425 in MDS.
CNCRNT_GRP_OT_MNTS_STAY	Concurrent and Group Occupational Therapy Minutes	Number of occupational therapy minutes administered to the resident concurrently with one other resident or a part of a group of residents during the stay by the SNF provider. Occupational therapy minutes identified using O0425 in MDS.
TOT_SLP_MNTS_STAY	Total Speech-Language Pathology Minutes	Total number of speech-language pathology therapy minutes administered to the resident during the stay by the SNF provider. Speech-language pathology therapy minutes identified using O0425 in MDS.

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INDVDL_SLP_MNTS_STAY	Individual Speech-Language Pathology Minutes	Number of speech-language pathology therapy minutes administered to the resident individually during the stay by the SNF provider. speech-language pathology therapy minutes identified using O0425 in MDS.
CNCRNT_GRP_SLP_MNTS_STAY	Concurrent and Group Speech-Language Pathology Minutes	Number of speech-language pathology therapy minutes administered to the resident concurrently with one other resident or a part of a group of residents during the stay by the SNF provider. Speech-language pathology therapy minutes identified using O0425 in MDS.
STAY_CLNCL_CTGRY_ACU_INF_PCT	Percent (%) of Stays with Acute Infection Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Acute Infection PDPM Clinical Category.
STAY_CLNCL_CTGRY_ACU_NEU_PCT	Percent (%) of Stays with Acute Neurologic Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Acute Neurological PDPM Clinical Category.
STAY_CLNCL_CTGRY_CNCR_PCT	Percent (%) of Stays with Cancer Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Cancer PDPM Clinical Category.
STAY_CLNCL_CTGRY_CRD_COAG_PCT	Percent (%) of Stays with Cardiovascular and Coagulations Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Cardiovascular and Coagulations PDPM Clinical Category.
STAY_CLNCL_CTGRY_MJR_SPN_PCT	Percent (%) of Stays with Major Joint Replacement or Spinal Surgery Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Major Joint Replacement or Spinal Surgery PDPM Clinical Category.
STAY_CLNCL_CTGRY_MED_MNG_PCT	Percent (%) of Stays with Medical Management Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Medical Management PDPM Clinical Category.

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STAY_CLNCL_CTGRY_NOORTH_SRGY_PCT	Percent (%) of Stays with Non-Orthopedic Surgery Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Non-Orthopedic Surgery PDPM Clinical Category.
STAY_CLNCL_CTGRY_ORTH_NOSRGY_PCT	Percent (%) of Stays with Orthopedic Non-Surgery Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Orthopedic Non-Surgery PDPM Clinical Category.
STAY_CLNCL_CTGRY_ORTH_SRGY_PCT	Percent (%) of Stays with Orthopedic Surgery Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Orthopedic Surgery PDPM Clinical Category.
STAY_CLNCL_CTGRY_PLMNRY_PCT	Percent (%) of Stays with Pulmonary Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Pulmonary PDPM Clinical Category.
STAY_DPRSN_MOOD_SCRE_PCT	Percent (%) of Stays with Depression Mood Score	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has a mood score indicating depression (D0160/D0600 in MDS of 10 or more, excluding 99).
STAY_SWLWG_DSRDR_PCT	Percent (%) of Stays with Swallowing Disorder	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I0020B) that maps to the Swallowing PDPM Clinical Category.
STAY_MLNTRN_PCT	Percent (%) of Stays with Malnutrition Clinical Category	Percent of SNF stays with a linked MDS PPS assessment (identified by A0310B not equal to "99" indicating any PPS assessment for a Medicare Part A Stay) that has an ICD-10-CM diagnosis for the resident's primary medical condition (I5600) that maps to the Malnutrition PDPM Clinical Category.
PDPM_PT_OT_TC_DAYS_PCT	Percent (%) of Days in SNF PDPM for Major Joint Replacement or Spinal Surgery, with functional score between 10 and 23	Percent of days with a HIPPS first position of "C" indicating Major Joint Replacement or Spinal Surgery, with functional score between 10 and 23. A Health Insurance Prospective Payment System (HIPPS) code represents a set of patient characteristics or case-mix on which payment determinations are made. The first position of the HIPPS code represents the Physical/Occupational Therapy payment group on a SNF claim.

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PDPM_PT_OT_TD_DAYS_PCT	Percent (%) of Days in SNF PDPM for Major Joint Replacement or Spinal Surgery, with functional score of 24	Percent of days with a HIPPS first position of "D" indicating Major Joint Replacement or Spinal Surgery, with functional score of 24. A Health Insurance Prospective Payment System (HIPPS) code represents a set of patient characteristics or case-mix on which payment determinations are made. The first position of the HIPPS code represents the Physical/Occupational Therapy payment group on a SNF claim.
PDPM_SLP_SK_DAYS_PCT	Percent (%) of Days in Presence of Acute Neurologic Condition, SLP Related Comorbidity, and Cognitive Impairment, with Either Mechanically Altered Diet or Swallowing Disorder	Percent of days with a HIPPS second position of "K" indicating Acute Neurologic Condition, SLP Related Comorbidity, and Cognitive Impairment, with Either Mechanically Altered Diet or Swallowing Disorder. A Health Insurance Prospective Payment System (HIPPS) code represents a set of patient characteristics or case-mix on which payment determinations are made. The second position of the HIPPS code represents the Speech-Language Pathology payment group on a SNF claim.
PDPM_SLP_SL_DAYS_PCT	Percent (%) of Days in SNF PDPM for Presence of Acute Neurologic Condition, SLP Related Comorbidity, and Cognitive Impairment, with Mechanically Altered Diet and Swallowing Disorder	Percent of days with a HIPPS second position of "L" indicating Acute Neurologic Condition, SLP Related Comorbidity, and Cognitive Impairment, with Mechanically Altered Diet and Swallowing Disorder. A Health Insurance Prospective Payment System (HIPPS) code represents a set of patient characteristics or case-mix on which payment determinations are made. The second position of the HIPPS code represents the Speech-Language Pathology payment group on a SNF claim.
PDPM_NRSNG_ES3_DAYS_PCT	Percent (%) of Days in SNF PDPM for Tracheostomy & Ventilator	Percent of days with a HIPPS third position of "A" indicating Tracheostomy & Ventilator. A Health Insurance Prospective Payment System (HIPPS) code represents a set of patient characteristics or case-mix on which payment determinations are made. The third position of the HIPPS code represents the Nursing payment group on a SNF claim.
PDPM_NRSNG_ES2_DAYS_PCT	Percent (%) of Days in SNF PDPM for Tracheostomy or Ventilator	Percent of days with a HIPPS third position of "B" indicating Tracheostomy or Ventilator. A Health Insurance Prospective Payment System (HIPPS) code represents a set of patient characteristics or case-mix on which payment determinations are made. The third position of the HIPPS code represents the Nursing payment group on a SNF claim.
PDPM_NTA_NA_DAYS_PCT	Percent (%) of Days in SNF PDPM for NTA Score of 12 or more	Percent of Days in SNF PDPM for Non-Therapy Ancillary Score of 12 or more Percent of days with a HIPPS fourth position of "A" indicating Non-Therapy Ancillary Score of 12 or more. A Health Insurance Prospective Payment System (HIPPS) code represents a set of patient characteristics or case-mix on which payment determinations are made. The fourth position of the HIPPS code represents the Non-Therapy Ancillary payment group on a SNF claim.

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PDPM_NTA_NB_DAYS_PCT	Percent (%) of Days in SNF PDPM for NTA Score between 9-11 PDPM	Percent of days with a HIPPS fourth position of "B" indicating Non-Therapy Ancillary Score of 9-11. A Health Insurance Prospective Payment System (HIPPS) code represents a set of patient characteristics or case-mix on which payment determinations are made. The fourth position of the HIPPS code represents the Non-Therapy Ancillary payment group on a SNF claim.