

Nebraska Hospitals and Ambulatory Surgery Centers Data Dictionary.					
This precise format is necessary					
CSV text					
#	Variable Name	Variable Label/Code	Data Type	Length	Rules for consistency
REQUIRED:					
1	FACILITY	Hospital/Ambulatory Surgery Center name. Full name of Hospital/Ambulatory Surgery Center.	char	35	Row one of the text file may have the field names as column headings but should not have a case record Column A, repeat for each record starting with row 2
2	LICENSE	License number issued by Nebraska DHHS alpha-numeric 10 characters	char	10	Column B, repeat for each record starting with row 2, numeric only
3	CHARGES	Facility portion of billed charges associated with primary procedure performed. Facility portion of billed charges should not include professional fees. 18 digits numeric unsigned 15 positions for whole dollar, 1 position for decimal and 2 positions for cents.	char	18	Column C, no \$ sign, no comma separator, numeric only, use decimal point and "00" if whole dollar charge. No need for leading zeros.
4	COUNTY	County Name (Residence)	char	35	Column D, Leave blank if unknown
5	STATE	Patient State Code (Residence). Two letters postal code of the state name	char	2	Column E, two letter postal code only
6	ZIP5	5-Digit Patient Zip Code (Residence) 5-Digits numeric zip code	char	5	Column F, 5 digit only
7	PROC	Primary outpatient surgical procedure performed for each patient encounter at the facility, reported by Current Procedural Terminology (CPT) codes or Health Care Financing Administration Common Procedure Coding System (HCPCS) codes Procedure codes. Refer to CPT or HCPCS coding manual	char	5	Column G, alpha-numeric
8	PAYERCD	Payer Code 1 - Medicare 2 - Medicaid 3 - Commercial Insurance 4 - Self Pay 6 - Other Government 7 - Workers Compensation	int	1	Column H, one number only
9	DATE	The date the procedure was performed mm/dd/yyyy	date	10	Column I, exactly this format, use "/", not "-", use leading zeros. Use four digit year.
10	GENDER	Gender of the patient Male = M Female = F Unknown = U	char	1	Column J, one letter only
11	AGE	Age of the patient in years at the time of procedure. If less than 1 year, age = 0.	int	3	Column K, numbers only
OPTIONAL:					
12	DOB	Date of Patient Birth mm/dd/yyyy	date	10	Column L, exactly this format, use "/" not "-", use leading zeros. Use four digit year.
13	DIAG1	Primary ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column M, ICD Code only alpha-numeric no decimal point
14	DIAG2	Secondary ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column N, ICD Code only alpha-numeric no decimal point
15	DIAG3	Tertiary ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column O, ICD Code only alpha-numeric no decimal point
16	DIAG4	Fourth ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column P, ICD Code only alpha-numeric no decimal point
17	DIAG5	Fifth ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column Q, ICD Code only alpha-numeric no decimal point
18	DIAG6	Sixth ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column R, ICD Code only alpha-numeric no decimal point
19	DIAG7	Seventh ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column S, ICD Code only alpha-numeric no decimal point
20	DIAG8	Eighth ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column T, ICD Code only alpha-numeric no decimal point
21	DIAG9	Ninth ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column U, ICD Code only alpha-numeric no decimal point
22	DIAG10	Tenth ICD-9 Diagnosis Code Diagnosis codes. Refer to ICD-9-CM coding manual	char	6	Column V, ICD Code only alpha-numeric no decimal point
23	ECODE	E-code External cause of Injury and poisoning(Ecode) Refer to ICD-9-CM coding manual	char	6	Column W, E-Code only alpha-numeric no decimal point