

Massachusetts Case Mix

Hospital Inpatient Discharge Data (HIDD)

Fiscal Year 2025

User Guide

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Executive Summary

Each quarter, Massachusetts health care facilities provide the Center for Health Information and Analysis (CHIA) data collected from acute care hospital inpatient discharges. The Fiscal Year (FY) 2025 Hospital Inpatient Discharge Database (HIDD) includes inpatient discharges that occurred in Massachusetts between October 1, 2024 and September 30, 2025. Acute care hospitals reported a total of 768,028 discharges.

The FY 2025 HIDD User Guide provides general information about data collection and processing, an overview of database organization and enhancements, general data use guidance, and a data dictionary.

For recent hospital-specific updates, please consult the FY 25 HIDD Release Notes available on CHIA's website at: <https://www.chiamass.gov/case-mix-data>

Data Collection and Processing

Acute care hospitals in Massachusetts are required to submit inpatient discharge data to CHIA under the following regulations:

- 957 CMR 8.00, APCD and Case Mix Data Submission

Regulations are available on [CHIA's website](#).¹

Hospitals submit preliminary inpatient discharge data to CHIA on the last day of the month following the end of each quarter. Final, complete inpatient discharge data is due 75 days the end of the quarter.

Quarterly reporting intervals for FY 2025 HIDD are as follows:

- Quarter 1: October 1, 2024 – December 31, 2024
- Quarter 2: January 1, 2025 – March 31, 2025
- Quarter 3: April 1, 2025 – June 30, 2025
- Quarter 4: July 1, 2025 – September 30, 2025

CHIA reviews each hospital's quarterly data for compliance to a one percent error rate threshold, based on the presence of errors per discharge in each quarterly submission. CHIA checks for valid codes, correct formatting, and presence of the required data elements. If one percent or more of the discharges are rejected, CHIA rejects the entire quarterly submission, and the reporting hospital must resubmit the data until it meets the compliance threshold.

HIDD Verification Report Process

Every six months, CHIA sends each hospital a profile report of their discharge data to maintain and improve the quality of their submissions. The Verification Report process gives the hospitals the opportunity to review the data they have provided to CHIA and affirm data accuracy and completeness.

CHIA asks each hospital to review and verify the data contained within the report. Each Verification Report has a series of frequency tables for selected data elements that include, but are not limited to, the number of discharges per month and breakouts by admission type, admission source, race, and patient status.

Hospitals must affirm that reported data is accurate and complete or identify any discrepancies on the year-end verification cycle. Hospitals certify the accuracy and completeness of their data by completing a Verification Report Response form. CHIA accepts two response types from hospitals:

¹ <https://www.chiamass.gov/regulations>

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- A. A hospital indicates its agreement that the data appearing on the Verification Report is accurate and that it represents the hospital's case mix profile.
 - B. A hospital indicates that the data on the report is accurate except for the discrepancies noted. If any data discrepancies exist, CHIA requests that hospitals provide written explanations of the discrepancies.

Users interested in the FY 2025 HIDD Verification Reports should contact CHIA at CaseMix.data@chiamass.gov. Please indicate the fiscal year of the Verification Report, the data set name, and if the information is needed for a specific hospital or set of hospitals.

Data Limitations

The HIDD is derived from patient discharge summaries, which can be traced to information entered by admitting and attending health professionals into the medical record. The quality of the HIDD is dependent upon facility data collection policies and coding practices of the medical record staff.

Information may not be consistent from hospital to hospital as a result of differences in:

- Collection and verification of patient-supplied information before or at admission;
- Updates to information following forensic autopsies;
- Medical record coding, consistency, and/or completeness;
- Extent of facility data processing capabilities;
- Flexibility of facility data processing systems;
- Capacity of financial processing system to record late-occurring charges on CHIA's electronic submission; or
- Non-comparability of data collection and reporting.

Database Organization and Enhancements

Files and Linking

The FY 2025 Case Mix HIDD consists of ASCII text files with a suffix indicating the table contained in the file and whether it belongs to a Limited Data Set (LDS) or Government data set.

Many users import the data into SQL, STATA™, SPSS™, SAS™, or R for analysis or data management. To accommodate the one-to-many relationship between the main discharge table and other tables, the `RecordType20ID` field is a unique identifier that can link the main Discharge table to Services, Diagnoses, DRGs, and Procedures tables. The `OrgID` field in the Organization table can be linked to columns on the Discharge table fields that contain organization identifiers (`IDOrgFiler`, `IDOrgSite`, `IDOrgHosp`, and `IDOrgTransfer`).

- **FIPA_HDD_2025_Discharge_** contains one record per discharge. The unique identifier on this table is `RecordType20ID`.
- **FIPA_HDD_2025_DiagnosisCode_** contains one record per diagnosis reported for each visit. The Discharge table has a one-to-many relationship with this table when linking with `RecordType20ID`.
- **FIPA_HDD_2025_ProcedureCode_** contains one record per procedure for each visit. The Discharge table has a one-to-many relationship with this table when linking with `RecordType20ID`.
- **FIPA_HDD_2025_Service_** contains one record per revenue code service reported for each visit. The Discharge table has a one-to-many relationship with this table when linking with `RecordType20ID`.
- **FIPA_HDD_2025_Organization_** contains one record per organization. Use this table to look up facility names, EMS region, and teaching status. The Discharge table has a many-to-one relationship with this table when linking with appropriate `OrgID` (`IDOrgFiler`, `IDOrgHosp`, `IDOrgSite` or `IDOrgTransfer`).
- **FIPA_HDD_2025_SubmissionLog_** contains one record per quarter for each of the Inpatient facilities filing data. The Discharge table has a many-to-one relationship with this table when linking with `IdOrgFiler`.
- **FIPA_HDD_2025_Error Log_** contains records by quarter and by fiscal year on the number of records passed and failed, as well as the reason for failing, by `IdOrgFiler`. The Discharge table has a one-to-many relationship with this table when linking with `RecordType20ID`.
- **Diagnosis-Related Groupers (DRGs):** **FIPA_HDD_2025_APR340**, **FIPA_HDD_2025_APR360**, **FIPA_HDD_2025_APR380**, **FIPA_HDD_2025_APR390**, **FIPA_HDD_2025_APR400**, and **FIPA_HDD_2025_CMS420** contain grouper data. Each of the DRG versions is released as a separate table. The Discharge table has a one-to-one relationship with each table when linking with `RecordType20ID`.

Organization Identifiers

CHIA assigns a unique organization identifier to each Massachusetts facility (`OrgID`). FY 2025 HIDD contains four elements that use this identifier:

- **Massachusetts Filer Organization ID (`IDOrgFiler`):** `OrgID` for the facility that submitted the Inpatient discharge data to CHIA.
- **Massachusetts Site Organization ID (`IDOrgSite`):** `OrgID` for the site where the patient received Inpatient care.
- **Massachusetts Hospital Organization ID (`IDOrgHosp`):** `OrgID` for the main hospital affiliation. For example, 27 (Cambridge Health Alliance) is the `IDOrgHosp` for `IDOrgSite` 142 (Everett Hospital).
- **Massachusetts Transfer Hospital Organization ID (`IDOrgTransfer`):** `OrgID` for the facility from which a patient is transferred. If the patient is transferred from outside of Massachusetts, `IDOrgTransfer` will be 9999999.

Groupers

For data user convenience, CHIA performs data grouping using the 3M™ APR-DRG grouper and the CMS grouper. The All Patient Refined DRGs (3M APR-DRG) classifies patients into diagnostic groups based on severity of illness and risk of mortality to provide an accurate means of adjusting for hospital case mix differences for evaluating inpatient care across all hospitals. For FY 2025 HIDD, CHIA has grouped data according to APR-DRG versions 34.0, 36.0, 38.0, 39.0, 40.0, and CMS version 42.0.

For APR-DRG versions 34.0, 36.0, 38.0, 39.0, and 40.0, both an admission and discharge DRG, MDC, ROM, and SOI are generated. For the CMS DRG version 42.0, discharge DRG and MDC are generated.

- The **Diagnosis Related Group (DRG)** categorizes patients with clinically similar medical diagnosis, severity of illness and risk of mortality to relate a hospital's case mix to the resource demands and costs experienced by the hospital.
- The **Major Diagnostic Categories (MDC)** within each DRG version parses the DRGs into 25 mutually exclusive categories. Each category relates to a physical system, disease, or contributing health factor.
- **Risk of Mortality (ROM)** is a clinical severity measure that estimates the likelihood that a patient will die during a hospital stay, given the patient's underlying condition at admission (admission ROM) and at discharge (discharge ROM). The ROM subclass data elements can be found in the ROM lookup table. In the APR-DRG system, a patient is assigned four distinct risk adjustment descriptors for ROM, numbered sequentially from 1 to 4. To evaluate patient mortality, use the 3M™ APR-DRGs in conjunction with the ROM subclass.
- **Severity of Illness (SOI)** is a clinical measure of how sick a patient is and how much care they will require. Like the ROM, in the APR-DRG system, it is measured on a scale from 1 to 4 (minor, moderate, major, extreme), based on the patient's underlying condition at admission (admission SOI) and at discharge (discharge SOI). The SOI subclass data elements can be found in the SOI lookup table. To evaluate resource use or establish patient care guidelines, use the 3M™ APR-DRGs in conjunction with the SOI subclass.

Note: The 3M™ All Patient Refined DRG Software and its logic are proprietary to 3M Company and are subject to the terms and conditions of the software licensing agreement between 3M and the Center for Health Information and Analysis. By contrast, the CMS DRGs maintained by the Centers for Medicare & Medicaid Services (CMS) are non-proprietary and distinct from the 3M™ All Patient Refined DRG.

Diagnosis and Procedure Code Organization

For FY 2025, CHIA organized the procedure and diagnosis fields into three tables: Discharge, Diagnosis, and Procedure.

All secondary diagnosis and procedure codes are in the Diagnosis and Procedure tables, respectively. Indicator codes are available for each secondary diagnosis or procedure code and are based on the order in which those codes were sent to CHIA. In the indicator code field, "A" designates admitting diagnosis, "D" designates discharge diagnosis, and "S" applies to all other diagnosis codes, designating secondary diagnosis. In the associated indicator code field, the admitting and discharge diagnosis have a code of "0" and secondary diagnosis have sequential numeric codes based on the order submitted. In FY 2025 data, discharges reached a maximum of 127 secondary diagnosis codes. Due to a complex discharge with an extended hospitalization of close to a year, a maximum of 153 secondary procedure codes was reached.

Diagnoses and procedures are ordered as submitted to CHIA. CHIA does not require the order of diagnoses and procedures to be medically relevant. CHIA does not affirm or confirm the medical

relevance of the principal diagnosis, procedure, or external cause codes reported in discharge data.

Inpatient Discharges that Began with Emergency Department (ED) Visits or Outpatient Observation Unit Stays

Any ED visit or observation stay that resulted in an inpatient discharge appears in the FY 2025 HIDD but **does not appear** in the FY 2025 Outpatient Emergency Department Database or FY 2025 Outpatient Observation Stay Database.

Discharges that began in an ED visit have an `EDFlagCode` value of 2. If there is evidence of an ED visit in the data, such as `EDFlagCode = 2`, `AdmissionSourceCode1` or `AdmissionSourceCode2 = R ("Within Hospital ER Transfer")`, or `RevenueCode = 045X` in the Service table, CHIA requests that providers report ED boarding information in the following five elements:

- `NumberOfHoursInED`
- `EmergencyDepartmentRegistrationDate`
- `EmergencyDepartmentRegistrationTime`
- `EmergencyDepartmentDischargeDate`
- `EmergencyDepartmentDischargeTime`

Discharges that began in an outpatient observation stay have `OutpatntObsrvStayFlagCode` value of Y.

LDS Age Calculation

If the `PatientBirthDate` and `AdmissionDate` are valid, CHIA calculates `AgeLDS` in years using the following logic.

- `Age = DischargeDate - PatientBirthDate`, rounded to the nearest integer
- If `Age` is valid and `< 1` year, then `AgeLDS = 0`
- If `Age` is valid and `> 0` and `< 90` years, then `AgeLDS = Age`
- If `Age` is valid and `> 89` and `<= 115`, then `AgeLDS = 999`
- If `Age` is missing, negative, or `> 115`, then `AgeLDS = null`

Consider other data elements in analysis using `AgeLDS` and use discretion when an age calculation seems questionable.

MDM ID Sequence Number Calculation

CHIA's derived UHIN Sequence Number (`UHIN_SequenceNo`) calculates the chronological order of Inpatient discharges for a patient with multiple discharges in a single fiscal year, using that patient's UHIN. The below calculation derives a similar sequence number (`MDMIDdischarge_sequence`) using that patient's `MemberMDMID`.

Please note that the below code applies if you have imported `DischargeDate` as text. If you have transformed `DischargeDate` into a date data type, simply order by `DischargeDate`.

```
SELECT
    d.RecordType20ID,
    d.DischargeDate,
    m.MemberMDMID,
    CASE
        WHEN NULLIF(LTRIM(RTRIM(m.MemberMDMID)), '') IS NULL
            OR NULLIF(LTRIM(RTRIM(d.DischargeDate)), '') IS NULL
        THEN 0
        ELSE ROW_NUMBER() OVER (
            PARTITION BY m.MemberMDMID
            ORDER BY
                SUBSTRING(d.DischargeDate, 5, 4) +
                SUBSTRING(d.DischargeDate, 1, 2) +
                SUBSTRING(d.DischargeDate, 3, 2)
            )
        END AS MDMIDdischarge_sequence
FROM [HIDDRReleaseFY2025].[dbo].[FIPA_HDD_2025_Discharge_Full_L167]
AS d
LEFT JOIN [HIDDRReleaseFY2025].[dbo].[FIPA_HDD_2025_MEID_Mapping]
AS m
ON m.RecordType20ID = d.RecordType20ID;
```

To exclude records that do not have an MEID, change `LEFT JOIN` to `INNER JOIN`.

Historical Data Elements

Users of multiple years of Case Mix data should be careful when merging multiple years of data. In order to maintain consistency across years, it may be necessary to merge some codes used for specific data elements. For example, the transition from ICD-9-CM to ICD-10-CM/PCS, affecting procedure and diagnosis codes, began in FY 2015 (October 2015). Users with questions about new data elements or changes in coding from year to year should contact CHIA at CaseMix.data@chiamass.gov.

Limited Data Set (LDS)

The pre-configured Limited Data Set (LDS) is designed to protect patient data confidentiality while ensuring analytic utility. All approved data applicants receive the “core” data elements. Data applicants seeking approval to add to the “core” elements must indicate this by selecting from the list of “buy-ups.” An applicant can use the “buy-up” process to receive more granular data. For example, the applicant can request a “buy-up” to a 5-digit patient ZIP code instead of a 3-digit patient ZIP code. CHIA must review buy-up requests and may approve the request

based on the project description. CHIA makes an additional set of core elements available only to government applicants. Government data applicants must specifically identify requested Government-Only elements in their application and provide justification for their request.

Master Data Elements by Table

For the FY 2025 HIDD, CHIA provides a master data elements list by table. Not every approved data applicant has access to every data element—some are reserved for limited data set buy-ups or for approved government use. All approved data applicants have access to the “CORE” data. Data applicants who choose limited data set buy-ups may receive access to some “LDS” elements. Only government data applicants may have access to the “GOV” fields. Data applicants interested in purchasing the data should visit the CHIA website for instructions.

Discharge Table – Core Elements

Core Discharge Elements Column 1	Core Discharge Elements Column 2	Core Discharge Elements Column 3
AdmissionDayOfWeek	IdOrgTransfer	PrimaryDiagnosisCode
AdmissionSourceCode1-2	LeaveOfAbsenceDays	PrincipalPreoperativeDays
AdmissionType	LengthOfStay	PrincipalProcedureCode
AdmissionYear	NewBornAge	PrincipalProcedureDate
AgeLDS	NumberOfANDs	PrincipalProcedureMonth
Birthweight	NumberOfDiagnosisCodes	Quarter
ConditionPresentECode	NumberOfHoursInED	RecordType20ID
DaysBetweenStays	NumberOfProcedureCodes	SecondaryPayerType
Discharge Day of Week	OtherCareGiverCode	SexLDS
DischargePassed	OutpatntObsrvStayFlagCode	SpecialConditionIndicator
DischargeYear	PatientStatus	SubmissionControlID
Ecode	PayerCode1	SubmissionPassedFlag
EDFlagCode	PayerCode2	TemporaryPatientStateLDS
HispanicIndicator	PeriodEndingDate	TemporaryPatientZip3CodeLDS
HomelessIndicator	PeriodStartingDate	TotalChargesAll
ICDIndicator	PermanentPatientState	TotalChargesAncillaries
IdOrgFiler	PermanentPatientZIP3Code	TotalChargesRoutine
IdOrgHosp	PrimaryPayerType	TotalChargesSpecial
IdOrgSite	PrimaryConditionPresent	Year

Discharge Table – LDS Elements

Data Elements Column 1	Data Elements Column 2	Data Elements Column 3
AdmissionDate	LegCHIAOperatingPhysicianP	PermanentPatientCityLDS
AdmissionMonth	LegCHIAOperatingPhysicianP1-P14	PermanentPatientZIP5CodeLDS
AttendingPhysicianNumber	MothersUHIN	Race1
ClaimCertificateNumber	OperatingPhysicianPrincipal	Race2
DischargeDate	OperatingPhysicianSignificant1-14	TemporaryPatientCityLDS
DischargeMonth	PeriodEndingDate	TemporaryPatientZip5CodeLDS
Ethnicity1	PeriodEndingMonth	UHIN
Ethnicity2	PeriodStartingDate	UHIN_SequenceNo
LegCHIAAttendingPhysicianNumber	PeriodStartingMonth	

Discharge Table – Government-Only Elements

Data Elements Column 1	Data Elements Column 2
ClaimCertificateNumber	HealthPlanMemberID
DNRStatus	HospitalBillNo
EmergencyDepartmentDischargeHour	MedicalRecordNumber
EmergencyDepartmentDischargeMinute	MotherMedicalRecordNumber
EmergencyDepartmentDischargeTime	OtherEthnicity
EmergencyDepartmentRegistrationHour	OtherRace
EmergencyDepartmentRegistrationMinute	PatientBirthDate
EmergencyDepartmentRegistrationTime	VeteransStatus
EmployerZipCode5	

Diagnosis Table – Core Elements

Data Elements Column 1

AssociatedIndicator
ConditionPresent
DiagnosisCode
Indicator
RecordType20ID

Procedure Table – Core Elements

Data Elements Column 1

AssociatedIndicator
Indicator
PreOperativeDays
ProcedureCode
ProcedureDate

Service Table – Core Elements

Data Elements Column 1	Data Elements Column 2
AccommodationsID	Sequence
LineNumber	SubmissionControlID
Quarter	TotalCharges
RecordType20ID	UnitsOfService
RevenueCode	Year
RevenueCodeType	N/A

Grouper – Core Elements

Data Elements Column 1	Data Elements Column 2	Data Element Column 3
APR340_ADM_RCD	APR340_ADM_DRG	APR340_ADM_MDC
APR340_DIS_DRG	APR340_ADM_ROM	APR340_ADM_SOI
APR340_DIS_ROM	APR340_DIS_MDC	APR340_DIS_RCD
APR360_ADM_MDC	APR340_DIS_SOI	APR360_ADM_DRG
APR360_ADM_SOI	APR360_ADM_RCD	APR360_ADM_ROM
APR360_DIS_RCD	APR360_DIS_DRG	APR360_DIS_MDC
APR380_ADM_DRG	APR360_DIS_ROM	APR360_DIS_SOI
APR380_ADM_ROM	APR380_ADM_MDC	APR380_ADM_RCD
APR380_DIS_MDC	APR380_ADM_SOI	APR380_DIS_DRG
APR380_DIS_SOI	APR380_DIS_RCD	APR380_DIS_ROM
APR390_ADM_RCD	APR390_ADM_DRG	APR390_ADM_MDC
APR390_DIS_DRG	APR390_ADM_ROM	APR390_ADM_SOI
APR390_DIS_ROM	APR390_DIS_MDC	APR390_DIS_RCD
APR400_ADM_MDC	APR390_DIS_SOI	APR400_ADM_DRG
APR400_ADM_SOI	APR400_ADM_RCD	APR400_ADM_ROM
APR400_DIS_RCD	APR400_DIS_DRG	APR400_DIS_MDC
CMS420_DIS_DRG	APR400_DIS_ROM	APR400_DIS_SOI
N/A	CMS420_DIS_MDC	CMS420_DIS_RCN

Note: Above are standard DRG fields. Depending on the type/version, some fields may be null or blank if not used in that particular type/version.

Organization Table

This table contains 1 record for every valid IDOrgFiler reported in HIDD. It lists the 64 organizations submitting inpatient data in FY 2025.

Org ID	Organization Name	FY 2025 Discharge Volume
1	Anna Jaques Hospital	4,881
2	Athol Memorial Hospital	534
4	Baystate Medical Center	44,676
5	Baystate Franklin Medical Center	4,868
7	Berkshire Medical Center - Berkshire Campus	11,786
8	Fairview Hospital	806
10	Beth Israel Deaconess Medical Center - East Campus	38,708
16	Boston Medical Center - Menino Pavilion Campus	26,797
22	Brigham and Women's Hospital	50,331
25	Signature Healthcare Brockton Hospital	9,740
27	Cambridge Health Alliance	11,482
39	Cape Cod Hospital	17,747
40	Falmouth Hospital	5,253
46	Boston Children's Hospital	14,992
49	MetroWest Medical Center - Framingham Campus	7,895
50	Cooley Dickinson Hospital	6,479
51	Dana-Farber Cancer Institute	1,267
53	Beth Israel Deaconess Hospital – Needham	4,878
57	Emerson Hospital	9,838
59	Brigham and Women's Faulkner Hospital	9,666
62	Steward Good Samaritan Medical Center - Brockton Campus	11,502
66	Lawrence Memorial Hospital Campus - Melrose Wakefield Healthcare	347
68	Harrington Memorial Hospital	4,580
71	HealthAlliance – Leominster Campus	7,871
73	Heywood Hospital	4,179
75	Steward Holy Family Hospital	7,787

Org ID	Organization Name	FY 2025 Discharge Volume
77	Holyoke Medical Center	7,626
79	Beth Israel Deaconess Hospital – Plymouth (Jordan)	13,064
81	Lahey Hospital & Medical Center, Burlington	22,339
83	Lawrence General Hospital	12,058
85	Lowell General Hospital – Main Campus	16,314
88	Martha's Vineyard Hospital	1,372
89	Massachusetts Eye and Ear Infirmary	1,545
91	Massachusetts General Hospital	50,112
97	Milford Regional Medical Center	9,754
98	Beth Israel Deaconess Hospital - Milton	6,552
99	Morton Hospital	5,986
100	Mount Auburn Hospital	11,871
101	Nantucket Cottage Hospital	612
103	New England Baptist Hospital	2,489
104	Tufts Medical Center- New England	17,939
105	Newton-Wellesley Hospital	23,548
106	Baystate Noble Hospital	3,293
109	Lahey Health - Addison Gilbert Hospital	1,856
110	Lahey Health - Beverly Hospital	16,912
114	Steward Saint Anne's Hospital	8,350
115	Lowell General Hospital - Saints Campus	3,431
116	North Shore Medical Center - Salem Campus	21,662
119	Mercy Medical Center - Springfield Campus	8,982
122	South Shore Hospital	33,449
123	Southcoast Hospitals Group - Charlton Memorial Campus	14,682
124	Southcoast Hospitals Group - St. Luke's Campus	17,340
126	Steward - St. Elizabeth's Medical Center	9,373
127	Saint Vincent Hospital	15,062
129	Sturdy Memorial Hospital	8,166
131	UMass Memorial Medical Center - University Campus	45,481

Org ID	Organization Name	FY 2025 Discharge Volume
133	Marlborough Hospital	3,509
138	Winchester Hospital	14,849
139	Baystate Wing Campus	3,653
141	MelroseWakefield Hospital Campus - MelroseWakefield Healthcare	9,508
145	Southcoast Hospitals Group – Tobey Hospital Campus	3,368
6963	Shriners Hospitals for Children Boston	53
11466	Holy Family Hospital at Merrimack Valley, A Steward Family Hospital, Inc.	1,225
21965	North Adams Regional Hospital	483

Data Dictionary

This section provides the following metadata for each element:

- Data Element Name as it appears in the file
- Short Description:
- Primary Table: the main table/file in which this element appears
- Linking Tables: other tables in which this element appears
- Release Level: indicates if the data is available to all users (“CORE”), a buy-up (“LDS”), or available only to government (“Government”)
- Data Type: Categorical, Ordinal, Identifier, Continuous, Date/Time, or Open Text
- Format: shows any specific formatting
- Length
- CHIA-Derived: shows if CHIA created this element
- Reference Table: indicates if a Categorical data element has set of valid values that are associated with other information
- Description: longer explanation of the element and its limitations

For more specific questions about HIDD data elements, contact CHIA at CaseMix.data@chiamass.gov. If applicable, include the related Application ID, name of Principal Investigator, and extract number. Please keep questions brief to improve response time.

AccommodationsID

Short Description:	CHIA-created field
Primary Table:	Service
Release Level:	CORE
Data Type:	Identifier
CHIA-Derived:	Yes
Description:	CHIA processing field
Reference Table:	No

AccommodationsID

Short Description:	CHIA indicator of quarterly submission status
Primary Table:	SubmissionLog
Release Level:	CORE
Data Type:	Categorical
CHIA-Derived:	Yes
Description:	CHIA processing field
Reference Table:	No

AdmissionDate

Short Description:	The date the patient was admitted to the hospital as an inpatient for this episode of care
Primary Table:	Discharge
Release Level:	LDS
Data Type:	VARCHAR
CHIA-Derived:	No
Description:	The date the patient was admitted to the hospital as an inpatient for this episode of care
Reference Table:	No

AdmissionDayOfWeek

Short Description:	Weekday that patient was admitted to hospital
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Date
CHIA-Derived:	No
Description:	Weekday that patient was admitted to hospital
Reference Table:	No

AdmissionMonth

Short Description:	Month in which patient was admitted to hospital
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Date
CHIA-Derived:	Yes
Description:	Month in which patient was admitted to hospital, derived by CHIA from AdmissionDate
Reference Table:	No

AdmissionSourceCode1, AdmissionSourceCode2

Short Description:	How a patient entered the hospital
Primary Table:	Discharge
Release Level:	CORE
Data Type:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	These two codes indicate the source of originating, referring or transferring the patient to inpatient admissions. Reporting patterns for the source of stay data element may vary widely.
Reference Table:	Source of Admission (see Longer Reference Tables)

AdmissionType

Short Description:	Admission status
Primary Table:	Discharge
Release Level:	CORE
Data Type:	VARCHAR
CHIA-Derived:	No
Description:	Standardized category of the patient's status upon admission to the hospital, using the following codes. Please note that Code 6 was added in FY 2025. <ul style="list-style-type: none">• 1: Emergency• 2: Urgent• 3: Elective• 4: Newborn• 5: Information Unavailable• 6: Trauma

AdmissionYear

Short Description:	Year in which patient was admitted to hospital
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Date
CHIA-Derived:	No
Description:	Year in which patient was admitted to hospital, derived by CHIA from AdmissionDate
Reference Table:	No

ADM_DRG (APR340, APR360, APR380, APR390, APR400)

Short Description:	Admitting diagnosis related group.
Primary Table:	Grouper – APR 340, Grouper – APR 360, Grouper – APR 380, Grouper- APR 390, Grouper – APR 400
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (NNN)
Length:	3
CHIA-Derived:	Yes
Description:	Standard DRG based on admission diagnoses.
Reference Table:	Standard 3M Grouper Values

ADM_MDC (APR340, APR360, APR380, APR390, APR400)

Short Description:	Admitting major diagnostic category.
Primary Table:	Grouper – APR 340, Grouper – APR 360, Grouper – APR 380, Grouper – APR 390, Grouper – APR 400
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (NN)
Length:	2
CHIA-Derived:	Yes
Description:	Admission MDC should classify the patient, based on Admission diagnoses and procedures, into a standard major diagnostic group.
Reference Table:	Standard 3M Grouper Values

ADM_RCD (APR340, APR360, APR380, APR390, APR400)

Short Description:	Null grouper field.
Primary Table:	Grouper – APR 340, Grouper – APR 360, Grouper – APR 380, Grouper APR 390, Grouper – APR 400
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (NN)
Length:	2
CHIA-Derived:	Yes
Description:	DRG record error indicator, '00' indicates valid DRG
Reference Table:	Standard 3M Grouper Values

ADM_ROM (APR340, APR360, APR380, APR390, APR400)

Short Description:	Admitting risk of mortality.
Primary Table:	Grouper – APR 340, Grouper 360, Grouper – APR 380, Grouper – APR 390, Grouper – APR 400
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (N)
Length:	1
CHIA-Derived:	Yes
Description:	Admitting ROM should classify the patient, based on admitting diagnoses and procedures, into a standard category of clinical risk using '1' (low), '2' (medium), '3' (high), and '4' (extreme).
Reference Table:	Standard 3M Grouper Values

ADM_SOI (APR340, APR360, APR380, APR390, APR400)

Short Description:	Admitting severity of illness.
Primary Table:	Grouper – APR 340, Grouper - APR 360, Grouper – APR 380, Grouper – APR 390, Grouper – APR 400
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (N)
Length:	1
CHIA-Derived:	Yes
Description:	Admitting SOI should classify the patient, based on admitting diagnoses and procedures, into a standard category of illness severity using '1' (low), '2' (medium), '3' (high), and '4' (extreme).
Reference Table:	Standard 3M Grouper Values

AgeLDS

Short Description:	Age of the patient
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	3
CHIA-Derived:	Yes
Description:	Age of the patient as calculated by CHIA. Rounded up to the nearest integer. Age is zero when patient is younger than 1 year and age is 999 when patient is older than 89 years. Discretion should be used whenever a questionable age assignment is noted. Researchers are advised to consider other data elements in their analysis of this field.
Reference Table:	No

AssociatedIndicator

Short Description:	Order in which diagnosis code was submitted to CHIA
Primary Table:	Diagnosis Code
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	3
CHIA-Derived:	No
Description:	Order in which diagnosis code was submitted to CHIA
Reference Table:	No

AttendingPhysicianNumber

Short Description:	Medical License Number of the attending physician
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Identifier
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	The lead physician supervising the care of the patient.
Reference Table:	Massachusetts Department of Health Board of Registration in Medicine license numbers

Birthweight

Short Description:	The specific birth weight of the newborn recorded in grams.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	4
CHIA-Derived:	No
Description:	Must be present if type of admission is “newborn”
Reference Table:	No

ClaimCertificateNumber

Short Description:	Medicaid Recipient Identification Number
Primary Table:	Discharge
Release Level:	GOV-SPEC
Data Type:	VARCHAR
Format:	Text
Length:	12
CHIA-Derived:	No
Description:	N/A
Reference Table:	No

CMS420_DIS_DRG

Short Description:	CMS 42.0 Grouper - Discharge diagnosis related group
Primary Table:	Grouper – CMS
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR(NNN)
Length:	3
CHIA-Derived:	Yes
Description:	Discharge DRG should classify the patient, based on discharge diagnoses and procedures, into a standard major diagnostic group.
Reference Table:	Centers for Medicare and Medicaid reference table: https://www.cms.gov/icd10m/FY2024-nprmversion41.0-fullcode-cms/fullcode_cms/P0001.html

CMS420_DIS_MDC

Short Description:	CMS 42.0 Grouper - Discharge major diagnostic category
Primary Table:	Grouper – CMS
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (NN)
Length:	2
CHIA-Derived:	Yes
Description:	Discharge MDC classifies the patient DRG into one of 25 standard major diagnostic groups.
Reference Table:	Centers for Medicare and Medicaid reference table: https://www.cms.gov/icd10m/FY2024-nprmversion41.0-fullcode-cms/fullcode_cms/P0001.html

ConditionPresent

Short Description:	Flags whether the diagnosis was present on admission
Primary Table:	Diagnosis
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	Indicates the onset of a diagnosis preceded or followed by admission. There is a POA indicator for every diagnosis and external cause-code.
Reference Table:	Condition Present

ConditionPresentECode

Short Description:	Flags whether the external cause-code was present on admission
Primary Table:	Diagnosis
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	Indicates the onset of a diagnosis preceded or followed by admission. There is a POA indicator for every diagnosis and external cause-code.
Reference Table:	Condition Present

DaysBetweenStays

Short Description:	Count of stays between admissions.
Primary Table:	Diagnosis
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	4
CHIA-Derived:	Yes
Description:	This CHIA-calculated field indicates the number of days between each admission and each consecutive admission for applicable patients. That is, a match with the UHIN is only used to make a determination that a patient has been readmitted.
Reference Table:	No

DHCFPSubmissionFile

Short Description:	CHIA-created field
Primary Table:	SubmissionLog
Release Level:	CORE
Data Type:	Identifier
Format:	VARCHAR
Length:	6
CHIA-Derived:	Yes
Description:	CHIA processing field
Reference Table:	No

DiagnosisCode

Short Description:	ICD-10-CM code for each diagnosis reported by the facility.
Primary Table:	Diagnosis
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	7
CHIA-Derived:	No
Description:	ICD-10-CM Associated Diagnosis. Excludes the decimal point. May be an External Cause Code or an Associated or Supplemental External Cause Code IF the Principal External Cause Code is present. Associated External Cause Codes may be: ICD-10-CM (V00-Y84.9) and supplemental codes: (Y90-Y99) (place of injury, activity, status).
Reference Table:	Standard ICD-10-CM Diagnosis Codes

DIS_DRG (APR340, APR360, APR380, APR390, APR400)

Short Description:	Discharge diagnosis related group.
Primary Table:	Grouper – APR 340, Grouper – APR 360, Grouper – APR 380, Grouper – APR 390, Grouper – APR 400
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (NNN)
Length:	3
CHIA-Derived:	Yes
Description:	Standard DRG based on Discharge diagnoses.
Reference Table:	Standard 3M Grouper Values

DIS_MDC (APR340, APR360, APR380, APR390, APR400)

Short Description:	Discharge major diagnostic category.
Primary Table:	Grouper – APR 340, Grouper - APR 360, Grouper – APR 380, Grouper – APR 390, Grouper - 400
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (NN)
Length:	2
CHIA-Derived:	Yes
Description:	Discharge MDC should classify the patient, based on Discharge diagnoses and procedures, into a standard major diagnostic group.
Reference Table:	Standard 3M Grouper Values

DIS_RCD (APR340, APR360, APR380, APR390, APR400)

Short Description:	Null grouper field.
Primary Table:	Grouper – APR 340, Grouper - APR360, Grouper – APR380, Grouper – APR390, Grouper – APR 400
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (NN)
Length:	2
CHIA-Derived:	Yes
Description:	DRG record error indicator, '00' indicates valid DRG
Reference Table:	

DIS_ROM (APR340, APR360, APR380, APR390, APR400)

Short Description:	Discharge risk of mortality
Primary Table:	Grouper – APR 340, Grouper - APR 360, Grouper – APR380, Grouper – APR 390, Grouper – APR 400
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR(N)
Length:	1
CHIA-Derived:	No
Description:	Discharge ROM should classify the patient, based on discharge diagnoses and procedures, into a standard category of mortality risk using '1' (low), '2' (medium) , '3' (high), and '4' (extreme).
Reference Table:	Standard 3M Grouper Values

DIS_SOI (APR340, APR360, APR380, APR390, APR400)

Short Description:	Discharge severity of illness.
Primary Table:	Grouper – APR 340, Grouper – APR 360, Grouper – APR 380, Grouper – APR 390, Grouper – APR 400
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	Discharge SOI should classify the patient, based on discharge diagnoses and procedures, into a standard category of illness severity using '1' (low), '2' (medium), '3' (high), and '4' (extreme).
Reference Table:	Standard 3M Grouper Values

DischargeDate

Short Description:	Calendar date of discharge from inpatient status
Primary Table:	Discharge
Release Level:	LDS
Data Type:	VARCHAR
Format:	YYYYMMDD
Length:	8
CHIA-Derived:	No
Description:	The date the patient was discharged from inpatient status in the hospital for this episode of care.
Reference Table:	No

DischargeDayOfWeek

Short Description:	Calendar day of discharge from inpatient status
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Date
Format:	VARCHAR
Length:	3
CHIA-Derived:	No
Description:	Day of the month on which the patient was discharged from inpatient status.
Reference Table:	No

DischargeMonth

Short Description:	Month of discharge from inpatient status
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Date
Format:	YYYYMM
Length:	6
CHIA-Derived:	No
Description:	Month of discharge from inpatient status
Reference Table:	No

DischargePassed

Short Description:	CHIA-derived field
Primary Table:	Discharge
Release Level:	CORE
Data Type:	VARCHAR
Length:	1
CHIA-Derived:	Yes
Description:	Related to CHIA processing of submissions. Note: CHIA is not providing DischargePassed in FY2025, so value will be null.
Reference Table:	No

DischargeYear

Short Description:	Year in which patient was discharged from hospital
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Date
Format:	YYYY
Length:	4
CHIA-Derived:	No
Description:	N/A
Reference Table:	No

DNRStatus

Short Description:	Indicates whether there is an order not to resuscitate the patient
Primary Table:	Discharge
Release Level:	GOV
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	Status indicating that the patient had a physician order not to resuscitate or the patient had a status of receiving palliative care only. "Do not resuscitate" (DNR) status means not to revive from potential or apparent death or that a patient was being treated with comfort measures only.

Numeric codes correspond to descriptions as follows:

- 1: DNR order written
- 2: Comfort measures only
- 3: No DNR order or measures ordered

Ecode

Short Description:	ICD-10-CM External Cause code
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	7
CHIA-Derived:	No
Description:	<p>International Classification of Diseases, 10th Revision, Clinical Modification (ICD) V-codes, and or W-codes, X-codes, or Y-codes (V00-Y99) are used to categorize events and conditions describing the external cause of injuries, poisonings, and adverse effects. Codes adequate to describe the external cause are reported for discharges with a principal and/or other diagnoses classified as injuries or poisonings of the ICD-10-CM (S00-T88) or where the ICD-10-CM codes demonstrate that an additional E-code is appropriate. The principal external cause of injury code shall describe the mechanism that caused the most severe injury, poisoning, or adverse effect. Additional codes used to report place of occurrence or to completely describe the mechanism(s) that contributed to the injury or poisoning or the causal circumstances surrounding any injury or poisoning are reported in the Diagnosis table. This data element describes the principal external cause of injuries, poisonings, and adverse effects using ICD-10-CM codes. In addition to the dedicated E-Code field, facilities record additional E-Codes in the associated diagnosis fields for conditions having multiple causes.</p>
Reference Table:	Standard ICD-10-CM Diagnosis Codes

EDFlagCode

Short Description:	Indicates if inpatient admission began in the hospital's emergency department
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (N)
Length:	1
CHIA-Derived:	No
Description:	Indicates if inpatient admission began in the hospital's emergency department, using the following codes: <ul style="list-style-type: none">• 0: Not admitted from the ED; no ED visit reflected in this record• 1: Not admitted from the ED, but ED visit(s) reflected in this record• 2: Admitted from the ED

EmergencyDepartmentRegistrationDate

Short Description:	Date of patient registration from the hospital's emergency department
Primary Table:	Discharge
Release Level:	GOV
Data Type:	Date
Format:	CCYYMMDD

EmergencyDepartmentRegistrationTime

Short Description:	Time of patient registration from the hospital's emergency department
Primary Table:	Discharge
Release Level:	GOV
Data Type:	Date/Time
Format:	Military Time ranging from 0000 to 2359

EmergencyDepartmentDischargeDate

Short Description:	Date of patient discharge from the hospital's emergency department
Primary Table:	Discharge
Release Level:	GOV
Data Type:	Date
Format:	CCYYMMDD

EmergencyDepartmentDischargeTime

Short Description:	Time of patient discharge from the hospital's emergency department
Primary Table:	Discharge
Release Level:	GOV
Data Type:	Date/Time
Format:	Military Time ranging from 0000 to 2359

EmployerZipCode5

Short Description:	ZIP Code of the patient's employer.
Primary Table:	Discharge
Release Level:	GOV
Data Type:	ZIP Code
Format:	VARCHAR
Length:	5
CHIA-Derived:	No
Description:	ZIP Code of the patient's employer.
Reference Table:	No

ErrorCategory

Short Description:	Indicates the error on the discharge record.
Primary Table:	ErrorLog
Linking Tables:	Organization
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	50
CHIA-Derived:	Yes
Description:	CHIA flag. Used for processing.
Reference Table:	No

ErrorDescription

Short Description:	Standardized Description of the reported error.
Primary Table:	ErrorLog
Linking Tables:	Organization
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	255
CHIA-Derived:	Yes
Description:	CHIA flag. Used for processing.
Reference Table:	No

Ethnicity 1, Ethnicity 2

Short Description:	Standardized, facility reported ethnicity.
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Categorical
Format:	VARCHAR
Length:	8
CHIA-Derived:	No
Description:	<p>Primary (Ethnicity 1) or Secondary (Ethnicity 2) ethnicity as reported by the provider. CHIA's Provider community utilizes the full list of standard ethnicity codes, per the code set available on CHIA's website at https://www.chiamass.gov/assets/docs/p/case-mix/FY25-Case-Mix-Submission-Guides/CDC-Ethnicity-Codes.pdf and the specific codes listed below. Note that Ethnicity Codes were updated in the FY 25 Submission Guides.</p> <ul style="list-style-type: none">• AMER: American• BRAZ: Brazilian• CANADA: Canadian• CAPE-V: Cape Verdean• CARIB: Caribbean Island• E-EUR: Eastern European• PORT: Portuguese• RUSSN: Russian• OTH: Other• UNK: Unknown• DONTKNOW: Don't know• ASKU: Choose not to answer• UTC: Unable to collect this information on patient due to lack of clinical capacity of patient to respond

HispanicIndicator

Short Description:	Indicates whether patient was Hispanic
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	<p>A flag for patients of Hispanic/Latino/Spanish culture or origin regardless of race, using the codes below. Note that Hispanic Indicator Codes were updated in the FY 25 Submission Guides.</p> <ul style="list-style-type: none">• 2135-2: Patient is Hispanic/Latino/Spanish• 2186-5: Patient is not Hispanic/Latino/Spanish• DONTKNOW: Don't know• ASKU: Choose not to answer• UNK: Unknown• UTC: Unable to collect this information on patient due to lack of clinical capacity of patient to respond

HomelessIndicator

Short Description:	Indicates whether the patient was homeless
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	8
CHIA-Derived:	No
Description:	<p>This flag indicates that the patient was homeless at the time of visit, using the following codes. Note that Homeless Indicator Codes were updated in the FY 25 Submission Guides.</p> <ul style="list-style-type: none">• Y: Patient is known to be homeless• N: Patient is not known to be homeless• UNK: Unknown• DONTKNOW: Don't know• ASKU: Choose not to answer• UTC: Unable to collect this information on patient due to lack of clinical capacity of patient to respond

HospitalBillNo

Short Description:	Unique patient billing record
Primary Table:	Discharge
Release Level:	GOV-SPEC
Data Type:	Identifier
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	Facility unique number associated with all billing for the visit.
Reference Table:	No

ICD Indicator

Short Description:	ICD version
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	Value of "0" indicates that the diagnoses, E-codes, and procedure codes are ICD-10.

IDOrgFiler

Short Description:	ID number of the facility that submitted Inpatient Discharges
Primary Table:	Discharge
Linking Tables:	SubmissionLog ErrorLog Organization
Release Level:	CORE
Data Type:	Identifier
Format:	Integer
Length:	8
CHIA-Derived:	Yes
Description:	Organization ID for the facility that submitted the Inpatient discharge data to CHIA.
Reference Table:	Organization

IDOrgHosp

Short Description:	Facility identifier
Primary Table:	Discharge
Linking Tables:	Organization
Release Level:	CORE
Data Type:	Identifier
Format:	Integer
Length:	8
CHIA-Derived:	Yes
Description:	Organization ID for the main facility affiliation
Reference Table:	Organization

IDOrgSite

Short Description:	Facility identifier
Primary Table:	Discharge
Linking Tables:	Organization
Release Level:	CORE
Data Type:	Identifier
Format:	Integer
Length:	8
CHIA-Derived:	Yes
Description:	Organization ID for the site where the patient received Inpatient care
Reference Table:	Organization

IDOrgTransfer

Short Description:	Indicates where patient was transferred from
Primary Table:	Discharge
Linking Tables:	Organization
Release Level:	CORE
Data Type:	Identifier
Format:	Integer
Length:	8
CHIA-Derived:	Yes
Description:	Organization ID for the facility from which a patient is transferred. If the patient is transferred from outside of Massachusetts, the IDOrgTransfer will be 9999999.
Reference Table:	Organization

Indicator - Diagnosis

Short Description:	Indicates if the diagnosis was primary, secondary, admitting, or discharge.
Primary Table:	Diagnosis
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	Indicates if the diagnosis or procedure was primary, secondary, admitting, or discharge, using the following codes. <ul style="list-style-type: none">• A: Admitting• D: Discharge• P: Principal• S: Secondary

Indicator - Procedure

Short Description:	Indicates if the submitted Procedure Code was secondary
Primary Table:	Procedure
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	Order in which procedure code was submitted to CHIA
Reference Table:	No

LeaveOfAbsenceDays

Short Description:	Days patient was absent from hospital stay during admission/discharge period.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	4
CHIA-Derived:	No
Description:	If the patient left the hospital during the stay, then this field must indicate how many days the patient was absent during the total length of stay.
Reference Table:	No

LegCHIAAttendingPhysicianNumber

Short Description:	ID of the Attending physician
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Identifier
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	Physician Board of Registration of Medicine License Number

LegCHIAOperatingPhysicianP

Short Description:	ID of the primary Procedure Physician
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Identifier
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	Physician Board of Registration of Medicine License Number

LegCHIAOperatingPhysicianP1-P14

Short Description:	ID of any other physician who performed a significant procedure on the patient
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Identifier
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	Physician Board of Registration of Medicine License Number of Operating Physicians 1 through 14. Ordered as reported by hospital in agreement with Significant Procedures 1 through 14.

LengthOfStay

Short Description:	Count of days in the hospital.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	4
CHIA-Derived:	Yes
Description:	Count of days between the Admitting and Discharge date for an Inpatient discharge.
Reference Table:	No

LineNumber

Short Description:	CHIA processing field
Primary Table:	Service
Linking Tables:	Service
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
CHIA-Derived:	Yes
Description:	N/A
Reference Table:	No

MedicalRecordNumber

Short Description:	Admission identifier assigned by the facility
Primary Table:	Discharge
Release Level:	GOV-SPEC
Data Type:	Identifier
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	The unique number assigned to each patient within the hospital that distinguishes the patient and the patient's hospital record(s) from all others in that institution.
Reference Table:	No

MemberMDMID

Short Description:	MemberMDMID
Primary Table:	MEID Mapping Gov
Linking Tables:	Discharge
Release Level:	GOV-SPEC
Data Type:	Identifier
Format:	Integer
Length:	8
CHIA-Derived:	Yes
Description:	CHIA used our Master Patient Index (MPI) approach to create unique MemberMDMID for distinct patients within the case mix data. The MemberMDMID provides a way to identify a distinct patient using a unique identifier that is not personally identifiable. The MemberMDMID provides the ability to track distinct patients across time, across case mix hospital sites of care, and across payers.
Reference Table:	No

MotherMedicalRecordNumber

Short Description:	Patient's mother's unique hospital assigned identifier
Primary Table:	Discharge
Release Level:	GOV-SPEC
Data Type:	Identifier
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	The medical record number assigned within the hospital to the newborn's mother is to be reported for the newborn. The medical record number of the newborn's mother distinguishes the patient's mother and the patient's mother's hospital record(s) from all others in that institution.
Reference Table:	No

MothersUHIN

Short Description:	Patient's mother's unique ID.
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Identifier
Format:	VARCHAR
Length:	9
CHIA-Derived:	No
Description:	CHIA generated unique identifier of a newborn's mother. For newborns or for infants less than 1 year old, CHIA derives a unique ID for the patient's mother. This unique ID allows a newborn visit to be associated with a mother's visit. Linkable across records and fiscal years. Each patient is given by CHIA a Unique Health Information Number (UHIN), which is a surrogate key that can link patients over time and across facilities. The data element is blank, a single dash (-) appears in the UHIN field. It is valid for facilities to report that the unique patient identifier is unknown. In these cases, the UHIN appears as "000000001". The utility of the UHIN field is dependent on the reporting data. For a small number of facilities, little or no UHIN data exists, as these institutions failed to report patients' uniquely identified information. Other facilities reported the same data repeatedly, resulting in numerous admissions for one UHIN. In other cases, the demographic information (age, sex, etc.) was not consistent when a match did exist with the UHIN. Some explanations for this include assignment of a mother's unique identifiers to her infant or assignment of a spouse's unique identifiers to a patient. Invalid data uses the code UHIN="4".
Reference Table:	No

NewBornAge

Short Description:	Newborn's age in weeks at admission
Primary Table:	Discharge
Release Level:	CORE
Data Type:	VARCHAR
Format:	Integer
Length:	2
CHIA-Derived:	Yes
Description:	Newborn's age in weeks at admission for infants less than 1 year old
Reference Table:	No

NumberDischargesFailed

Short Description:	CHIA-derived error field
Primary Table:	SubmissionLog
Linking Tables:	ErrorLog
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	3
CHIA-Derived:	Yes
Description:	Number of discharge records failing submission threshold
Reference Table:	No

NumberDischargesPassed

Short Description:	CHIA-derived error field
Primary Table:	SubmissionLog
Linking Tables:	ErrorLog
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	5
CHIA-Derived:	Yes
Description:	Number of discharge records passing submission threshold
Reference Table:	No

NumberOfANDs

Short Description:	Total Administratively Necessary Days
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	4
CHIA-Derived:	No
Description:	The number of days that were deemed clinically unnecessary in accordance with review by the Division of Medical Assistance.
Reference Table:	No

NumberOfDiagnosisCodes

Short Description:	Count of diagnosis codes in a particular submission
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	3
CHIA-Derived:	Yes
Description:	Count of diagnosis codes in a particular submission
Reference Table:	No

NumberOfDischarges

Short Description:	Count of discharges in a particular submission
Primary Table:	SubmissionLog
Linking Tables:	ErrorLog
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	6
CHIA-Derived:	Yes
Description:	Count of discharges in a particular submission
Reference Table:	No

NumberOfErrors

Short Description:	Count of errors in a particular submission
Primary Table:	ErrorLog
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	5
CHIA-Derived:	Yes
Description:	Count of errors in a particular submission
Reference Table:	No

NumberOfProcedureCodes

Short Description:	Count of procedure codes in a particular submission
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	3
CHIA-Derived:	Yes
Description:	Count of procedure codes in a particular submission
Reference Table:	No

OperatingPhysicianPrincipal

Short Description:	ID of the Primary Operating Physician
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Identifier
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	Operating Physician's Board of Registration in Medicine License Number

OperatingPhysicianSignificant1-14

Short Description:	ID of any other physician who operated on the patient
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Identifier
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	Physician Board of Registration of Medicine License Number of Operating Physicians 1 through 14.

OrgID

Short Description:	Facility-specific identifier
Primary Table:	Organization
Release Level:	CORE
Data Type:	Identifier
Format:	Integer
Length:	8
CHIA-Derived:	No
Description:	Unique identifier for facility linking across tables and fiscal years
Reference Table:	Organization Table

OrgName

Short Description:	Name of facility
Primary Table:	Organization
Linking Tables:	SubmissionLog ErrorLog
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
CHIA-Derived:	No
Description:	Facility-specific name
Reference Table:	No

OtherCareGiverCode

Short Description:	Indicates type of other patient caregiver
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	<p>This data element indicates the type of primary caregiver responsible for the patient's care other than the attending physician, operating room physician, or nurse midwife. Codes correspond to the below descriptions.</p> <ul style="list-style-type: none">• 1: Resident• 2: Intern• 3: Nurse Practitioner• 4: Not Used• 5: Physician Assistant

OtherEthnicity

Short Description:	Non-standard patient ethnicity designations
Primary Table:	Discharge
Release Level:	GOV
Data Type:	Categorical
Format:	VARCHAR
Length:	20
CHIA-Derived:	No
Description:	<p>Patient's ethnicity as entered by the facility. Other ethnicity is an open text field for reporting additional ethnicities when ethnicity 1 or ethnicity 2 equals "OTH", or "Other ethnicity".</p>
Reference Table:	No

OtherRace

Short Description:	Non-standard patient race designations
Primary Table:	Discharge
Release Level:	GOV
Data Type:	Categorical
Format:	VARCHAR
Length:	15
CHIA-Derived:	No
Description:	Patient's Race as entered by the facility. Other Race is an open text field for reporting additional races when Race 1 or Race 2 equals "OTH", or "Other Race".
Reference Table:	No

OutpatntObsrvStayFlagCode

Short Description:	Indicates inpatient admission began in observation stay unit
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	Indicates inpatient admission began in observation stay unit
Reference Table:	Yes

Passed

Short Description:	CHIA processing field
Primary Table:	SubmissionLog
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
CHIA-Derived:	Yes
Description:	N/A
Reference Table:	No

PatientBirthDate

Short Description:	Patient date of birth
Primary Table:	Discharge
Release Level:	GOV-SPEC
Data Type:	Date
Format:	YYYYMMDD
Length:	8
CHIA-Derived:	No
Description:	Patient date of birth
Reference Table:	No

PatientStatus

Short Description:	A code indicating the patient's status upon discharge and/or the destination to which the patient was referred or transferred upon discharge.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	VARCHAR
Length:	2
CHIA-Derived:	No
Description:	This field identifies the disposition and destination of the patient after discharge from the Inpatient unit. A small percentage of records are missing the zero used to pad codes 10 through 18. For example, the entire code might consist of the digit 7, rather than 07. A full list of codes is available in the Longer Reference Tables section.

PayerCode1

Short Description:	Standardized Payer Source code
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	3
CHIA-Derived:	No
Description:	A standardized source of payment code (different than payer code). Most MA payers are identified in advance of the payment cycle. This field captures the specific differences between those payers. The payer table is extensive.
Reference Table:	Payer Source Code (see Longer Reference Tables)

PayerCode2

Short Description:	Standardized Payer Source code
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	3
CHIA-Derived:	No
Description:	A standardized source of payment code (different than payer code). Most MA payers are identified in advance of the payment cycle. This field captures the specific differences between those payers. The payer table is extensive.
Reference Table:	Payer Source Code (see Longer Reference Tables)

PeriodEndingDate

Short Description:	Must be the last day of the quarter for which data is being submitted
Primary Table:	Discharge
Release Level:	LDS
Data Type:	VARCHAR
Format:	YYYYMMDD
Length:	8
CHIA-Derived:	No
Description:	Must be the last day of the quarter for which data is being submitted
Reference Table:	No

PeriodEndingMonth

Short Description:	Must be the last month of the quarter for which data is being submitted
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Date
Format:	MM
Length:	2
CHIA-Derived:	No
Description:	Must be the last month of the quarter for which data is being submitted
Reference Table:	No

PeriodEndingYear

Short Description:	Must be the year for which data is being submitted
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Date
Format:	YYYY
Length:	4
CHIA-Derived:	No
Description:	Must be the year for which data is being submitted
Reference Table:	No

PeriodStartingDate

Short Description:	Must be the first day of the quarter for which data is being submitted
Primary Table:	Discharge
Release Level:	LDS
Data Type:	VARCHAR
Format:	YYYYMMDD
Length:	8
CHIA-Derived:	No
Description:	
Reference Table:	No

PeriodStartingMonth

Short Description:	Must be the first month of the quarter for which data is being submitted
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Date
Format:	YYYYMM
Length:	6
CHIA-Derived:	No
Description:	Must be the first month of the quarter for which data is being submitted
Reference Table:	No

PeriodStartingYear

Short Description:	Must be the year for which data is being submitted
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Date
Format:	YYYY
Length:	4
CHIA-Derived:	No
Description:	Must be the year for which data is being submitted
Reference Table:	No

PermanentPatientCityLDS

Short Description:	Permanent city of residence for the patient.
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Categorical
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	Primary city of residency for patient.
Reference Table:	No

PermanentPatientCountryLDS

Short Description:	Permanent country of residence for the patient.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	2
CHIA-Derived:	No
Description:	Primary country of residency for patient. In the LDS file for non-government data users, the data release will only include country information for the United States (US), Canada (CA) and Mexico (MX). All other countries will be designated by ZZ. Any additional questions concerning country information can be addressed by contacting CHIA at CaseMix.data@chiamass.gov
Reference Table:	No

PermanentPatientStateLDS

Short Description:	Permanent state of residence for the patient.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	2
CHIA-Derived:	No
Description:	Primary state of residency for patient. In the LDS file for non-government data users, the data release will only include state information for Massachusetts (MA), Connecticut (CT), Maine (ME), New Hampshire (NH), New York (NY), Vermont (VT) and Rhode Island (RI). All other states in the US will be designated by XX. Any additional questions concerning state information can be addressed by contacting CHIA at CaseMix.data@chiamass.gov
Reference Table:	STATE

PermanentPatientStreetAddress

Short Description:	Patient's street address
Primary Table:	Discharge
Release Level:	GOV-SPEC
Data Type:	Open Text
Format:	VARCHAR
Length:	100
CHIA-Derived:	No
Description:	Address for patient's permanent residence as provided by the hospital. CHIA does not alter or standardize this field.
Reference Table:	STATE

PermanentPatientZIP3CodeLDS

Short Description:	3-digit ZIP Code of the patient's permanent residence.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (NNN)
Length:	3
CHIA-Derived:	No
Description:	First three digits of patient's permanent ZIP code. ZIP codes are not standardized, and this field is as reported from a nine-digit ZIP code. For LDS users only, if the patient state is not in Massachusetts or a state bordering Massachusetts (Connecticut, Maine, New Hampshire, New York, Vermont or Rhode Island) ZIP codes are set to zeros (0s) and the state is removed. Any additional questions can be addressed by contacting CHIA at CaseMix.data@chiamass.gov
Reference Table:	No

PermanentPatientZIP5CodeLDS

Short Description:	5-digit ZIP Code of the patient's permanent residence.
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Categorical
Format:	VARCHAR (NNNNN)
Length:	5
CHIA-Derived:	No
Description:	First five digits of patient's permanent ZIP Code. ZIP Codes are not standardized, and this field is as reported from a nine-digit ZIP Code. For LDS users only, if the patient state is not in Massachusetts or a state bordering Massachusetts (Connecticut, Maine, New Hampshire, New York, Vermont, or Rhode Island) ZIP Codes are set to zeros (0s) and the state is removed. Any additional questions can be addressed by contacting CHIA at CaseMix.data@chiamass.gov .
Reference Table:	No

PreOperativeDays

Short Description:	Count of days between Admission and Procedure
Primary Table:	Procedure
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	4
CHIA-Derived:	No
Description:	Calculation of the number of days between Admission and the Procedure.
Reference Table:	No

PrimaryConditionPresent

Short Description:	Flag indicating that Principal Condition was present on admission.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	Indicates that Principal Condition was present on admission.
Reference Table:	Condition Present on Admission (see Longer Reference Tables)

PrimaryDiagnosisCode

Short Description:	ICD-10-CM code for the condition that led to the Inpatient visit.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	7
CHIA-Derived:	No
Description:	The ICD diagnosis code corresponding to the condition established after study to be chiefly responsible for the admission of the patient for hospital care.
Reference Table:	Standard ICD-10-CM Diagnosis Codes

PrimaryPayerType

Short Description:	Indicates the Type of Payer
Primary Table:	Discharge
Release Level:	CORE
Data Type:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	N/A
Reference Table:	Payer Source Code (see Longer Reference Tables)

PrincipalPreoperativeDays

Short Description:	Count of days between Admission and Primary procedure.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	5
CHIA-Derived:	No
Description:	Calculation of the number of days between Admission and the Procedure.
Reference Table:	Payer Source Code (see Longer Reference Tables)

PrincipalProcedureCode

Short Description:	ICD-10-PCS code for the Principal procedure in the Inpatient visit.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	7
CHIA-Derived:	No
Description:	The chief procedure performed in the Inpatient visit.
Reference Table:	Standard ICD-10-PCS Procedure Codes

PrincipalProcedureDate

Short Description:	Date that the Principal procedure was performed
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Date
Format:	YYYYMMDD
Length:	8
CHIA-Derived:	No
Description:	
Reference Table:	No

PrincipalProcedureMonth

Short Description:	The month in which the principal procedure was performed
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Date
Format:	YYYYMM
Length:	6
CHIA-Derived:	No
Description:	The month in which the principal procedure was performed
Reference Table:	No

ProcedureCode

Short Description:	ICD-10-PCS code for each Significant Procedure reported by the facility. Up to 78 new Procedures were added by CMS in FY 2024. See: https://www.cms.gov/medicare/coding-billing/icd-10-codes
Primary Table:	Procedure
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	7
CHIA-Derived:	No
Description:	The ICD procedure code usually corresponding to additional procedures which carry an operative or anesthetic risk or require highly trained personnel, special equipment or facilities.
Reference Table:	Standard ICD-10-PCS Procedure Codes

ProcedureCodeDate

Short Description:	Date the procedure was performed
Primary Table:	Procedure
Release Level:	CORE
Data Type:	Date
Format:	YYYYMMDD
Length:	8
CHIA-Derived:	No
Description:	
Reference Table:	No

ProcedureTable

Short Description:	Indicates the order in which facilities submitted Procedure Codes.
Primary Table:	Procedure Code
Linking Tables:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	3
CHIA-Derived:	No
Description:	Order in which procedure code was submitted to CHIA.
Reference Table:	No

Quarter

Short Description:	Quarter of submission.
Primary Table:	Discharge
Linking Tables:	Service SubmissionLog
Release Level:	CORE
Data Type:	Integer
Format:	Q
Length:	1
CHIA-Derived:	No
Description:	Quarter in which the discharge was submitted to CHIA. (1, 2, 3, 4)
Reference Table:	No

Race1, Race2

Short Description:	Standardized, facility reported race.
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Categorical
Format:	VARCHAR
Length:	8
CHIA-Derived:	No
Description:	<p>Primary race as reported by the provider. CHIA's Provider community utilizes the full list of standard race codes, per the code set available on CHIA's website at https://www.chiamass.gov/assets/docs/p/case-mix/FY25-Case-Mix-Submission-Guides/CDC-Ethnicity-Codes.pdf and those listed below. Note that Race Codes were updated in the FY 25 Submission Guides.</p> <ul style="list-style-type: none">• 1002-5: American Indian/Alaska Native• 2028-9: Asian• 2054-5: Black/African American• 2076-8: Native Hawaiian or other Pacific Islander• 2106-3: White• OTH: Other Race• DONTKNOW: Don't know• ASKU: Choose not to answer• UNK: Unknown• UTC: Unable to collect this information on patient due to lack of clinical capacity of patient to respond

RecordType20ID

Short Description:	Unique per discharge. Key to link from discharge table.
Primary Table:	Discharge
Linking Tables:	Diagnosis Service Procedure Group
Release Level:	CORE
Data Type:	Identifier
Format:	Integer
Length:	8
CHIA-Derived:	No
Description:	<p>Indicator for Record Type '20'. Required for every Inpatient discharge record.</p> <p>Only one allowed per inpatient discharge record. Inpatient discharge specific record identifier used to link data about a specific discharge across CHIA data tables. It is important to note that if the same patient is admitted and discharged multiple times, the patient will have a separate unique Record Type 20 ID for each discharge. Therefore, the Record Type 20 ID is intended to distinguish unique discharges rather than unique individuals. The Record Type 20 ID is used in combination with the facility ID when you seek to aggregate and analyze discharges by facility. Because a single patient may have multiple diagnosis codes, multiple revenue codes in the services table, and multiple procedure codes, the Record Type 20 ID in the main discharge table has a 1-to-many relationship to the diagnosis, procedure code, and services table.</p>
Reference Table:	No

RevenueCode

Short Description:	Billing code.
Primary Table:	Service
Linking Tables:	Service
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	4
CHIA-Derived:	No
Description:	<p>A numeric code which identifies a particular routine or special care accommodation. The revenue codes are taken from the Uniform Billing (UB) revenue codes and correspond to specific cost centers in CHIA's hospital cost reports (previously known as DHCFP-403 Cost Report, now a combination of sections of both the former DHCFP-403 Cost Report and the 2552 Cost Report).</p>
Reference Table:	www.nubc.org (UB-04)

RevenueCodeType

Short Description:	Type of billing code
Primary Table:	Service
Linking Tables:	Service
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
CHIA-Derived:	No
Description:	Category of billing code to allow association with specific billing systems.
Reference Table:	www.nubc.org (UB-04)

SecondaryPayerType

Short Description:	Secondary Payer for the visit.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	4
CHIA-Derived:	No
Description:	Secondary Payer for this visit.
Reference Table:	Payer Source Code (see Longer Reference Tables)

PatientSexatBirthLDS

Short Description:	Indicates sex assigned at birth
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	8
CHIA-Derived:	No
Description:	<p>Patient sex assigned at birth, using codes below. Note that this was updated from PatientSex for FY 25 and new codes were added to the FY 25 Submission Guides.</p> <ul style="list-style-type: none">• M: Male• F: Female• UNK: Unknown• DONTKNOW: Don't know• ASKU: Choose not to answer• UTC: Unable to collect this information on patient due to lack of clinical capacity of patient to respond

SpecialConditionIndicator

Short Description:	N/A
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	N/A
Reference Table:	Yes

SubmissionActive

Short Description:	CHIA processing field
Primary Table:	ErrorLog
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	Yes
Description:	N/A
Reference Table:	No

SubmissionControllID

Short Description:	Unique per facility-quarter-submission. Key to link from the Discharge table.
Primary Table:	Discharge
Linking Tables:	Service SubmissionLog ErrorLog
Release Level:	CORE
Data Type:	Identifier
Format:	Integer
Length:	4
CHIA-Derived:	No
Description:	Unique id for a facility's submission of data to CHIA. Usually, one Submission Control ID is associated with a facility's quarterly submission.
Reference Table:	No

SubmissionPassed

Short Description:	CHIA flag.
Primary Table:	ErrorLog
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	Yes
Description:	Indicates the submission to CHIA has passed.
Reference Table:	No

SubmissionPassedFlag

Short Description:	CHIA-derived field
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
Length:	1
CHIA-Derived:	No
Description:	N/A
Reference Table:	No

SubmissionQuarter

Short Description:	Indicates the quarter (1-4) in which the record was submitted to CHIA.
Primary Table:	ErrorLog
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (N)
Length:	1
CHIA-Derived:	No
Description:	Year in which the record was submitted to CHIA.
Reference Table:	No

TemporaryPatientCityLDS

Short Description:	Current municipality of residence for a patient, if different from permanent residence.
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Categorical
Format:	VARCHAR
Length:	25
CHIA-Derived:	No
Description:	MA City in which the patient temporarily resides.
Reference Table:	No

TemporaryPatientStateLDS

Short Description:	Current state of residence for a patient, if different from permanent residence.
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Categorical
Format:	VARCHAR
Length:	2
CHIA-Derived:	No
Description:	Indicates "MA" if the patient temporarily resides in Massachusetts.
Reference Table:	STATE

TemporaryPatientZip3CodeLDS

Short Description:	Current 3-digit ZIP Code of patient residence, if different from permanent residence.
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR (NNN)
Length:	3
CHIA-Derived:	No
Description:	First three digits of patient's temporary, Massachusetts ZIP Code. ZIP Codes are not standardized, and this field is as reported from a nine-digit ZIP Code. The Limited Data Set supports selection of 3-character ZIP Code or 5-character ZIP Code for approval by CHIA. Government users may be able to request a 9-character ZIP Code. For LDS users only, if the patient state is not in Massachusetts or a state bordering Massachusetts (Connecticut, Maine, New Hampshire, New York, Vermont or Rhode Island) ZIP Codes are set to zeros (0s) and the state is removed.
Reference Table:	No

TemporaryPatientZip5CodeLDS

Short Description:	Current 5-digit ZIP Code of patient residence, if different from permanent residence.
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Categorical
Format:	VARCHAR (NNNNN)
Length:	5
CHIA-Derived:	No
Description:	First five digits of patient's temporary, Massachusetts ZIP Code. ZIP Codes are not standardized, and this field is as reported from a nine-digit ZIP Code. The Limited Data Set supports selection of 3-character ZIP Code or 5-character ZIP Code for approval by CHIA. Government users may be able to request a 9-character ZIP Code. For LDS users only, if the patient state is not in Massachusetts or a state bordering Massachusetts (Connecticut, Maine, New Hampshire, New York, Vermont or Rhode Island) ZIP Codes are set to zeros (0s), and the state is removed.
Reference Table:	No

TemporaryPatientZIP5Code

Short Description:	Patient's ZIP Code
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Categorical
Format:	VARCHAR (NNNNN)
Length:	5
CHIA-Derived:	No
Description:	ZIP Code of patient's temporary Massachusetts address. CHIA does not alter or standardize the values in this field.
Reference Table:	No

TemporaryUSPatientStreetAddress

Short Description:	Patient's street address
Primary Table:	Discharge
Release Level:	GOV-SPEC
Data Type:	Open Text
Format:	VARCHAR
Length:	100
CHIA-Derived:	No
Description:	Address for patient's temporary, Massachusetts-based, residence as provided by the hospital. CHIA does not alter or standardize this field.
Reference Table:	No

TotalCharges

Short Description:	Total inpatient charges included with a Facility-Submission-Quarter.
Primary Table:	Service
Linking Tables:	Service SubmissionLog
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	10
CHIA-Derived:	No
Description:	Sum of charges for the inpatient stay.
Reference Table:	No

TotalChargesAll

Short Description:	Hospital charges (all)
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	12
CHIA-Derived:	No
Description:	The full, undiscounted charges summarized by specific accommodation revenue code(s). Total charges should not include charges for telephone service, television, or private duty nurses. Any charges for a leave of absence period are to be included in the routine accommodation charges for the appropriate service (medical/surgical, psychiatry) from which the patient took the leave of absence. Any other routine admission charges or daily charges under which expenses are allocated to the routine or special care reporting centers on the CHIA's hospital cost reports must be included in the total charges. This is the grand total of charges associated with the patient's inpatient stay. The total charge amount should be rounded to the nearest dollar. A charge of \$0 is not permitted unless the patient has a special Departure Status.
Reference Table:	No

TotalChargesAncillaries

Short Description:	Hospital ancillary charges
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	10
CHIA-Derived:	No
Description:	The full, undiscounted charges summarized by a specific ancillary service revenue code(s).
Reference Table:	No

TotalChargesRoutine

Short Description:	Hospital routine charges
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	10
CHIA-Derived:	No
Description:	The full, undiscounted charges for patient care summarized by prescribed revenue code for routine accommodation services as specified in Inpatient Data Code Table(3).
Reference Table:	No

TotalChargesSpecial

Short Description:	Special charges for hospital services
Primary Table:	Discharge
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	10
CHIA-Derived:	No
Description:	The full, undiscounted charges for patient care summarized by prescribed revenue code for accommodation services in those special care units which provide patient care of a more intensive nature than that provided in the general medical care units, as specified in Inpatient Data Code Table(3).
Reference Table:	No

TransmittalID

Short Description:	CHIA created field
Primary Table:	SubmissionLog
Release Level:	CORE
Data Type:	Identifier
Format:	Integer
Length:	5
CHIA-Derived:	No
Description:	CHIA processing field
Reference Table:	No

TypeofService

Short Description:	CHIA-created field
Primary Table:	Service
Release Level:	CORE
Data Type:	Categorical
Format:	VARCHAR
CHIA-Derived:	No
Description:	Code ANC used to indicate ancillary services and Code ACC used to indicate accommodation services.
Reference Table:	No

UHIN

Short Description:	Unique patient ID created by CHIA
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Identifier
Format:	VARCHAR
Length:	9
CHIA-Derived:	No
Description:	CHIA-created unique identifier of the patient. Linkable across records and fiscal years. Each patient is given by CHIA a Unique Health Information Number (UHIN), which is a surrogate key that can link patients over time and across facilities. The data element is blank, a single dash (-) appears in the UHIN field. It is valid for facilities to report that the unique patient identifier is unknown. In these cases, the UHIN appears as "000000001." The utility of the UHIN field is dependent on the reporting data. For a small number of facilities, little or no UHIN data exists, as these institutions failed to report patients' uniquely identified information. Other facilities reported the same data repeatedly, resulting in numerous admissions for one UHIN. In other cases, the demographic information (age, sex, etc.) was not consistent when a match did exist with the UHIN. Some explanations for this include assignment of a mother's unique identifiers to her infant or assignment of a spouse's unique identifiers to a patient. Invalid data is assigned a UHIN value of "4."
Reference Table:	No

UHIN_SequenceNo

Short Description:	Order of hospital discharges for a patient.
Primary Table:	Discharge
Release Level:	LDS
Data Type:	Continuous
Format:	VARCHAR
Length:	3
CHIA-Derived:	Yes
Description:	This calculated field indicates the chronological order of Inpatient discharge for patients with multiple Inpatient discharges in a fiscal year. A match with the UHIN only, is used to make the determination that a patient has had multiple discharges. The Sequence Number uses the following data conventions: (1) The sequence number is calculated by sorting the file by UHIN and discharge date (in ascending order). (2) The sequence number is then calculated by incrementing a counter for each UHIN's set of discharges. A sequence number of "1" indicates the first discharge for the UHIN in that fiscal year. (3) If a UHIN has two visits on the same day, the visit date is used as the secondary sort key. (4) If the UHIN is undefined (not reported, unknown or invalid), the sequence number is set to zero.
Reference Table:	No

UnitsOfService

Short Description:	Number of days with an Accommodation charge
Primary Table:	Service
Linking Tables:	Service
Release Level:	CORE
Data Type:	Continuous
Format:	Integer
Length:	6
CHIA-Derived:	No
Description:	Number of days with an Accommodation charge
Reference Table:	No

VeteransStatus

Short Description:	Indicates Veteran status
Primary Table:	Discharge
Release Level:	GOV
Data Type:	Categorical
Format:	VARCHAR (N)
Length:	1
CHIA-Derived:	No
Description:	Indicates Veteran status, using the below codes. <ul style="list-style-type: none">• 1: Yes• 2: No (includes never in military, currently inactive duty, National Guard or reservist with 6 months or less active duty)• 3: Not applicable (should be used for patients who have not turned 18 years old)• 4: Not determined (information not available)

Year

Short Description:	Indicates Fiscal Year of submission.
Primary Table:	Discharge
Linking Tables:	Service SubmissionLog
Release Level:	CORE
Data Type:	Integer
Format:	YYYY
Length:	4
CHIA-Derived:	No
Description:	Fiscal Year the data was submitted.
Reference Table:	No

Longer Reference Tables

FY 2025 HIDD has 20 standard reference tables. These relate to categorical variables that are driven by the *Hospital Inpatient Discharge Database October 2020 Submission Guide*. Some of the tables have been integrated into the data dictionary. This section contains longer tables used by multiple data elements. Users of the data with additional questions about any specific Reference table should contact CHIA at CaseMix.data@chiamass.gov.

Table 1a. Admission Source

Principal Data Element: AdmissionSourceCode1
Other Data Elements: AdmissionSourceCode2
Rules: All other values are invalid.
Last Updated: 04/2020

Code	Description
0	Information Not Available
1	Direct Physician Referral
2	Within Hospital Clinic Referral
3	Direct Health Plan Referral/HMO Referral
4	Transfer from Acute Hospital
5	Transfer from a Skilled Nursing Facility (SNF)
6	Transfer from Intermediate Care Facility (ICF)
7	Outside Hospital Emergency Room Transfer
8	Court/Law Enforcement
9	Other (to include level 4 Nursing Facility)
F	Transfer from a Hospice Facility
J	Transfer from another unit within same hospital
K	Transfer from a Designated Disaster Alternative Care Site
L	Outside Hospital Clinic Referral
M	Walk-In/Self-Referral
R	Within Hospital ER Transfer
T	Transfer from Another Institution's Ambulatory Surgery (SDS)
U	Transfer to Swing bed in same facility
V	Transfer from another facility to Swing bed

Code	Description
W	Extramural Birth
X	Observation
Y	Within Hospital Ambulatory Surgery Transfer (SDS Transfer)

Table 1b. Newborn Admission Source

Code	Description (Specific to Newborn)
0	Information Not Available
A	Normal Delivery
B	Premature Delivery
C	Sick Baby
D	Extramural Birth

Table 2. Condition Present

Principal Data Element: PrimaryConditionPresent
Other Data Elements: ConditionPresent
ConditionPresentECode2
Other Data Elements: ConditionPresent, ConditionPresentECode
Rules: All other values are invalid.
Last Updated: 011/31/2017

Code	Description
Y	Yes
N	No
U	Unknown
W	Clinically undetermined
1	Not applicable (only valid for NCHS official published list of not applicable ICD-10-CM codes for POA flag)
[Blank]	Not applicable (only valid for NCHS official published list of not applicable ICD-10-CM codes for POA flag)

Table 3. Patient Status

Look-up Table: Patient Status
Principal Data Element: Patient Status
Principal Data Element: PatientStatus
Rules: All other values are invalid.
Last Updated: 04/21/2020

Code	Description
01	Discharged/transferred to home or self-care (routine discharge)
02	Discharged/transferred to another short-term general hospital for inpatient care
03	Discharged, transferred to Skilled Nursing Facility (SNF)
04	Discharged/transferred to an Intermediate Care Facility (ICF)
05	Discharged/transferred to a Designated Cancer Center or Children's Hospital.
06	Discharged/transferred to home under care of organized home health service organization
07	Left against medical advice (AMA)
08	Discharged/transferred to home under care of a Home IV Drug Therapy Provider
09	Not allowed in the MA Hospital Inpatient Discharge Data
12	Discharged Other
13	Discharged/transferred to rehab hospital
14	Discharged/transferred to rest home
15	Discharged to Shelter
20	Expired (or did not recover - Christian Science Patient)
41	Expired in a Medical Facility (e.g., hospital, SNF, ICF, or free standing hospice)
43	Discharged/transferred to federal healthcare facility
50	Discharged to Hospice - Home
51	Discharged to Hospice Medical Facility
61	Discharged/transferred within this institution to a hospital-based Medicare-approved swing bed
62	Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital.
63	Discharged/transferred to a Medicare certified long term care hospital.
64	Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare

Code	Description
65	Discharged/transferred to psychiatric hospital or psychiatric distinct part unit of a hospital.
66	Discharged/transferred to a Critical Access Hospital (CAH).
69	Discharged/transferred to a Designated Alternative Care Site.
70	Discharged/transferred to another type of health care institution not defined elsewhere in this code list
81	Discharged to home or self-care with a planned acute care hospital inpatient readmission
82	Discharged/transferred to a short-term general hospital for inpatient care with a planned acute care hospital inpatient readmission
83	Discharged/transferred to a skilled nursing facility (SNF) with Medicare certification with a planned acute care hospital inpatient readmission
84	Discharged/transferred to a facility that provides custodial or supportive care with a planned acute care hospital inpatient readmission
85	Discharged/transferred to a designated cancer center or children's hospital with a planned acute care hospital inpatient readmission
86	Discharged/transferred to home under care of organized home health service organization with a planned acute care hospital inpatient readmission
87	Discharged/transferred to court/law enforcement with a planned acute care hospital inpatient readmission
88	Discharged/transferred to a federal health care facility with a planned acute care hospital inpatient readmission
89	Discharged/transferred to a hospital-based Medicare approved swing bed with a planned acute care hospital inpatient readmission
90	Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital with a planned acute care hospital inpatient readmission
91	Discharged/transferred to a Medicare certified long term care hospital (LTCH) with a planned acute care hospital inpatient readmission
92	Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare with a planned acute care hospital inpatient readmission
93	Discharged/transferred to a psychiatric distinct part unit of a hospital with a planned acute care hospital inpatient readmission
94	Discharged/transferred to a Critical Access Hospital (CAH) with a planned acute care hospital inpatient readmission
95	Discharged/transferred to another type of health care institution not defined elsewhere in this code list with a planned acute care hospital inpatient readmission

Table 4. Payer Type

Principal Data Element: PayerType
Other Data Elements: ConditionPresent, ConditionPresentECode
Principal Data Element: Payer Type
Other Data Element: ManagedCareCode/MCareMCaidPrivCode
Rules: All other values are invalid.
Last Updated: 01/31/2017

Note: New code “P” added in FY 25.

Payer Type Code	Payer Type Abbreviation	Payer Type Definition
1	SP	Self-Pay
2	WOR	Worker's Compensation
3	MCR	Medicare
F	MCR-MC	Medicare Managed Care (includes Medicare Advantage)
4	MCD	Medicaid
B	MCD-MC	Medicaid Managed Care / MCO
5	GOV	Other Government Payment
7	COM	Commercial Insurance
D	COM-MC	Commercial Managed Care
8	HMO	HMO
9	FC	Free Care
0	OTH	Other Non-Managed Care Plans
E	PPO	PPO and Other Managed Care Plans Not Elsewhere Classified
H	HSN	Health Safety Net
J	POS	Point-of-Service Plan
K	EPO	Exclusive Provider Organization
T	AI	Auto Insurance
N	None	None (Valid only for Secondary Payer)
Q	CommCare	Commonwealth Care/Connector Care Plans
Z	DEN	Dental Plans
S	SCO/ICO	Senior Care Options / Integrated Care Organization
A	MCD-ACO	Medicaid Accountable Care Organization

Payer Type Code	Payer Type Abbreviation	Payer Type Definition
C	COM-ACO	Commercial Accountable Care Organization
P	PACE	Program of All-Inclusive Care for the Elderly (PACE)
1	SP	Self-Pay
2	WOR	Worker's Compensation

Table 5. Payment Source

Principal Data Element: PayerCode1
Other Data Element: PayerCode2
PrimaryPayerType
SecondaryPayerType
Rules: All other values are invalid.
Some codes are valid as Secondary Source of Payment.
Last Updated: 04/01/2023
Refer to complete listing at: [CHIA Payer Source Codes](#)

Table 6. State

Principal Data Element: PermanentPatientStateLDS
Other Data Element: TemporaryPatientStateLDS Rules
Rules: All other values are invalid.
Must be present when Patient Country is 'US'.
Must be valid U.S. postal code for state.

Code	Description
CT	Connecticut
ME	Maine
MA	Massachusetts
NH	New Hampshire
NY	New York
RI	Rhode Island
VT	Vermont

Note: The LDS includes only the states listed above. The default code of XX is used for any other state or U.S. territory.