



**DALHOUSIE
UNIVERSITY**

Health Data Nova Scotia

MED Data Dictionary

MSI Physician Billings

Last Revised: November, 2017

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Summary of the MED dataset

Purpose:	Recording physician billing information, detailed administrative records regarding a service encounter between an individual and a provider.
Data Years:	Fiscal 1997 – 2015 * (April 1 to March 31)
Source Agency:	Medavie Blue Cross
Database Contact:	Jordan Farrell – 902.494.3688 – jordan.farrell@nshealth.ca
Type:	Annual administrative records
ICD Coding:	ICD-9-CM
Target Population:	All individuals, excluding military, receiving billable services from physicians in Nova Scotia
Security & Access:	Apply for access
Legality:	Custodian: Department of Health and Wellness Use of data for research purposes must be PHIA and PIPEDA Compliant

Variable Summary:

- Individual demographic information (e.g. birth date, sex, postal code)
- Physician information (e.g. specialty, ID number for linkage to the physician registry)
- Billing Information & Payment Responsibility
- Diagnosis Codes and procedure codes

More Information:

* - The 1995 and 1996 datasets contain many commonly used research variables and may be recommended for use depending on the requirements of a research project. 1989 – 1994 are available however these datasets contain less than half the variables available from 1997 onward.

There is only one diagnosis code from 1989-1996, and only the first three digits (pre-decimal) were recorded. From 1997 forward up to three diagnosis codes with no length restrictions are available.

Dataset Details

The datasets are named such that *nn* represents the last two digits of the fiscal year the dataset records. E.g. MED14 contains physician billings information for the fiscal year 2014.

MEDnn

The MED datasets contain administrative records for each insured service encounter rendered by a physician and paid for by the Nova Scotia Medical Services Insurance (MSI). Each record represents a service encounter not an individual, it's possible for the data to contain several records for a single service encounter (e.g. when a flu shot is administered, two records are generated - one for the shot itself, and another for associated medical supplies that are required to administer the shot).

Because of this a unique service encounter record is identified by an individual's encrypted health card number (*msi*), physician identification number (*doctor*) and date of service (*dxdate*). The physician may repeat the same diagnosis code(s) on multiple records for different procedures or supply orders. To eliminate duplicates when counting diagnoses, sort your data by patient identifier (*msi*), date of service (*dxdate*), physician identifier (*doctor*), and primary diagnosis (*dxcode1*) removing duplicate entries.

The data are compiled annually for each fiscal year, and are not cumulative between years.

Definitions

ICD-9-CM Codes:

ICD-9-CM is the: *International Classification of Diseases, 9th edition, Clinical Modification*.

The ICD-9-CM classification system is a series of codes used by physicians, hospitals, and health workers to standardize diagnosis and procedure records for all medical service encounters.

There are also ICD-9-CM (E) codes which indicate an external cause of injury which initiated the service encounter. These codes are in the *External Causes of Injury* (The E-Section) of the ICD-9-CM library.

There is only one diagnosis code available during the years 1989-1996, and only the first three digits (pre-decimal) were recorded (e.g. dxcode 300.12 is recorded as 300). From 1997 forward up to three diagnosis codes with no length restrictions are available. However, they are recorded as numbers without a decimal (e.g. dxcode 300.12 is recorded as 30012).

Identification of appropriate codes for a research project requires clinical judgment, it is the responsibility of the investigator to provide HDNS with the requested ICD codes for a research project. HDNS does *not* identify ICD codes for research projects, however a library of ICD codes used in previous projects does exist for reference.

SAS Date Format:

Variables representing dates are stored in the SAS date format. This format is a value that represents the number of days between January 1, 1960, and the specified date. Dates before January 1, 1960, are negative numbers; dates after are positive numbers. SAS dates account for all leap year days, and can reliably tell you what day of the week a particular day was going back to Sept. 1752.

SAS dates can be formatted by HDNS to appear as human-readable dates for research projects.

Units of Value:

MSI uses a term called *units* to represent the value of a service encounter. The value of a unit is determined by the current tariff prices, which are the actual monetary value of the provided service. Anaesthetic services have a different unit value than all other medical services. Tariff prices are usually updated at the start of every fiscal year, consult the MSI Physician Manual for current tariff prices.

Variables in the MED dataset

Admission Date

Variable Name	addate
Label	Hospital Admit Date
Definition	The date of admission to the hospital
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	<p>The date of admission (<i>addate</i>) may be recorded as being months or years prior to the date of service (<i>dxdate</i>). This is not necessarily a mistake in the data, it would mean that the individual was admitted prior to the current observation.</p> <p>A record's <i>dxdate</i> represents the date the service encounter occurred. The <i>addate</i> should always be less than or equal to <i>dxdate</i> otherwise a mistake was made in the administrative data entry process.</p> <p>Records with a null value indicate the individual was not admitted to a hospital prior to, or for that particular observation.</p> <p>The admission date (<i>addate</i>) is stored in the SAS date format, which is a value that represents the number of days between January 1, 1960, and a specified date. Dates before January 1, 1960, are negative numbers; dates after are positive numbers.</p>
Dates Available	Fiscal 1997 - 2015
History	

Age

Variable Name	age
Label	Patient Age
Definition	Individual's age in years at day of service
Data Type	NUM
Data Element Length	3
Field Values	
Additional Information	Not available as a variable before 1997 - can be derived on request
Dates Available	Fiscal 1997 - 2015
History	

Amount Approved

Variable Name	approved
Label	Amount Approved (Cents)
Definition	The value (in cents) that has been assessed, and approved for the service encounter.
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	<p>Amount approved (<i>approved</i>) has a negative value for reversals/deletions.</p> <p>There was a cap on how much annual income a physician could make. Once a particular physician had been paid the cap amount by the province, they were only paid 50% of the approved value of their services. As of 1997 <i>approved</i> and <i>paid</i> are the same in most non-shadow billing records.</p>
Dates Available	Fiscal 1991 - 2015
History	

Amount Paid

Variable Name	paid
Label	Amount Paid (Cents)
Definition	The total amount (in cents) that has been paid for the service encounter.
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	<p>Amount paid (<i>paid</i>) has a negative value for reversals/deletions.</p> <p>There was a cap on how much annual income a physician could make. Once a particular physician had been paid the cap amount by the province, they were only paid 50% of the approved value of their services. As of 1997 <i>approved</i> and <i>paid</i> are the same in most non-shadow billing records.</p>
Dates Available	Fiscal 1989 - 2015
History	

CCP Category

Variable Name	ccpcat
Label	CCP (Procedure) Category
Definition	Category of the procedure for which the individual was billed
Data Type	CHAR
Data Element Length	4
Field Values (Label)	<p>ADON (Add-on)</p> <p>ALPM (Alternate Payments)</p> <p>ANAE (Anaesthesia)</p> <p>BOGR (Bone Grafts)</p> <p>BTOP (Boarding, Transportation, and Ostomy)</p> <p>BULK (Bulk Billed)</p> <p>CASP (Casts and Splints)</p> <p>COCR (Complete Care)</p> <p>CONS (Consultation)</p> <p>CRCR (Intensive/Critical Care)</p> <p>DEFT (Default)</p> <p>DISL (Dislocation)</p> <p>INCD (Internal MMC Code)</p> <p>MAAS (Manual Assess)</p> <p>MAFR (Major Fracture)</p> <p>MASG (Major Surgery)</p> <p>MIFR (Minor Fracture)</p> <p>MISG (Minor Surgery)</p> <p>OBST (Obstetrical)</p> <p>OPTO (Optometry)</p> <p>PMNO (Pain Management)</p> <p>PSYC (Psychiatric Care)</p> <p>VADT (Diagnostic & Therapeut (VA))</p> <p>VEDT (Diagnostic & Therapeut (VE))</p> <p>VIST (Visit)</p>
Additional Information	<p>A crosswalk file does exist to convert FEE codes to CCP codes, however conversion should be considered an approximation.</p> <p>Check the MSI Physician's Manual (external link) for CCP code information and descriptions.</p>
Dates Available	Fiscal 1997 - 2015
History	Replaces the Nova Scotia specific FEE Code variables

CCP Code

Variable Name	ccpcode
Label	CCP (Procedure) Code
Definition	The billable procedure which the individual received
Data Type	CHAR
Data Element Length	5
Field Values	Null Value: “ ”
Additional Information	<p>A crosswalk file does exist to convert FEE codes to CCP codes, however conversion should be considered an approximation.</p> <p>Check the MSI Physician's Manual (external link) for CCP code information and descriptions.</p>
Dates Available	Fiscal 1997 - 2013
History	Replaces the Nova Scotia specific FEE Code variables

CCP Qualifier

Variable Name	ccpqual
Label	CCP (Procedure) Qualifier
Definition	CCP qualifier to determine specifics regarding the procedure
Data Type	CHAR
Data Element Length	1
Field Values	Null Values: “ ”
Additional Information	<p>A qualifier is an Alpha character appended to some service codes to subdivide the code and thereby distinguish differences specific to that procedure. e.g. 03.26A, 98.12B.</p> <p>A crosswalk file does exist to convert FEE codes to CCP codes, however conversion should be considered an approximation.</p> <p>Check the MSI Physician's Manual (external link) for CCP code information and descriptions.</p>
Dates Available	Fiscal 1997 - 2015
History	Replaces the Nova Scotia specific FEE Code variables

Date of Birth

Variable Name	dob
Label	Date of Birth
Definition	Individual's date of birth
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	<p>Due to confidentiality reasons date of birth will not be released in full to external researchers because of the potential to identify individuals.</p> <p>Month and Year of birth may be released if required for a research project and approved by the HDNS Data Access Committee. Alternatively, a variable for age at a given index date may be derived by HDNS and released.</p> <p>Date of birth (<i>dob</i>) is stored in the SAS date format, which is a value that represents the number of days between January 1, 1960, and a specified date. Dates before January 1, 1960, are negative numbers; dates after are positive numbers.</p>
Dates Available	Fiscal 1989 - 2015
History	

Date of Service

Variable Name	dxdate
Label	Date of Service
Definition	Date service was provided
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	Date of service (<i>dxdate</i>) is stored in the SAS date format, which is a value that represents the number of days between January 1, 1960, and a specified date. Dates before January 1, 1960, are negative numbers; dates after are positive numbers.
Dates Available	Fiscal 1989 - 2015
History	

Diagnostic Code 1

Variable Name	dxcode1
Label	ICD9CM Diagnostic Code 1
Definition	International Classification of Diseases, 9th edition, Clinical Modification Primary Diagnostic Code
Data Type	CHAR
Data Element Length	5
Field Values	ICD-9-CM Codes
Additional Information	<p>The decimals in <i>dxcode1</i> to <i>dxcode3</i> have been removed (e.g. <i>dxcode</i> 300.1 is recorded as 3001 in this dataset).</p> <p>ICD-9-CM is a series of codes used by physicians, hospitals, and allied health workers to standardize diagnosis records for all service encounters.</p>
Dates Available	Fiscal 1989 - 2015
History	<p>1989 – 1996: Only the first three digits (pre-decimal) are available.</p> <p>1989 – 1996: Only one diagnosis code is available (<i>dxcode</i>).</p>

Diagnostic Code 2

Variable Name	dxcode2
Label	ICD9CM Diagnostic Code 2
Definition	International Classification of Diseases, 9th edition, Clinical Modification secondary diagnostic code
Data Type	CHAR
Data Element Length	5
Field Values	ICD-9-CM Codes
Additional Information	<p>The decimals in <i>dxcode1</i> to <i>dxcode3</i> have been removed (e.g. dxcode 300.1 is recorded as 3001 in this dataset).</p> <p>ICD-9-CM is a series of codes used by physicians, hospitals, and allied health workers to standardize diagnosis records for all service encounters.</p>
Dates Available	Fiscal 1997 - 2015
History	<p>1989 – 1996: Only the first three digits (pre-decimal) are available.</p> <p>1989 – 1996: Only one diagnosis code is available (<i>dxcode</i>).</p>

Diagnostic Code 3

Variable Name	dxcode3
Label	ICD9CM Diagnostic Code 3
Definition	International Classification of Diseases, 9th edition, Clinical Modification tertiary diagnostic code
Data Type	CHAR
Data Element Length	5
Field Values	ICD-9-CM Codes
Additional Information	<p>The decimals in <i>dxcode1</i> to <i>dxcode3</i> have been removed (e.g. <i>dxcode</i> 300.1 is recorded as 3001 in this dataset).</p> <p>ICD-9-CM is a series of codes used by physicians, hospitals, and allied health workers to standardize diagnosis records for all service encounters.</p>
Dates Available	Fiscal 1997 - 2015
History	<p>1989 – 1996: Only the first three digits (pre-decimal) are available.</p> <p>1989 – 1996: Only one diagnosis code is available (<i>dxcode</i>).</p>

Hospital Unit

Variable Name	hospunit
Label	Hospital (Treatment) Unit
Definition	Hospital unit where treatment was received
Data Type	CHAR
Data Element Length	4
Field Values	DTOX (Detox) EMCC (Emergency) INCU (Intensive Care) INPT (Inpatient) NICU (Neonatal Intensive Care) OTPT (Outpatient) Null Values: “ ”
Additional Information	Regarding payment of physicians' claims there may be inconsistencies in coding practises for hospital unit (<i>hospunit</i>) between hospitals and Medavie.
Dates Available	Fiscal 1997 - 2015
History	

Health Service ID

Variable Name	hsid
Label	Health Service (Unique) ID
Definition	Unique health services identification number
Data Type	CHAR
Data Element Length	6
Field Values	Null Values: None
Additional Information	The health service ID is generated internally at Medavie. It uniquely identifies each record in the health service file and is used to link the data contained in the health service file to the Medicare claims data.
Dates Available	Fiscal 1997 - 2015
History	

ICU Date

Variable Name	icudate
Label	Admission to ICU Date
Definition	Date of admission to the intensive care unit
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	<p>The ICU admission date (<i>icudate</i>) may be recorded as being months or years prior to the date of service (<i>dxdate</i>). This is not necessarily a mistake in the data, it would mean that the individual was admitted to the ICU prior to the current observation.</p> <p>Records with a null value indicate the individual was not admitted to the Intensive Care Unit prior to, or at the time of that particular observation.</p> <p>A record's <i>dxdate</i> represents the date the service encounter occurred. The <i>icudate</i> should always be less than or equal to <i>dxdate</i> otherwise a mistake was made in the administrative data entry process.</p> <p>ICU date (<i>icudate</i>) is stored in the SAS date format, which is a value that represents the number of days between January 1, 1960, and a specified date. Dates before January 1, 1960, are negative numbers; dates after are positive numbers.</p>
Dates Available	Fiscal 1997 - 2015
History	

Injury Diagnostic Code

Variable Name	injurydx
Label	ICD9CM Injury (E) Code
Definition	ICD-9-CM (E) Injury code that initiated the service encounter
Data Type	CHAR
Data Element Length	5
Field Values	
Additional Information	An ICD9CM Injury (E) Code indicates an external cause of injury behind the service encounter. These codes are located in the "External Causes of Injury", or "E-Section" of the International Classification of Diseases.
Dates Available	Fiscal 1997 - 2015
History	

Health Care Number

Variable Name	msi
Label	Patient MSI Health Card Number (HCN)
Definition	Encrypted MSI health card number
Data Type	CHAR
Data Element Length	24
Field Values	Null Values: “ ”
Additional Information	<p>Individual's msi health card number is not available for release due to confidentiality reasons. It is used internally by HDNS for data linkage.</p> <p>In some cases a valid HCN is not available. As a result the field will either be left blank or filled with a “dummy” HCN. Observations containing a dummy HCN, or a null value are to be excluded from most analysis which focus on the MSI eligible population.</p> <p>Unique IDs can be generated by HDNS for research projects which can be used to link between datasets or count observations of individuals.</p>
Dates Available	Fiscal 1989 - 2015
History	

Patient County

Variable Name	pcounty
Label	Patient County
Definition	County or city in which the individual resides
Data Type	CHAR
Data Element Length	2
Field Values (Label)	<p>00 (Unknown) 01 (Annapolis) 02 (Antigonish) 03 (Cape Breton) 04 (Colchester) 05 (Cumberland) 06 (Digby) 07 (Guysborough) 08 (Halifax County) 09 (Hants) 10 (Inverness) 11 (Kings) 12 (Lunenburg) 13 (Pictou) 14 (Queens) 15 (Richmond) 16 (Shelburne) 17 (Victoria) 18 (Yarmouth) 19 (City of Halifax) 20 (City of Dartmouth) 21 (Sydney) 99 (Out-of-Province)</p> <p>Null Values: Blank</p>
Additional Information	
Dates Available	Fiscal 1989 - 2015
History	

Patient Postal Code

Variable Name	postcode
Label	Patient Postal Code
Definition	Postal code of the individual's most recent correspondence address given to the provider.
Data Type	CHAR
Data Element Length	6
Field Values	Null Values: " "
Additional Information	Only the first three digits are available for release. Full postal code may be released only if deemed necessary for the research project by the HDNS Data Access Committee.
Dates Available	Fiscal 1997 - 2015
History	

Payment Responsibility

Variable Name	payresp
Label	Payment Responsibility
Definition	Institute responsible for payment of treatment
Data Type	CHAR
Data Element Length	3
Field Values (Label)	COM (Community Services) MSI (Medical Services Insurance) Null Values: None
Additional Information	
Dates Available	Fiscal 1997 - 2015
History	

Program

Variable Name	program
Label	MSI Program
Definition	The MSI Program responsible for the service encounter claim
Data Type	CHAR
Data Element Length	2
Field Values (Label)	HD (Home Dialysis) MC (Medicare) Null Values: None
Additional Information	
Dates Available	Fiscal 1997 - 2015
History	

Provider Billed Specialty

Variable Name	bspecial
Label	Provider (Billing) Specialty
Definition	The specialty under which the provider billed for the service encounter. Not necessarily the provider's main specialty.
Data Type	CHAR
Data Element Length	4
Field Values (Label)	<p>ANAE (Anaesthetist)</p> <p>ANPA (Anatomical Pathology)</p> <p>CARD (Cardiology)</p> <p>CASG (Cardiovasc/Thoracic Surgery)</p> <p>CLIA (Clinical Immunology and Allergy)</p> <p>COMD (Community Medicine)</p> <p>DENT (Dental General Practitioner)</p> <p>DERM (Dermatology)</p> <p>DIRD (Diagnostic Radiology)</p> <p>EMMD (Emergency Medicine)</p> <p>ENDO (Endodontics)</p> <p>ENME (Endocrinology and Metabolism)</p> <p>GAST (Gastroenterology)</p> <p>GEMD (Geriatric Medicine)</p> <p>GENP (General Practitioner)</p> <p>GNSG (General Surgery)</p> <p>HAGY (Haematology)</p> <p>HAPA (Haematology Pathology)</p> <p>HUGE (Human Genetics)</p> <p>INDI (Infectious Diseases)</p> <p>INMD (Internal Medicine)</p> <p>MDON (Medical Oncology)</p> <p>MEBI (Medical Biochemistry)</p> <p>MEGE (Medical Genetics)</p> <p>MEMI (Medical Microbiology)</p> <p>NCMD (Nuclear Medicine)</p> <p>NEPA (Neuropathology)</p> <p>NEPE (Neurology Paediatric)</p> <p>NEPH (Nephrology)</p> <p>NEUR (Neurology)</p> <p>NUSG (Neurosurgery)</p> <p>OBGY (Obstetrics & Gynaecology)</p> <p>ODON (Orthodontics)</p>

	OPHT (Ophthalmology) OPTO (Optometry) ORAL (Oral Surgery) ORTH (Orthopaedic Surgery) OTOL (Otolaryngology) PATH (General Pathology) PEDI (Pediatrics) PEDO (Pedodontics) PERI (Periodontics) PRPR (Prosthetics Provider) PSYC (Psychiatry) RADI (Diagnostic & Ther Radiology) RDON (Radiation Oncology) PHMD (Physical Medicine & Rehab) PLAS (Plastic Surgery) PROS (Prosthodontics) RHEU (Rheumatology) RSMD (Respiratory Medicine) THSG (Thoracic Surgery) UROL (Urology) VASG (Vascular Surgery)
Additional Information	<p>Provider billed specialty (<i>bspecial</i>) is the specialty that is billed on the service claim, it is not necessarily the physician's main specialty. The 'Provider Main Specialty' (<i>dspecial</i>) variable records the physician's licensed main specialty.</p>
Dates Available	Fiscal 1998 - 2015
History	

Provider County

Variable Name	dcounty
Label	Provider County
Definition	County or city of the provider's correspondence address
Data Type	CHAR
Data Element Length	2
Field Values (Label)	<p>00 (Unknown) 01 (Annapolis) 02 (Antigonish) 03 (Cape Breton) 04 (Colchester) 05 (Cumberland) 06 (Digby) 07 (Guysborough) 08 (Halifax County) 09 (Hants) 10 (Inverness) 11 (Kings) 12 (Lunenburg) 13 (Pictou) 14 (Queens) 15 (Richmond) 16 (Shelburne) 17 (Victoria) 18 (Yarmouth) 19 (City of Halifax) 20 (City of Dartmouth) 21 (Sydney) 33 (Sackville, N.B.) 99 (Out-of-Province)</p> <p>Null Values: " "</p>
Additional Information	Provider county (<i>dcounty</i>) is based on the postal code of the provider's correspondence address.
Dates Available	Fiscal 1989 - 2015
History	

Provider ID

Variable Name	doctor
Label	Provider ID (6 Digit)
Definition	Encrypted provider identification number
Data Type	CHAR
Data Element Length	24
Field Values	Null Values: “ ”
Additional Information	<p>Provider IDs are not available for release due to confidentiality reasons. They are used internally by HDNS for data linkage.</p> <p>In some cases a valid provider ID is not available. As a result the field will either be left blank or filled with a “dummy” ID. Observations containing a dummy ID, or a null value may not need to be excluded if a project’s scope does not need to identify individual providers.</p> <p>Unique IDs can be generated by HDNS for research projects which can be used to link between datasets or count observations of individuals.</p>
Dates Available	Fiscal 1989 - 2015
History	

Provider Main Specialty

Variable Name	dspecial
Label	Provider (Main) Specialty
Definition	Licensed (main) specialty of the physician. May not be the specialty that was billed for in the service encounter.
Data Type	CHAR
Data Element Length	4
Field Values (Label)	<p>ANAE (Anaesthetist)</p> <p>ANPA (Anatomical Pathology)</p> <p>CARD (Cardiology)</p> <p>CASG (Cardiovasc/Thoracic Surgery)</p> <p>CLIA (Clinical Immunology and Allergy)</p> <p>COMD (Community Medicine)</p> <p>DENT (Dental General Practitioner)</p> <p>DERM (Dermatology)</p> <p>DIRD (Diagnostic Radiology)</p> <p>EMMD (Emergency Medicine)</p> <p>ENDO (Endodontics)</p> <p>ENME (Endocrinology and Metabolism)</p> <p>GAST (Gastroenterology)</p> <p>GEMD (Geriatric Medicine)</p> <p>GENP (General Practitioner)</p> <p>GNSG (General Surgery)</p> <p>HAGY (Haematology)</p> <p>HAPA (Haematology Pathology)</p> <p>HUGE (Human Genetics)</p> <p>INDI (Infectious Diseases)</p> <p>INMD (Internal Medicine)</p> <p>MDON (Medical Oncology)</p> <p>MEBI (Medical Biochemistry)</p> <p>MEGE (Medical Genetics)</p> <p>MEMI (Medical Microbiology)</p> <p>NCMD (Nuclear Medicine)</p> <p>NEPA (Neuropathology)</p> <p>NEPE (Neurology Paediatric)</p> <p>NEPH (Nephrology)</p> <p>NEUR (Neurology)</p> <p>NUSG (Neurosurgery)</p> <p>OBGY (Obstetrics & Gynaecology)</p> <p>ODON (Orthodontics)</p> <p>OPHT (Ophthalmology)</p> <p>OPTO (Optometry)</p>

	ORAL (Oral Surgery) ORTH (Orthopaedic Surgery) OTOL (Otolaryngology) PATH (General Pathology) PEDI (Pediatrics) PEDO (Pedodontics) PERI (Periodontics) PSYC (Psychiatry) RADI (Diagnostic & Ther Radiology) RDON (Radiation Oncology) PHMD (Physical Medicine & Rehab) PLAS (Plastic Surgery) PROS (Prosthodontics) RHEU (Rheumatology) RSMD (Respiratory Medicine) THSG (Thoracic Surgery) UROL (Urology) VASG (Vascular Surgery) Null Values: None
Additional Information	Although provider main specialty (<i>dspecial</i>) is the physician's main specialty the service encounter may have the physician use another accredited specialty for billing purposes. That value is recorded as the 'Provider Billed Specialty' (<i>bspecial</i>) variable.
Dates Available	Fiscal 1989 – 2015
History	1989 – 1996: <i>dspecial</i> is a CHAR of Length 2

Provider Type

Variable Name	doctype
Label	Provider Type
Definition	Category of provider that attended the individual
Data Type	CHAR
Data Element Length	2
Field Values (Label)	NP (Nurse Practitioner) OP (Optometrlist) PH (Physician) PP (Out of Province) PR (Prosthetics) Null Values: None
Additional Information	
Dates Available	Fiscal 1997 - 2015
History	

Quantity of Treatment

Variable Name	quantity
Label	Quantity of Treatment
Definition	Modifies the unit value of treatment
Data Type	NUM
Data Element Length	3
Field Values	
Additional Information	<p>Used as a modifier for units of value, and may have different meanings depending on the services of the physician. <i>Quantity</i> indicates either the number of services performed (e.g. number of lesions treated), the length of time (e.g. 15 minute time blocks - detention, counselling) or the percentage of the body (e.g. burns) or surface area treated (e.g. sq. inches).</p> <p>MSI uses a term called <i>units</i> to represent the value of a service encounter. The value of a unit is determined by the current tariff prices, which are the actual monetary value of the provided service.</p>
Dates Available	Fiscal 1997 - 2015
History	

Reduced Units

Variable Name	reduced
Label	Reduced Units Indicator
Definition	Indicates if a reduced fee (in unit value) was billed
Data Type	CHAR
Data Element Length	1
Field Values (Label)	<p>Y (Yes)</p> <p>N (No)</p> <p>Null Values: None</p>
Additional Information	<p><i>Reduced</i> indicates whether or not the physician claimed a unit value which is less than the normal unit value for the provided service.</p> <p>MSI uses a term called <i>units</i> to represent the value of a service encounter. The value of a unit is determined by the current tariff prices, which are the actual monetary value of the provided service.</p>
Dates Available	Fiscal 1997 - 2015
History	

Referring Doctor's ID

Variable Name	referred
Label	Referring Doctors ID
Definition	Encrypted Identification number of doctor who referred the individual
Data Type	CHAR
Data Element Length	24
Field Values	Null Values: “ ”
Additional Information	<p>Provider IDs are not available for release due to confidentiality reasons. They is used internally by HDNS for data linkage.</p> <p>In some cases a valid provider ID is not available. As a result the field will either be left blank or filled with a “dummy” ID. Observations containing a dummy ID, or a null value may not need to be excluded if a project’s scope does not need to identify individual providers.</p> <p>Unique IDs can be generated by HDNS for research project-s which can be used to link between datasets or count observations of individuals.</p>
Dates Available	Fiscal 1991 - 2015
History	

Referring Doctor's Type

Variable Name	reftype
Label	Referring Doctors Type
Definition	Type of provider who referred the individual
Data Type	CHAR
Data Element Length	2
Field Values (Label)	DE (Dentist) MW (Midwife) NP (Nurse Practitioner) OP (Optometrlist) PH (Physician) PR (Prosthetics) PP (Out of Province) Null Values: “ ”
Additional Information	
Dates Available	Fiscal 1997 - 2015
History	

Referring Doctor's Specialty

Variable Name	rspecial
Label	Referring Doctors Specialty
Definition	Specialty of the referring provider
Data Type	CHAR
Data Element Length	4
Field Values (Label)	ANAE (Anaesthetist) ANPA (Anatomical Pathology) CARD (Cardiology) CASG (Cardiovascular/Thoracic Surgery) CLIA (Clinical Immunology and Allergy) COMD (Community Medicine) DENT (Dental General Practitioner) DERM (Dermatology) DIRD (Diagnostic Radiology) EMMD (Emergency Medicine) ENDO (Endodontics) ENME (Endocrinology and Metabolism) GAST (Gastroenterology) GEMD (Geriatric Medicine) GENP (General Practitioner) GNSG (General Surgery) HAGY (Haematology) HAPA (Haematology Pathology) HUGE (Human Genetics) INDI (Infectious Diseases) INMD (Internal Medicine) MDON (Medical Oncology) MEBI (Medical Biochemistry) MEGE (Medical Genetics) MEMI (Medical Microbiology) NCMD (Nuclear Medicine) NEPA (Neuropathology) NEPE (Neurology Paediatric) NEPH (Nephrology) NEUR (Neurology) NUSG (Neurosurgery) OBGY (Obstetrics & Gynaecology) ODON (Orthodontics) OPHT (Ophthalmology) OPTO (Optometry) ORAL (Oral Surgery) ORTH (Orthopaedic Surgery)

	OTOL (Otolaryngology) PATH (General Pathology) PEDI (Pediatrics) PEDO (Pedodontics) PERI (Periodontics) PHMD (Physical Medicine & Rehab) PLAS (Plastic Surgery) PROS (Prosthodontics) PSYC (Psychiatry) RADI (Diagnostic & Ther Radiology) RDON (Radiation Oncology) RHEU (Rheumatology) RSMD (Respiratory Medicine) THSG (Thoracic Surgery) UROL (Urology) VASG (Vascular Surgery)
Additional Information	
Dates Available	Fiscal 1997 - 2015
History	

Sex

Variable Name	sex
Label	Patient Gender
Definition	The individual's sex
Data Type	CHAR
Data Element Length	1
Field Values (Label)	F (Female) M (Male) Null Values: None
Additional Information	
Dates Available	Fiscal 1989 - 2015
History	

Shadow Billing

Variable Name	shadow
Label	Shadow Billing Flag [1]
Definition	Flag for whether or not shadow billing occurred
Data Type	CHAR
Data Element Length	1
Field Values (Label)	<p>Y (Yes)</p> <p>N (No)</p> <p>Null Values: None</p>
Additional Information	<p>Shadow Billing is an administrative process in which physicians submit service encounter information using province-specific FEE codes. Payment is not directly linked to the reported services, which causes differences between the amount approved (<i>approved</i>) and the amount paid (<i>paid</i>) in shadow billing records. Shadow billing records may be used to maintain historical measures of service encounters based on fee-for-service claims data.</p> <p>Check The Status of Alternative Payment Programs (2003/2004) (external link) for more information regarding shadow billing.</p>
Dates Available	Fiscal 1994 - 2015
History	

Treatment Location

Variable Name	location
Label	Treatment Location
Definition	Type of treatment facility in which the service encounter occurred
Data Type	CHAR
Data Element Length	4
Field Values (Label)	CCNT (Correctional Centre) HMHC (Home Hospital Care) HOME (Patient's Home) HOSP (Hospital) LODG (External Lodging) NRHM (Nursing Home) OFFC (Physician's Office) OTHR (Other)
Additional Information	LODG should only be used for BTO (Boarding, Transportation, and Ostomy) program claims that are entered internally for reimbursement of lodging fees (health service code B5000).
Dates Available	Fiscal 1997 - 2015
History	

Unit Value of Service

Variable Name	units
Label	Unit Value of Service
Definition	Value of service using the Unit Value System
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	<p>MSI uses a term called <i>units</i> to represent the value of a service encounter. The value of a unit is determined by the current tariff prices, which are the actual monetary value of the provided service.</p> <p>Check the MSI Physician's Manual (external link) for the tariff value of units.</p>
Dates Available	Fiscal 1997 – 2015
History	

Discontinued Variables

Diagnosis Code (Discontinued Format)

Variable Name	DXCODE
Label	Diagnostic Code (ICD-9)
Definition	Old ICD-9 Diagnosis code variable
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	If the physician could not find an appropriate ICD-9 code new codes were assigned. These were given a prefix of "Z". Since "Z" is not a number, they were recorded as 9000 codes. For example, "Z24" was recorded as 9024.
Dates Available	Fiscal 1989 – 1996
History	1989 – 1996: Only the first three digits (pre-decimal) are available, it is impossible to find dxcodes with digits after the decimal in this date range. dxcode was split into three variables in 1997 'dxcode1' 'dxcode2' and 'dxcode3'
"9000" Codes (Label)	Z14 (ECG or EKG (no diagnosis specified)) Z17 (Anaesthetic) Z18 (Surgical assistant) Z19 (Mantoux test) Z22 (Pregnancy examination, unconfirmed pregnancy) Z23 (Well baby care, no other diagnosis given) Z24 (Contraceptive advice, fitting of diaphragm) Z26 (Tubal ligation / vasectomy procedures) Z27 (Insertion of an I.U.D.) Z30 (Diphtheria) Z31 (Fluogen, Influenza) Z32 (Measles) Z33 (Mumps) Z34 (Cholera, H.I.B., Hepatovax B.) Z35 (Poliomyelitis) Z36 (Rabies) Z37 (Rubella) Z38 (Smallpox) Z39 (Tetanus) Z40 (Tuberculosis) Z41 (T.A.B.) Z42 (Typhus) Z43 (Whooping cough) Z44 (Yellow Fever)

Z49	(Tetanus toxoid, combined vaccines)
Z50	(M.M.R., Respiratory, Cold, Megavax, Pneumovax)
Z51	(Tine test)
Z52	(B-12 injection, no other diagnosis)
Z64	(Removal of sutures, no other diagnosis given)
Z70	(Newborn care)
Z99	(Pap smear only, no other diagnosis given)

FEE Code

Variable Name	FEECODE
Label	Fee Schedule Code
Definition	FEE schedule code
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	Nova Scotia specific Fee Codes. A crosswalk file is available to convert FEE codes to CCP codes, however the crosswalk is not always exact.
Dates Available	Fiscal 1989 - 1996
History	

FEE Group

Variable Name	FEEGRP
Label	Fee Group
Definition	FEE Group
Data Type	Num
Data Element Length	3
Field Values	Null Values: “.”
Additional Information	
Dates Available	Fiscal 1991 - 1996
History	

FEE Group Cluster

Variable Name	FEEGRPC
Label	
Definition	FEE Group cluster
Data Type	Char
Data Element Length	1
Field Values (Label)	A (Consultations) B (Office Visits) C (Emergency/Home) D (Hospital Visits) E (Emergency/OPD) F (Intensive Care) G (Psychiatric Services) H (Eye Exams) I (Other Diagnostic) J (Obstetrical Services) K (Major Surgery) L (Minor Surgery) M (Surgical Assistance) N (Anaesthesia) O (Optometry) P (Out of Province) Q (All Other) R (Temporary Code)
Additional Information	
Dates Available	Fiscal 1991 - 1996
History	

FEE Specialty Code

Variable Name	FSPECIAL
Label	Fee Specialty Code
Definition	FEE specialty code
Data Type	CHAR
Data Element Length	2
Field Values (Label)	A (General Practice) B (Anaesthesia) C (Dermatology) D (General/Thoracic Surgery) E (Internal Medicine/Pathology) F (Neuro Surgery) G (Obstetrics & Gynaecology) H (Ophthalmology & Otolaryngology) J (Otolaryngology) L (Paediatrics) M (Physical Medicine) N (Plastic Surgery) P (Diagnostic Radiology) Q (Therapeutic Radiology) R (Urology) S (Neurology) T (Optometry) U (Diagnostic - List I) V (Diagnostic - List II) W (Psychiatry) X (Orthopaedic Surgery) Y (Assist to Surgery) Z (Anaesthetic at Surgery)
Additional Information	
Dates Available	Fiscal 1989 - 1996
History	

Provider Community Size

Variable Name	Csize
Label	Physician Community Size
Definition	Estimated population of the community around the physician
Data Type	CHAR
Data Element Length	2
Field Values (Label)	01 (Under 2,000) 02 (2,000 - 10,000) 03 (10,000 - 35,000) 04 (35,000 - 100,000) 05 (Over 100,000)
Additional Information	Based on the postal code of the physician's correspondence address. Provider community size (<i>csize</i>) may or may not reflect the community in which the physician practises.
Dates Available	Fiscal 1989 - 1996
History	

Provider Group Code

Variable Name	docgrp
Label	Physician Group Code
Definition	Encrypted physician group code
Data Type	CHAR
Data Element Length	24
Field Values	
Additional Information	
Dates Available	Fiscal 1991 - 1996
History	

**Provider Main
Specialty
(Discontinued Format)**

Variable Name	dspecial
Label	Provider (Main) Specialty
Definition	Main specialty of the provider
Data Type	CHAR
Data Element Length	2
Field Values (Label)	00 (General Practice) 10 (Internal Medicine) 11 (Neurology) 12 (Paediatrics) 13 (Dermatology) 20 (General Surgery) 22 (Thoracic Surgery) 23 (Neurosurgery) 24 (Plastic Surgery) 25 (Orthopaedic Surgery) 26 (Urology) 27 (Vascular Surgery) 30 (Obstetrics & Gynaecology) 40 (Anaesthesia) 50 (Diagnostic Radiology) 51 (Therapeutic Radiology) 60 (Ophthalmology & Otolaryngology) 61 (Ophthalmology) 62 (Otolaryngology) 70 (Psychiatry) 85 (Pathology) 95 (Physical Medicine) 97 (Optometry)
Additional Information	
Dates Available	Fiscal 1989 – 1996
History	

Services

Variable Name	services
Label	Number of Services
Definition	
Data Type	NUM
Data Element Length	3
Field Values	
Additional Information	Field values information for Fiscal year 1996
Dates Available	Fiscal 1989 - 1996
History	

Unique Physician ID

Variable Name	UNIQUEID
Label	Unique Physician ID
Definition	
Data Type	NUM
Data Element Length	4
Field Values	
Additional Information	
Dates Available	Fiscal 1989 - 1995
History	

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