

AQI NACOR ADMINISTRATIVE DATA SET CONCEPTUAL DEFINITIONS

October 31, 2016 - FOR USE DURING 2017

	A	B	C	D	E	F
1	1st Level	2nd Level	Definition	Notes	AQI XML Schema Element	Source
2	Admission Status	Inpatient	Admission to an in-patient healthcare facility prior to or after the therapeutic or diagnostic procedure as a result of a physician's order	Synonym: Admitted Note: Includes same day admit patients	<AdmissionStatus>	CMS
3		Observation	A therapeutic or diagnostic procedure is performed in a healthcare facility without a physician's admission order	Synonym: Overnight recovery Note: The patient stays in an in-patient facility overnight (at least one midnight) but does not have a physician's order for admission. A patient who is in the hospital (without admission orders) with an expected stay of one midnight is an observation patient and an outpatient	<AdmissionStatus>	CMS
4		Ambulatory	A therapeutic or diagnostic procedure performed in a healthcare facility that does not require an overnight stay (less than 24 hours of care)	Synonyms: Day surgery, same-day surgery, outpatient	<AdmissionStatus>	CMS
5	Coverage Code			The conceptual definitions for these data elements are based on CMS billing codes		
6		MD-ALONE	The physician (a) personally performed the entire anesthesia service alone; or (b) is involved with one anesthesia case with a resident (physician is a teaching physician); or (c) is continuously involved in a single case involving a student nurse anesthetist; or (d) is working with a CRNA or AA in one anesthesia case and the services of each are found to be medically necessary	Clarifying Statement: Personally performed Note: Applies to DOs as well as MDs Medicare Anesthesia Documentation Modifier: AA-Anesthesia services performed personally by an anesthesiologist	<CoverageCode>	CMS Medicare Claims Processing Manual, Chapter 12 (rev.3476, 03-11-16)
7		MD-DIRECTING	The physician (a) performs and documents a pre-anesthetic examination and evaluation; and (b) prescribes and documents the anesthesia plan; and (c) personally participates in the most demanding procedures in the anesthesia plan, including induction and emergence, and documents this participation; and (d) ensures that any procedures in the anesthesia plan that he or she does not perform are performed by a qualified anesthetist; and (e) monitors the course of anesthesia administration at frequent intervals; and (f) remains physically present and available for immediate diagnosis and treatment of emergencies; and (g) provides and documents indicated-post-anesthesia care for two, three or four concurrent procedures involving qualified individuals, all of whom could be CRNAs, AAs, SRNAs, interns, residents or combinations of these individuals. A physician who is concurrently directing the administration of anesthesia to not more than four surgical patients cannot ordinarily be involved in furnishing additional services to other patients. However, addressing an emergency of short duration in the immediate area, administering an epidural or caudal anesthetic to ease labor pain, or periodic, rather than continuous, monitoring of an obstetrical patient does not substantially diminish the scope of control exercised by the physician in directing the administration of anesthesia to surgical patients. It does not constitute a separate service for the purpose of determining whether the medical direction criteria are met. Further, while directing concurrent anesthesia procedures, a physician may receive patients entering the operating suite for the next surgery, check or discharge patients in the recovery room, or handle scheduling matters without affecting fee schedule payment. (Chapter 12 Section 50C of the claims processing manual)	Note: Applies to DOs as well as MDs Medicare Anesthesia Documentation Modifier: QK--Medical direction by a physician of two, three, or four concurrent anesthesia procedures; QY--Medical direction of one CRNA/CAA by an anesthesiologist	<CoverageCode>	CMS Medicare Claims Processing Manual, Chapter 12 (rev.3476, 03-11-16)
8		MD PRESENT BUT NOT DIRECTING	The physician is working with one or more CRNAs but does not fulfill or does not document all of the requirements for Medical Direction	Note: Applies to DOs as well as MDs Medicare Anesthesia Documentation Modifier: There is no current Medicare Documentation Modifier for this	<CoverageCode>	
9		MD-SUPERVISING	The physician is involved in more than four concurrent cases	Note: Applies to DOs as well as MDs Medicare Anesthesia Documentation Modifier: AD--Medically supervised by a physician, more than four concurrent anesthesia procedures	<CoverageCode>	CMS Medicare Claims Processing Manual, Chapter 12 (rev.3476, 03-11-16), modified
10		CRNA-ALONE	The CRNA provides legally authorized anesthesia services without medical direction by a physician	Medicare Anesthesia Documentation Modifier: QZ--CRNA service; provides anesthesia care without medical direction by a physician	<CoverageCode>	CMS Medicare Claims Processing Manual, Chapter 12 (rev.3476, 03-11-16), modified
11		CRNA-DIRECTED	The CRNA participates in a single anesthesia procedure which involves physician medical direction services	Medicare Anesthesia Documentation Modifier: QX--CRNA service with medical direction by a physician	<CoverageCode>	CMS Medicare Claims Processing Manual, Chapter 12 (rev.3476, 03-11-16), modified

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12		CRNA-SUPERVISED	The CRNA participates in a single anesthesia procedure which involves physician medical supervision services	Medicare Anesthesia Documentation Modifier: There is no current Medicare Documentation Modifier for this	<CoverageCode>	CMS Medicare Claims Processing Manual, Chapter 12 (rev.3476, 03-111-16), modified
13		CRNA-SUPERVISING	The teaching CRNA supervises a single case involving a student nurse anesthetist where the CRNA is continuously present and the teaching CRNA is not medically directed by an anesthesiologist	Synonym: Teaching CRNA Medicare Anesthesia Documentation Modifier: There is no current Medicare Documentation Modifier for this	<CoverageCode>	CMS Medicare Claims Processing Manual, Chapter 12 (rev.3476, 03-111-16), modified
14		CAA-DIRECTED	The CAA participates in a single anesthesia procedure which involves physician medical direction services	Note: CAA stands for Certified Anesthesiologist Assistant Medicare Anesthesia Documentation Modifier: QX--CAA service with medical direction by a physician	<CoverageCode>	CMS Medicare Claims Processing Manual, Chapter 12 (rev.3476, 03-111-16), modified
15		MD-MD	The teaching anesthesiologist is involved in the training of a resident in a single anesthesia case, two concurrent anesthesia cases involving residents, or a single anesthesia case involving a resident that is concurrent to another case paid under the medical direction rules	Clarifying Statement: Teaching anesthesiologist directing an anesthesiology resident Note: Also applies to MD-DO, DO-DO, and DO-MD Medicare Anesthesia Documentation Modifier: AA and QC--Teaching physician involved in the training of physician residents in up to two concurrent cases, or the training of physician residents in one case that is concurrent to another case paid under Medical Direction. The GC modifier is reported by the teaching physician to indicate he/she rendered the service in compliance with the teaching physician requirements in §100.1.2. One of the payment modifiers must be used in conjunction with the GC modifier. (Chapter 12, Section 50K) The teaching anesthesiologist should use the "AA" modifier and the "GC" certification modifier to report such cases. See §50 B. and §0 K. (Chapter 12, Section 100.1.2 A 4)	<CoverageCode>	CMS Medicare Claims Processing Manual, Chapter 12 (rev.3476, 03-111-16), modified
16	Location		A particular place or setting where the procedure was performed	Clarifying Statement: Perioperative care may have been provided in more than one setting. The setting (location) of where the actual procedure, exclusive of any pre-op or post-op care, was performed should be reported		Miriam Webster's Dictionary, modified
17		Ambulance - Land	A land vehicle specifically designed, equipped and staffed for lifesaving and transporting the sick or injured.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
18		Ambulatory Surgical Center	A freestanding facility, other than a physician's office, where surgical and diagnostic services are provided on an ambulatory basis		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
19		Assisted Living Facility	Congregate residential facility with self-contained living units providing assessment of each resident's needs and on-site support 24 hours a day, 7 days a week, with the capacity to deliver or arrange for services including some health care and other services.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
20		Birth Center	A facility, other than a hospital's maternity facilities or a physician's office, which provides a setting for labor, delivery, and immediate post-partum care as well as immediate care of new born infants.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
21		Community Mental Health Center	A facility that provides the following services: outpatient services, including specialized outpatient services for children, the elderly, individuals who are chronically ill, and residents of the CMHC's mental health services area who have been discharged from inpatient treatment at a mental health facility; 24 hour a day emergency care services; day treatment, other partial hospitalization services, or psychosocial rehabilitation services; screening for patients being considered for admission to State mental health facilities to determine the appropriateness of such admission; and consultation and education services.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
22		Comprehensive Inpatient Rehabilitation Facility	A facility that provides comprehensive rehabilitation services under the supervision of a physician to inpatients with physical disabilities. Services include physical therapy, occupational therapy, speech pathology, social or psychological services, and orthotics and prosthetics services.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
23		Comprehensive Outpatient Rehabilitation Facility	A facility that provides comprehensive rehabilitation services under the supervision of a physician to outpatients with physical disabilities. Services include physical therapy, occupational therapy, and speech pathology services.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015

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24		Custodial Care Facility	A facility which provides room, board and other personal assistance services, generally on a long-term basis, and which does not include a medical component.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
25		Emergency Room Hospital	A portion of a hospital where emergency diagnosis and treatment of illness or injury is provided.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
26		Federally Qualified Health Center	A facility located in a medically underserved area that provides Medicare beneficiaries preventive primary medical care under the general direction of a physician.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
27		Group Home	A residence, with shared living areas, where clients receive supervision and other services such as social and/or behavioral services, custodial service, and minimal services (e.g., medication administration).		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
28		Home	Location, other than a hospital or other facility, where the patient receives care in a private residence.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
29		Homeless Shelter	A facility or location whose primary purpose is to provide temporary housing to homeless individuals (e.g., emergency shelters, individual or family shelters).		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
30		Hospice	A facility, other than a patient's home, in which palliative and supportive care for terminally ill patients and their families are provided.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
31		Independent Clinic	A location, not part of a hospital and not described by any other Place of Service code, that is organized and operated to provide preventive, diagnostic, therapeutic, rehabilitative, or palliative services to outpatients only.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
32		Independent Laboratory	A laboratory certified to perform diagnostic and/or clinical tests independent of an institution or a physician's office.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
33		Indian Health Service (Free-standing Facility)	A facility or location, owned and operated by the Indian Health Service, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to American Indians and Alaska Natives who do not require hospitalization.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
34		Indian Health Service (Provider-based Facility)	A facility or location, owned and operated by the Indian Health Service, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services rendered by, or under the supervision of, physicians to American Indians and Alaska Natives admitted as inpatients or outpatients.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
35		In-Patient	A facility, other than psychiatric, which primarily provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services by, or under, the supervision of physicians to patients admitted for a variety of medical conditions.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
36		Inpatient Psychiatric Facility	A facility that provides inpatient psychiatric services for the diagnosis and treatment of mental illness on a 24-hour basis, by or under the supervision of a physician.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
37		Mass Immunization Center	A location where providers administer pneumococcal pneumonia and influenza virus vaccinations and submit these services as electronic media claims, paper claims, or using the roster billing method. This generally takes place in a mass immunization setting, such as, a public health center, pharmacy, or mall but may include a physician office setting.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
38		Military Treatment Facility	A medical facility operated by one or more of the Uniformed Services. Military Treatment Facility (MTF) also refers to certain former U.S. Public Health Service (USPHS) facilities now designated as Uniformed Service Treatment Facilities (USTF).		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
39		Mobile Unit	A facility/unit that moves from place-to-place equipped to provide preventive, screening, diagnostic, and/or treatment services.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
40		Nursing Facility	A facility which primarily provides to residents skilled nursing care and related services for the rehabilitation of injured, disabled, or sick persons, or, on a regular basis, health-related care services above the level of custodial care to other than mentally retarded individuals.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
41		Office	Location, other than a hospital, skilled nursing facility (SNF), military treatment facility, community health center, State or local public health clinic, or intermediate care facility (ICF), where the health professional routinely provides health examinations, diagnosis, and treatment of illness or injury on an ambulatory basis.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015

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42		Outpatient Hospital (Off Campus)	A portion of an off-campus hospital provider based department which provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
43		Outpatient Hospital (On Campus)	A portion of a hospital's main campus which provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
44		Pharmacy	A facility or location where drugs and other medically related items and services are sold, dispensed, or otherwise provided directly to patients.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
45		Prison-Correctional Facility	A prison, jail, reformatory, work farm, detention center, or any other similar facility maintained by either Federal, State or local authorities for the purpose of confinement or rehabilitation of adult or juvenile criminal offenders.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
46		Psychiatric Residential Treatment Center	A facility or distinct part of a facility for psychiatric care which provides a total 24-hour therapeutically planned and professionally staffed group living and learning environment.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
47		Public Health Clinic	A facility maintained by either State or local health departments that provides ambulatory primary medical care under the general direction of a physician.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
48		Residential Substance Abuse Treatment Facility	A facility which provides treatment for substance (alcohol and drug) abuse to live-in residents who do not require acute medical care. Services include individual and group therapy and counseling, family counseling, laboratory tests, drugs and supplies, psychological testing, and room and board.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
49		Rural Health Clinic	A certified facility which is located in a rural medically underserved area that provides ambulatory primary medical care under the general direction of a physician.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
50		School	A facility whose primary purpose is education.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
51		Skilled Nursing Facility	A facility which primarily provides inpatient skilled nursing care and related services to patients who require medical, nursing, or rehabilitative services but does not provide the level of care or treatment available in a hospital.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
52		Urgent Care Facility	Location, distinct from a hospital emergency room, an office, or a clinic, whose purpose is to diagnose and treat illness or injury for unscheduled, ambulatory patients seeking immediate medical attention.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
53		Walk-in Retail Health Clinic	A walk-in health clinic, other than an office, urgent care facility, pharmacy or independent clinic and not described by any other Place of Service code, that is located within a retail operation and provides, on an ambulatory basis, preventive and primary care services.		<LocationType>	CMS Place of Service Codes for Professional Claims Aug 6, 2015
54	Patient Characteristics		Selected attributes of a patient			
55		Height	Vertical measurement of the patient		<Height> inches <HeightInCm> cm	Stedman's Medical Dictionary. 28th ed. (modified)
56		Weight	The apparent mass of the patient's body		<Weight> lbs <WeightInKg> Kg	Stedman's Medical Dictionary. 28th ed. (modified)
57	Procedure Status	Emergency	A surgical, therapeutic, or diagnostic procedure that cannot be delayed without causing a significant risk of death or permanent impairment	Synonym: Emergent surgery Note: The ASA Physical Status should include "E". The designation of a procedure as an emergency is determined by a surgeon and/or an anesthesiologist.	<ProcStatus>	
58		Urgent	A surgical, therapeutic, or diagnostic procedure that must be performed to prevent death or permanent impairment but that can be delayed	Note: The procedure may be delayed to allow for medical optimization of the patient or to permit better availability of resources (ex., personnel or equipment)	<ProcStatus>	
59		Elective	A surgical, therapeutic, or diagnostic procedure that can be performed at any time or date with an agreement between the surgeon and the patient		<ProcStatus>	

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60	Time	Anesthesia Induction Time	Time when the anesthesiologist begins the administration of agents intended to provide the level of anesthesia required for the scheduled procedure		<TMType:AnesthesiaInductionStartTime>	AACD Procedural Times Glossary (1991)
61		Anesthesia Ready Time	Time at which the patient has a sufficient level of anesthesia established to begin surgical preparation of the patient, and remaining anesthetic chores do not preclude positioning and prepping the patient		<TMType:StartTime>	AACD Procedural Times Glossary (1991)
62		Procedure/Surgery Start Time	Time the procedure is started		<ProcStartTime>	AACD Procedural Times Glossary (1991)
63		Procedure/Surgery Finish Time	Time when all instrument and sponge counts are completed and verified as correct; all post-op radiological studies to be done in the OR and completed; all dressings and drains are secured; and the physician/surgeons have completed all procedure related activities on the patient		<ProcEndTime>	AACD Procedural Times Glossary (1991)
64		Arrival in PACU/ICU Time	Time of patient arrival in PACU or ICU		<TMType:TMStartTime>	AACD Procedural Times Glossary (1991)
65		Ready for Discharge from PACU/ICU Time	Time that the patient is assessed to be ready for discharge from the PACU or ICU	Clarifying Statement: This is the time that the patient has been assessed and met criteria for discharge and care by the anesthesiologist has been concluded and care transferred to another medical service	<TMType:TMStartTime>	AACD Procedural Times Glossary (1991)
66		Discharge from PACU/ICU Time	Time that the patient is transported out of PACU or ICU		<TMType:TMStartTime>	AACD Procedural Times Glossary (1991)