

Texas Outpatient Surgical and Radiological Procedure Data

Public Use Data File

Data Dictionary 2012

BACKGROUND

The Texas Department of State Health Services is responsible, under Sections 108.011 through 108.0135, Texas Health and Safety Code (THSC), for collecting data on outpatient surgical and radiological services from hospitals and ambulatory surgery centers except those that are statutorily exempt from the reporting requirement. Exempt facilities include those located in a county with a population less than 35,000, or those located in a county with a population more than 35,000 and with fewer than 100 licensed hospital beds and not located in an area that is delineated as an urbanized area by the United States Bureau of the Census (Section 108.0025). Exempt hospitals also include hospitals that do not seek insurance payment or government reimbursement (Section 108.009).

PUBLIC USE DATA FILE (PUDF)

Sections 108.011(a) and 108.012 of the THSC requires DSHS to provide public use data for computer-to-computer access. It also permits DSHS to charge the data requestor a standard fee for using the Public Use Data File (PUDF). The PUDF contains patient-level information for outpatient surgical and radiological services. These data are extracted from DSHS's outpatient services database. The providers/submitters have, by law, until the next quarter (following the discharge) to submit their data. This means that the PUDF data is a snapshot in time and each quarter may contain some discharges dated in the previous quarter (i.e. for calendar year data be sure to check the first quarter of the following year also).

PATIENT/PHYSICIAN CONFIDENTIALITY

The legislative intent behind the creation of the Hospital Discharge Database (HDD) was that the data and resulting information be used for the benefit of the public. This is specified in Section 108.013 of the Texas Health and Safety Code (THSC). The THSC also stipulates that DSHS may not release and a person or entity may not gain access to any data that could reasonably be expected to reveal the identity of a patient or physician. Any effort to determine the identity of any person violates the THSC. In addition, under Section 108.013(e) and (f) of the THSC, patient and/or physician information in the HDD cannot be used for discovery, subpoena, or other means of legal compulsion or in any civil, administrative, or criminal proceeding. Pursuant to the THSC, DSHS excludes all direct personal and demographic identifiers (e.g., name, address, social security number, patient identifiers, admission and discharge dates) that might lead to the identification of a specific patient from the PUDF.

To protect patient identities, DSHS has suppressed these data elements in this release of the PUDF:

- The last two digits of the patient's ZIP code are suppressed if there are fewer than thirty patients included in the ZIP code.
- The entire ZIP code is suppressed if a hospital has fewer than fifty visits in a quarter.
- The ZIP code is changed to '88888' for patients from states other than Texas and the adjacent states.
- The entire ZIP code and gender code are suppressed if the ICD-9-CM code indicates alcohol or drug use or an HIV diagnosis.
- The entire ZIP code and provider name are suppressed if a hospital has fewer than five visits of a particular gender, including 'unknown'. The provider ID is changed to '999998'.
- The country code is suppressed if fewer than five visits were reported for that country in a quarter .
- The county code is suppressed if fewer that five visits were reported for that county in a quarter .

- Age is represented by 22 age group codes for the general patient population and 5 age group codes for the HIV and alcohol and drug use patient populations.
- Race is changed to 'Other' and ethnicity is suppressed if a hospital has fewer than ten visits of a race.
- If a hospital has fewer than fifty visits in a quarter, the provider ID is changed to '9999999'.

To protect physician identities, the THSC requires creation of a uniform identification number for physicians in practice. Uniform physician identifiers are available except when the number of physicians represented in a DRG for a hospital is less than the minimum cell size of five.

It may be possible in rare instances, through complex analysis and with outside information, to ascertain from the PUDF the identity of individual patients. Considerable harm could result if this were done. PUDF users are required to sign and comply with the DSHS Hospital Discharge Data Use Agreement in the Application before shipment of the PUDF. The Data Use Agreement prohibits attempts to identify individual patients.

RESTRICTIONS ON DATA USE

Section 108.010(c) of the THSC prohibits DSHS from releasing provider quality reports until one year of data is available. Users of the PUDF are cautioned about using less than a year of data to make any healthcare facility quality assumptions.

Sections 108.013(c)(1) and (2) and 108.013 (g) of the Texas Health and Safety Code (THSC) prohibit the DSHS from releasing, and a person or entity from gaining access to, any data that could reveal the identity of a patient or the identity of a physician unless specifically authorized by the Act. Any effort to determine the identity of any person or to use the information for any purpose other than for analysis and aggregate statistical reporting violates the THSC and the Data Use Agreement. By virtue of the Agreement, the signer agrees that the data will not be used to identify an individual patient or physician or hospital or ambulatory surgery center for the purpose of verifying information supplied in the DSHS Outpatient Services Public Use Data sets. Any questions about the data must be referred to DSHS only. Data analysis assistance is not provided by DSHS. The data are protected by United States copyright laws and international treaty provisions.

In the Data Use Agreement, the purchaser and end-user of the data are referred to as the "licensee". To acquire the data the licensee must give the following assurances with respect to the use of DSHS Outpatient Public Use Data sets:

- The licensee will not release nor permit others to release the individual patient records or any part of them to any person who is not a staff member of the organization that has acquired the data, except with the written approval of DSHS;
- The licensee will not attempt to link nor permit others to attempt to link the outpatient records of patients in this data set with personally identifiable records from any other source, including any THCIC research data file (effective Aug 1, 2012);The licensee will not release nor permit others to release any information that identifies persons, directly or indirectly;
- The licensee will not attempt to use nor permit others to use the data to learn the identity of any physician;
- The licensee will not nor permit others to copy, sell, rent, license, lease, loan, or otherwise grant access to the data covered by this Agreement to any other person or entity, unless approved in writing by DSHS;
- The licensee agrees to read the User Manual and to be cognizant of the limitations of the data;
- The licensee will use the following citation in any publication of information from this file:

Texas Outpatient Services Public Use Data File, [quarter and year of data]. Texas Department of State Health Services, Center for Health Statistics, Austin, Texas. [date of publication];

- The licensee will indemnify, defend, and hold the DSHS, its members, employees, and the Department's contract vendors harmless from any and all claims and losses accruing to any person as a result of violation of this agreement; and
- The licensee will make no statement nor permit others to make statements indicating or suggesting that interpretations drawn from these data are those of DSHS.

The licensee understands that these assurances are collected by DSHS to assure compliance with its statutory confidentiality requirement. The signature on behalf of the licensee indicates the licensee's agreement to comply with the above-stated requirements with the knowledge that under Sections 108.014 and 108.0141 of the Texas Health and Safety Code to knowingly or negligently release data in violation of this agreement is punishable by a fine of up to \$10,000 and an offense is a state jail felony. By signing the Data Use Agreement, the PUDF user has been informed that the potential for both civil and criminal penalties exists.

Users of report generating software to access the PUDF are required to purchase a license to use the data.

OUTPATIENT FACILITY COMMENTS

(Users are advised to consider hospital comments in any analysis of the data.)

Included with the PUDF is a separate file containing the unedited comments submitted by hospitals or ambulatory surgery centers at the time of data certification. Comments relating to individual data elements should be considered in any analysis of those data elements. These comments express the opinions of individual hospitals and are not necessarily the views of the DSHS. Hospitals or ambulatory surgery centers that submitted comments are identified in 'Reporting Status of Texas Outpatient Facilities'.

A Facility Type file with 27 variables, including the THCIC_ID is included also. This clarifies the type of provider (Pediatric, Teaching Facility, Long Term Care, etc.), and is useful for data users focusing on a certain type of facility.

DATA FILES

The 2012 PUDF is available in four files, the Base Data, Classification data, Charges and Facility Type Data files. The files are also available in fixed length and tab-delimited formats. The size of the files are as follows:

First quarter, 787 facilities:					
Base Data	2,209,760 records	Fixed field format	1,750 MB	Tab-delimited	822 MB
Classification Data	2,209,760 records	Fixed field format	1,150 MB	Tab-delimited	435 MB
Charges	16,615,716 records	Fixed field format	1,331 MB	Tab-delimited	829 MB
Facility Type Data	787 records	Fixed field format	68 KB	Tab-delimited	55 KB
Second quarter, 789 facilities:					
Base Data	2,716,465 records	Fixed field format	2,151 MB	Tab-delimited	1,011 MB
Classification Data	2,716,465 records	Fixed field format	1,414 MB	Tab-delimited	823 MB
Charges	19,244,084 records	Fixed field format	1,541 MB	Tab-delimited	968 MB
Facility Type Data	789 records	Fixed field format	68 KB	Tab-delimited	55 KB
Third quarter, 793 facilities:					
Base Data	3,205,288 records	Fixed field format	2,539 MB	Tab-delimited	1,188 MB
Classification Data	3,205,288 records	Fixed field format	1,668 MB	Tab-delimited	961 MB
Charges	21,325,097 records	Fixed field format	1,708 MB	Tab-delimited	1,078 MB
Facility Type Data	793 records	Fixed field format	69 KB	Tab-delimited	55 KB
Fourth quarter, 798 facilities:					
Base Data	3,118,542 records	Fixed field format	2,470 MB	Tab-delimited	1,156 MB
Classification Data	3,118,542 records	Fixed field format	1,623 MB	Tab-delimited	935 MB
Charges	21,419,084 records	Fixed field format	1,715 MB	Tab-delimited	1,080 MB
Facility Type Data	798 records	Fixed field format	69 KB	Tab-delimited	56 KB

The data must be imported into a software package. No software is included with the PUDF. The data file has been tested with several software packages, including Microsoft Access, SAS, and SPSS.

Updates to any PUDF CD's are available through the THCIC website, <u>http://www.dshs.state.tx.us/thcic/</u>, which should be checked periodically as notifications of an update will not be sent.

DATA DICTIONARY

This document provides the user with the necessary information to use and understand the data in the Public Use Data File. The following information is provided:

Field	Unique, abbreviated name of the data element
Description	Brief explanation of the data element. Descriptions of data elements are taken from
	specifications manuals.

Data Source	Provided by the health care facility on the claim form (Claim)
	Assigned by DSHS (Assigned)
	Calculated by DSHS (Calculated)
	Note: For those data elements that have been temporarily suppressed, the quarter of data
	for which the data element will be released is noted following the Data Source.
Туре	Alphanumeric or numeric
Coding scheme	Valid codes for a data field. Values taken from specifications manuals.

Any data provided by a facility that has been determined to be invalid has been assigned the value ` (accent mark). Any data element that is blank should be interpreted as 'missing', no data provided, unless otherwise noted.

BASE DATA FILE

Description: Quarter during which service occurred. Year and quarter of service. yyyyQn. Beginning Position: 1 Data Source: Assigned Length: 6 Type: Alphanumeric Field 2: RECORD_ID Record Identification Number. Unique number assigned to identify the record. First available 1" quarter 2002. Does NOT match the RECORD_ID in THCIC Research Data Files (RDF's). Beginning Position: 7 Data Source: Assigned Itength: 12 Type: Alphanumeric Field 3: THCIC_ID Description: Facilities reporting fewer than 50 events have been aggregated into the Provider ID '999999'. If a facility reported fewer than 50 events have been aggregated into the Provider ID '999998'. Beginning Position: 19 Data Source: Assigned Length: 6 Type: Alphanumeric Field 4: PROVIDER_NAME Description: Name provided by the facility. Suppression: Facilitiy: reported fewer than 50 events for a particular gender, including 'unknown', Provider Name is blank. Provider ID equals '999999') are assigned the name 'Low Volume Facility'. If a facility reported fewer than 5 events for a particular gender, including 'unknown', Provider Name is blank. Beginning Position: 25 Data Source: Provider	D! 114				
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Beginning Position: 25 Data Source: Provider Length: 55 Type: Alphanumeric Field 5: SPEC_UNIT Specialty Units in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. In order by number of days in the unit. SPEC_UNIT_1 through SPEC_UNIT_5 are combined in one field in the Tab Delimited file and can be accessed individually in the fixed length file. Coding Scheme: C Coronary Care Unit P Pediatric Unit D Detoxification Unit Y Psychiatric Unit I Intensive Care Unit R Rehabilitation Unit H Hospice Unit U Sub-acute Care Unit H Hospice Unit Blank Acute Care N Nursery S Skilled Nursing Unit B Obstetric Unit Blank Acute Care O Oncology Unit Blank Acute Care Beginning Position: SPEC_UNIT_1 (fixed length file only) Eacute Care Description: Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. Coding Scheme: Same as Field 5. Same as Field 5.	Suppression:				
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Length:55Type:AlphanumericField 5:SPEC_UNITDescription:Specialty Units in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. In order by number of days in the unit. SPEC_UNIT_1 through SPEC_UNIT_5 are combined in one field in the Tab Delimited file and can be accessed individually in the fixed length file.Coding Scheme:CCoronary Care Unit DPPediatric Unit DDetoxification Unit HYPsychiatric Unit HIIntensive Care Unit DRRehabilitation Unit HHHospice Unit OUSub-acute Care Unit Sub-acute Care Unit NBeginning Position:80Data Source: Oncology UnitCalculatedField 5a:SPEC_UNIT_1 (fixed length file only)AlphanumericDescription:Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code.Coding Scheme:Same as Field 5.Same as Field 5.	Designing Desition.				
Field 5: SPEC_UNIT Description: Specialty Units in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. In order by number of days in the unit. SPEC_UNIT_1 through SPEC_UNIT_5 are combined in one field in the Tab Delimited file and can be accessed individually in the fixed length file. Coding Scheme: C Coronary Care Unit P Pediatric Unit D Detoxification Unit Y Psychiatric Unit I Intensive Care Unit R Rehabilitation Unit H Hospice Unit U Sub-acute Care Unit B Obstetric Unit Blank Acute Care O Oncology Unit Blank Acute Care B Obstetric Unit Blank Acute Care O Oncology Unit Blank Acute Care B Obstetric Unit Blank Acute Care O Oncology Unit Blank Acute Care D Data Source: Calculated Calculated Length: 5 Type: Alphanumeric Field 5a: SPEC_UNIT_1 (fixed length file only) Description: Specialty Unit in which most days during stay occurred based on number of days					
Description: Specialty Units in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. In order by number of days in the unit. SPEC_UNIT_1 through SPEC_UNIT_5 are combined in one field in the Tab Delimited file and can be accessed individually in the fixed length file. Coding Scheme: C Coronary Care Unit P Pediatric Unit D Detoxification Unit Y Psychiatric Unit I Intensive Care Unit R Rehabilitation Unit H Hospice Unit U Sub-acute Care Unit B Obstetric Unit Blank Acute Care O Oncology Unit Blank Acute Care Beginning Position: 80 Data Source: Calculated Length: 5 Type: Alphanumeric Field 5a: SPEC_UNIT_1 (fixed length file only) Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. Coding Scheme: Same as Field 5. Same as Field 5.			Type:	Alphanumeric	
Bill or Revenue Code. In order by number of days in the unit. SPEC_UNIT_1 through SPEC_UNIT_5 are combined in one field in the Tab Delimited file and can be accessed individually in the fixed length file.Coding Scheme:C C C D DCoronary Care Unit Detoxification Unit IP Pediatric Unit P Pediatric Unit P Pediatric Unit N Sub-acute Care Unit N Nursery B O Oncology UnitP Pediatric Unit P Pediatric Unit N Sub-acute Care Unit Nursery S Skilled Nursing Unit B Obstetric Unit B Oncology UnitP Pediatric Unit P Pediatric Unit Nursery S Skilled Nursing Unit Blank Acute CareBeginning Position:80 S PEC_UNIT_1 (fixed length file only) Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code.Same as Field 5.		—			
D Detoxification Unit Y Psychiatric Unit I Intensive Care Unit R Rehabilitation Unit H Hospice Unit U Sub-acute Care Unit N Nursery S Skilled Nursing Unit B Obstetric Unit Blank Acute Care O Oncology Unit Blank Acute Care Beginning Position: 80 Data Source: Calculated Length: 5 Type: Alphanumeric Field 5a: SPEC_UNIT_1 (fixed length file only) Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. Coding Scheme: Same as Field 5. Same as Field 5.	Coding Schemen	SPEC_UNIT_5 are combined individually in the fixed le	ned in one field in t ngth file.	the Tab Delimited file and	l can be accessed
IIntensive Care UnitRRehabilitation UnitHHospice UnitUSub-acute Care UnitNNurserySSkilled Nursing UnitBObstetric UnitBlankAcute CareOOncology UnitOncology UnitBeginning Position:80Data Source:CalculatedLength:5Type:AlphanumericField 5a:SPEC_UNIT_1 (fixed length file only)Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code.Coding Scheme:Same as Field 5.Image: Same as Field 5.	Coding Scheme:		•		
N Nursery S Skilled Nursing Unit B Obstetric Unit Blank Acute Care O Oncology Unit Oncology Unit Beginning Position: 80 Data Source: Calculated Length: 5 Type: Alphanumeric Field 5a: SPEC_UNIT_1 (fixed length file only) Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. Coding Scheme: Same as Field 5.		Ι	Intensive Care Unit	R	-
B Obstetric Unit Blank Acute Care O Oncology Unit Oncology Unit Oncology Unit Beginning Position: 80 Data Source: Calculated Length: 5 Type: Alphanumeric Field 5a: SPEC_UNIT_1 (fixed length file only) Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. Coding Scheme: Same as Field 5. Same as Field 5.			*		
O Oncology Unit Beginning Position: 80 Data Source: Calculated Length: 5 Type: Alphanumeric Field 5a: SPEC_UNIT_1 (fixed length file only) Specialty Unit in which most days during star occurred based on number of days by Type of Bill or Revenue Code. Coding Scheme: Same as Field 5.			•		Ū.
Beginning Position: 80 Data Source: Calculated Length: 5 Type: Alphanumeric Field 5a: SPEC_UNIT_1 (fixed length file only) Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. Coding Scheme: Same as Field 5. Same as Field 5.				Blank	Acute Care
Length:5Type:AlphanumericField 5a:SPEC_UNIT_1 (fixed length file only)Description:Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code.Coding Scheme:Same as Field 5.	Reginning Position.		•••	Calculated	
Field 5a:SPEC_UNIT_1 (fixed length file only)Description:Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code.Coding Scheme:Same as Field 5.					
Description:Specialty Unit in which most days during stay occurred based on number of days by Type of Bill or Revenue Code.Coding Scheme:Same as Field 5.				Alphanumene	
Bill or Revenue Code. Coding Scheme: Same as Field 5.				v occurred based on numb	er of days by Type of
Coding Scheme: Same as Field 5.	Description.	1 *	ost days during sta	y occurred based on nume	or or days by Type or
	Coding Scheme				
Reginning Position: 80 Data Source: Calculated	Beginning Position:	80	Data Source:	Calculated	
Length: 1 Type: Alphanumeric					
Field 5b: SPEC_UNIT_2 (fixed length file only)				Alphandhene	
Description: Since_ontr_2 (incertaining time only) Specialty Unit in which 2 nd most days during stay occurred based on number of days by Type		Specialty Unit in which 2^n	^d most days during	stay occurred based on n	unber of days by Type
of Bill or Revenue Code.	Description.		most days during	stay occurred based on m	inder of days by Type
Coding Scheme: Same as Field 5.	Coding Scheme				
Beginning Position: 81 Data Source:	6		Data Source		
Length: 1 Type: Alphanumeric				Alphanumeric	
Field 5c: SPEC_UNIT_3 (fixed length file only)					
Description: Si EC_ONT_S (incertengin ine only) Description: Specialty Unit in which 3 rd most days during stay occurred based on number of days by Type of Bill or Revenue Code.		Specialty Unit in which 3 rd		stay occurred based on nu	mber of days by Type of
Coding Scheme: Same as Field 5.	Coding Scheme				
Beginning Position:82Data Source:			Data Source:		

Length:	1	Туре:	Alphanumeric			
Field 5d:	SPEC_UNIT_4 (fix	ked length file only)	•			
Description:	Specialty Unit in wh	nich 4 th most days during	stay occurred based on 1	number of days by Type of		
1	Bill or Revenue Coo		2			
Coding Scheme:	Same as Field 5.					
Beginning Position:	83	Data Source:				
0 0			Alabanyania			
Length:		Type:	Alphanumeric			
Field 5e:	SPEC_UNIT_5 (fixed length file only)					
Description:	Specialty Unit in which 5 th most days during stay occurred based on number of days by Type o					
	Bill or Revenue Coo	le.				
Coding Scheme:	Same as Field 5.					
Beginning Position:	84	Data Source:				
Length:	1	Туре:	Alphanumeric			
Field 6:	SEX_CODE	Type.	7 Alphandine ne			
Description:		it as recorded at date of st				
Suppression:				se or an HIV diagnosis. If		
	a facility reported fe	ewer than 5 patients of a p	oarticular gender, includi	ing unknown, Provider ID		
	is '999998' and Pro	vider Name and Patient Z	IP Code are blank for th	ose patients.		
Coding Scheme:	M Male			-		
0	F Female					
	U Unknown					
	Ilivallu	_ ~	~ .			
Beginning Position:	85	Data Source:	Claim			
Length:	1	Туре:	Alphanumeric			
Field 7:	PAT_COUNTY					
Description:	FIPS code of patient	t's county.				
Coding scheme:	001 Anderson	129 Donley	257 Kaufman	385 Real		
e oung senemer	003 Andrews	131 Duval	259 Kendall	387 Red River		
	005 Angelina	133 Eastland	261 Kenedy	389 Reeves		
	007 Aransas 009 Archer	135 Ector 137 Edwards	263 Kent 265 Kerr	391 Refugio393 Roberts		
	009 Archer 011 Armstrong	137 Edwards 139 Ellis	265 Ken 267 Kimble	395 Robertson		
	013 Atascosa	141 El Paso	269 King	397 Rockwall		
	015 Austin	143 Erath	271 Kinney	399 Runnels		
	017 Bailey	145 Falls	273 Kleberg	401 Rusk		
	019 Bandera	147 Fannin	275 Knox	403 Sabine		
	021 Bastrop 023 Baylor	149 Fayette 151 Fisher	283 La Salle 277 Lamar	405 San Augustine 407 San Jacinto		
	023 Baylor 025 Bee	151 Fisher 153 Floyd	277 Lamar 279 Lamb	407 San Jacinto 409 San Patricio		
	027 Bell	155 Foard	281 Lampasas	411 San Saba		
	029 Bexar	157 Fort Bend	285 Lavaca	413 Schleicher		
	031 Blanco	159 Franklin	287 Lee	415 Scurry		
	033 Borden	161 Freestone	289 Leon	417 Shackelford		
	035 Bosque 037 Bowie	163 Frio 165 Gaines	291 Liberty 293 Limestone	419 Shelby421 Sherman		
	039 Brazoria	167 Galveston	295 Lipscomb	421 Sherman 423 Smith		
	041 Brazos	169 Garza	297 Live Oak	425 Somervell		
	043 Brewster	171 Gillespie	299 Llano	427 Starr		
	045 Briscoe	173 Glasscock	301 Loving	429 Stephens		
	047 Brooks 049 Brown	175 Goliad 177 Gonzales	303 Lubbock 305 Lynn	431 Sterling 433 Stonewall		
	051 Burleson	177 Gonzales 179 Gray	307 McCulloch	435 Stonewall 435 Sutton		
	053 Burnet	181 Grayson	309 McLennan	437 Swisher		
	055 Caldwell	183 Gregg	311 McMullen	439 Tarrant		
	057 Calhoun	185 Grimes	313 Madison	441 Taylor		
	059 Callahan 061 Camaran	187 Guadalupe	315 Marion	443 Terrell 445 Torry		
	061 Cameron 063 Camp	189 Hale 191 Hall	317 Martin 319 Mason	445 Terry 447 Throckmorton		
	065 Carson	191 Hamilton	321 Matagorda	449 Titus		
	067 Cass	195 Hansford	323 Maverick	451 Tom Green		
	069 Castro	197 Hardeman	325 Medina	453 Travis		
	071 Chambers	199 Hardin	327 Menard	455 Trinity		
	073 Cherokee	201 Harris	329 Midland	457 Tyler		
	075 Childress 077 Clay	203 Harrison 205 Hartley	331 Milam 333 Mills	459 Upshur 461 Upton		
	077 Clay 079 Cochran	205 Hartley 207 Haskell	333 Mills335 Mitchell	461 Upton 463 Uvalde		
	081 Coke	209 Hays	337 Montague	465 Val Verde		
		•	5			

	083	Coleman	211	Hemphill	339	Montgomery	467	Van Zandt	
	085	Collin	213	Henderson	341	Moore	469	Victoria	
	087	Collingsworth	215	Hidalgo	343	Morris	471	Walker	
	089 091	Colorado Comal	217 219	Hill Hockley	345 347	Motley Nacogdoches	473 475	Waller Ward	
	091	Comanche	219	Hood	347	Navarro	473	Washington	
	095	Concho	223	Hopkins	351	Newton	479	Webb	
	097	Cooke	225	Houston	353	Nolan	481	Wharton	
	099	Coryell	227	Howard	355	Nueces	483	Wheeler	
	101	Cottle	229	Hudspeth	357	Ochiltree	485	Wichita	
	103	Crane	231	Hunt	359	Oldham	487	Wilbarger	
	105	Crockett	233	Hutchinson	361	Orange	489	Willacy	
	107 109	Crosby Culberson	235 237	Irion Jack	363 365	Palo Pinto Panola	491 493	Williamson Wilson	
	111	Dallam	237	Jackson	367	Parker	495	Winkler	
	113	Dallas	241	Jasper	369	Parmer	497	Wise	
	115	Dawson	243	Jeff Davis	371	Pecos	499	Wood	
	117	Deaf Smith	245	Jefferson	373	Polk	501	Yoakum	
	119	Delta	247	Jim Hogg	375	Potter	503	Young	
	121	Denton	249	Jim Wells	377	Presidio	505	Zapata	
	123	Dewitt	251	Johnson	379	Rains	507	Zavala	
	125 127	Dickens	253	Jones	381	Randall		Turnelid	
D		Dimmit	255	Karnes	383	Reagan	4	Invalid	
Beginning Position: Length:	86 3			Data Source:	Alphan	ed; based on pa		code	
Field 8:		STATE		Туре:	Alphan	lumenc			
Description:	_	of the patient's m	ailing c	ddrass in Toyog	and con	tiquous statos	Standard	2 charactor	
Description:		-	-	iduless III Texas		inguous states.	stanuaru	2-character	
a 11 a 1		l Service abbrevia	ation.						
Coding Scheme:		Arkansas							
	LA Louisiana								
		NM New Mexico							
		OK Oklahoma							
		TX Texas ZZ All other states and American Territories							
				Territories					
	FC 1		linencali	remitories					
		Foreign country		remtories					
Beginning Position:	XX I				Claim				
Beginning Position: Length	XX 1 89	Foreign country	I	Data Source:	Claim Alphar	numeric			
Length:	XX 1 89 2	Foreign country Foreign country	I			numeric			
Length: Field 9:	XX 1 89 2 PAT_	Foreign country Foreign country _ ZIP	I	Data Source:		numeric			
Length: Field 9: Description:	XX 1 89 2 PAT_ Patier	Foreign country Foreign country _ ZIP nt's five-digit ZIF	I 7 code.	Data Source: Гуре:	Alphar				
Length: Field 9:	XX 1 89 2 PAT_ Patier Last t	Foreign country Foreign country _ ZIP nt's five-digit ZIP two digits are blan	I 7 code. nk if a Z	Data Source: Type: ZIP code has few	Alphar	30 patients. If st	-		
Length: Field 9: Description:	XX 1 89 2 PAT_ Patier Last t	Foreign country Foreign country _ ZIP nt's five-digit ZIF	I 7 code. nk if a Z	Data Source: Type: ZIP code has few	Alphar	30 patients. If st	-		
Length: Field 9: Description:	XX 1 89 2 PAT_ Patier Last t equals	Foreign country Foreign country _ ZIP nt's five-digit ZIP two digits are blan s '88888'. If state	I 7 code. nk if a Z e equals	Data Source: Type: ZIP code has few 'FC' (foreign co	Alphar ver than 3 ountry) Z	30 patients. If st ZIP code is blan	k. If ICE	-9-CM indicat	
Length: Field 9: Description:	XX 1 89 2 PAT_ Patier Last t equals alcoho	Foreign country Foreign country ZIP nt's five-digit ZIF wo digits are blan s '88888'. If state ol or drug use or	I Code. nk if a Z e equals an HIV	Data Source: Type: ZIP code has few 'FC' (foreign co diagnosis the Z	Alphar ver than 3 ountry) Z IP code i	30 patients. If st IP code is blan s blank. If a fac	k. If ICE ility has	-9-CM indicat fewer than fift	
Length: Field 9: Description:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa	Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services rep	Code. nk if a Z e equals an HIV orted fo	Data Source: Type: CIP code has few 'FC' (foreign c diagnosis the Z or the quarter the	Alphar ver than 3 ountry) Z IP code i e ZIP cod	30 patients. If st 21P code is blan s blank. If a fac e is blank. If a t	k. If ICE cility has facility h	0-9-CM indicat fewer than fift as fewer than 5	
Length: Field 9: Description: Suppression:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier	Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services reported of a p	I code. nk if a Z e equals an HIV orted fo particula	Data Source: Type: CIP code has few 'FC' (foreign control of the c	Alphar ver than 3 ountry) Z IP code i e ZIP cod ling 'unk	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a t nown', the ZIP	k. If ICE cility has facility h	0-9-CM indicat fewer than fift as fewer than 5	
Length: Field 9: Description: Suppression: Beginning Position:	XX 1 89 2 Patier Last t equals alcohe outpa patier 91	Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services reported of a p	I code. nk if a 2 e equals an HIV orted fo oarticula	Data Source: Type: CIP code has few 'FC' (foreign co diagnosis the Z or the quarter the ur gender, includ Data Source:	Alphar ver than 3 ountry) Z IP code i 2 ZIP cod ling 'unk Claim	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a f nown', the ZIP	k. If ICE cility has facility h	0-9-CM indicat fewer than fift as fewer than 5	
Length: Field 9: Description: Suppression: Beginning Position: Length:	XX 1 89 2 Patier Last t equals alcohe outpa patier 91 5	Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services reported of a p	I code. nk if a 2 e equals an HIV orted fo oarticula	Data Source: Type: CIP code has few 'FC' (foreign control of the c	Alphar ver than 3 ountry) Z IP code i 2 ZIP cod ling 'unk Claim	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a t nown', the ZIP	k. If ICE cility has facility h	0-9-CM indicat fewer than fift as fewer than 5	
Length: Field 9: Description: Suppression: Beginning Position: Length: Field 10:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier 91 5 PAT_	Foreign country Foreign country ZIP nt's five-digit ZIP two digits are blan s '88888'. If state ol or drug use or tient services reported of a p	I Code. nk if a Z e equals an HIV orted fo particula I J	Data Source: Type: ZIP code has few 'FC' (foreign co diagnosis the Z or the quarter the ur gender, includ Data Source: Type:	Alphar ver than 3 ountry) Z IP code i e ZIP cod ling 'unk Claim Alphar	30 patients. If st IP code is blan s blank. If a fac e is blank. If a f nown', the ZIP numeric	k. If ICD cility has facility h Code is	0-9-CM indicat fewer than fift as fewer than 5 blank.	
Length: Field 9: Description: Suppression: Beginning Position: Length:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier 91 5 PAT_ Count	Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services rep- nts reported of a p <u>COUNTRY</u> try of patient's re	I Code. nk if a Z e equals an HIV orted fo particula I 1 Sidentia	Data Source: Type: ZIP code has few 'FC' (foreign co diagnosis the Z or the quarter the ur gender, includ Data Source: Type:	Alphar ver than 3 ountry) Z IP code i e ZIP cod ling 'unk Claim Alphar	30 patients. If st IP code is blan s blank. If a fac e is blank. If a f nown', the ZIP numeric	k. If ICD cility has facility h Code is	0-9-CM indicat fewer than fift as fewer than 5 blank.	
Length: Field 9: Description: Suppression: Beginning Position: Length: Field 10: Description:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier 91 5 PAT_ Count Stand	Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blar s '88888'. If state ol or drug use or tient services rep- nts reported of a p <u>COUNTRY</u> try of patient's re lardization (ISO).	Code. nk if a Ze equals an HIV orted fo particula J ssidentia	Data Source: Type: ZIP code has few 'FC' (foreign co diagnosis the Z or the quarter the ar gender, includ Data Source: Type: al address. List n	Alphar ver than 3 ountry) Z IP code i e ZIP cod ling 'unk Claim Alphar naintaine	30 patients. If st IP code is blan s blank. If a fac e is blank. If a f nown', the ZIP numeric	k. If ICD cility has facility h Code is	0-9-CM indicat fewer than fift as fewer than 5 blank.	
Length: Field 9: Description: Suppression: Beginning Position: Length: Field 10: Description: Suppression:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier 91 5 PAT_ Count Stand Suppr	Foreign country Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services reported of a p COUNTRY try of patient's re lardization (ISO). ressed if fewer that	I Code. nk if a Z e equals an HIV orted fo particula I sidentia an 5 pat	Data Source: Type: CIP code has few 'FC' (foreign cr diagnosis the Z or the quarter the ar gender, includ Data Source: Type: I address. List n	Alphar ver than 3 ountry) Z IP code i e ZIP cod ling 'unk Claim Alphar naintaine	30 patients. If st IP code is blan s blank. If a fac e is blank. If a f nown', the ZIP numeric	k. If ICD cility has facility h Code is	0-9-CM indicat fewer than fift as fewer than 5 blank.	
Length: Field 9: Description: Suppression: Beginning Position: Length: Field 10: Description:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier 91 5 PAT_ Count Stand Suppr	Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blar s '88888'. If state ol or drug use or tient services rep- nts reported of a p <u>COUNTRY</u> try of patient's re lardization (ISO).	I Code. nk if a Z e equals an HIV orted fo particula I sidentia an 5 pat	Data Source: Type: CIP code has few 'FC' (foreign cr diagnosis the Z or the quarter the ar gender, includ Data Source: Type: I address. List n	Alphar ver than 3 ountry) Z IP code i e ZIP cod ling 'unk Claim Alphar naintaine	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a f nown', the ZIP numeric	k. If ICD cility has facility h Code is	0-9-CM indicat fewer than fift as fewer than 5 blank.	
Length: Field 9: Description: Suppression: Beginning Position: Length: Field 10: Description: Suppression:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier 91 5 PAT_ Count Stand Suppr	Foreign country Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services reported of a p COUNTRY try of patient's re lardization (ISO). ressed if fewer that	Code. nk if a Ze equals an HIV orted fo particula sidentia an 5 pat complet	Data Source: Type: CIP code has few 'FC' (foreign c diagnosis the Z or the quarter the gender, includ Data Source: Type: al address. List n cients from one c e list.	Alphar ver than 3 ountry) Z IP code i e ZIP cod ling 'unk Claim Alphar naintaine	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a f nown', the ZIP numeric	k. If ICD cility has facility h Code is	0-9-CM indicat fewer than fift as fewer than 5 blank.	
Length: Field 9: Description: Suppression: Beginning Position: Length: Field 10: Description: Suppression: Coding scheme: Beginning Position:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier 91 5 PAT_ Count Stand Suppr See w 96	Foreign country Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services reported of a p COUNTRY try of patient's re lardization (ISO). ressed if fewer that	Code. nk if a Z e equals an HIV orted fo particula issidentia an 5 pat complet	Data Source: Type: CIP code has few 'FC' (foreign con- diagnosis the Z or the quarter the ar gender, include Data Source: Type: al address. List no cients from one co- e list. Data Source: Data Source:	Alphar ver than 3 ountry) Z IP code i 2 ZIP cod ling 'unk Claim Alphar naintaine country. Claim	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a fac nown', the ZIP numeric d by the Interna	k. If ICD cility has facility h Code is	0-9-CM indicat fewer than fift as fewer than 5 blank.	
Length: Field 9: Description: Suppression: Length: Field 10: Description: Suppression: Coding scheme: Beginning Position: Length:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier 91 5 PAT_ Count Stand Suppr See w 96 2	Foreign country Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services reported of a p COUNTRY try of patient's re lardization (ISO). ressed if fewer that <i>tww.ISO.org</i> for comparison	Code. nk if a Z e equals an HIV orted fo particula sidentia an 5 pat complet	Data Source: Type: CIP code has few 'FC' (foreign con- diagnosis the Z or the quarter the ar gender, include Data Source: Type: al address. List mone con- e list. Data Source: Type: Data Source: Type:	Alphar ver than 3 ountry) Z IP code i 2 ZIP cod ling 'unk Claim Alphar naintaine country. Claim	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a f nown', the ZIP numeric	k. If ICD cility has facility h Code is	0-9-CM indicat fewer than fift as fewer than 5 blank.	
Length: Field 9: Description: Suppression: Beginning Position: Length: Field 10: Description: Suppression: Coding scheme: Beginning Position: Length: Field 11:	XX 1 89 2 PAT_ Patier Last t equals alcoho outpa patier 91 5 PAT_ Count Stand Suppr See w 96 2 PUBI	Foreign country Foreign country Foreign country ZIP nt's five-digit ZIF two digits are blan s '88888'. If state ol or drug use or tient services rep- nts reported of a p 	I C code. nk if a Z e equals an HIV orted fo oarticula I Sidentia an 5 pat complet I REGIO	Data Source: Type: CIP code has few 'FC' (foreign co diagnosis the Z or the quarter the ur gender, includ Data Source: Type: al address. List n cients from one co e list. Data Source: Type: DN	Alphar ver than 3 ountry) Z IP code i 2 ZIP cod ling 'unk Claim Alphar naintaine country. Claim	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a fac nown', the ZIP numeric d by the Interna	k. If ICD cility has facility h Code is	0-9-CM indicat fewer than fift as fewer than 5 blank.	
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Length: Field 9: Description: Suppression: Beginning Position: Length: Field 10: Description: Suppression: Coding scheme: Beginning Position: Length: Field 11:	XX 1 89 2 PAT_ Patier Last t equals alcohe outpa patier 91 5 PAT_ Count Stand Suppr See <i>w</i> 96 2 PUBI Public 1	Foreign country Foreign country Foreign country ZIP nt's five-digit ZIF two digits are bland s '88888'. If state ol or drug use or tient services reported of a p COUNTRY try of patient's re- lardization (ISO). ressed if fewer that <i>ww.ISO.org</i> for con- LIC_HEALTH_ c Health Region of Armstrong, Bailey, Dickens, Donley, Fl Lamb, Lipscomb, L Sherman, Swisher, '	I P code. nk if a Z e equals an HIV orted fo particula isidentia an 5 pat complet I REGIC of patien Briscoe, (loyd, Gara ubbock, I Terry, Wh	Data Source: Type: CIP code has few 'FC' (foreign cr diagnosis the Z or the quarter the ar gender, includ Data Source: Type: al address. List n tients from one cr e list. Data Source: Type: DN nt's address. Carson, Castro, Chill za, Gray, Hale, Hall. Jynn, Moore, Motley neeler, Yoakum cource	Alphar ver than 3 ountry) Z IP code i e ZIP cod ling 'unk Claim Alphar naintaine country. Claim Alphar dress, Cocl , Hansford, y, Ochiltree nties	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a fac nown', the ZIP numeric d by the Interna numeric numeric numeric numeric	k. If ICD facility has facility h Code is ational O	D-9-CM indicat fewer than fift as fewer than 5 blank. rganization for Dallam, Deaf Smit Hutchinson, King, ndall, Roberts,	
Length: Field 9: Description: Suppression: Beginning Position: Length: Field 10: Description: Suppression: Coding scheme: Beginning Position: Length: Field 11:	XX 1 89 2 PAT_ Patier Last t equals alcoho outpa patier 91 5 PAT_ Count Stand Suppr See w 96 2 PUBI	Foreign country Foreign country Foreign country ZIP nt's five-digit ZIF two digits are bland s '88888'. If state ol or drug use or tient services reported of a pro- tient services reported of a pro- try of patient's re- lardization (ISO). ressed if fewer that tww.ISO.org for con- LIC_HEALTH_ c Health Region of Armstrong, Bailey, Dickens, Donley, Fl Lamb, Lipscomb, L Sherman, Swisher, ' Archer, Baylor, Bro	I P code. nk if a Z e equals an HIV orted fo particula isidentia an 5 pat complet I REGIC of patien Briscoe, (loyd, Gar ubbock, I Terry, WH wwn, Calla	Data Source: Type: CIP code has few 'FC' (foreign c diagnosis the Z or the quarter the ar gender, includ Data Source: Type: al address. List n tients from one c e list. Data Source: Type: DN nt's address. Carson, Castro, Chil za, Gray, Hale, Hall. Jynn, Moore, Motle; heeler, Yoakum com han, Clay, Coleman	Alphar ver than 3 ountry) Z IP code i e ZIP cod ling 'unk Claim Alphar naintaine country. Claim Alphar dress, Cocl , Hansford, y, Ochiltree nties	30 patients. If st ZIP code is blan s blank. If a fac e is blank. If a fac nown', the ZIP numeric d by the Interna numeric numeric nran, Collingsworth Hartley, Hemphill e, Oldham, Parmer, e, Cottle, Eastland,	k, If ICD facility has facility h Code is ational O ational O	 9-9-CM indicat fewer than fift as fewer than fift blank. rganization for Dallam, Deaf Smit Hutchinson, King, ndall, Roberts, ard, Hardeman, 	
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	_					
			a, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar,			
	 Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood counties Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler counties Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Harris, Liberty, Matagorda, Montgomery, 					
	Walker, Waller, Wharton7 Bastrop, Bell, Blanco, B		n, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes,			
			mestone, Llano, McLennan, Madison, Milam, Mills, Robertson,			
	San Saba, Travis, Washi	ngton, Williamson cou	nties			
	Guadalupe, Jackson, Ka	mes, Kendall, Kerr, Kin	Witt, Dimmit, Edwards, Frio, Gillespie, Goliad, Gonzales, nney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val			
	Verde, Victoria, Wilson,9 Andrews, Borden, Coke,		tett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble,			
			Aidland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton,			
	Terrell, Tom Green, Upt					
	 Brewster, Culberson, El Aransas, Bee, Brooks, C 	•	avis, Presidio counties o, Jim Hogg, Jim Wells, Kenedy, Kleberg, Live Oak,			
			r, Webb, Willacy, Zapata counties			
	` Invalid	.8,	,			
Beginning Position:	98	Data Source:	Assigned			
Length:	2	Туре:	Alphanumeric			
Field 12:	LENGTH_OF_SERVIC	E				
Description:			From Date through Statement Thru Date. The			
	minimum length of service					
Beginning Position:	100	Data Source:	Calculated			
Length:	2	Туре:	Alphanumeric			
Field 13:	PAT_AGE					
Description:	Code indicating age of pat					
Coding Scheme:	00 1-28 days	10 35-39				
	01 29-365 days 02 1-4 years	11 40-44 12 45-49				
	03 5-9	13 50-54				
	04 10-14	14 55-59				
	05 15-17	15 60-64	24 45-64			
	06 18-19	16 65-69				
	07 20-24 08 25-29	17 70-74 18 75-79				
	09 30-34	19 80-84				
Beginning Position:	102	Data Source:	Assigned			
Length:	2	Type:	Alphanumeric			
Field 14:	RACE					
Description:	Code indicating the patien	t's race.				
Suppression:	0 1		e race that race is changed to 'Other' (code equals 5).			
Coding Scheme:	1 American Indian/Eskimo	1				
0	2 Asian or Pacific Islander					
	3 Black 4 White					
	5 Other					
	` Invalid					
Beginning Position:	104	Data Source:	Claim			
Length:	1	Туре:	Alphanumeric			
Field 15:	ETHNICITY					
Description:	Code indicating the Hispan					
Suppression:		ten patients of one	e race the ethnicity of patients of that race is			
	suppressed (code is blank).					
Coding Scheme:	1 Hispanic Origin					
	2 Not of Hispanic Origin Invalid					
	105	Data Source:	Claim			
Roginning Docitions	100	Data Source:				
Beginning Position:		Type	Alphanumeric			
Length:	1	Туре:	Alphanumeric			
Length: Field 16:	1 FIRST_PAYMENT_SRO	2	•			
Length:	1	2	•			

	10	Central Certification			LI	Liability		
	11	Other Non-federal Program			LM	Liability N		
	12 Preferred Provider Organization (PPO)			MA Medicare				
	13 14	Point of Service (POS)	ration (ED		MB MC	Medicare	Part I	3
	14 15	Exclusive Provider Organiz Indemnity Insurance	ation (EP	0)		Medicaid		
	15 16	Health Maintenance Organi Medicare Risk	ization (H	IMO)	TV Title V OF Other Federal Program			
	AM	Automobile Medical			VA			istration Plan
	BL CH	Blue Cross/Blue Shield			WC 77			ensation Health Claim
	CI	CHAMPUS Commercial Insurance			ZZ	Invalid	laigei	nt or Unknown
	DS	Disability Insurance						
Beginning Position:	106		Data S	ource:	Claim			
Length:	2		Type:		Alphanu	meric		
Field 17:	SEC	CONDARY_PAYMENT	Γ SRC					
Description:		e indicating the expected		ary sour	e of navn	ient		
-					c of payin	ient.		
Coding Scheme:		e as field 16, FIRST_PA			C1 ·			
Beginning Position:	108		Data S	ource:	Claim	_		
Length:	2		Type:		Alphanu	meric		
Field 18:	TYI	PE_OF_BILL						
Description:	Prov	vides specific information	n about i	the claim	data subi	nitted. Fi	rst d	igit = type of facility.
···· I ····		and digit = type of care. 7						8 91
Coding Scheme:		git-Type of Facility		igit–Type o		ne enamn.	3rd	digit–Sequence of claim
County Scheme.		Hospital	1		including N	Iedicare	0	Non-payment/Zero claim
	2	Skilled nursing	2	Inpatient,	Medicare Pa	art B only	1	Admit through discharge claim
	3	Home health	3	Outpatier		•	2	Interim-first claim
	4	Religious non-medical health care-Hospital	4	Outpatier Part B on	nt Other, Mee lv	dicare	3	Interim-continuing claim
	5	5 Religious non-medical health 5 Interme care-Extended care			ate Care-Le	vel I	4	Interim-last claim
	6				ate Care–Le	vel II	5	Late charge(s) only claim
	7	Clinic	7		e inpatient –		6	Adjustment of prior claim (No used by Medicare)
	8	Special facility	8	Swing be	d		7 8	Replacement of prior claim Void/cancel of prior claim
Beginning Position:	110		Data S	ource:	Claim			× ×
Length:	3		Type:		Alphanu	meric		
		NDITION CODE 1	Type.		Alphanu	merie		
Field 19:		NDITION_CODE_1						
		e describing a condition	relating	to the cl				
Coding Scheme:	1	Military service related			76			lity dialysis
	2	2 Condition is employment related			77	contractua	ıl arra	s or is obligated/required due to a ngement or law to accept
	3	3 Patient covered by insurance not reflected here			78			rimary payer as payment not implemented by HMO
	4	-			78			provided offsite
	5	Lien has been filed			80			nursing facility
		6 ESRD patient in first 18 months of entitlement			A0			ernal partnership program
	6	covered by EGHP				EPSDT/CHAP		
	6 7	I.	condition	for hospice	A1	EPSDT/C	HAP	
		covered by EGHP Treatment of non-terminal of patient Beneficiary would not prov concerning other insurance	vide inform coverage	nation	A1 A2			licapped children's program
	7	covered by EGHP Treatment of non-terminal of patient Beneficiary would not prov concerning other insurance Neither patient or spouse is	vide inform coverage employed	nation	A2 A3		hand	
	7 8 9 10	covered by EGHP Treatment of non-terminal of patient Beneficiary would not prov concerning other insurance Neither patient or spouse is Patient and/or spouse is em exists	ride inform coverage employed ployed bu	nation I t no EGHP	A2 A3 A4	Physically Special Fe Family pla	hand deral	Funding
	7 8 9 10 11	covered by EGHP Treatment of non-terminal of patient Beneficiary would not prov concerning other insurance Neither patient or spouse is Patient and/or spouse is em exists Disabled beneficiary but no exists	ride inform coverage employed ployed bu	nation I t no EGHP	A2 A3 A4 A5	Physically Special Fe Family pla Disability	v hand ederal anning	Funding g
	7 8 9 10 11 17	covered by EGHP Treatment of non-terminal of patient Beneficiary would not prov concerning other insurance Neither patient or spouse is Patient and/or spouse is em exists Disabled beneficiary but no exists Patient is homeless	ride inform coverage employed ployed bu	nation I t no EGHP	A2 A3 A4 A5 A6	Physically Special Fe Family pla Disability Vaccines/	v hand ederal anning Medio	Funding g care 100% payment
	7 8 9 10 11	covered by EGHP Treatment of non-terminal of patient Beneficiary would not prov concerning other insurance Neither patient or spouse is Patient and/or spouse is em exists Disabled beneficiary but no exists	ride inform coverage employed ployed bu	nation I t no EGHP	A2 A3 A4 A5	Physically Special Fe Family pla Disability Vaccines/	v hand ederal anning Medio	Funding g
	7 8 9 10 11 17	covered by EGHP Treatment of non-terminal of patient Beneficiary would not prov concerning other insurance Neither patient or spouse is Patient and/or spouse is em exists Disabled beneficiary but no exists Patient is homeless	vide inform coverage employed ployed but CGHP co	nation I t no EGHP	A2 A3 A4 A5 A6	Physically Special Fe Family pla Disability Vaccines/ Induced at	y hand ederal anning Medio bortio	Funding g care 100% payment
	7 8 9 10 11 17 18	covered by EGHP Treatment of non-terminal of patient Beneficiary would not prov concerning other insurance Neither patient or spouse is Patient and/or spouse is em exists Disabled beneficiary but no exists Patient is homeless Maiden name retained	vide inform coverage employed ployed but b LGHP co	nation I t no EGHP	A2 A3 A4 A5 A6 A7	Physically Special Fe Family pla Disability Vaccines/ Induced at	v hand ederal anning Medic bortio	Funding g care 100% payment n - danger to life n - victim rape/incest
	7 8 9 10 11 17 18 19	covered by EGHP Treatment of non-terminal of patient Beneficiary would not prov concerning other insurance Neither patient or spouse is Patient and/or spouse is em exists Disabled beneficiary but not exists Patient is homeless Maiden name retained Child retains mother's name	vide inform coverage employed ployed but b LGHP co	nation I t no EGHP	A2 A3 A4 A5 A6 A7 A8	Physically Special Fe Family pla Disability Vaccines/ Induced al Induced a Second op	v hand ederal anning Medic bortic bortic	Funding g care 100% payment n - danger to life n - victim rape/incest

22	Patient on multiple drug regimen	
23	Home care giver available	
24	Home IV patient also receiving HHA services	
25	Patient is non-US resident	
26	VA eligible patient chooses to receive services in a Medicare certified facility	
27	Patient referred to a sole community hospital for a diagnostic laboratory test	
28	Patient and/or spouse's EGHP is secondary to Medicare	
29	Disabled beneficiary and/or family member's LGHP is secondary to Medicare	
30	Non-research services provided to patients	
31	enrolled in a qualified clinical trial Patient is student (full time - day)	
32	Patient is student (cooperative/work study program)	
33	Patient is student (full time - night)	
34	Patient is student (part-time)	
	ά γ	
36	General care patient in a special unit	
37	Ward accommodation at patient request	
38	Semi-private room not available	
39	Private room medically necessary	
40	Same day transfer	
41	Partial hospitalization	
42	Continuing care not related to inpatient admission	
43	Continuing care not provided within prescribed postdischarge window	
44	Inpatient admission changed to outpatient	
45	Reserved	
46	Non-availability statement on file	
47	Reserved for CHAMPUS	
48	Psychiatric residential treatment centers for children and adolescents (RTCs)	
49 55	Product replacement within product lifecycle SNF bed not available	
55		
56	Medical appropriateness	
57	SNF readmission	
58	Terminated Medicare+Choice organization enrollee	
59	Non-primary ESRD facility	
60	Day outlier	
61	Cost outlier	
66	Provider does not wish cost outlier payment	
67	Beneficiary elects not to use life time reserve (LTR) days	
68	Beneficiary elects to use life time reserve (LTR) days	
69 70	IME/DGME/N&AH Payment Only	
70 71	Self-administered anemia management drug Full care in unit	
71 72	Self care in unit	
73	Self care training	
74	Home	

- AB Abortion performed due to incest
- AC Abortion performed due to serious fatal genetic defect, deformity, or abnormality
- AD Abortion performed due to life endangering physical condition caused by, arising from or exacerbated by the pregnancy itself
- AE Abortion performed due to physical health of mother that is not life endangering
- AF Abortion performed due to emotional/psychological health of mother
- AG Abortion performed due to social or economic reasons
- AH Elective abortion
- AI Sterilization
- AJ Payer responsible for co-payment
- AJ Payer responsible for co-payment
- AK Air ambulance required
- AL Specialized treatment/bed unavailable
- AM Non-emergency medically necessary stretcher transport required
- AN Pre-admission screening not required
- B0 Medicare coordinated care demonstration claim
- B1 Beneficiary is ineligible for demonstration program
- B2 Critical access hospital ambulance attestation
- B3 Pregnancy indicator
- B4 Admission unrelated to discharge on same day
- C1 Approved as billed
- C2 Automatic approval as billed based on focused review
- C3 Partial approval
- C4 Admission/services denied
- C5 Postpayment review applicable
- C6 Admission Preauthorization
- C7 Extended Authorization
- D0 Changes to Service Dates
- D1 Changes to Charges
- D2 Changes in Revenue Codes/HCPCS/HIPPS rate code
- D3 Second or Subsequent Interim PPS Bill
- D4 Change in ICD-9-CM diagnosis and/or procedure codes.
- D5 Cancel to correct HICN or Provider ID
- D6 Cancel Only to Repay a Duplicate or OIG Overpayment
- D7 Change to Make Medicare the Secondary Payer
- D8 Change to Make Medicare the Primary Payer
- D9 Any Other Change
- DR Katrina disaster related
- E0 Changes in Patient Status
- G0 Distinct Medical Visit
- H0 Delayed Filing, Statement of Intent Submitted
- M0 All inclusive rate for outpatient services
- M1 Roster billed influenza virus vaccine or pneumococcal pneumonia vaccine (PPV)
- M2 HHA payment significantly exceeds total charges

	75 Home - 100% reimbursem	ent	P1 Do not Resuscitate Order (DNR)WO United Mine Workers of America (UMWA)
D	112	D-4- C	Demonstration Indicator
Beginning Position:	113 2	Data Source:	Claim
Length: Field 20:		Туре:	Alphanumeric
Field 20:	CONDITION_CODE_2	relating to the a	loim
Coding Sohomor	Code describing a condition Same as Field 19.	relating to the c	lann.
Coding Scheme:	115	Data Source:	Claim
Beginning Position: Length:	2	Type:	Alphanumeric
Field 21:	CONDITION_CODE_3	Type:	Alphanumenc
rielu 21:	Code describing a condition	relating to the o	laim
Coding Scheme:	Same as Field 19.	r relating to the c	lann.
Beginning Position:	117	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 22:	CONDITION_CODE_4	турс.	Alphanumerie
	Code describing a condition	relating to the c	aim
Coding Scheme:	Same as Field 19.	relating to the e	
Beginning Position:	119	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 23:	CONDITION_CODE_5	1 ypc.	Tuphanamerie
r ielu 23.	Code describing a condition	relating to the c	laim
Coding Scheme:	Same as Field 19.	relating to the e	
Beginning Position:	121	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 24:	CONDITION_CODE_6	Type.	T iphanamerie
Ficiu 24.	Code describing a condition	relating to the c	laim
Coding Scheme:	Same as Field 19.	relating to the e	
Beginning Position:	123	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 25:	CONDITION_CODE_7	rype.	T iphanamerie
11010 201	Code describing a condition	relating to the c	laim
Coding Scheme:	Same as Field 19.	relating to the e	
Beginning Position:	125	Data Source:	Claim
Length:	2	Туре:	Alphanumeric
Field 26:	CONDITION_CODE_8	- j pot	
	Code describing a condition	relating to the c	laim.
Coding Scheme:	Same as Field 19.		
Beginning Position:	127	Data Source:	Claim
Length:	2	Туре:	Alphanumeric
Field 27:	REASON FOR VISIT		•
		including the 4th	and 5th digits if applicable. Decimal is implied
	following the third character		
Beginning Position:	129	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 28:	PRINC_DIAG_CODE		•
	ICD 0 CM diagnosis and a f	for the principal of	liagnosis, including the 4th and 5th digits if
	ICD-9-CIVI diagnosis code i		
	applicable. Decimal is impli		
Beginning Position:			
	applicable. Decimal is impli	ied following the	third character.
Beginning Position: Length: Field 29:	applicable. Decimal is impli 134	ied following the Data Source:	third character. Claim
Length:	applicable. Decimal is impli 134 5 OTH_DIAG_CODE_1 ICD-9-CM diagnosis code,	ied following the Data Source: Type: including the 4th	third character. Claim
Length:	applicable. Decimal is impliined to the second seco	ied following the Data Source: Type: including the 4th r.	third character. Claim Alphanumeric
Length:	applicable. Decimal is impli 134 5 OTH_DIAG_CODE_1 ICD-9-CM diagnosis code,	ied following the Data Source: Type: including the 4th	third character. Claim Alphanumeric
Length: Field 29:	applicable. Decimal is impliined to the second seco	ied following the Data Source: Type: including the 4th r.	third character. Claim Alphanumeric and 5th digits if applicable. Decimal is implied

	following the third character	U				
Beginning Position:	144	Data Source:	Claim			
Length:	5	Type:	Alphanumeric			
Field 31:	OTH_DIAG_CODE_3	1урс.	Alphanumene			
riciu 31.	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied					
	following the third character		and 5th dights it applicable. Decimal is implied			
Dociumina Docition.	e		Claim			
Beginning Position:	149	Data Source:	Claim			
Length:	5	Туре:	Alphanumeric			
Field 32:	OTH_DIAG_CODE_4	• • • • • • • •				
			and 5th digits if applicable. Decimal is implied			
	following the third character		~			
Beginning Position:	154	Data Source:	Claim			
Length:	5	Туре:	Alphanumeric			
Field 33:	OTH_DIAG_CODE_5					
			and 5th digits if applicable. Decimal is implied			
	following the third character	r.				
Beginning Position:	159	Data Source:	Claim			
Length:	5	Туре:	Alphanumeric			
Field 34:	OTH_DIAG_CODE_6					
		including the 4th	and 5th digits if applicable. Decimal is implied			
	following the third character					
Beginning Position:	164	Data Source:	Claim			
Length:	5	Туре:	Alphanumeric			
Field 35:	OTH_DIAG_CODE_7	1,100	Thphuhumene			
Ficiu 55.		including the 4th	and 5th digits if applicable. Decimal is implied			
	following the third character		and our digits it applicable. Decimal is implied			
Beginning Position:	169	Data Source:	Claim			
	5					
Length:		Туре:	Alphanumeric			
Field 36:	OTH_DIAG_CODE_8		and 5th divite if annliaghly Desired is implied			
			and 5th digits if applicable. Decimal is implied			
	following the third character					
Beginning Position:	174	Data Source:	Claim			
Length:	5	Туре:	Alphanumeric			
Field 37:	OTH DIAG CODE 9					
- iciu 57.	ICD-9-CM diagnosis code, i		and 5th digits if applicable. Decimal is implied			
	ICD-9-CM diagnosis code, i following the third character	r.				
Beginning Position:	ICD-9-CM diagnosis code, i following the third character 179	r. Data Source:	Claim			
Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5	r.				
Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10	r. Data Source: Type:	Claim Alphanumeric			
Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i	r. Data Source: Type: including the 4th	Claim			
Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10	r. Data Source: Type: including the 4th	Claim Alphanumeric			
Beginning Position: <u>Length:</u> Field 38:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i	r. Data Source: Type: including the 4th	Claim Alphanumeric			
Beginning Position: Length: Field 38: Beginning Position:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character	r. Data Source: Type: including the 4th r.	Claim Alphanumeric and 5th digits if applicable. Decimal is implied			
Beginning Position: Length: Field 38: Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184	r. Data Source: Type: including the 4th r. Data Source:	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim			
Beginning Position: Length: Field 38: Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184 5 OTH_DIAG_CODE_11	r. Data Source: Type: including the 4th r. Data Source: Type:	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric			
Beginning Position: Length: Field 38: Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184 5 OTH_DIAG_CODE_11 ICD-9-CM diagnosis code, i	r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim			
Beginning Position: Length: Field 38: Beginning Position: Length: Field 39:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184 5 OTH_DIAG_CODE_11 ICD-9-CM diagnosis code, i following the third character	r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th r.	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric and 5th digits if applicable. Decimal is implied			
Beginning Position: Length: Field 38: Beginning Position: Length: Field 39: Beginning Position:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184 5 OTH_DIAG_CODE_11 ICD-9-CM diagnosis code, i following the third character 189	r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th r. Data Source:	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim			
Beginning Position: Length: Field 38: Beginning Position: Length: Field 39: Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184 5 OTH_DIAG_CODE_11 ICD-9-CM diagnosis code, i following the third character 189 5	r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th r.	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric and 5th digits if applicable. Decimal is implied			
Beginning Position: Length: Field 38: Beginning Position: Length: Field 39: Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184 5 OTH_DIAG_CODE_11 ICD-9-CM diagnosis code, i following the third character 189 5 OTH_DIAG_CODE_12	r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th r. Data Source: Type:	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric			
Beginning Position: Length: Field 38: Beginning Position: Length: Field 39: Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184 5 OTH_DIAG_CODE_11 ICD-9-CM diagnosis code, i following the third character 189 5 OTH_DIAG_CODE_12 ICD-9-CM diagnosis code, i	r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim			
Beginning Position: Length: Field 38: Beginning Position: Length: Field 39: Beginning Position: Length: Field 40:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184 5 OTH_DIAG_CODE_11 ICD-9-CM diagnosis code, i following the third character 189 5 OTH_DIAG_CODE_12 ICD-9-CM diagnosis code, i following the third character	r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th r.	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric and 5th digits if applicable. Decimal is implied			
Beginning Position: Length: Field 38: Beginning Position: Length: Field 39: Beginning Position: Length: Field 40: Beginning Position: Length:	ICD-9-CM diagnosis code, i following the third character 179 5 OTH_DIAG_CODE_10 ICD-9-CM diagnosis code, i following the third character 184 5 OTH_DIAG_CODE_11 ICD-9-CM diagnosis code, i following the third character 189 5 OTH_DIAG_CODE_12 ICD-9-CM diagnosis code, i	r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th r. Data Source: Type: including the 4th	Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric and 5th digits if applicable. Decimal is implied Claim Alphanumeric			

ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.

			and sur digits if applicable. Decimal is implied
	following the third characte		
Beginning Position:	199	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 42:	OTH_DIAG_CODE_14		
	ICD-9-CM diagnosis code,	including the 4th	and 5th digits if applicable. Decimal is implied
	following the third characte	r.	
Beginning Position:	204	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 43:	OTH_DIAG_CODE_15	- , F	
		including the 4th	and 5th digits if applicable. Decimal is implied
	following the third characte		and sur digits it applicable. Deenhar is implied
Beginning Position:	209	Data Source:	Claim
0 0			
Length:	5	Туре:	Alphanumeric
Field 44:	OTH_DIAG_CODE_16		
			and 5th digits if applicable. Decimal is implied
	following the third characte		
Beginning Position:	214	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 45:	OTH_DIAG_CODE_17		
	ICD-9-CM diagnosis code,	including the 4th	and 5th digits if applicable. Decimal is implied
	following the third characte		
Beginning Position:	219	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 46:	OTH_DIAG_CODE_18	Type.	7 Aprianamente
rielu 40:		including the 1th	and 5th digits if applicable. Desired is implied
			and 5th digits if applicable. Decimal is implied
	following the third characte		
Beginning Position:	224	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 47:	OTH_DIAG_CODE_19		
			and 5th digits if applicable. Decimal is implied
	following the third characte		
Beginning Position:	229	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 48:	OTH_DIAG_CODE_20	• •	*
		including the 4th	and 5th digits if applicable. Decimal is implied
	following the third characte		· ······ · ···························
Beginning Position:	234	Data Source:	Claim
Length:	5	Type:	Alphanumeric
		Type.	Aphanumene
Field 49:	OTH_DIAG_CODE_21	including the 1th	and 5th digits if applicable. Desired is implied
	6	0	and 5th digits if applicable. Decimal is implied
	following the third characte		
Beginning Position:	239	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 50:	OTH_DIAG_CODE_22		
			and 5th digits if applicable. Decimal is implied
	following the third characte	r.	
Beginning Position:	244	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 51:	OTH_DIAG_CODE_23	v .	*
• _ • _ •		including the Ath	and 5th digits if applicable. Decimal is implied
	following the third characte		and our digits it applicable. Declinar is implied
Deginning Desition	•	Data Source:	Claim
Beginning Position:	249		Claim
Length:	5	Туре:	Alphanumeric
Field 52:	OTH_DIAG_CODE_24		

	following the third character	r.	
Beginning Position:	254	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 53:	RELATED_CAUSE_COD	DE_1	
	Code identifying an accomp	anying cause of	an illness, injury or an accident.
Coding Scheme:	AA Auto accident		
	AB Abust		
	AP Another party responsi	ble	
	EM Employment		
	OA Other accident	_ ~	
Beginning Position:	259	Data Source:	Claim
Length:	2	Туре:	Alphanumeric
Field 54:	RELATED_CAUSE_COD		•••
		anying cause of	an illness, injury or an accident.
Coding Scheme:	Same as Field 53.		
Beginning Position:	261	Data Source:	Claim
Length:	2	Туре:	Alphanumeric
Field 55:	RELATED_CAUSE_COD		· · · · · · · · · · · · · · · · · · ·
C. P. C. Lawrence		anying cause of	an illness, injury or an accident.
Coding Scheme:	Same as Field 53. 263	Data Company	Claim
Beginning Position:	203	Data Source:	
Length: Field 56:	E_CODE_1	Туре:	Alphanumeric
riela 50:		including the 1th	and 5th digits if applicable, of the primary
			d following the third character.
Beginning Position:	265	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 57:	E CODE 2	Type.	Alphanumerie
riciu 57.		including the 4th	and 5th digits if applicable, of an additional
			following the third character.
Beginning Position:	270	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 58:	E CODE 3		
		including the 4th	and 5th digits if applicable, of an additional
			following the third character.
Beginning Position:	275	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 59:	E_CODE_4		
			and 5th digits if applicable, of an additional
	.		following the third character.
Beginning Position:	280	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 60:	E_CODE_5		
			and 5th digits if applicable, of an additional
			following the third character.
Beginning Position:	285	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 61:	E_CODE_6		and 5th divite if annihold a firm of divisional
			and 5th digits if applicable, of an additional following the third elegenter
Reginning Desitions	290		following the third character.
Beginning Position:		Data Source:	Claim Alphanumeric
Length: Field 62:	5 E_CODE_7	Туре:	Alphanumeric
rielu 02;	E_CODE_/		

ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.

			following the third character.
Desimulus Desitions	295	-	Claim
Beginning Position:	293 5	Data Source:	Alphanumeric
Length:		Туре:	Alphanumenc
Field 63:	E_CODE_8	in also din a the a the	and 5th digits if anylights of an additional
	5	U	and 5th digits if applicable, of an additional
	•••	-	following the third character.
Beginning Position:	300	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 64:	E_CODE_9		
			and 5th digits if applicable, of an additional
		-	following the third character.
Beginning Position:	305	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 65:	E_CODE_10		
			and 5th digits if applicable, of an additional
	external cause of injury. De	cimal is implied t	following the third character.
Beginning Position:	310	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 66:	PROC_CODE_1		
	Code for the surgical or oth	er procedure with	the highest charge performed during the period
	covered by the bill. HCPCS	or CPT code.	
Beginning Position:	315	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 67:	PROC_CODE_2	••	•
		rocedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		
Beginning Position:	320	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 68:	PROC_CODE_3		A
		rocedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		
Beginning Position:	325	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 69:	PROC_CODE_4	- J F	
		rocedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next ingliest enange performed during the period
Beginning Position:	330	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 70:	PROC_CODE_5	Type.	7 Aphananerie
riciu 70.		rocedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next ingliest charge performed during the period
Beginning Position:	335	Data Source:	Claim
	5	Type:	Alphanumeric
Length: Field 71:		I VDE:	AIDHAHUHEHC
$\mathbf{r}_{1} = \mathbf{r}_{1}$		- JF = 7	
	PROC_CODE_6	**	-
	PROC_CODE_6 Code for surgical or other p	rocedure with the	e next highest charge performed during the period
	PROC_CODE_6 Code for surgical or other p covered by the bill. HCPCS	rocedure with the or CPT code.	e next highest charge performed during the period
Beginning Position:	PROC_CODE_6 Code for surgical or other p covered by the bill. HCPCS 340	rocedure with the or CPT code. Data Source:	e next highest charge performed during the period Claim
Beginning Position: Length:	PROC_CODE_6 Code for surgical or other p covered by the bill. HCPCS 340 5	rocedure with the or CPT code.	e next highest charge performed during the period
Beginning Position:	PROC_CODE_6 Code for surgical or other p covered by the bill. HCPCS 340 5 PROC_CODE_7	rocedure with the or CPT code. Data Source: Type:	e next highest charge performed during the period Claim Alphanumeric
Beginning Position: Length:	PROC_CODE_6 Code for surgical or other p covered by the bill. HCPCS 340 5 PROC_CODE_7 Code for surgical or other p	rocedure with the or CPT code. Data Source: Type: rocedure with the	e next highest charge performed during the period Claim
Beginning Position: Length: Field 72:	PROC_CODE_6 Code for surgical or other p covered by the bill. HCPCS 340 5 PROC_CODE_7 Code for surgical or other p covered by the bill. HCPCS	rocedure with the or CPT code. Data Source: Type: rocedure with the or CPT code.	e next highest charge performed during the period Claim Alphanumeric e next highest charge performed during the period
Beginning Position: Length: Field 72: Beginning Position:	PROC_CODE_6 Code for surgical or other p covered by the bill. HCPCS 340 5 PROC_CODE_7 Code for surgical or other p covered by the bill. HCPCS 345	rocedure with the or CPT code. Data Source: Type: rocedure with the or CPT code. Data Source:	e next highest charge performed during the period Claim Alphanumeric e next highest charge performed during the period Claim
Beginning Position: Length: Field 72:	PROC_CODE_6 Code for surgical or other p covered by the bill. HCPCS 340 5 PROC_CODE_7 Code for surgical or other p covered by the bill. HCPCS	rocedure with the or CPT code. Data Source: Type: rocedure with the or CPT code.	e next highest charge performed during the period Claim Alphanumeric e next highest charge performed during the period

ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character.

	covered by the bill. HCPCS		e next ingliest charge performed during the period
Beginning Position:	350	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 74:	PROC_CODE_9	1 ypc.	7 Aphanamerie
		procedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next ingliest charge performed during the period
Beginning Position:	355	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 75:	PROC_CODE_10	Type.	Aphanumere
riciu 73.		procedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		
Beginning Position:	360	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 76:	PROC_CODE_11		
		procedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e nene ingnese eninge periorinee earing are perior
Beginning Position:	365	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 77:	PROC_CODE_12	rype.	Thermanianene
		procedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next menest charge performed during the period
Beginning Position:	370	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 78:	PROC CODE 13	Type.	Aphanumerie
riciu 70.		procedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next ingliest charge performed during the period
Beginning Position:	375	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 79:	PROC_CODE_14	Type.	Aphanumere
		procedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next menest charge performed during the period
Beginning Position:	380	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 80:	PROC_CODE_15	i ype:	7 uphanumerie
		procedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next ingliest charge performed during the period
Beginning Position:	385	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 81:	PROC_CODE_16	1 j pc.	/ uphunumerte
		procedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		next ingliest charge performed during the period
Beginning Position:	390	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 82:	PROC_CODE_17	Type.	Aphanumerie
		rocadura with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next nighest enarge performed during the period
Paginning Desition.	395	Data Source:	Claim
Beginning Position:	595 5		
Length: Field 83:	PROC CODE 18	Туре:	Alphanumeric
			now the heat above we also we do not the set of the
rielu 05.	Code for surgical or other procedure with the next highest charge performed during the period		
			8 8 F
	covered by the bill. HCPCS	S or CPT code.	
Beginning Position: Length:			Claim Alphanumeric

Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.

	covered by the bill. HCPCS		e next ingliest enarge performed during the period
Beginning Position:	405	Data Source:	Claim
Length:	405 5	Type:	Alphanumeric
Field 85:		Type:	Alphanumenc
riela 85:	PROC_CODE_20		
			e next highest charge performed during the period
	covered by the bill. HCPCS		
Beginning Position:	410	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 86:	PROC_CODE_21		
			e next highest charge performed during the period
	covered by the bill. HCPCS	or CPT code.	
Beginning Position:	415	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 87:	PROC_CODE_22		
	Code for surgical or other pr	rocedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		
Beginning Position:	420	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 88:	PROC_CODE_23	1,100	
1 iciu 00.		rocedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next nighest charge performed during the period
Designing Desitions			Claim
Beginning Position:	425	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Field 89:	PROC_CODE_24		
	U		e next highest charge performed during the period
	covered by the bill. HCPCS		
Beginning Position:	430	Data Source:	Claim
Length:	5	Туре:	Alphanumeric
Length: Field 90:	PROC_CODE_25		
	PROC_CODE_25		Alphanumeric e next highest charge performed during the period
	PROC_CODE_25	rocedure with the	
	PROC_CODE_25 Code for surgical or other pr	rocedure with the	
Field 90: Beginning Position:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS	rocedure with the or CPT code.	e next highest charge performed during the period
Field 90: Beginning Position: Length:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5	rocedure with the or CPT code. Data Source:	e next highest charge performed during the period Claim
Field 90: Beginning Position:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT	rocedure with the or CPT code. Data Source: Type:	e next highest charge performed during the period Claim Alphanumeric
Field 90: Beginning Position: Length:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C	rocedure with the or CPT code. Data Source: Type: Other Charge Am	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum
Field 90: Beginning Position: Length:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C of charges associated with re	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X-
Field 90: Beginning Position: Length: Field 91:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C of charges associated with re 24X, 52X-53X, 55X-60X, 6	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 8X, 90X-95X, 99X.
Field 90: Beginning Position: Length: Field 91: Beginning Position:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C of charges associated with re 24X, 52X-53X, 55X-60X, 6 440	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 64X-70X, 76X-78 Data Source:	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated
Field 90: Beginning Position: Length: Field 91: Beginning Position: Length:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C of charges associated with re 24X, 52X-53X, 55X-60X, 6 440 12	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 8X, 90X-95X, 99X.
Field 90: Beginning Position: Length: Field 91: Beginning Position:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C of charges associated with re 24X, 52X-53X, 55X-60X, 6 440 12 PHARM_AMOUNT	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type:	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated Numeric
Field 90: Beginning Position: Length: Field 91: Beginning Position: Length:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C of charges associated with re 24X, 52X-53X, 55X-60X, 6 440 12 PHARM_AMOUNT Ancillary Service Charge, P	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type: harmacy Charge	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated Numeric Amount. Calculated using MEDPAR algorithm.
Field 90: Beginning Position: Length: Field 91: Beginning Position: Length: Field 92:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C of charges associated with rr 24X, 52X-53X, 55X-60X, 6 440 12 PHARM_AMOUNT Ancillary Service Charge, P Sum of charges associated w	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type: harmacy Charge with revenue code	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated Numeric Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 26X, 63X.
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Field 90: Beginning Position: Length: Field 91: Beginning Position: Length: Field 92: Beginning Position:	PROC_CODE_25 Code for surgical or other procovered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C of charges associated with re 24X, 52X-53X, 55X-60X, 6 440 12 PHARM_AMOUNT Ancillary Service Charge, P Sum of charges associated w 452 12 MEDSURG_AMOUNT	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type: harmacy Charge with revenue code Data Source: Type:	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated Numeric Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 26X, 63X. Calculated Numeric
Field 90: Beginning Position: Length: Field 91: Beginning Position: Length: Field 92: Beginning Position: Length:	 PROC_CODE_25 Code for surgical or other provided for the surger of the surger of	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type: harmacy Charge with revenue code Data Source: Type: Medical/Surgical	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated Numeric Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 26X, 63X. Calculated Numeric Supply Charge Amount. Calculated using
Field 90: Beginning Position: Length: Field 91: Beginning Position: Length: Field 92: Beginning Position: Length:	 PROC_CODE_25 Code for surgical or other provered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, Conference of charges associated with response of ch	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type: harmacy Charge with revenue code Data Source: Type: Medical/Surgical	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated Numeric Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 26X, 63X. Calculated Numeric
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Field 90: Beginning Position: Length: Field 91: Beginning Position: Length: Field 92: Beginning Position: Length: Field 93:	PROC_CODE_25 Code for surgical or other procovered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, Co of charges associated with re 24X, 52X-53X, 55X-60X, 6 440 12 PHARM_AMOUNT Ancillary Service Charge, P Sum of charges associated w 452 12 MEDSURG_AMOUNT Ancillary Service Charge, M MEDPAR algorithm. Sum of revenue center 27X, 62X.	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type: harmacy Charge with revenue code Data Source: Type: Medical/Surgical of charges associa	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated Numeric Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 26X, 63X. Calculated Numeric Supply Charge Amount. Calculated using ated with revenue codes other than 0100-0219,
Field 90: Beginning Position: Length: Field 91: Beginning Position: Length: Field 92: Beginning Position: Length: Field 93: Beginning Position:	PROC_CODE_25 Code for surgical or other pr covered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, C of charges associated with re 24X, 52X-53X, 55X-60X, 6 440 12 PHARM_AMOUNT Ancillary Service Charge, P Sum of charges associated v 452 12 MEDSURG_AMOUNT Ancillary Service Charge, N MEDPAR algorithm. Sum of revenue center 27X, 62X. 464 12	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type: harmacy Charge vith revenue code Data Source: Type: Medical/Surgical of charges associa	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 8X, 90X-95X, 99X. Calculated Numeric Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 26X, 63X. Calculated Numeric Supply Charge Amount. Calculated using ated with revenue codes other than 0100-0219, Calculated
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Field 90: Beginning Position: Length: Field 91: Beginning Position: Length: Field 92: Beginning Position: Length: Field 93: Beginning Position: Length:	 PROC_CODE_25 Code for surgical or other precovered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, Context of charges associated with received with r	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type: tharmacy Charge with revenue code Data Source: Type: fedical/Surgical of charges associa Data Source: Type:	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated Numeric Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 26X, 63X. Calculated Numeric Supply Charge Amount. Calculated using ated with revenue codes other than 0100-0219, Calculated Numeric Equipment Charge Amount. Calculated using
Field 90: Beginning Position: Length: Field 91: Beginning Position: Length: Field 92: Beginning Position: Length: Field 93: Beginning Position: Length:	 PROC_CODE_25 Code for surgical or other precovered by the bill. HCPCS 435 5 OTHER_AMOUNT Ancillary Service Charge, Context of charges associated with received with r	rocedure with the or CPT code. Data Source: Type: Other Charge Am evenue codes oth 4X-70X, 76X-78 Data Source: Type: harmacy Charge with revenue code Data Source: Type: Medical/Surgical of charges associa Data Source: Type:	e next highest charge performed during the period Claim Alphanumeric ount. Calculated using MEDPAR algorithm. Sum her than 0100-0219, revenue center 002-099, 22X- 3X, 90X-95X, 99X. Calculated Numeric Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 26X, 63X. Calculated Numeric Supply Charge Amount. Calculated using ated with revenue codes other than 0100-0219, Calculated Numeric

Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.

Beginning Position:	476	Data Source:	Calculated
Length:	12 12	Туре:	Numeric
Field 95:			dical Equipment Charge Amount. Calculated associated with revenue codes other than 0100-
Beginning Position: Length:	488 12	Data Source: Type:	Calculated Numeric
Field 96:	PT_AMOUNT	Type.	Tumbre
	Ancillary Service Charge, F		Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center
Beginning Position:	500	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 97:	OT_AMOUNT		
			rapy Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center
Beginning Position:	512	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 98:	SPEECH_AMOUNT		
			Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center
Beginning Position:	524	Data Source:	Calculated
Length: Field 99:	12 IT_AMOUNT	Туре:	Numeric
Beginning Position:			y Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center Calculated
Length:	12	Туре:	Numeric
Field 100:	BLOOD_AMOUNT Ancillary Service Charge. C with revenue codes other th		MEDPAR algorithm. Sum of charges associated venue center 38X.
Beginning Position:	548	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 101:	with revenue codes other th	Calculated using I	MEDPAR algorithm. Sum of charges associated venue center 39X.
Beginning Position:	560	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 102:	OR_AMOUNT Ancillary Service Charge, Operating Room Charge amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 36X, 71X-72X.		
Beginning Position:	572	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 103:	Sum of charges associated	with revenue code	e Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 79X.
Beginning Position:	584	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 104:	CARD_AMOUNT		

	Ancillary Service Charge,	Cardiology Charg	e Amount. Calculated using MEDPAR algorithm.
			es other than 0100-0219, revenue center 48X, 73X.
Beginning Position:	596	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 105:	ANES AMOUNT		
		Anesthesia Charge	e Amount. Calculated using MEDPAR algorithm.
			es other than 0100-0219, revenue center 37X.
Beginning Position:	608	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 106:	LAB_AMOUNT		
	Ancillary Service Charge,	Laboratory Charg	e Amount. Calculated using MEDPAR algorithm.
			es other than 0100-0219, revenue center 30X-31X,
	74X-75X.		
Beginning Position:	620	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 107:	RAD_AMOUNT	*	
	Ancillary Service Charge,	Radiology Charge	e Amount. Calculated using MEDPAR algorithm.
			es other than 0100-0219, revenue center 28X, 32X-
	35X, 40X.		
Beginning Position:	632	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 108:	MRI_AMOUNT		
	Ancillary Service Charge,	MRI Charge Amo	ount. Calculated using MEDPAR algorithm. Sum of
			than 0100-0219, revenue center 61X.
Beginning Position:	644	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 109:	OP_AMOUNT		
			es Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center
Beginning Position:	656	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 110:	ER_AMOUNT	J1	
		Emergency Room	Charge Amount. Calculated using MEDPAR
			evenue codes other than 0100-0219, revenue center
Beginning Position:	668	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 111:	AMBULANCE_AMOUN	T	
	Ancillary Service Charge,	Ambulance Charg	ge Amount. Calculated using MEDPAR algorithm.
	Sum of charges associated	with revenue code	es other than 0100-0219, revenue center 54X.
Beginning Position:	680	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 112:	PRO_FEE_AMOUNT		
	Ancillary Service Charge,	Professional Fee G	Charge Amount. Calculated using MEDPAR
	algorithm. Sum of charges 96X-98X.	associated with re	evenue codes other than 0100-0219, revenue center
Beginning Position:	692	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 113:	ORGAN_AMOUNT		
		Organ Acquisition	n Charge Amount. Calculated using MEDPAR
	•		evenue codes other than 0100-0219, revenue center
Beginning Position:	704	Data Source:	Calculated
Length:	12	Туре:	Numeric
U		* *	

Field 114:	ESRD_AMOUNT			
11010 114.	Ancillary Service Charge, End Stage Renal Dialysis Charge Amount. Calculated using			
	MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219,			
	ę	revenue center 80X, 82X-88X.		
Beginning Position:	716 Data Source: Calculated			
Length:	12	Туре:	Numeric	
Field 115:	CLINIC_AMOUNT	<i></i>		
		Clinic Visit Charg	e Amount. Calculated using MEDPAR algorithm.	
			es other than 0100-0219, revenue center 51X.	
Beginning Position:	728	Data Source:	Calculated	
Length:	12	Туре:	Numeric	
Field 116:	TOTAL_CHARGES			
	Sum of accommodation ch	arges, non-covere	d accommodation charges, ancillary charges, non-	
	covered ancillary charges.			
Beginning Position:	740	Data Source:	Claim	
Length:	12	Type:	Numeric	
Field 117:	TOTAL_NON_COV_CH			
			s, non-covered ancillary charges.	
Beginning Position:	752	Data Source:	Claim	
Length:	12	Туре:	Numeric	
Field 118:	TOTAL_CHARGES_AN			
	Sum of covered and non-co			
Beginning Position:	764	Data Source:	Claim	
Length:	12	Туре:	Numeric	
Field 119:	TOTAL_NON_COV_CH			
	Sum of non-covered ancill			
Beginning Position:	776	Data Source:	Claim	
Length:	12	Туре:	Numeric	
Field 120:	PHYSICIAN_1_UNIF_I			
			hysician reported as the Operating Physician, if	
			it, or Rendering Physician 1, if reported in the 837	
			ndividual licensed to practice medicine under the racticioner other than a physician who provides a	
			the outpatient's surgical or radiological	
			ist, chiropractor, dentist, nurse practitioner, nurse	
	midwive or podiatrist, auth			
Suppression:			eported for a facility or the number of physicians	
Suppression.	reported for CCS_PROC_(
Coding Scheme:	9999999998 Cell size le			
-	1 2		nber could not be matched	
Beginning Position:	788	Data Source:	Assigned	
Length:	10	Туре:	Alphanumeric	
Field 121:	PHYSICIAN_2_UNIF_II			
	e	1	hysician reported as the other provider, if reported	
			Rendering Physician 2, if reported in the 837	
			ndividual licensed to practice medicine under the	
			ractitioner other than a physician who provides a	
			the outpatient's surgical or radiological	
			ist, chiropractor, dentist, nurse practitioner, nurse	
C	midwive or podiatrist, auth	•	• 1	
Suppression:			eported for a facility or the number of physicians	
Coding Cohorses	represented for CCS_PRO 9999999998 Cell size le		racinty is less than five.	
Coding Scheme:			iber could not be matched	
Beginning Position:	798	Data Source:	Assigned	
Length:	10	Type:	Alphanumeric	
0```		J 1	*	

Field 122:	CERT_STATUS			
	Assignment of a code to indicate the certification of data and submission of comments by the			
	facility. First available 3 rd quarter 1999.			
Coding Scheme:	1 Certified, without comment			
	2 Certified, with comment			
	3 Certified, with comment, comment not received by deadline			
	4 Facility elected not to certify			
	5 Facility closed, data not certified			
	6 Facility out of compliance, did not certify data			
Beginning Position:	808 Data Source: Assigned			
Length:	1 Type: Alphanumeric			
Field 123:	INPUT_FORMAT			
	Format in which the outpatient data file was submitted by the facility			
Coding Scheme:	0 837 Professional			
coung seneme.	1 837 Institutional			
Beginning Position:	809 Data Source: Assigned			
Length:	1 Type: Alphanumeric			

References:

	CLASSIFI	CATION DA	ATA FILE
Field 1:	RECORD_ID		
Description:	Record Identification Numbe	r. Unique numb	er assigned to identify the record. First available
1			ORD_ID in THCIC Research Data Files (RDF's).
Beginning Position:		Data Source:	Assigned
Length:		Type:	Alphanumeric
Field 2:	CCS PRIN DIAG CODE		/ uphunumente
rielu 2:			ification of DDIN, DIAC, CODE into alignably
			sification of PRIN_DIAG_CODE into clinically
	meaningful diagnosis categor		
Beginning Position:		Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 3:	CCS_OTH_DIAG_CODE_		
	Clinical Classifications Softw	vare (CCS) class	sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor	y.	
Beginning Position:	17	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 4:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor		
Beginning Position:	8 8 8	Data Source:	Assigned
Length:		Type:	Alphanumeric
Field 5:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor		
Beginning Position:	25	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 6:	CCS_OTH_DIAG_CODE	_4	
	Clinical Classifications Softw	vare (CCS) class	sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor		,
Beginning Position:	• • •	Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 7:	CCS_OTH_DIAG_CODE		
riciu 7.			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor		sineation of OTT_DING_CODE_1 into eninearly
Designing Desition		y. Data Source:	Assigned
Beginning Position:			•
Length:		Туре:	Alphanumeric
Field 8:	CCS_OTH_DIAG_CODE_		
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor		
Beginning Position:	37	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 9:	CCS_OTH_DIAG_CODE	7	
	Clinical Classifications Softw	vare (CCS) class	sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor		`
Beginning Position:		Data Source:	Assigned
Length:		Type:	Alphanumeric
Field 10:	CCS OTH DIAG CODE		Tiphanone
riciu 10.			sification of OTH_DIAG_CODE_1 into clinically
			Sincation of OTH_DIAO_CODE_1 into chilically
D • • D • •	meaningful diagnosis categor		A
Beginning Position:		Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 11:	CCS_OTH_DIAG_CODE_		
	Clinical Classifications Softw	vare (CCS) class	sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor		•
Beginning Position:		Data Source:	Assigned
8 8			

CLASSIFICATION DATA FILE

Length:	4	Туре:	Alphanumeric
Field 12:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis catego	ory.	
Beginning Position:	53	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 13:	CCS_OTH_DIAG_CODE		•
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis catego		
Beginning Position:	57	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 14:	CCS OTH DIAG CODE		/ ipitalialitie
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis catego		sineation of OTIT_DIAG_CODE_1 into eninearly
Desimulus Desition.	0 0 0		Assisted
Beginning Position:	61	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 15:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis catego		
Beginning Position:	65	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 16:	CCS_OTH_DIAG_CODE	_14	
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis catego		
Beginning Position:	69	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 17:	CCS OTH DIAG CODE		Aphanumene
riciu 17.			sification of OTH_DIAG_CODE_1 into clinically
			sincation of OTH_DIAG_CODE_1 into chinically
D D	meaningful diagnosis catego	Data Source:	Antinual
Beginning Position:	73		Assigned
Length:	4	Туре:	Alphanumeric
Field 18:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis catego		
Beginning Position:	77	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 19:	CCS_OTH_DIAG_CODE	2_17	
	Clinical Classifications Soft	ware (CCS) class	sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis catego	ory.	·
Beginning Position:	81	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 20:	CCS_OTH_DIAG_CODE		
1 Iciu 20.			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis catego	· · · · ·	sineation of OTIT_DIAG_CODE_1 into eninearly
Designing Desition.	• • •	Data Source:	Assigned
Beginning Position:	85		Assigned
Length:	4	Type:	Alphanumeric
Field 21:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis catego	•	
Beginning Position:	89	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 22:	CCS_OTH_DIAG_CODE		*
			sification of OTH_DIAG_CODE_1 into clinically
	Chinear Classifications SOIL	maic (CCD) class	incation of OTT_DIAO_CODE_1 into chilleally
Beginning Position:	meaningful diagnosis catego 93		Assigned

Length:		Туре:	Alphanumeric
Field 23:	CCS_OTH_DIAG_CODE_		
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor		
Beginning Position:		Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 24:	CCS_OTH_DIAG_CODE_		
			sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor	•	
Beginning Position:		Data Source:	Assigned
Length:		Type:	Alphanumeric
Field 25:	CCS_OTH_DIAG_CODE_		Contraction DIAC CODE 1 Startistical
			sification of OTH_DIAG_CODE_1 into clinically
Desimulus Desitions	meaningful diagnosis categor	•	Assigned
Beginning Position:		Data Source:	Assigned
Length:		<u>Type:</u>	Alphanumeric
Field 26:	CCS_OTH_DIAG_CODE_		if a forth DIAC CODE 1 into aliginally
			sification of OTH_DIAG_CODE_1 into clinically
Decimping Decitions	meaningful diagnosis categor 109	Data Source:	Assigned
Beginning Position:			Assigned Alphanumeric
Length: Field 27:	CCS_PROC_CODE_1	Type:	Alphanumenc
rielu 27:		vora (CCS) for S	Services and Procedures classification of
	PROC_CODE_1 into clinical		
Beginning Position:		Data Source:	Assigned
Length:		Type:	Alphanumeric
Field 28:	CCS_PROC_CODE_2	Type.	Alphanumenc
r ielu 20.		vare (CCS) for S	Services and Procedures classification of
	PROC_CODE_2 into clinical		
Beginning Position:		Data Source:	Assigned
Length:		Type:	Alphanumeric
Field 29:	CCS_PROC_CODE_3	i ype.	Tiphulullelle
		vare (CCS) for S	Services and Procedures classification of
	PROC_CODE_3 into clinical		
Beginning Position:		Data Source:	Assigned
Length:		Type:	Alphanumeric
Field 30:	CCS PROC CODE 4		
		vare (CCS) for S	Services and Procedures classification of
	PROC_CODE_4 into clinical		
Beginning Position:	122	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 31:	CCS_PROC_CODE_5		
	Clinical Classifications Softw	vare (CCS) for S	Services and Procedures classification of
	PROC_CODE_5 into clinical	lly meaningful p	procedure category.
Beginning Position:	125	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 32:	CCS_PROC_CODE_6		
			Services and Procedures classification of
	PROC_CODE_6 into clinical	lly meaningful p	procedure category.
Beginning Position:	128	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 33:	CCS_PROC_CODE_7		
			Services and Procedures classification of
	PROC_CODE_7 into clinical		procedure category.
Beginning Position:	131	Data Source:	Assigned

Length:	3	Туре:	Alphanumeric
Field 34:	CCS_PROC_CODE_8		
		· · · ·	Services and Procedures classification of
	PROC_CODE_8 into clinic		
Beginning Position:	134	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 35:	CCS_PROC_CODE_9		
			Services and Procedures classification of
	PROC_CODE_9 into clinic		
Beginning Position:	137	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 36:	CCS_PROC_CODE_10		
			Services and Procedures classification of
Desimulus Desitions	PROC_CODE_10 into clini		
Beginning Position:	140	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 37:	CCS_PROC_CODE_11	(CCC) for (Samiana and Duran draws along firsting of
			Services and Procedures classification of
Doginating Dogitions	PROC_CODE_11 into clini 143	Data Source:	
Beginning Position: Length:	3		Assigned Alphanumeric
Field 38:	CCS_PROC_CODE_12	Туре:	Alphanumeric
riela 58:		twore (CCS) for	Services and Procedures classification of
	PROC_CODE_12 into clini	ically meaningful	procedure category
Beginning Position:	146	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 39:	CCS_PROC_CODE_13	турс.	Alphanumerie
riciu 57.		tware (CCS) for S	Services and Procedures classification of
	PROC_CODE_13 into clini		
Beginning Position:	149	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 40:	CCS_PROC_CODE_14	- J F**	
		tware (CCS) for S	Services and Procedures classification of
	PROC_CODE_14 into clini		
Beginning Position:	152	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 41:	CCS_PROC_CODE_15	••	
	Clinical Classifications Sof	tware (CCS) for S	Services and Procedures classification of
	PROC_CODE_15 into clini		procedure category.
Beginning Position:	155	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 42:	CCS_PROC_CODE_16		
			Services and Procedures classification of
	PROC_CODE_16 into clini		procedure category.
Beginning Position:	158	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 43:	CCS_PROC_CODE_17		
			Services and Procedures classification of
	PROC_CODE_17 into clini		
Beginning Position:	161	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 44:	CCS_PROC_CODE_18		
			Services and Procedures classification of
	PROC_CODE_18 into clini		
Beginning Position:	164	Data Source:	Assigned

Length:	3	Туре:	Alphanumeric
Field 45:	CCS_PROC_CODE_19		
	Clinical Classifications Software (CCS) for Services and Procedures classification of		
	PROC_CODE_19 into clini		
Beginning Position:	167	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 46:	CCS_PROC_CODE_20		
			Services and Procedures classification of
	PROC_CODE_20 into clini		
Beginning Position:	170	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 47:	CCS_PROC_CODE_21		
			Services and Procedures classification of
	PROC_CODE_21 into clini	ically meaningful	procedure category.
Beginning Position:	173	Data Source:	Assigned
Length:	3	Туре:	Alphanumeric
Field 48:	CCS_PROC_CODE_22		
	Clinical Classifications Sof	tware (CCS) for S	Services and Procedures classification of
	PROC_CODE_22 into clini		
Beginning Position:	176	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 49:	CCS_PROC_CODE_23		•
		tware (CCS) for S	Services and Procedures classification of
	PROC_CODE_23 into clini		
Beginning Position:	179	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 50:	CCS PROC CODE 24	rype.	riphanumerie
riciu 50.		tware (CCS) for S	Services and Procedures classification of
	PROC_CODE_24 into clini		
Beginning Position:	182	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 51:	CCS_PROC_CODE_25	Type:	Alphanumenc
riela 51:		twore (CCS) for S	Services and Procedures classification of
Desinuina Desition.	PROC_CODE_25 into clini		
Beginning Position:	185	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 52:	FINAL_EAPG_CATEGO		
			b) category code, as assigned by 3M EAPG
	Grouper, version 26. Not av	-	
Beginning Position:	188	Data Source:	Assigned
Length:	2	Туре:	Alphanumeric
Field 53:	FINAL_EAPG_CATEGO		
			b) category code, as assigned by 3M EAPG
	Grouper, version 26. Not av	-	
Beginning Position:	190	Data Source:	Assigned
Length:	2	Туре:	Alphanumeric
Field 54:	FINAL_EAPG_CATEGC		
			a) category code, as assigned by 3M EAPG
	Grouper, version 26. Not av	vailable 4Q09.	
Beginning Position:	192	Data Source:	Assigned
Length:	2	Туре:	Alphanumeric
Field 55:	FINAL_EAPG_CATEGO		*
			b) category code, as assigned by 3M EAPG
	Grouper, version 26. Not av		,
Beginning Position:	194	Data Source:	Assigned

Length:	2	Туре:	Alphanumeric
Field 56:	FINAL_EAPG_CATEGO		
	Enhanced Ambulatory Patie Grouper, version 26. Not av) category code, as assigned by 3M EAPG
Beginning Position:	196	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 57:	 FINAL_EAPG_CATEGO		Tiphanone
) category code, as assigned by 3M EAPG
	Grouper, version 26. Not av) category code, as assigned by 5W LATO
Beginning Position:	198	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 58:	FINAL EAPG CATEGO		Alphanumene
riciu 30.) category code, as assigned by 3M EAPG
	Grouper, version 26. Not av) category code, as assigned by 5101 EAFO
Beginning Position:	200	Data Source:	Assigned
	200		Alphanumeric
Length: Field 59:		Type:	Alphanumenc
Field 59:	FINAL_EAPG_CATEGO) and a second by 2MEADC
) category code, as assigned by 3M EAPG
D!	Grouper, version 26. Not av		Assisted
Beginning Position:	202	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 60:	FINAL_EAPG_CATEGO		
) category code, as assigned by 3M EAPG
	Grouper, version 26. Not av		
Beginning Position:	204	Data Source:	Assigned
Length:	2	Туре:	Alphanumeric
Field 61:	FINAL_EAPG_CATEGO		
) category code, as assigned by 3M EAPG
	Grouper, version 26. Not av	vailable 4Q09.	
Beginning Position:	206	Data Source:	Assigned
Length:	2	Туре:	Alphanumeric
Field 62:	FINAL_EAPG_TYPE_C	ODE_1	
	Enhanced Ambulatory Patie	ent Group (EAPG) type code, as assigned by 3M EAPG Grouper,
	version 26. Not available 40	Q09.	
Beginning Position:	208	Data Source:	Assigned
Length:	2	Туре:	Alphanumeric
Field 63:	FINAL_EAPG_TYPE_C	ODE 2	•
) type code, as assigned by 3M EAPG Grouper,
	version 26. Not available 40		······································
Beginning Position:	210	Data Source:	Assigned
Length:	2	Туре:	Alphanumeric
Field 64:	FINAL_EAPG_TYPE_C		F
) type code, as assigned by 3M EAPG Grouper,
	version 26. Not available 40		$\mathcal{F}_{\mathbf{r}}$
Beginning Position:	212	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 65:			- apaulumente
) type code, as assigned by 3M EAPG Grouper,
			rype code, as assigned by Sivi EAFO Olouper,
Doginning Dogition	version 26. Not available 40	-	Assigned
Beginning Position:	214	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 66:	FINAL_EAPG_TYPE_C		
	Enhanced Ambulatory Patie	ent Group (EAPG) type code, as assigned by 3M EAPG Grouper,
Beginning Position:	version 26. Not available 40 216		Assigned

Length:	2	Туре:	Alphanumeric
Field 67:	FINAL_EAPG_TYPE_CO		
) type code, as assigned by 3M EAPG Grouper,
	version 26. Not available 4Q	-	
Beginning Position:	218	Data Source:	Assigned
Length:	2	Туре:	Alphanumeric
Field 68:	FINAL_EAPG_TYPE_CO		
	Enhanced Ambulatory Patient	nt Group (EAPG) type code, as assigned by 3M EAPG Grouper,
	version 26. Not available 4Q	09.	
Beginning Position:	220	Data Source:	Assigned
Length:	2	Туре:	Alphanumeric
Field 69:	FINAL_EAPG_TYPE_CO	DE 8	•
	Enhanced Ambulatory Patient	nt Group (EAPG) type code, as assigned by 3M EAPG Grouper,
	version 26. Not available 4Q		
Beginning Position:	222	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 70:	FINAL_EAPG_TYPE_CO	V I	
) type code, as assigned by 3M EAPG Grouper,
	version 26. Not available 4Q) type code, as assigned by 514 LAN C Crouper,
Beginning Position:	224	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 71:	FINAL EAPG TYPE CO		Alphanumene
riela /1:			turns and a second by 2M EADC Common
) type code, as assigned by 3M EAPG Grouper,
	version 26. Not available 4Q		
Beginning Position:	226	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 72:	FINAL_EAPG_1		
			EAPG), as assigned by 3M EAPG Grouper,
	version 26. Not available 4Q		
Beginning Position:	228	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 73:	FINAL_EAPG_2		
	Final Enhanced Ambulatory	Patient Group (I	EAPG), as assigned by 3M EAPG Grouper,
	version 26. Not available 4Q		
Beginning Position:	233	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 74:	FINAL_EAPG_3	JI	1
		Patient Group (1	EAPG), as assigned by 3M EAPG Grouper,
	version 26. Not available 4Q		Sin O), us ussigned by Sin Ern O Orouper,
Beginning Position:	238	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 75:		rype.	Aiphanument
rielu /3:		Dationt Crown (ADC) as assigned by 2M EADC Crowner
		- ·	EAPG), as assigned by 3M EAPG Grouper,
n · · n · · ·	version 26. Not available 4Q		A : 1
Beginning Position:	243	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 76:	FINAL_EAPG_5		
		- ·	EAPG), as assigned by 3M EAPG Grouper,
	version 26. Not available 4Q	09.	
Beginning Position:	248	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 77:	FINAL_EAPG_6	* *	•
		Patient Group (1	EAPG), as assigned by 3M EAPG Grouper,
	Version 26 Not available 40	109.	
Beginning Position:	version 26. Not available 4Q 253	Data Source:	Assigned

Length:	5	Туре:	Alphanumeric	
Field 78:	FINAL_EAPG_7			
	Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper,			
	version 26. Not available 40	•		
Beginning Position:	258	Data Source:	Assigned	
Length:	5	Туре:	Alphanumeric	
Field 79:	FINAL_EAPG_8			
	Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grou			
	version 26. Not available 40	•		
Beginning Position:	263	Data Source:	Assigned	
Length:	5	Туре:	Alphanumeric	
Field 80:	FINAL_EAPG_9			
			EAPG), as assigned by 3M EAPG Grouper,	
	version 26. Not available 40	Q09.		
Beginning Position:	268	Data Source:	Assigned	
Length:	5	Туре:	Alphanumeric	
Field 81:	FINAL_EAPG_10			
			EAPG), as assigned by 3M EAPG Grouper,	
	version 26. Not available 40		-	
Beginning Position:	273	Data Source:	Assigned	
Length:	5	Туре:	Alphanumeric	
Field 82:	EAPG_GRP_VER	••	•	
		ent Group Version	n Number, as assigned by 3M EAPG Grouper	
Beginning Position:	278	I I I I I I I I I I I I I I I I I I I		
Length:	12	Туре:	Alphanumeric	
Field 83:	CRG_STATUS_1	- JF		
		status code as as	signed by 3M CRG Grouper, version 26. Not	
	available 4Q09.	status coue us us		
Beginning Position:	290	Data Source:	Assigned	
Length:	1	Type:	Alphanumeric	
Field 84:	CRG_STATUS_2	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	7 Aphandmerie	
r iciu 07.		status code as as	signed by 3M CRG Grouper, version 26. Not	
	available 4Q09.	status coue as as	signed by 514 CKG Glouper, version 20. 1400	
Beginning Position:	291	Data Source:	Assigned	
	1			
Length:		Туре:	Alphanumeric	
Field 85:	CRG_STATUS_3		in the 2M CDC Community 2C Not	
	1	status code as as	signed by 3M CRG Grouper, version 26. Not	
n · · <i>n · ·</i> ·	available 4Q09.	D (C	A	
Beginning Position:	292	Data Source:	Assigned	
Length:		Туре:	Alphanumeric	
Field 86:	CRG_STATUS_4			
		status code as as	signed by 3M CRG Grouper, version 26. Not	
	available 4Q09.	D / 7		
Beginning Position:	293	Data Source:	Assigned	
Length:	1	Туре:	Alphanumeric	
Field 87:	CRG_STATUS_5			
		status code as as	signed by 3M CRG Grouper, version 26. Not	
	available 4Q09.			
Beginning Position:	294	Data Source:	Assigned	
Length:	1	Туре:	Alphanumeric	
Field 88:	CRG_STATUS_6			
		status code as as	signed by 3M CRG Grouper, version 26. Not	
	available 4Q09.			
Beginning Position:	295	Data Source:	Assigned	
Length:	1	Туре:	Alphanumeric	
		-J F **	r	

Field 89:	CRG_STATUS_7		
r ielu 07.		status code as as	signed by 3M CRG Grouper, version 26. Not
	available 4Q09.	status coue as as	signed by 514 CKO Olouper, version 20. Not
Doginning Dogition.		Data Sauraa	Assigned
Beginning Position:	296	Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 90:	CRG_STATUS_8		
		status code as as	signed by 3M CRG Grouper, version 26. Not
	available 4Q09.		
Beginning Position:	297	Data Source:	Assigned
Length:	1	Туре:	Alphanumeric
Field 91:	CRG_STATUS_9		
	Clinical Risk Group (CRG)	status code as as	signed by 3M CRG Grouper, version 26. Not
	available 4Q09.		
Beginning Position:	298	Data Source:	Assigned
Length:	1	Туре:	Alphanumeric
Field 92:	CRG_STATUS_10	<i></i>	•
		status code as as	signed by 3M CRG Grouper, version 26. Not
	available 4Q09.		
Beginning Position:	299	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 93:	CRG_CODE_1	Type.	' mphanamente
r iciu 95.		codo os ossion-4	by 2M CDC Grouper version 26 Not evolution
		code as assigned	l by 3M CRG Grouper, version 26. Not available
	4Q09.	D (C	A · 1
Beginning Position:	300	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 94:	CRG_CODE_2		
		code as assigned	by 3M CRG Grouper, version 26. Not available
	4Q09.		
Beginning Position:	305	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 95:	CRG_CODE_3		
	Clinical Risk Group (CRG)	code as assigned	l by 3M CRG Grouper, version 26. Not available
	4Q09.	_	
Beginning Position:	310	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 96:	CRG_CODE_4		•
		code as assigned	by 3M CRG Grouper, version 26. Not available
	4Q09.	eoue us ussigned	by shirefild brouper, version 20. Not uvunuole
Beginning Position:	315	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 97:	CRG_CODE_5	rype.	/ upnulument
		anda an antior - 1	by 2M CDC Grouper version 26 Not available
		code as assigned	l by 3M CRG Grouper, version 26. Not available
	4Q09.	D-4- C	A
Beginning Position:	320	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 98:	CRG_CODE_6		
	1	code as assigned	by 3M CRG Grouper, version 26. Not available
	4Q09.		
Beginning Position:	325	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 99:	CRG_CODE_7		
		code as assigned	by 3M CRG Grouper, version 26. Not available
	4Q09.		
Beginning Position:	330	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Longui,	5	- <i>j</i> pc.	

Field 100:	CRG_CODE_8			
		code as assigned	by 3M CRG Grouper, version 26. Not available	
	4Q09.	8	, , , , , , , , , , , , , , , , , , ,	
Beginning Position:	335	Data Source:	Assigned	
Length:	5	Туре:	Alphanumeric	
Field 101:	CRG_CODE_9	-,		
		code as assigned	by 3M CRG Grouper, version 26. Not available	
	4Q09.	code as assigned	by shi end diduper, version 20. Not available	
Beginning Position:	340	Data Source:	Assigned	
Length:	5	Type:	Alphanumeric	
Field 102:	CRG CODE 10	Type:	Alphanumenc	
riela 102:		and an antimad	hy 2M CDC Crowner version 26 Not evoilable	
		code as assigned	by 3M CRG Grouper, version 26. Not available	
Designing Desition.	4Q09. 345	Data Sauraa	Assigned	
Beginning Position:		Data Source:	Assigned	
Length:	5	Туре:	Alphanumeric	
Field 103:	CRG_SEVERITY_1	. 1		
		severity code as	assigned by 3M CRG Grouper, version 26. Not	
	available 4Q09.			
Beginning Position:	350	Data Source:	Assigned	
Length:	1	Туре:	Alphanumeric	
Field 104:	CRG_SEVERITY_2	_		
		severity code as	assigned by 3M CRG Grouper, version 26. Not	
	available 4Q09.			
Beginning Position:	351	Data Source:	Assigned	
Length:	1	Type:	Alphanumeric	
Field 105:	CRG_SEVERITY_3			
	Clinical Risk Group (CRG)	severity code as	assigned by 3M CRG Grouper, version 26. Not	
	available 4Q09.	•		
Beginning Position:	352	Data Source:	Assigned	
Length:	1	Type:	Alphanumeric	
Field 106:	CRG_SEVERITY_4			
		severity code as	assigned by 3M CRG Grouper, version 26. Not	
	available 4Q09.	j	8	
Beginning Position:	353	Data Source:	Assigned	
Length:	1	Type:	Alphanumeric	
Field 107:	CRG_SEVERITY_5	Type:	Thermanianene	
riciu 107.		severity code as	assigned by 3M CRG Grouper, version 26. Not	
	available 4Q09.	seventy code as	assigned by 514 CKG Glouper, version 20. Not	
Beginning Position:	354	Data Source:	Assigned	
Length:	1		•	
Field 108:	CRG SEVERITY 6	Туре:	Alphanumeric	
riela 108:			11 MCDC C	
		severity code as	assigned by 3M CRG Grouper, version 26. Not	
Destant D 14	available 4Q09.	Dete C	A	
Beginning Position:	355	Data Source:	Assigned	
Length:	1	Туре:	Alphanumeric	
Field 109:	CRG_SEVERITY_7			
	1	severity code as	assigned by 3M CRG Grouper, version 26. Not	
	available 4Q09.			
Beginning Position:	356	Data Source:	Assigned	
Length:	1	Туре:	Alphanumeric	
Field 110:	CRG_SEVERITY_8			
		severity code as	assigned by 3M CRG Grouper, version 26. Not	
	available 4Q09.	-		
Beginning Position:	357	Data Source:	Assigned	
Length:	1	Туре:	Alphanumeric	
		JF	1	

Field 111:	CRG_SEVERITY_9		
		everity code as	assigned by 3M CRG Grouper, version 26. Not
	available 4Q09.	eventy code as	assigned by 514 ered Glouper, version 20. Not
Beginning Position:		Data Source:	Assigned
Length:		Type:	Alphanumeric
Field 112:	CRG SEVERITY 10	i ype.	Alphalumene
rielu 112:		warity code as	assigned by 3M CRG Grouper, version 26. Not
	-	eventy code as	assigned by 514 CKG Glouper, version 20. Not
Desimulus Desitions	available 4Q09. 359	Data Common	Assigned
Beginning Position:		Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 113:	APC_PROCEDURE_CODI		
			rocedure code as assigned by 3M APC Grouper,
D I I D I /I	version 26. Not available 4Q0		
Beginning Position:		Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 114:	APC_PROCEDURE_CODI		
			rocedure code as assigned by 3M APC Grouper,
	version 26. Not available 4Q0		
Beginning Position:		Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 115:	APC_PROCEDURE_CODI		
			rocedure code as assigned by 3M APC Grouper,
	version 26. Not available 4Q0		
Beginning Position:		Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 116:	APC_PROCEDURE_CODI	_	
			rocedure code as assigned by 3M APC Grouper,
	version 26. Not available 4Q0		
Beginning Position:	375	Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 117:	APC_PROCEDURE_CODI		
			rocedure code as assigned by 3M APC Grouper,
	version 26. Not available 4Q0		
Beginning Position:		Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 118:	APC_PROCEDURE_CODI		
	Ambulatory Payment Classifi	cation (APC) p	rocedure code as assigned by 3M APC Grouper,
	version 26. Not available 4Q0)9.	
Beginning Position:	385	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 119:	APC_PROCEDURE_CODI	E _7	
	Ambulatory Payment Classifi	cation (APC) p	rocedure code as assigned by 3M APC Grouper,
	version 26. Not available 4Q0)9.	
Beginning Position:		Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 120:	APC_PROCEDURE_CODI	E_8	
			rocedure code as assigned by 3M APC Grouper,
	version 26. Not available 4Q0		
Beginning Position:		Data Source:	Assigned
Length:		Туре:	Alphanumeric
Field 121:	APC_PROCEDURE_CODI		*
			rocedure code as assigned by 3M APC Grouper,
	version 26. Not available 4Q0		
Beginning Position:		Data Source:	Assigned
Length:		Type:	Alphanumeric
	-	J F - 3	r

Field 122:	ADC DROCEDURE CODE 10	
riela 122:	APC_PROCEDURE_CODE_10	C) procedure code as assigned by 3M APC Grouper,
	version 26. Not available 4Q09.	e, procedure code as assigned by 51vi Ar C 0100per,
Beginning Position:	405 Data Source	e: Assigned
Length:	5 Type:	Alphanumeric
Field 123:	APC_PX_STATUS_IND_CODE_1	7 uphanemetre
Ficiu 125.		C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09.	
Beginning Position:	410 Data Source	
Length:	2 Type:	Alphanumeric
Field 124:	APC_PX_STATUS_IND_CODE_2	7 upitulellelle
		C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09.	
Beginning Position:	412 Data Source	
Length:	2 Type:	Alphanumeric
Field 125:	APC_PX_STATUS_IND_CODE_3	
		C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09.	
Beginning Position:	414 Data Source	
Length:	2 Type:	Alphanumeric
Field 126:	APC_PX_STATUS_IND_CODE_4	*
		C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09.	
Beginning Position:	416 Data Source	
Length:	2 Type:	Alphanumeric
Field 127:	APC_PX_STATUS_IND_CODE_5	*
	Ambulatory Payment Classification (APC	C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09.	
Beginning Position:	418 Data Source	e: Assigned
Length:	2 Type:	Alphanumeric
Field 128:	APC_PX_STATUS_IND_CODE_6	
		C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09	
Beginning Position:	420 Data Source	0
Length:	2 Type:	Alphanumeric
Field 129:	APC_PX_STATUS_IND_CODE_7	
		C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09	
Beginning Position:	422 Data Source	
Length:	2 Type:	Alphanumeric
Field 130:	APC_PX_STATUS_IND_CODE_8	~
		C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09.	
Beginning Position:	424 Data Source	6
Length:	2 Type:	Alphanumeric
Field 131:	APC_PX_STATUS_IND_CODE_9	
		C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09.	
Beginning Position:	426 Data Source	e
Length:	2 Type:	Alphanumeric
Field 132:	APC_PX_STATUS_IND_CODE_10	
		C) procedure status indicator as assigned by 3M APC
	Grouper, version 26. Not available 4Q09.	
Beginning Position:	428 Data Source	6
Length:	2 Type:	Alphanumeric

Field 133:	APC_WEIGHT_1		
		fication (APC) v	veighting as assigned by 3M APC Grouper, version
	26. Not available 4Q09.		
Beginning Position:	430	Data Source:	Assigned
Length:	9	Туре:	Alphanumeric
Field 134:	APC_WEIGHT_2	J I	*
		Fication (APC) v	veighting as assigned by 3M APC Grouper, versior
	26. Not available 4Q09.		verginning us ussigned by sint in C Grouper, version
Beginning Position:	439	Data Source:	Assigned
Length:	9	Type:	Alphanumeric
Field 135:	APC_WEIGHT_3	Type.	Alphandmerie
rielu 155:	Ambulatory Payment Classif	fication (APC) w	veighting as assigned by 3M APC Grouper, version
D D	26. Not available 4Q09.	Dete German	A
Beginning Position:	448	Data Source:	Assigned
Length:	9	Туре:	Alphanumeric
Field 136:	APC_WEIGHT_4		
	26. Not available 4Q09.	fication (APC) v	veighting as assigned by 3M APC Grouper, version
Beginning Position:	457	Data Source:	Assigned
Length:	9	Туре:	Alphanumeric
Field 137:	APC_WEIGHT_5		
	Ambulatory Payment Classif	fication (APC) v	veighting as assigned by 3M APC Grouper, version
	26. Not available 4Q09.		
Beginning Position:	466	Data Source:	Assigned
Length:	9	Туре:	Alphanumeric
Field 138:	APC WEIGHT 6	- J F	
11010 1001		Figure (ΔPC) w	veighting as assigned by 3M APC Grouper, version
	26. Not available 4Q09.	iteation (ALC) v	vergnung as assigned by SWIAI C Grouper, version
Paginning Desition.	475	Data Source:	Assigned
Beginning Position:			Assigned
Length:	9	Туре:	Alphanumeric
Field 139:	APC_WEIGHT_7		
		fication (APC) v	veighting as assigned by 3M APC Grouper, version
	26. Not available 4Q09.	_ ~	
Beginning Position:	484	Data Source:	Assigned
Length:	9	Туре:	Alphanumeric
Field 140:	APC_WEIGHT_8		
	Ambulatory Payment Classif	fication (APC) v	veighting as assigned by 3M APC Grouper, version
	26. Not available 4Q09.		
Beginning Position:	493	Data Source:	Assigned
Length:	9	Туре:	Alphanumeric
Field 141:	APC WEIGHT 9		*
		fication (APC) v	veighting as assigned by 3M APC Grouper, version
	26. Not available 4Q09.		8 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
Beginning Position:	502	Data Source:	Assigned
Length:	9	Type:	Alphanumeric
Field 142:	APC_WEIGHT_10	Type.	- Aphanamerie
		fication (APC) v	veighting as assigned by 3M APC Grouper, version
Beginning Position:	511	Data Source:	Assigned
Length:	9	Type:	Alphanumeric
Field 143:	APC_GRP_VER	-jpc.	- Aphunumene
FICIU 175.	Ambulatory Payment Classif		Version Number as assigned by 3M APC Grouper,
	version 26. Not available 4Q		A * 1
Beginning Position:	520	Data Source:	Assigned
Length:	12	Туре:	Alphanumeric

CHARGES DATA FILE

Field 1:	RECO	ORD_ID		
Description:	Record Identification Number. Unique number assigned to identify the record. First available			
	1 st qua	arter 2002. Does NOT match the RECO	RD_ID i	n THCIC Research Data Files (RDF's).
Beginning Position:	1	Data Source:	Assign	ed
Length:	12	Туре:	Alphan	umeric
Field 2:	REVI	ENUE_CODE		
Description:	Code	corresponding to each specific accommo	dation, a	ncillary service or billing calculation
-	related	d to the services being billed.		
Coding Scheme:	0100	All-inclusive room charges plus ancillary	0516	Clinic - urgent care
	0101 0110	All-inclusive room charges Room charges for private rooms - general	0517 0519	Clinic - family practice Clinic - other
	0110	Room charges for private rooms - medical/surgical/GYN	0520	Freestanding Clinic - general
	0112	Room charges for private rooms - obstetrics	0521	Freestanding Clinic - Clinic Visit by Member to RHC/FQHC
	0113	Room charges for private rooms - pediatric	0522	Freestanding Clinic - Home Visit by RHC/FQHC Practitioner
	0114 0115	Room charges for private rooms - psychiatric Room charges for private rooms - hospice	0523 0524	Freestanding Clinic - family practice Freestanding Clinic - Visit by RHC/FQHC Practitioner to a Member in a Covered Part A Stay at SNF
	0116	Room charges for private rooms - detoxification	0525	Freestanding Clinic - Visit by RHC/FQHC Practitioner to a Member in a SNF (not Covered Part A Stay) or NF or ICF MR or Other Residential Facility
	0117	Room charges for private rooms - oncology	0526	Freestanding Clinic - urgent care
	0118	Room charges for private rooms - rehabilitation	0527	Freestanding Clinic - Visiting Nurse Services(s) to a Member's Home when in a Home Health Shortage Area
	0119	Room charges for private rooms - other	0528	Freestanding Clinic – Visit by RHC/FQHC Practitioner to Other non RHC/FQHC Site (e.g. Scene of Accident)
	0120	Room charges for semi-private rooms - general	0529	Freestanding Clinic - other
	0121	Room charges for semi-private rooms - medical/surgical/GYN	0530	Osteopathic service - general
	0122	Room charges for semi-private rooms - obstetrics	0531	Osteopathic service - therapy
	0123	Room charges for semi-private rooms - pediatric	0539	Osteopathic service - other
	0124	Room charges for semi-private rooms - psychiatric	0540	Ambulance service - general
	0125	Room charges for semi-private rooms - hospice	0541	Ambulance service - supplies
	0126	Room charges for semi-private rooms - detoxification	0542	Ambulance service - medical transport
	0127 0128	Room charges for semi-private rooms - oncology Room charges for semi-private rooms -	0543 0544	Ambulance service - heart mobile Ambulance service - oxygen
	0128	rehabilitation Room charges for semi-private rooms - other	0545	Ambulance service - oxygen
	0129	Room charges for semi-private - 3/4 beds -	0546	Ambulance service - neonatal
	0131	rooms - general Room charges for semi-private - 3/4 beds - rooms - medical/surgical/GYN	0547	Ambulance service - pharmacy
	0132	Room charges for semi-private - 3/4 beds - rooms - obstetrics	0548	Ambulance service - telephone transmission EKG
	0133	Room charges for semi-private - 3/4 beds - rooms - pediatric	0549	Ambulance service - other
	0134	Room charges for semi-private - 3/4 beds - rooms - psychiatric	0550	Skilled nursing - general
	0135	Room charges for semi-private - 3/4 beds - rooms - hospice	0551	Skilled nursing - visit charge
	0136	Room charges for semi-private - 3/4 beds - rooms - detoxification	0552	Skilled nursing - hourly charge

0137	Room charges for semi-private - 3/4 beds -	0559	Skilled nursing - other
0138	rooms - oncology Room charges for semi-private - 3/4 beds - rooms - rehabilitation	0560	Medical social services - general
0139	Room charges for semi-private - 3/4 beds - rooms - other	0561	Medical social services - visit charge
0140	Room charges for private (deluxe) rooms -	0562	Medical social services - hourly charge
0141	general Room charges for private (deluxe) rooms -	0569	Medical social services - other
0142	medical/surgical/GYN Room charges for private (deluxe) rooms -	0570	Home health aide - general
0143	obstetrics Room charges for private (deluxe) rooms -	0571	Home health aide - visit charge
0144	pediatric Room charges for private (deluxe) rooms -	0572	Home health aide - hourly charge
0145	psychiatric Room charges for private (deluxe) rooms -	0579	Home health aide - other
0146	hospice Room charges for private (deluxe) rooms -	0580	Other visits (home health) - general
0147	detoxification Room charges for private (deluxe) rooms -	0581	Other visits (home health) - visit charge
	oncology		· · · · · ·
0148	Room charges for private (deluxe) rooms - rehabilitation	0582	Other visits (home health) - hourly charge
0149	Room charges for private (deluxe) rooms - other	0583	Other visits (home health) - assessment
0150	Room charges for ward rooms - general	0589	Other visits (home health) - other
0151	Room charges for ward rooms - medical/surgical/GYN	0590	Units of service (home health) - general
0152	Room charges for ward rooms - obstetrics	0599	Units of service (home health) - other
0153	Room charges for ward rooms - pediatric	0600	Oxygen (home health) - general
0154	Room charges for ward rooms - psychiatric	0601	Oxygen (home health) - stat/equip/supply or contents
0155	Room charges for ward rooms - hospice	0602	Oxygen (home health) - stat/equip/supply under 1 liter per minute
0156	Room charges for ward rooms - detoxification	0603	Oxygen (home health) - stat/equip/supply over 4 liters per minute
0157	Room charges for ward rooms - oncology	0604	Oxygen (home health) - portable add-in
0158	Room charges for ward rooms - rehabilitation	0610	MRI - general
0159	Room charges for ward rooms - other	0611	MRI - brain (including brain stem)
0160	Room charges for other rooms - general	0612	MRI - spinal cord (including spine)
0161	Room charges for other rooms -	0619	MRI - other
0162	medical/surgical/GYN Room charges for other rooms - obstetrics	0621	Medical/surgical supplies - incident to radiology
0162	-	0621	· · · · ·
	Room charges for other rooms - pediatric		Medical/surgical supplies - incident to other diagnostic services
0164	Room charges for other rooms - psychiatric	0623	Medical/surgical supplies - surgical dressings
0165	Room charges for other rooms - hospice	0624	Medical/surgical supplies - FDA investigational devices
0166	Room charges for other rooms - detoxification	0630	Drugs requiring specific identification - general
0167	Room charges for other rooms - oncology	0631	Drugs requiring specific identification - single source
0168	Room charges for other rooms - rehabilitation	0632	Drugs requiring specific identification - multiple source
0169	Room charges for other rooms - other	0633	Drugs requiring specific identification - restrictive prescription
0170	Room charges for nursery - general	0634	Drugs requiring specific identification - EPO, less than 10,000 units
0171	Room charges for nursery - newborn level I	0635	Drugs requiring specific identification - EPO, 10,000 or more units
0172	Room charges for nursery - newborn level II	0636	Drugs requiring specific identification - requiring detailed coding
0173	Room charges for nursery - newborn level III	0637	Drugs requiring specific identification - self- adminstrable nto requiring detailed coding
0174	Room charges for nursery - newborn level IV	0640	Home IV therapy services - general
0179	Room charges for nursery - other	0641	Home IV therapy services - nonroutine nursing, central line
0180	Room charges for LOA - general	0642	Home IV therapy services - IV site care, central line
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0182	Room charges for LOA - patient convenice- charges billable	0643	Home IV therapy services - IV start/change, peripheral line
0183	Room charges for LOA - therapeutic leave	0644	Home IV therapy services - nonroutine nursing, peripheral line
0184	Room charges for LOA - ICF mentally retarded - any reason	0645	Home IV therapy services - training patient/caregiver, central line
0185	Room charges for LOA - hospitalization	0646	Home IV therapy services - traning, disabled
0189	Room charges for LOA - other	0647	patient, central line Home IV therapy services - training, patient/caregiver, peripheral
0190	Room charges for subacute care - general	0648	Home IV therapy services - training, disabled patient, peripheral
0191	Room charges for subacute care - Level I (skilled care)	0649	Home IV therapy services - other
0192	Room charges for subacute care - Level II (comprehensive care)	0650	Hospice services - general
0193	Room charges for subacute care - Level III (complex care)	0651	Hospice services - routine home care
0194	Room charges for subacute care - Level IV (intensive care)	0652	Hospice services - continuous home care
0199	Room charges for subacute care - other	0655	Hospice services - inpatient respite care
0200	Room charges for intensive care - general	0656	Hospice services - general inpatient care (nonrespite)
0201	Room charges for intensive care - surgical	0657	Hospice services - physician services
0202	Room charges for intensive care - medical	0658	Hospice services - room and board - nursing facility
0203	Room charges for intensive care - pediatric	0659	Hospice services - other
0204	Room charges for intensive care - psychiatric	0660	Respite care - general
0206	Room charges for intensive care - intermediate	0661	Respite care - hourly charge/skilled nursing
0207	intensive care unit (ICU) Room charges for intensive care - burn care	0662	Respite care - hourly
0208	Room charges for intensive care - trauma	0663	charge/aide/homemaker/companion Respite care - daily charge
0200	Room charges for intensive care - trauma Room charges for intensive care - other	0669	Respite care - other
020)	Room charges for coronary care - general	0670	Outpatient special residence - general
0210	Room charges for coronary care - myocardial	0671	Outpatient special residence - hospital based
0212	infarction Room charges for coronary care - pulmonary	0672	Outpatient special residence - contracted
0213	care Room charges for coronary care - heart	0679	Outpatient special residence - other
0214	transplant Room charges for coronary care - intermediate	0681	Trauma response - level I
0219	coronary care unit (CCU) Room charges for coronary care - other	0682	Trauma response - level II
021)	Special charges - general	0683	Trauma response - level III
0220	Special charges - admission charge	0684	Trauma response - level IV
0222	Special charges - technical support charge	0689	Trauma response - other
0223	Special charges - UR service charge	0700	Cast Room services - general
0224	Special charges - late discharge, medically	0709	Cast Room services - other
0229	necessary Special charges - other	0710	Recovery Room services - general
0230	Incremental nursing care - general	0719	Recovery Room services - other
0231	Incremental nursing care - nursery	0720	Labor/Delivery Room services - general
0232	Incremental nursing care - OB	0721	Labor/Delivery Room services - labor
0233	Incremental nursing care - ICU (includes transitional care)	0722	Labor/Delivery Room services - delivery
0234	Incremental nursing care - CCU (includes transitional care)	0723	Labor/Delivery Room services - circumcision
0235	Incremental nursing care - hospice	0724	Labor/Delivery Room services - birthing center
0239	Incremental nursing care - other	0729	Labor/Delivery Room services - other
0240	All-inclusive ancillary - general	0730	EKG/ECG services - general
0249	All-inclusive ancillary - other	0731	EKG/ECG services - holter monitor
0250	Pharmacy - general	0732	EKG/ECG services - telemetry
0230	r narmacy - general	0152	Listo, Lett services - menieury

0251	Pharmacy - generic drugs	0739	EKG/ECG services - other
0252	Pharmacy - nongeneric drugs	0740	EEG services - general
0253	Pharmacy - take-home drugs	0749	EEG services - other
0254	Pharmacy - drugs incident to other diagnostic services	0750	Gastrointestinal services - general
0255	Pharmacy - drugs incident to radiology	0759	Gastrointestinal services - other
0256	Pharmacy - experimental drugs	0760	Treatment or observation room services -
0257	Pharmacy - nonprescription	0761	general Specialty Room - Treatment/ Observation Room - Treatment Room
0258	Pharmacy - IV solutions	0762	Specialty Room - Treatment/ Observation Room - Observation Room
0259	Pharmacy - other		
0260	IV Therapy - general	0769	Treatment or observation room services - other
0261	IV Therapy - infusion pump	0770	Preventive care services - general
0262	IV Therapy - pharmacy services	0771	Preventive care services - vaccine administration
0263	IV Therapy - durg/supply delivery	0779	Preventive care services - other
0264	IV Therapy - supplies	0780	Telemedicine services - general
0269	IV Therapy - other	0789	Telemedicine services - other
0270	Medical surgical supplies and devices - general	0790	Lithotripsy services - general
0271	Medical surgical supplies and devices - nonsterile	0790	Extra-corporeal shockwave therapy - general
0272	Medical surgical supplies and devices - sterile	0799	Extra-corporeal shockwave therapy - other
0273	Medical surgical supplies and devices - take- home	0799	Lithotripsy services - other
0274	Medical surgical supplies and devices - prosthetic/orthotic	0800	Inpatient renal dialysis services - general
0275	Medical surgical supplies and devices - pacemaker	0801	Inpatient renal dialysis services - hemodialysis
0276	Medical surgical supplies and devices - intraocular lens (IOL)	0802	Inpatient renal dialysis services - peritoneal (non-CAPD)
0277	Medical surgical supplies and devices - oxygen - take-home	0803	Inpatient renal dialysis services - continuous ambulatory peritoneal dialysis (CAPD)
0278	- take-nome Medical surgical supplies and devices - other implants	0804	Inpatient renal dialysis services - continuous cycling peritoneal dialysis (CAPD)
0279	Medical surgical supplies and devices - other	0809	Inpatient renal dialysis services - other
0280	Oncology - general	0810	Organ acquisition - general
0289	Oncology - other	0811	Organ acquisition - living donor
0290	DME - general	0812	Organ acquisition - cadaver donor
0291	DME - rental	0813	Organ acquisition - unknown donor
0292	DME - purchase of new	0814	Organ acquisition - unsuccessful organ search- donor bank charges
0293	DME - purchase of used	0819	Organ acquisition - other donor
0294	DME - supplies/drugs for DME effectiveness	0820	Hemodialysis - outpatient or home - general
0299	DME - other equipment	0821	Hemodialysis - outpatient or home - composite or other rate
0300	Laboratory - general	0825	Hemodialysis - outpatient or home - support services
0301	Laboratory - chemistry	0829	Hemodialysis - outpatient or home - other
0302	Laboratory - immunology	0830	Peritoneal dialysis - outpatient or home - general
0303	Laboratory - renal patient (home)	0831	Peritoneal dialysis - outpatient or home - composite or other rate
0304	Laboratory - nonroutine dialysis	0835	Peritoneal dialysis - outpatient or home - support services
0305	Laboratory - hemotology	0839	Peritoneal dialysis - outpatient or home - other
0306	Laboratory - bacteriology and microbiology	0840	CAPD - outpatient or home - general
0307	Laboratory - urology	0841	CAPD - outpatient or home - composite or other rate
0309	Laboratory - other	0845	CAPD - outpatient or home - support services
0310	Laboratory pathological - general	0849	CAPD - outpatient or home - other
0311	Laboratory pathological - cytology	0850	CCPD - outpatient or home - general

0.112 Laboratory pathological - histology 0851 CCPD - outpatient or home - composite or other rate 0.113 Laboratory pathological - biopsy 0855 CCPD - outpatient or home - other 0.214 Radiology - diagnostic - ageneral 0880 Miscellaneous dialysis - butrafiltration 0.212 Radiology - diagnostic - arteriography 0882 Miscellaneous dialysis - butrafiltration 0.213 Radiology - diagnostic - arteriography 0880 Miscellaneous dialysis - butrafiltration 0.214 Radiology - diagnostic - arteriography 0889 Miscellaneous dialysis - butrafiltration 0.218 Radiology - diagnostic - other 0901 Behavior health treatments/services - general 0.218 Radiology - diagnostic - other 0901 Behavior health treatments/services - alterioty 0.218 Radiology - dingnostic - cohernotherapy 0902 Behavior health treatments/services - alterioty 0.218 Radiology - dingnostic - cohernotherapy 0903 Behavior health treatments/services - alterioty 0.218 Radiology - therapeutic and/or chemotherapy 0907 Behavior health treatments/services - alterioty 0.218 Radiology - therapeutic and/or chemotherapy 0907 Behavior health treatments/serv				
0131 Laboratory pathological - biopsy 0855 CCPD - outpatient or home - support services 0319 Laboratory pathological - other 0859 CCPD - outpatient or home - other 0322 Radiology - diagnostic - antiocarghy 0881 Miscellaneous dialysis - ultrafiltration 0323 Radiology - diagnostic - antiocarghy 0889 Miscellaneous dialysis - other 0324 Radiology - diagnostic - other 0900 Behavior health treatments/services - eneral 0337 Radiology - therapeutic and/or chemotherapy 0902 Behavior health treatments/services - enerine 0338 Radiology - therapeutic and/or chemotherapy 0903 Behavior health treatments/services - entrive 0338 Radiology - therapeutic and/or chemotherapy 0901 Behavior health treatments/services - intensive 0338 Radiology - therapeutic and/or chemotherapy 0903 Behavior health treatments/services - intensive 0338 Radiology - therapeutic and/or chemotherapy 0904 Behavior health treatments/services - entrivices - activity 0338 Radiology - therapeutic and/or chemotherapy 0905 Behavior health treatments/services - intensive 0338 Radiolog	0312	Laboratory pathological - histology	0851	CCPD - outpatient or home - composite or other
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0379Anesthesia - other0932Medical rehabilitation day program - full day0380Blood - general0940Other therapeutic services - general0381Blood - packed red cells0941Other therapeutic services - recreational therapy0382Blood - whole blood0942Other therapeutic services - education/training0383Blood - plasma0943Other therapeutic services - cardiac rehabilitation0384Blood - platelets0944Other therapeutic services - drug rehabilitation0385Blood - leukocytes0945Other therapeutic services - alcohol rehabilitation0386Blood - other components0946Other therapeutic services - complex medical equipment - routine0387Blood - other derivatives (cryoprecipitates)0947Other therapeutic services - complex medical	0372	6	0929	Other diagnostic services - other
0380Blood - general0940Other therapeutic services - general0381Blood - packed red cells0941Other therapeutic services - recreational therapy0382Blood - whole blood0942Other therapeutic services - education/training0383Blood - plasma0943Other therapeutic services - cardiac rehabilitation0384Blood - platelets0944Other therapeutic services - drug rehabilitation0385Blood - leukocytes0945Other therapeutic services - alcohol rehabilitation0386Blood - other components0946Other therapeutic services - complex medical equipment - routine0387Blood - other derivatives (cryoprecipitates)0947Other therapeutic services - complex medical	0374		0931	Medical rehabilitation day program - half day
0381Blood - packed red cells0941Other therapeutic services - recreational therapy0382Blood - whole blood0942Other therapeutic services - education/training0383Blood - plasma0943Other therapeutic services - cardiac rehabilitation0384Blood - platelets0944Other therapeutic services - drug rehabilitation0385Blood - leukocytes0945Other therapeutic services - alcohol rehabilitation0386Blood - other components0946Other therapeutic services - complex medical equipment - routine0387Blood - other derivatives (cryoprecipitates)0947Other therapeutic services - complex medical	0379	Anesthesia - other	0932	Medical rehabilitation day program - full day
0382Blood - whole blood0942Other therapeutic services - education/training0383Blood - plasma0943Other therapeutic services - cardiac rehabilitation0384Blood - platelets0944Other therapeutic services - drug rehabilitation0385Blood - leukocytes0945Other therapeutic services - alcohol rehabilitation0386Blood - other components0946Other therapeutic services - complex medical equipment - routine0387Blood - other derivatives (cryoprecipitates)0947Other therapeutic services - complex medical	0380	Blood - general	0940	Other therapeutic services - general
0383Blood - plasma0943Other therapeutic services - cardiac rehabilitation0384Blood - platelets0944Other therapeutic services - drug rehabilitation0385Blood - leukocytes0945Other therapeutic services - alcohol rehabilitation0386Blood - other components0946Other therapeutic services - complex medical equipment - routine0387Blood - other derivatives (cryoprecipitates)0947Other therapeutic services - complex medical	0381	Blood - packed red cells	0941	Other therapeutic services - recreational therapy
0384 Blood - platelets 0944 Other therapeutic services - drug rehabilitation 0385 Blood - leukocytes 0945 Other therapeutic services - alcohol rehabilitation 0386 Blood - other components 0946 Other therapeutic services - complex medical equipment - routine 0387 Blood - other derivatives (cryoprecipitates) 0947 Other therapeutic services - complex medical	0382	Blood - whole blood	0942	Other therapeutic services - education/training
0384Blood - platelets0944Other therapeutic services - drug rehabilitation0385Blood - leukocytes0945Other therapeutic services - alcohol rehabilitation0386Blood - other components0946Other therapeutic services - complex medical equipment - routine0387Blood - other derivatives (cryoprecipitates)0947Other therapeutic services - complex medical	0383	Blood - plasma	0943	1
0385Blood - leukocytes0945Other therapeutic services - alcohol rehabilitation0386Blood - other components0946Other therapeutic services - complex medical equipment - routine0387Blood - other derivatives (cryoprecipitates)0947Other therapeutic services - complex medical	0384	Blood - platelets	0944	
0386 Blood - other components 0946 Other therapeutic services - complex medical equipment - routine 0387 Blood - other derivatives (cryoprecipitates) 0947 Other therapeutic services - complex medical		*		· ·
0387Blood - other derivatives (cryoprecipitates)0947Other therapeutic services - complex medical			0946	rehabilitation
		*		equipment - routine
	0387	Blood - other derivatives (cryoprecipitates)	0947	

0389	Blood - other	0949	Other therapeutic services - other
0390	Blood amd blood component administration, storage and processing - general	0960	Professional fees - general
0391	Blood and blood component administration, storage and processing - administration	0961	Professional fees - psychiatric
0399	Blood and blood component administration,	0962	Professional fees - ophthalmology
0400	storage and processing - other Other imaging services - general	0963	Professional fees - anesthesiologist (MD)
0401	Other imaging services - diagnostic mammography	0964	Professional fees - anesthetist (CRNA)
0402	Other imaging services - ultrasound	0969	Professional fees - other
0403	Other imaging services - screening mammography	0970	Professional fees - general
0404	Other imaging services - PET	0971	Professional fees - laboratory
0409	Other imaging services - other	0972	Professional fees - radiology - diagnostic
0410	Respiratory services - general	0973	Professional fees - radiology - therapeutic
0412	Respiratory services - inhalation	0974	Professional fees - readiology - nuclear medicine
0413	Respiratory services - hyperbaric oxygen therapy	0975	Professional fees - operating room
0419	Respiratory services - other	0976	Professional fees - respiratory therapy
0420	Physical therapy - general	0977	Professional fees - physical therapy
0421	Physical therapy - visit charge	0978	Professional fees - occupational therapy
0422	Physical therapy - hourly charge	0979	Professional fees - speech therapy
0423	Physical therapy - group rate	0980	Professional fees - general
0424	Physical therapy - evaluation or reevaluation	0981	Professional fees - emergency room
0429	Physical therapy - other	0982	Professional fees - outpatient services
0430	Occupational therapy - general	0983	Professional fees - clinic
0431	Occupational therapy - visit charge	0984	Professional fees - medical social services
0432	Occupational therapy - hourly charge	0985	Professional fees - EKG
0433	Occupational therapy - group rate	0986	Professional fees - EEG
0433	Occupational therapy - evaluation or	0987	Professional fees - hospital visit
0434	reevaluation Occupational therapy - other	0988	Professional fees - consultation
0439	Speech-language pathology - general	0989	Professional fees - private duty nurse
0440	Speech-language pathology - visit charge	0989	Patient convenience items - general
0442	Speech-language pathology - visit charge	0991	Patient convenience items - cafeteria/guest tray
0442	Speech-language pathology - group rate	0991	Patient convenience items - caretena/guest tray Patient convenience items - private linen service
0443		0992	•
	Speech-language pathology - evaluation or reevaluation		Patient convenience items - telephone/telegraph
0449	Speech-language pathology - other	0994	Patient convenience items - TV/radio
0450	Emergency room - general	0995	Patient convenience items - nonpatient room rentals
0451	Emergency room - EMTALA emergency medical screening services	0996	Patient convenience items - late discharge charge
0452	Emergency room - beyond EMTALA screening	0997	Patient convenience items - admission kits
0456	Emergency room - urgent care	0998	Patient convenience items - beauty shop/barber
0459	Emergency room - other	0999	Patient convenience items - other
0460	Pulmonary function - general	1000	Behavior health accommodations - general
0469	Pulmonary function - other	1001	Behavior health accommodations - residential treatment - psychiatric
0470	Audiology - general	1002	Behavior health accommodations - residential treatment - chemical dependency
0471	Audiology - diagnostic	1003	Behavior health accommodations - supervised living
0472	Audiology - treatment	1004	Behavior health accommodations - halfway house
0479	Audiology - other	1005	Behavior health accommodations - group home
0480	Cardiology - general	2100	Alternative therapy services - general
0481	Cardiology - cardiac cath lab	2101	Alternative therapy services - acupuncture
0482	Cardiology - stress test	2102	Alternative therapy services - acupressure
0483	Cardiology - echocardiology	2103	Alternative therapy services - massage
			r, stringe

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	0489	Cardiology - other	2104	Alternative therapy services - reflexology
	0490	Ambulatory surgical care - general	2105	Alternative therapy services - biofeedback
	0499	Ambulatory surgical care - other	2106	Alternative therapy services - hypnosis
	0500	Outpatient services - general	2109	Alternative therapy services - other
	0509	Outpatient services - other	3101	Adult day care, medical and social - hourly
	0510	Clinic - general	3102	Adult day care, social - hourly
	0511	Clinic - chronic pain	3103	Adult day care, medical and social - daily
	0512	Clinic - dental	3104	Adult day care, social - daily
	0513	Clinic - psychiatric	3105	Adult foster care - daily
	0514	Clinic - OB/GYN	3109	Adult foster care - other
	0515	Clinic - pediatric		
Beginning Position:	13	Data Source:	Claim	
Length:	4	Туре:	Alphar	numeric
Field 3:	HCPO	CS_QUALIFIER		
Description:				
Beginning Position:	17	Data Source:	Claim	
Length:	2	Туре:		numeric
Field 4		CS_PROCEDURE_CODE		
Description:		A Common Procedure Coding System (H	CPCS)	code applicable to ancillary services or
- cocription.		amodations.	21 05/0	appreciate to unemary services of
Coding Scheme:		ttp://www.cms.hhs.gov/HCPCSReleaseCo	ado Sata/	ANHCPCS/list asp for complete list of
county scheme:		II HCPCS codes.	Jueseis/.	Amiler Constate for complete list of
Beginning Position:	Level 19	Data Source:	Claim	
0 0				
Length:	5	Туре:	Alphai	numeric
Field 5:		DIFIER_1	c	
Description:		fies special circumstances related to the p		
Coding Scheme:	0 1	No assessment completed Medicare 5 day assessment (full)	F2 F3	Left hand, third digit Left hand, fourth digit
	2	Medicare 30 day assessment (full)	F3 F4	Left hand, fifth digit
	3	Medicare 60 day assessment (full)	F5	Right hand, thumb
	4	Medicare 90 day assessment (full)	F6	Right hand, second digit
	7	Medicare 14 day assessment (comprehensive or	F7	Right hand, third digit
	0	full)	F 0	
	8 11	Other Medicare required assessment (OMRA) Admission assessment - Medicare 5 day	F8 F9	Right hand, fourth digit Right hand, fifth digit
	11	assessment (comprehensive)	1.2	Kight hand, fifth digit
	25	Significant, separately identifiable evaluation and	FA	Left hand, thumb
	25	management service by the same physician on	FA	Left hand, thumb
		management service by the same physician on the same day of the procedure o		
	25 31	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment	FA G1	Left hand, thumb Most recent URR of less than 60%
	31	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement)	G1	Most recent URR of less than 60%
		management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment		
	31	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment	G1	Most recent URR of less than 60%
	31 32 33	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement)	G1 G2 G3	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9%
	31 32	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment	G1 G2	Most recent URR of less than 60% Most recent URR of 60% to 64%
	31 32 33 34	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement)	G1 G2 G3 G4	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9%
	31 32 33	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment	G1 G2 G3	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9%
	31 32 33 34	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment	G1 G2 G3 G4	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech-
	31 32 33 34 37	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement)	G1 G2 G3 G4 G5	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient
	31 32 33 34 37 38	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) Significant change in status assessment (SCSA)	G1 G2 G3 G4 G5 GN	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient speech-language pathology plan of care.
	31 32 33 34 37	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) Significant change in status assessment (SCSA)	G1 G2 G3 G4 G5	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient speech-language pathology plan of care. Service delivered personally by an occupationa
	31 32 33 34 37 38	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) Significant change in status assessment (SCSA)	G1 G2 G3 G4 G5 GN	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient speech-language pathology plan of care. Service delivered personally by an occupationa therapist or under an outpatient occupational
	 31 32 33 34 37 38 41 	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) Significant change in status assessment (SCSA) Significant correction of prior full assessment/Medicare 5 day assessment	G1 G2 G3 G4 G5 GN G0	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient speech-language pathology plan of care. Service delivered personally by an occupationa therapist or under an outpatient occupational therapy plan of care.
	31 32 33 34 37 38	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) Significant change in status assessment (SCSA)	G1 G2 G3 G4 G5 GN	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient speech-language pathology plan of care. Service delivered personally by an occupational therapy plan of care. Service delivered personally by an physical
	 31 32 33 34 37 38 41 	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) Significant change in status assessment (SCSA) Significant correction of prior full assessment/Medicare 5 day assessment Significant correction of prior full	G1 G2 G3 G4 G5 GN G0	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient speech-language pathology plan of care. Service delivered personally by an occupational therapist or under an outpatient occupational therapist or under an outpatient occupational therapist or under an outpatient physical therapist or under an outpatient physical therapist plan of care.
	 31 32 33 34 37 38 41 	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) Significant change in status assessment (SCSA) Significant correction of prior full assessment/Medicare 5 day assessment Significant correction of prior full assessment/Medicare 30 day assessment Significant correction of prior full assessment/Medicare 30 day assessment	G1 G2 G3 G4 G5 GN G0	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient speech-language pathology plan of care. Service delivered personally by an occupational therapy plan of care. Service delivered personally by an physical therapy plan of care.
	 31 32 33 34 37 38 41 42 43 	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) Significant change in status assessment (SCSA) Significant correction of prior full assessment/Medicare 30 day assessment Significant correction of prior full assessment/Medicare 30 day assessment	G1 G2 G3 G4 G5 GN G0 GP LC	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient speech-language pathology plan of care. Service delivered personally by an occupational therapist or under an outpatient occupational therapist or under an outpatient occupational therapist or under an outpatient physical therapist or under an outpatient physical therapist or under an outpatient physical therapist or under an outpatient physical therapy plan of care. Left circulflex coronary artery
	 31 32 33 34 37 38 41 42 	management service by the same physician on the same day of the procedure o SCSA or OMRA/Medicare 5 day assessment (replacement) SCSA or OMRA/Medicare 30 day assessment (replacement) SCSA or OMRA/Medicare 60 day assessment (replacement) SCSA or OMRA/Medicare 90 day assessment (replacement) SCSA or OMRA/Medicare 14 day assessment (replacement) Significant change in status assessment (SCSA) Significant correction of prior full assessment/Medicare 5 day assessment Significant correction of prior full assessment/Medicare 30 day assessment Significant correction of prior full assessment/Medicare 30 day assessment	G1 G2 G3 G4 G5 GN G0 GP	Most recent URR of less than 60% Most recent URR of 60% to 64% Most recent URR of 65% to 69.9% Most recent URR of 70% to 74.9% Most recent URR of 75% or greater Service delivered personally by a speech- language pathologist or under an outpatient speech-language pathology plan of care. Service delivered personally by an occupational therapist or under an outpatient occupational therapist or under an outpatient occupational therapist or under an outpatient physical therapist or under an outpatient physical therapy plan of care.

	47	Significant correction of p assessment/Medicare 14 d		LT	Left side of the body procedure	
	48	Significant correction of p	prior full	QM	Ambulance service provided under arrangemen	
	50	assessment/OMRA or SC Bilateral procedure	SA	QN	by a provider of services Ambulance service furnished directly by a	
	52	Reduced services		QP Documentation exists showing that the laboratory test(s) was ordered individually, or a		
	53	Discontinued procedure		RC	CPT-recognized panel other than profil Right coronary artery	
	54	Quarterly review assessment (full)	ent - Medicare 90	RT	Right side of the body procedure	
	58	Staged or related procedure same physician during the		T1	Left foot, second digit	
	59	Distinct procedural servic		T2	Left foot, third digit	
	76	Repeat procedure by same		Т3	Left foot, fourth digit	
	77	Repeat procedure by anot	her physician	T4	Left foot, fifth digit	
	78	Return to the operating ro		T5	Right foot, great toe	
	79	procedure during the post Unrelated procedure of se physician during the post	rvice by the same	T6	Right foot, second digit	
	E1	Upper left eyelid		T7	Right foot, third digit	
	E2	Lower left eyelid		Т8	Right foot, fourth digit	
	E3	Upper right eyelid		Т9	Right foot, fifth digit	
	E4	Lower right eyelid		TA	Left foot, great toe	
	F1	Left hand, second digit				
Beginning Position:	24		Data Source:	Claim		
Length:	2		Туре:	Alphanumeric		
Field 6:	MO	DIFIER_2				
Description:		tifies special circumsta	nces related to the	perform	ance of the service.	
Coding Scheme:		e as Field 5				
Beginning Position:	26		Data Source:	Claim		
Length:	2		Туре:	Alpha	numeric	
Field 7:		DIFIER_3				
Description:		tifies special circumsta	nces related to the	perform	ance of the service.	
Coding Scheme:		e as Field 5	- ~			
Beginning Position:	28		Data Source:	Claim		
Length:	2		Туре:	Alpha	numeric	
Field 8:		DIFIER_4	.	c		
Description:		tifies special circumsta	nces related to the	perform	ance of the service.	
Coding Scheme:		e as Field 5	-			
Beginning Position:	30		Data Source:			
Length:	2		Туре:	Alphanumeric		
Field 9:		T_MEASUREMENT				
Description: Coding Scheme:	Code DA F2	e specifying the units ir Days International unit	n which a value is	being ex	pressed.	
	UN					
Beginning Position:	32		Data Source:	Claim		
Length:	2		Туре:	Alpha	numeric	
Field 10:		TS_OF_SERVICE				
Description:		eric value of quantity		~~ ·		
Beginning Position:	34		Data Source:	Claim		
Length:	7		Туре:	Nume	ric	
Field 11:		T_RATE				
Description:		per unit				
Beginning Position:	41		Data Source:	Claim		
Length:	12		Туре:	Nume	ric	
Field 12:		RGS_LINE_ITEM				

Field 12:CHRGS_LINE_ITEM

Description:	Total amount of the charge		
Beginning Position:	53	Data Source:	Assigned
Length:	14	Туре:	Numeric
Field 13:	CHRGS_NON_COV		
Description:	Total non-covered amount	of the charge	
Beginning Position:	67	Data Source:	Assigned
Length:	14	Туре:	Numeric

FACILITY TYPE INDICATOR FILE

Facility type indicators provided by the facilities. Provide the data user with information on the type of facility providing the outpatient service.

T: 114			
Field 1:	THCIC_ID		
Description:	Provider ID. Unique identif	U	1 2
Beginning Position:	1	Data Source:	Assigned
Length:	6	Туре:	Alphanumeric
Field 2	PROVIDER_NAME		
Description:	Hospital name provided by		
Beginning Position:	7	Data Source:	Provider
Length:	55	Туре:	Alphanumeric
Field 3:	FAC_TEACHING_IND		
Description:	Teaching facility indicator.		
Coding Scheme:	A Member, Council of Teac	ching Hospitals	
	X Other teaching facility		
Beginning Position:	62	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 4:	FAC_PSYCH_IND		
Description:	Psychiatric facility indicato		
Beginning Position:	63	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 5:	FAC_REHAB_IND		
Description:	Rehabilitation facility indic	ator.	
Beginning Position:	64	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 6:	FAC_ACUTE_CARE_IN	D	
Description:	Acute care facility indicator	r.	
Beginning Position:	65	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 7:	FAC_SNF_IND		
Description:	Skilled nursing facility indi	cator.	
Beginning Position:	66	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 8:	FAC_LONG_TERM_AC	IND	
Description:	Long term acute care facilit	y indicator.	
Beginning Position:	67	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 9:	FAC_OTHER_LTC_IND		
Description:	Other long term care facility		
Beginning Position:	68	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 10:	FAC_PEDS_IND		•

Description:	Pediatric facility Indicator.		
Coding Scheme:			's Hospitals and Related Institutions (NACHRI)
0	X Facilities that also treat c		
Beginning Position:	69	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 11:	FAC_CARDIOVASCUL	AR_IND	•
Description:	Cardiovascular facility indi	icator.	
Beginning Position:	70	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 12:	FAC_CHIROPRACTIC_	IND	
Description:	Chiropractic care facility in	ndicator.	
Beginning Position:	71	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 13:	FAC_ENDOSCOPY_INI)	
Description:	Endoscopy facility indicate	or.	
Beginning Position:	72	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 14:	FAC_FOOT_IND		
Description:	Foot care facility indicator.		
Beginning Position:	73	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 15:	FAC_GASTROENTERO	_	
Description:	Gastroenterology facility ir		
Beginning Position:	74	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 16:	FAC_GENERAL_IND		
Description:	General care facility indica		
Beginning Position:	75	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 17:	FAC_NEUROLOGICAL		
Description:	Neurological care facility in		
Beginning Position:	76	Data Source:	Provider
Length:		Туре:	Alphanumeric
Field 18:	FAC_OB_GYN_IND		
Description:	Obstetric and gynecology f		Provider
Beginning Position:	77	Data Source:	
Length: Field 19:	1 FAC OPTHAMOLOGY	Type:	Alphanumeric
Description:		—	
Beginning Position:	Opthamology facility indic 78	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 20:	FAC_ORAL_IND	турс.	Alphanumene
Description:	Oral health care facility ind	licator	
Beginning Position:	79	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 21:	FAC_ORTHOPEDIC_IN		
Description:	Orthopedic care facility ind		
Beginning Position:	80	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 22:	FAC_OTOLARYNGOLO		
Description:	Otolaryngology facility ind		
Beginning Position:	81	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 23:	FAC_PAIN_MNGMT_I		•
Description:	Pain management facility in		
T . 1 . 1 .			

Beginning Position:	82	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 24:	FAC_PLASTIC_IND		
Description:	Plastic surgery facility indi	cator.	
Beginning Position:	83	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 25:	FAC_THORACIC_IND		
Description:	Thoracic care facility Indic	ator.	
Beginning Position:	84	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 26:	FAC_UROLOGY_IND		
Description:	Urology care facility indica	tor.	
Beginning Position:	85	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 27:	FAC_OTHER_IND		
Description:	Other facility indicator.		
Beginning Position:	86	Data Source:	Provider
Length:	1	Туре:	Alphanumeric



Texas Outpatient Services Data Public Use Data File

Base Data File Classifications Data File Charges Data File Facility Indicators Data File

Data Fields

Fields that are shaded are not available in this release of data.

Base Data File

NUMBER	FIELD NAME	POSITION	LENGTH	FIELD TYPE
1	SERVICE_QUARTER	1	6	Alphanumeric
	RECORD_ID - Does NOT match the THCIC			
2	RECORD_ID in Research Data Files (RDF's).	7	12	Alphanumeric
3	THCIC_ID	19	6	Alphanumeric
4	PROVIDER_NAME	25	55	Alphanumeric
5	SPEC_UNIT	80	5	Alphanumeric
5a	SPEC_UNIT_1 (fixed length format only)	80	1	Alphanumeric
5b	SPEC_UNIT_2 (fixed length format only)	81	1	Alphanumeric
5c	SPEC_UNIT_3 (fixed length format only)	82	1	Alphanumeric
5d	SPEC_UNIT_4 (fixed length format only)	83	1	Alphanumeric
5e	SPEC_UNIT_5 (fixed length format only)	84	1	Alphanumeric
6	SEX_CODE	85	1	Alphanumeric
7	PAT_COUNTY	86	3	Alphanumeric
8	PAT_STATE	89	2	Alphanumeric
9	PAT_ZIP	91	5	Alphanumeric
10	PAT_COUNTRY	96	2	Alphanumeric
11	PUBLIC_HEALTH_REGION	98	2	Alphanumeric
12	LENGTH_OF_SERVICE	100	2	Alphanumeric
13	PAT_AGE	102	2	Alphanumeric
14	RACE	104	1	Alphanumeric
15	ETHNICITY	105	1	Alphanumeric
16	FIRST_PAYMENT_SRC	106	2	Alphanumeric
17	SECONDARY_PAYMENT_SRC	108	2	Alphanumeric
18	TYPE_OF_BILL	110	3	Alphanumeric
19	CONDITION_CODE_1	113	2	Alphanumeric
20	CONDITION_CODE_2	115	2	Alphanumeric
21	CONDITION_CODE_3	117	2	Alphanumeric
22	CONDITION_CODE_4	119	2	Alphanumeric
23	CONDITION_CODE_5	121	2	Alphanumeric
24	CONDITION_CODE_6	123	2	Alphanumeric
25	CONDITION_CODE_7	125	2	Alphanumeric
26	CONDITION_CODE_8	127	2	Alphanumeric
27	PAT_REASON_FOR_VISIT	129	5	Alphanumeric
28	PRINC_DIAG_CODE	134	5	Alphanumeric
29	OTHER_DIAG_CODE_1	139	5	Alphanumeric
30	OTHER_DIAG_CODE_2	144	5	Alphanumeric
31	OTHER_DIAG_CODE_3	149	5	Alphanumeric

32	OTHER DIAG CODE 4	154	5	Alphanumaria
32	OTHER_DIAG_CODE_4 OTHER_DIAG_CODE_5	159	5	Alphanumeric Alphanumeric
33	OTHER_DIAG_CODE_5	164	5	Alphanumeric
35	OTHER_DIAG_CODE_0	164	5	Alphanumeric
35	OTHER_DIAG_CODE_8	109	5	Alphanumeric
37	OTHER_DIAG_CODE_9	174	5	Alphanumeric
37	OTHER_DIAG_CODE_9	179	5	Alphanumeric
39	OTHER_DIAG_CODE_10	184	5	Alphanumeric
40	OTHER_DIAG_CODE_11	189	5	Alphanumeric
40	OTHER_DIAG_CODE_12 OTHER_DIAG_CODE_13	194	5	Alphanumeric
41 42	OTHER DIAG CODE 14	204	5	Alphanumeric
42	OTHER_DIAG_CODE_14	204	5	Alphanumeric
43	OTHER_DIAG_CODE_15	209	5	Alphanumeric
44		214 219	5	Alphanumeric
43	OTHER_DIAG_CODE_17	219	5	Alphanumeric
40	OTHER_DIAG_CODE_18	224	5	
	OTHER_DIAG_CODE_19			Alphanumeric
48	OTHER_DIAG_CODE_20	234	5 5	Alphanumeric
<u>49</u> 50	OTHER_DIAG_CODE_21	239 244	5	Alphanumeric Alphanumeric
	OTHER_DIAG_CODE_22		5	
51	OTHER_DIAG_CODE_23	249		Alphanumeric
52	OTHER_DIAG_CODE_24	254	5	Alphanumeric
53	RELATED_CAUSE_CODE_1	259	2	Alphanumeric
54	RELATED_CAUSE_CODE_2	261	2	Alphanumeric
55	RELATED_CAUSE_CODE_3	263	2	Alphanumeric
56	E_CODE_1	265	5	Alphanumeric
57	E_CODE_2	270	5	Alphanumeric
58	E_CODE_3	275	5	Alphanumeric
59	E_CODE_4	280	5	Alphanumeric
60	E_CODE_5	285	5	Alphanumeric
61	E_CODE_6	290	5	Alphanumeric
62	E_CODE_7	295	5	Alphanumeric
63	E_CODE_8	300	5	Alphanumeric
64	E_CODE_9	305	5	Alphanumeric
65	E_CODE_10	310	5	Alphanumeric
66	PROC_CODE_1	315	5	Alphanumeric
67	PROC_CODE_2	320	5 5	Alphanumeric
68	PROC_CODE_3	325	-	Alphanumeric
69	PROC_CODE_4	330	5	Alphanumeric
70	PROC_CODE_5	335	5	Alphanumeric
71	PROC_CODE_6	340	5	Alphanumeric
72	PROC_CODE_7	345	5	Alphanumeric
73	PROC_CODE_8	350	5	Alphanumeric
74	PROC_CODE_9	355	5	Alphanumeric
75	PROC_CODE_10	360	5	Alphanumeric
76	PROC_CODE_11	365	5	Alphanumeric
77	PROC_CODE_12	370	5	Alphanumeric
78	PROC_CODE_13	375	5	Alphanumeric
79	PROC_CODE_14	380	5	Alphanumeric
80	PROC_CODE_15	385	5	Alphanumeric
81	PROC_CODE_16	390	5	Alphanumeric
82	PROC_CODE_17	395	5	Alphanumeric
83	PROC_CODE_18	400	5	Alphanumeric
84	PROC_CODE_19	405	5	Alphanumeric

85	PROC_CODE_20	410	5	Alphanumeric
86	PROC_CODE_21	415	5	Alphanumeric
87	PROC_CODE_22	420	5	Alphanumeric
88	PROC_CODE_23	425	5	Alphanumeric
89	PROC_CODE_24	430	5	Alphanumeric
90	PROC_CODE_25	435	5	Alphanumeric
91	OTHER_AMOUNT	440	12	Numeric
92	PHARM_AMOUNT	452	12	Numeric
93	MEDSURG_AMOUNT	464	12	Numeric
94	DME_AMOUNT	476	12	Numeric
95	USED_DME_AMOUNT	488	12	Numeric
96	PT_AMOUNT	500	12	Numeric
97	OT_AMOUNT	512	12	Numeric
98	SPEECH_AMOUNT	524	12	Numeric
99	IT_AMOUNT	536	12	Numeric
100	BLOOD_AMOUNT	548	12	Numeric
101	BLOOD_ADM_AMOUNT	560	12	Numeric
102	OR_AMOUNT	572	12	Numeric
103	LITH_AMOUNT	584	12	Numeric
104	CARD_AMOUNT	596	12	Numeric
105	ANES_AMOUNT	608	12	Numeric
106	LAB_AMOUNT	620	12	Numeric
107	RAD_AMOUNT	632	12	Numeric
108	MRI_AMOUNT	644	12	Numeric
109	OP_AMOUNT	656	12	Numeric
110	ER_AMOUNT	668	12	Numeric
111	AMBULANCE_AMOUNT	680	12	Numeric
112	PRO_FEE_AMOUNT	692	12	Numeric
113	ORGAN_AMOUNT	704	12	Numeric
114	ESRD_AMOUNT	716	12	Numeric
115	CLINIC_AMOUNT	728	12	Numeric
116	TOTAL_CHARGES	740	12	Numeric
117	TOTAL_NON_COV_CHARGES	752	12	Numeric
118	TOTAL_CHARGES_ANCIL	764	12	Numeric
119	TOTAL_NON_COV_CHARGES_ANCIL	776	12	Numeric
120	PHYSICIAN_1_INDEX_NUMBER	788	10	Alphanumeric
121	PHYSICIAN_2_INDEX_NUMBER	798	10	Alphanumeric
122	CERTIFICATION_STATUS	808	1	Alphanumeric
123	INPUT_FORMAT	809	1	Alphanumeric

Classification Data File

NUMBER	FIELD NAME	POSITION	LENGTH	FIELD TYPE
1	RECORD_ID- Does NOT match the THCIC	1	12	Alphanumeric
	RECORD_ID in Research Data Files (RDF's)			r
2	CCS_PRINC_DIAG_CODE	13	4	Alphanumeric
3	CCS_OTHER_DIAG_CODE_1	17	4	Alphanumeric
4	CCS_OTHER_DIAG_CODE_2	21	4	Alphanumeric
5	CCS_OTHER_DIAG_CODE_3	25	4	Alphanumeric
6	CCS_OTHER_DIAG_CODE_4	29	4	Alphanumeric
7	CCS_OTHER_DIAG_CODE_5	33	4	Alphanumeric
8	CCS_OTHER_DIAG_CODE_6	37	4	Alphanumeric

9	CCS_OTHER_DIAG_CODE_7	41	4	Alphanumeric
10	CCS_OTHER_DIAG_CODE_8	45	4	Alphanumeric
10	CCS_OTHER_DIAG_CODE_9	49	4	Alphanumeric
12	CCS_OTHER_DIAG_CODE_10	53	4	Alphanumeric
13	CCS_OTHER_DIAG_CODE_11	57	4	Alphanumeric
14	CCS OTHER DIAG CODE 12	61	4	Alphanumeric
15	CCS_OTHER_DIAG_CODE_13	65	4	Alphanumeric
16	CCS_OTHER_DIAG_CODE_14	69	4	Alphanumeric
17	CCS_OTHER_DIAG_CODE_15	73	4	Alphanumeric
18	CCS_OTHER_DIAG_CODE_16	77	4	Alphanumeric
19	CCS_OTHER_DIAG_CODE_17	81	4	Alphanumeric
20	CCS_OTHER_DIAG_CODE_18	85	4	Alphanumeric
20	CCS_OTHER_DIAG_CODE_19	89	4	Alphanumeric
22	CCS_OTHER_DIAG_CODE_20	93	4	Alphanumeric
23	CCS_OTHER_DIAG_CODE_21	97	4	Alphanumeric
23	CCS_OTHER_DIAG_CODE_22	101	4	Alphanumeric
24	CCS_OTHER_DIAG_CODE_22	101	4	Alphanumeric
25	CCS_OTHER_DIAG_CODE_23	103	4	
20	CCS_PROC_CODE_1	109	3	Alphanumeric
27	CCS_PROC_CODE_1		3	Alphanumeric
	CCS_PROC_CODE_2	116	3	Alphanumeric
29		119	3	Alphanumeric
30	CCS_PROC_CODE_4	122	3	Alphanumeric
31	CCS_PROC_CODE_5	125		Alphanumeric
32	CCS_PROC_CODE_6	128	3	Alphanumeric
33	CCS_PROC_CODE_7	131	3	Alphanumeric
34	CCS_PROC_CODE_8	134	3	Alphanumeric
35	CCS_PROC_CODE_9	137	3	Alphanumeric
36	CCS_PROC_CODE_10	140	3	Alphanumeric
37	CCS_PROC_CODE_11	143	3	Alphanumeric
38	CCS_PROC_CODE_12	146	3	Alphanumeric
39	CCS_PROC_CODE_13	149	3	Alphanumeric
40	CCS_PROC_CODE_14	152	3	Alphanumeric
41	CCS_PROC_CODE_15	155		Alphanumeric
42	CCS_PROC_CODE_16	158	3	Alphanumeric
43	CCS_PROC_CODE_17	161	3	Alphanumeric
44 45	CCS_PROC_CODE_18	164	3	Alphanumeric
	CCS_PROC_CODE_19	167		Alphanumeric
46	CCS_PROC_CODE_20	170	3	Alphanumeric
47	CCS_PROC_CODE_21	173	3	Alphanumeric
48	CCS_PROC_CODE_22	176	3	Alphanumeric
49	CCS_PROC_CODE_23	179	3	Alphanumeric
50	CCS_PROC_CODE_24	182	3	Alphanumeric
51	CCS_PROC_CODE_25	185	3	Alphanumeric
52	FINAL_EAPG_CATEGORY_CODE_1	188	2	Alphanumeric
53	FINAL_EAPG_CATEGORY_CODE_2	190	2	Alphanumeric
54	FINAL_EAPG_CATEGORY_CODE_3	192	2	Alphanumeric
55	FINAL_EAPG_CATEGORY_CODE_4	194	2	Alphanumeric
56	FINAL_EAPG_CATEGORY_CODE_5	196	2	Alphanumeric
57	FINAL_EAPG_CATEGORY_CODE_6	198	2	Alphanumeric
58	FINAL_EAPG_CATEGORY_CODE_7	200	2	Alphanumeric
59	FINAL_EAPG_CATEGORY_CODE_8	202	2	Alphanumeric
60	FINAL_EAPG_CATEGORY_CODE_9	204	2	Alphanumeric
61	FINAL_EAPG_CATEGORY_CODE_10	206	2	Alphanumeric

62		200	0	Alphonumoria
62	FINAL_EAPG_TYPE_CODE_1	208	2	Alphanumeric
63 64	FINAL_EAPG_TYPE_CODE_2 FINAL_EAPG_TYPE_CODE_3	210	2	Alphanumeric
		212		Alphanumeric
65	FINAL_EAPG_TYPE_CODE_4	214	2	Alphanumeric
66	FINAL_EAPG_TYPE_CODE_5	216	2	Alphanumeric
67	FINAL_EAPG_TYPE_CODE_6	218	2	Alphanumeric
68	FINAL_EAPG_TYPE_CODE_7	220	2	Alphanumeric
69	FINAL_EAPG_TYPE_CODE_8	222	2	Alphanumeric
70	FINAL_EAPG_TYPE_CODE_9	224	2	Alphanumeric
71	FINAL_EAPG_TYPE_CODE_10	226	2	Alphanumeric
72	FINAL_EAPG_1	228	5	Alphanumeric
73	FINAL_EAPG_2	233	5	Alphanumeric
74	FINAL_EAPG_3	238	5	Alphanumeric
75	FINAL_EAPG_4	243	5	Alphanumeric
76	FINAL_EAPG_5	248	5	Alphanumeric
77	FINAL_EAPG_6	253	5	Alphanumeric
78	FINAL_EAPG_7	258	5	Alphanumeric
79	FINAL_EAPG_8	263	5	Alphanumeric
80	FINAL_EAPG_9	268	5	Alphanumeric
81	FINAL_EAPG_10	273	5	Alphanumeric
82	EAPG_GRP_VER	278	12	Alphanumeric
83	CRG_STATUS_1	290	1	Alphanumeric
84	CRG_STATUS_2	291	1	Alphanumeric
85	CRG_STATUS_3	292	1	Alphanumeric
86	CRG_STATUS_4	293	1	Alphanumeric
87	CRG_STATUS_5	294	1	Alphanumeric
88	CRG_STATUS_6	295	1	Alphanumeric
89	CRG_STATUS_7	296	1	Alphanumeric
90	CRG_STATUS_8	297	1	Alphanumeric
91	CRG_STATUS_9	298	1	Alphanumeric
92	CRG_STATUS_10	299	1	Alphanumeric
93	CRG_CODE_1	300	5	Alphanumeric
94	CRG_CODE_2	305	5	Alphanumeric
95	CRG_CODE_3	310	5	Alphanumeric
96	CRG_CODE_4	315	5	Alphanumeric
97	CRG_CODE_5	320	5	Alphanumeric
98	CRG_CODE_6	325	5	Alphanumeric
99	CRG_CODE_7	330	5	Alphanumeric
100	CRG_CODE_8	335	5	Alphanumeric
101	CRG_CODE_9	340	5	Alphanumeric
102	CRG_CODE_10	345	5	Alphanumeric
103	CRG_SEVERITY_1	350	1	Alphanumeric
104	CRG_SEVERITY_2	351	1	Alphanumeric
105	CRG_SEVERITY_3	352	1	Alphanumeric
106	CRG_SEVERITY_4	353	1	Alphanumeric
107	CRG_SEVERITY_5	354	1	Alphanumeric
108	CRG_SEVERITY_6	355	1	Alphanumeric
109	CRG_SEVERITY_7	356	1	Alphanumeric
110	CRG_SEVERITY_8	357	1	Alphanumeric
111	CRG_SEVERITY_9	358	1	Alphanumeric
112	CRG_SEVERITY_10	359	1	Alphanumeric
113	APC_PROCEDURE_CODE_1	360	5	Alphanumeric
114	APC_PROCEDURE_CODE_2	365	5	Alphanumeric
114	APU_PROUEDURE_CODE_2	565	5	Alphanumeric

115	APC PROCEDURE CODE 3	370	5	Alphanumeric
116	APC PROCEDURE CODE 4	375	5	Alphanumeric
117	APC_PROCEDURE_CODE_5	380	5	Alphanumeric
118	APC_PROCEDURE_CODE_6	385	5	Alphanumeric
119	APC_PROCEDURE_CODE_7	390	5	Alphanumeric
120	APC_PROCEDURE_CODE_8	395	5	Alphanumeric
121	APC_PROCEDURE_CODE_9	400	5	Alphanumeric
122	APC_PROCEDURE_CODE_10	405	5	Alphanumeric
123	APC_PX_STATUS_IND_CODE_1	410	2	Alphanumeric
124	APC_PX_STATUS_IND_CODE_2	412	2	Alphanumeric
125	APC_PX_STATUS_IND_CODE_3	414	2	Alphanumeric
126	APC_PX_STATUS_IND_CODE_4	416	2	Alphanumeric
127	APC_PX_STATUS_IND_CODE_5	418	2	Alphanumeric
128	APC_PX_STATUS_IND_CODE_6	420	2	Alphanumeric
129	APC_PX_STATUS_IND_CODE_7	422	2	Alphanumeric
130	APC_PX_STATUS_IND_CODE_8	424	2	Alphanumeric
131	APC_PX_STATUS_IND_CODE_9	426	2	Alphanumeric
132	APC_PX_STATUS_IND_CODE_10	428	2	Alphanumeric
133	APC_WEIGHT_1	430	9	Alphanumeric
134	APC_WEIGHT_2	439	9	Alphanumeric
135	APC_WEIGHT_3	448	9	Alphanumeric
136	APC_WEIGHT_4	457	9	Alphanumeric
137	APC_WEIGHT_5	466	9	Alphanumeric
138	APC_WEIGHT_6	475	9	Alphanumeric
139	APC_WEIGHT_7	484	9	Alphanumeric
140	APC_WEIGHT_8	493	9	Alphanumeric
141	APC_WEIGHT_9	502	9	Alphanumeric
142	APC_WEIGHT_10	511	9	Alphanumeric
143	APC_GRP_VER	520	12	Alphanumeric

Charges Data File

NUMBER	FIELD NAME	POSITION	LENGTH	FIELD TYPE
	RECORD_ID - Does NOT match the THCIC			
1	RECORD_ID in Research Data Files (RDF's)	1	12	Alphanumeric
2	REVENUE_CODE	13	4	Alphanumeric
3	HCPCS_QUALIFIER	17	2	Alphanumeric
4	HCPCS_PROCEDURE_CODE	19	5	Alphanumeric
5	MODIFIER_1	24	2	Alphanumeric
6	MODIFIER_2	26	2	Alphanumeric
7	MODIFIER_3	28	2	Alphanumeric
8	MODIFIER_4	30	2	Alphanumeric
9	UNIT_MEASUREMENT_CODE	32	2	Alphanumeric
10	UNITS_OF_SERVICE	34	7	Numeric
11	UNIT_RATE	41	12	Numeric
12	CHRGS_LINE_ITEM	53	14	Numeric
13	CHRGS_NON_COV	67	14	Numeric

Facility Type Data File

NUMBER	FIELD NAME	POSITION	LENGTH	FIELD TYPE
1	THCIC_ID	1	6	Alphanumeric
2	PROVIDER_NAME	7	55	Alphanumeric
3	FAC_TEACHING_IND	62	1	Alphanumeric
4	FAC_PSYCH_IND	63	1	Alphanumeric
5	FAC_REHAB_IND	64	1	Alphanumeric
6	FAC_ACUTE_CARE_IND	65	1	Alphanumeric
7	FAC_SNF_IND	66	1	Alphanumeric
8	FAC_LONG_TERM_AC_IND	67	1	Alphanumeric
9	FAC_OTHER_LTC_IND	68	1	Alphanumeric
10	FAC_PEDS_IND	69	1	Alphanumeric
11	FAC_CARDIOVASCULAR_IND	70	1	Alphanumeric
12	FAC_CHIROPRACTIC_IND	71	1	Alphanumeric
13	FAC_ENDOSCOPY_IND	72	1	Alphanumeric
14	FAC_FOOT_IND	73	1	Alphanumeric
15	FAC_GASTROENTEROLOGY_IND	74	1	Alphanumeric
16	FAC_GENERAL_IND	75	1	Alphanumeric
17	FAC_NEUROLOGICAL_IND	76	1	Alphanumeric
18	FAC_OB-GYN_IND	77	1	Alphanumeric
19	FAC_OPTHAMOLOGY_IND	78	1	Alphanumeric
20	FAC_ORAL_IND	79	1	Alphanumeric
21	FAC_ORTHOPEDIC_IND	80	1	Alphanumeric
22	FAC_OTOLARYRGOLOGY_IND	81	1	Alphanumeric
23	FAC_PAIN MNGMT_IND	82	1	Alphanumeric
24	FAC_PLASTIC_IND	83	1	Alphanumeric
25	FAC_THORACIC_IND	84	1	Alphanumeric
26	FAC_UROLOGY_IND	85	1	Alphanumeric
27	FAC_OTHER_IND	86	1	Alphanumeric