

# Texas Department of State Health Services

## **Center for Health Statistics Texas Health Care Information Collection**

## **TEXAS HOSPITAL EMERGENCY DEPARTMENT PUBLIC USE DATA FILES USER MANUAL** 2018

### **TABLE OF CONTENTS**

BACKGROUND	3
HOSPITAL EMERGENCY DEPARTMENT Public Use Data Files	
DATA PROCESSING AND QUALITY	
PATIENT/PHYSICIAN CONFIDENTIALITY	
RESTRICTIONS ON DATA USE	9
DATA LIMITATIONS	
(Users are advised to become familiar with the data limitation	
HOSPITAL COMMENTS FILE & OUTPATIENT FACILITY COMMENTS	
FILE	12
(Users are advised to consider hospital comments in any anal	
of the data.)	-
CITATION	13
DATA DICTIONARY	14
Inpatient Base Data #1 File	14
Inpatient Base Data #2 File	36
Inpatient Charges Data File	48
Outpatient Base Data File	56
Outpatient Classification Data File	73
Outpatient Charges Data File	80
Facility Type Indicator File	89
DATA FILE LAYOUTS	92
Inpatient Base Data #1 File	92
Inpatient Base Data #2 File	96
Inpatient Charges Data File	99
Outpatient Base Data File	99
Outpatient Classification File	104
Outpatient Charges Data File	106
Facility Type Indicator File	107

#### **BACKGROUND**

The 2014-15 General Appropriations Act, S.B. 1, 83rd Texas Legislature, Regular Session, 2013 (Article II, Department of State Health Services [DSHS], Rider 93) specified that DSHS shall collect hospital emergency department (ED) data as set forth in Chapter 108, Texas Health and Safety Code (THSC). DSHS currently collects inpatient and outpatient data from hospitals and ambulatory surgical centers. DSHS began collecting ED data from hospitals on January 1, 2015 per 25 Texas Administrative Code (TAC), Sections 421.71-421.78, and in conjunction with the collection of inpatient and outpatient data.

Sections  $\underline{108.011(a)}$  and  $\underline{108.013}$  of the THSC require DSHS to provide public use data promptly and to protect patient and physician privacy and confidentiality. Also, THSC, Section  $\underline{108.012}$  authorizes DSHS to charge the data requestor a standard fee to recoup funds for sustaining the program processing the data.

#### HOSPITAL EMERGENCY DEPARTMENT PUBLIC USE DATA FILES

The Hospital Emergency Department Public Use Data Files include data from Inpatient "Public Use Data Files" (PUDF) and the Outpatient PUDF. The Inpatient PUDF contains patient-level information for patients which were admitted into the hospital for care. The inpatient hospital stay may last several hours to days, weeks or years, depending upon the condition or status of the patient before being discharged; the Outpatient PUDF contains patient-level information for outpatient services that does not go more than twenty-four (24) hours from the time they are being treated in the hospital or ambulatory surgery center (ASC). DSHS only collect data from these hospitals and ASCs in which patient's received services one or more procedures that included an invasive surgical procedures or imaging/radiological procedures and all hospital emergency department (ED) visits.

The providers/submitters must submit their data according to the schedule specified in 25 TAC, Sections 421.73, 421.75 and 421.76 (which references 25 TAC, Sections 421.63, 421.65 and 421.66). The reporting schedules are also posted on the DSHS/THCIC webpage <a href="http://www.dshs.texas.gov/THCIC/datareportingschedule.shtm">http://www.dshs.texas.gov/THCIC/datareportingschedule.shtm</a>. This means that the Hospital ED PUDF reflects a snapshot in time and each quarter may contain some inpatient encounter records or outpatient event records dated in the previous quarter (i.e. for a complete calendar year of data, be sure to check the first quarter of the following year).

The Hospital ED PUDF contains:

- Inpatient (IP) Base Data #1 File This file contains the required data elements. For example, codes regarding: Facility Identifier; Principal Diagnosis; Other Diagnoses; External Cause of Injury; Principal Procedure; Other Procedures; Diagnosis Related Group; Type of Admission; Source of Admission; Length of Stay; Patient Ethnicity; Patient Race; Patient Residence City, County, ZIP code, Patient Status, Primary Payment Source and other data used for most research topics.
- IP Base Data #2 File This file contains most of the situationally required data elements and some calculated fields. For example, codes regarding: Condition Code; Value Code; Occurrence Code, Occurrence Day, Charge amounts for Service Pay Groups; and other information that may be useful regarding the inpatient stay research.
- IP Charges File This file contains charges data. This file can be linked with the other IP data files via the Record ID. This file contains information regarding the revenue codes, modifiers and specific charges for services or products.
- Outpatient (OP) Base Data File This file contains the required data elements. For example, codes regarding: Facility Identifier; Diagnoses; External Cause of Injury; Procedures; Diagnosis Related Group; Charge amounts for Service Pay Groups; Patient Ethnicity; Patient Race; Patient Residence City, County, ZIP code; Patient Status, Source of Admission; Primary Payment Source, and other data used for most research topics.
- OP Classification Data File This file contains calculated data elements and classifiers assigned by THCIC. Clinical Classification Software codes; and, Clinical Risk Group codes, status and severity;
- OP Charges File -This file contains charges data. This file can be linked with the other OP data files via the Record ID. This file contains information regarding the revenue codes, modifiers and specific charges for services or products. This file also contains Enhanced Ambulatory Patient Grouping codes and Ambulatory Payment Classification information.
- Facility Type Data File This file contains the information about specialty units or specific types of services provided at the hospitals.

The following supplementary information is provided along with the Hospital ED PUDF:

- Hospital Comments File This PDF file contains any comments that the facilities included when they submitted and certified their inpatient data.
- Outpatient Facility Comments File This PDF file contains any comments that the hospitals included when they reviewed and certified their outpatient data.
- Facility Reporting Status Document (Inpatient and Outpatient) These
  documents provide information about whether the hospitals reported any
  data. It also indicates whether they reported low numbers and their
  identification was masked in the data, reported no discharges, or if they
  closed or were out of compliance, and whether they submitted any
  comments about their data.

The 2018 Hospital ED PUDF is available in seven fixed length or tab-delimited format text files: Inpatient Base Data #1, Inpatient Base Data #2, Inpatient Charges, Outpatient Base Data, Outpatient Classification Data, Outpatient Charges, and Facility Type Data files. The sizes of the files are as follows:

#### First quarter, 496 facilities:

IP Base Data #1	409,776 records	166 variables	Fixed field format	314 MB	Tab-delimited	167 MB
IP Base Data #2	409,776 records	99 variables	Fixed field format	254 MB	Tab-delimited	110 MB
IP Charges	7,835,239 records	13 variables	Fixed field format	613 MB	Tab-delimited	361 MB
OP Base Data	2,500,788 records	128 variables	Fixed field format	2,111 MB	Tab-delimited	976 MB
OP Classification Data	2,500,788 records	83 variables	Fixed field format	675 MB	Tab-delimited	332 MB
OP Charges	19,282,380 records	19 variables	Fixed field format	1,968 MB	Tab-delimited	1,522 MB
Facility Type Data	496 records	30 variables	Fixed field format	44 KB	Tab-delimited	39 KB

#### Second quarter, 487 facilities:

IP Base Data #1	385,680 records	166 variables	Fixed field format	296 MB	Tab-delimited	158 MB
IP Base Data #2	385,680 records	99 variables	Fixed field format	239 MB	Tab-delimited	104 MB
IP Charges	7,341,105 records	13 variables	Fixed field format	574 MB	Tab-delimited	338 MB
OP Base Data	2,359,980 records	128 variables	Fixed field format	1,992 MB	Tab-delimited	930 MB
OP Classification Data	2,359,980 records	83 variables	Fixed field format	637 MB	Tab-delimited	317 MB
OP Charges	19,153,697 records	19 variables	Fixed field format	1,955 MB	Tab-delimited	1,511 MB
Facility Type Data	487 records	30 variables	Fixed field format	43 KB	Tab-delimited	39 KB

#### Third quarter, 492 facilities:

IP Base Data #1	382,461 records	166 variables	Fixed field format	293 MB	Tab-delimited	157 MB
IP Base Data #2	382,461 records	99 variables	Fixed field format	237 MB	Tab-delimited	103 MB
IP Charges	7,593,268 records	13 variables	Fixed field format	594 MB	Tab-delimited	352 MB
OP Base Data	2,319,929 records	128 variables	Fixed field format	1,958 MB	Tab-delimited	918 MB
OP Classification Data	2,319,929 records	83 variables	Fixed field format	626 MB	Tab-delimited	313 MB
OP Charges	19,275,555 records	19 variables	Fixed field format	1,967 MB	Tab-delimited	1,521 MB
Facility Type Data	492 records	30 variables	Fixed field format	44 KB	Tab-delimited	39 KB

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 5 Last Updated: August, 2019

#### Fourth quarter, 497 facilities:

IP Base Data #1	390,017 records	166 variables	Fixed field format	299 MB	Tab-delimited	160 MB
IP Base Data #2	390,017 records	99 variables	Fixed field format	242 MB	Tab-delimited	105 MB
IP Charges	7,788,331 records	13 variables	Fixed field format	609 MB	Tab-delimited	362 MB
OP Base Data	2,444,990 records	128 variables	Fixed field format	2,064 MB	Tab-delimited	965 MB
OP Classification Data	2,444,990 records	83 variables	Fixed field format	660 MB	Tab-delimited	330 MB
OP Charges	20,692,681 records	19 variables	Fixed field format	2,112 MB	Tab-delimited	1,633 MB
Facility Type Data	497 records	30 variables	Fixed field format	44 KB	Tab-delimited	39 KB

The data must be imported into a software package. The Hospital ED PUDF does not include software for analyzing the data. The data files have been tested with several software packages including Microsoft Access 2016 (Software limits may not allow all data to be loaded), Microsoft Excel 2016 (Software limits may not allow all data to be loaded), SAS 9.4, and IBM SPSS Statistics 24. Please note that files containing in excess of 1,048,576 records will not fit on a single Microsoft Excel 2016 worksheet.

#### DATA PROCESSING AND QUALITY

Each hospital is responsible for the accuracy and completeness of its data. Even so, DSHS' vendor uses an automated process to audit each record for consistency and conformity with the definitions stated in the data specification manual. Records failing an audit are marked as errors and the hospital is notified of the errors. The hospital may either correct and upload the data, or accept the data as is submitted.

Following the correction process, DSHS uses valid claims data to build files of "encounters"; one encounter contains the final discharge and all related interim claims information for a patient. Then, each submitting hospital has an opportunity to review its data and correct any known or previously unidentified errors, such as mapping errors (codes that had valid code responses, but were not correct for the patient record). Hospitals may certify the encounter data with or without comments. The comments may provide information about the hospital's data submission or correction process. For example, a hospital comment may indicate whether the hospital changed vendors during the quarter and there are codes that did not get mapped properly, or whether the facility could not submit corrections before the deadline for corrections ends.

Finally, DSHS builds a final inpatient encounter and separate outpatient event file that includes all data for those datasets, including the corrected data submitted by the hospitals. DSHS staff checks and adjusts for missing values and invalid codes in this file before the Hospital ED PUDF is generated. Users are advised to examine every data element to be used for missing values and

invalid codes, and to read accompanying notes, comments, and other descriptive text.

#### PATIENT/PHYSICIAN CONFIDENTIALITY

The legislative intent behind the creation of the Hospital ED PUDF was that the data and resulting information be used for the benefit of the public. This is specified in THSC, Section 108.013. THSC, Section 108.013(c) 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 THSC, Section 108.013 and may incur civil or criminal penalties as stated in THSC, Sections 108.014 and 108.0141, respectively. In addition, under THSC, Sections 108.013(e) and (f), data and information collected by the DSHS under this statute that identifies a patient and/or physician in the Hospital ED PUDF cannot be used for discovery, subpoena, or other means of legal compulsion or in any civil, administrative, or criminal proceeding. Pursuant to THSC, Section 108.013, DSHS excludes all direct personal and demographic identifiers (e.g., names, address, patient identifiers, admission and discharge dates) that might lead to the identification of a specific patient from the PUDF.

Additionally, to protect patient identities, DSHS has suppressed these data elements in this release of the PUDF (suppression procedures were applied separately within inpatient and outpatient data):

- 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 ZIP code is changed to '88888' for patients from states other than Texas and the adjacent states (i.e., Arkansas, Louisiana, New Mexico, and Oklahoma).
- The entire ZIP code and gender code are suppressed if the ICD-10-CM code indicates alcohol use, drug use, or an HIV-STD diagnosis.
- The entire ZIP code and provider name are suppressed if a hospital has fewer than five discharges of a particular gender, including 'unknown'. The provider ID is changed to '999998'.
- The entire ZIP code is suppressed if a hospital has fewer than fifty discharges in a quarter. The provider ID is changed to '999999'.
- The country code is suppressed if the country field has fewer than five discharges for that quarter.
- The county code is suppressed if a county has fewer than five discharges for that quarter.
- Age is represented by 22 age group codes for the general patient population and 5 age group codes for patients with one or more diagnosis codes indicating an HIV-STD diagnosis, alcohol use, or drug use.

• Race is changed to 'Other' and ethnicity is suppressed if a hospital has fewer than ten discharges of a particular race code.

Substance Abuse and Mental Health Services Administration (SAMHSA) new rules:

On January 18, 2017, Substance Abuse and Mental Health Services Administration (SAMHSA) passed rules for the protection of patients covered under 42 USC §290dd-2 and 42 CFR Part 2 rules (Mental Health and Substance Abuse patients and HIV patients).

The federal rules require that patients' names, identifiers (ZIP code, city, address, county, and any geographic identifiers below the state level), sex and dates (date of birth, statement from dates, statement through dates and procedure dates) be modified and/or masked in the THCIC Public Use Data Files (PUDF) and Research Data Files (RDF).

Texas Department of State Health Services (DSHS) proposed rules regarding the collection and release of the data regarding those patients covered by the federal rules, which were adopted, published in the January 25, 2019 Texas Register on page 44 TexReg 429 and became effective January 30, 2019.

Beginning with second quarter 2018, the inpatient, outpatient and emergency department public use datasets and any research datasets approved by the DSHS IRB will be appropriately masked for protection.

To protect physician identities in inpatient data provided by hospitals, THSC, Sections 108.002 (17), 108.009, and 108.011 require creation of a uniform identification number for physicians in practice. Uniform physician identifiers are available except when the number of physicians represented in a Diagnosis-Related Group (DRG) or Enhanced Ambulatory Patient Grouping (EAPG) for a hospital is less than the minimum cell size of five.

It may be possible in rare instances, or 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 Emergency Department Data Use Agreement in the Application before shipment of the PUDF. The Data Use Agreement prohibits attempts to identify individual patients or physicians. A person who knowingly or negligently releases or accesses this data with criminal intent may incur a penalty. Civil and/or criminal penalties may be assessed under THSC Sections 108.014 and 108.0141.

#### **RESTRICTIONS ON DATA USE**

Users of the Hospital ED PUDF are cautioned about using less than a year of data to make any hospital quality assumptions.

THSC, Sections 108.013(c)(1) and (2) and 108.013(g) prohibit 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 patient or physician or to use the information for any purpose other than for analysis and aggregate statistical reporting violates the Chapter 108, THSC protection processes 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. Because of these restrictions, under no circumstances will users of the data contact an individual patient or physician or hospital for the purpose of verifying information supplied in the DSHS Hospital ED PUDF. Any questions about the data must be referred to DSHS only. DSHS does not assist with data analysis. The data are protected by United States copyright laws and international treaty provisions.

In the Hospital Emergency Department PUDF 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 Hospital ED PUDF:

- 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 hospital stay records of patients in this data set with personally identifiable records from any other source, including any THCIC research data files;
- The licensee will not release nor permit others to release any information that identifies patients, 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 permit others to copy, sell, rent, license, lease, loan, or otherwise grant access to the data covered by the Data Use 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 Hospital Emergency Department Public Use Data Files, [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 THSC, Sections 108.014 and 108.0141 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 licensee (or 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.

#### **DATA LIMITATIONS**

#### (Users are advised to become familiar with the data limitations.)

- THSC, Section <u>108.009(h)</u> requires that a uniform submission format be used for reporting purposes. Beginning with 2005, all data are collected from the THCIC 837 format (a modified version of the American National Standards Institutes, Accredited Standards Committee X12, National Electronic Data Interchange Transaction Set Implementation Guide, Health Care Claim: Institutional, 837, ASC X12N 837 and Professional, ASC X12N, and the addenda).
- Up to 25 diagnosis codes, up to 25 procedure codes, and up to 10 external cause of injury codes can be submitted. Sicker patients may not be accurately represented in the data. This may also result in total

- volume and percentage calculations for diagnoses and procedures not being complete.
- Gender is suppressed for patients with an ICD-10-CM code that indicates drug use, alcohol use, or an HIV-STD diagnosis. Suppression of this data element is applied separately within inpatient and outpatient data sets.
- The last two digits of the ZIP code are suppressed if there are fewer than thirty patients included in the ZIP code. The entire ZIP code is suppressed for patients with an ICD-10-CM code that indicates drug use, alcohol use, an HIV-STD diagnosis, or if a hospital has fewer than five discharges of a particular gender, including 'unknown'. ZIP code is changed to '88888' for patients from a state other than Texas and not from an adjacent state. If the ZIP code is changed to '88888' the state abbreviation is changed to 'ZZ'. Suppression of the ZIP code is applied separately within inpatient and outpatient data sets.
- Patient race and ethnicity data are required by law and rule to be submitted for each patient. Generally, these data are not collected by facilities directly from the patient, and may be subjectively captured and reported by the facilities.
- Inaccuracies in the data and incompleteness of the data would be addressed in the hospitals' comments if submitted by the providing facilities.
- County of residence is not collected by provider facilities. County Federal Information Processing Standard (FIPS) codes are assigned by DSHS based on patient ZIP code.
- For hospital emergency department patient visits that are admitted to the hospital and included in the inpatient discharge data, DSHS assigns the Risk of Mortality and Severity of Illness scores using methodology designed by 3M. These scores may be affected by the number of diagnoses and procedure codes collected by DSHS or by the facility's information system and may be understated.
- Diagnosis present on admission indicator codes (POA) are required for all hospitals submitting inpatient discharge data, except Critical Access Hospitals, inpatient rehabilitation hospitals, inpatient psychiatric hospitals, children's or pediatric hospitals, and long term care hospitals. Some acute care hospitals that have special units similar to the hospitals exempted from reporting POA may not include POA codes for those patients. POA codes are not required and therefore not available for outpatient data.
- Admission Source as reported by hospitals is suppressed, as recommended by the previous THCIC Council, when the Admission Type is 'newborn'. Data users can use ICD-10-CM codes to correctly identify the clinical status of newborns.
- Comparability of inpatient length of stay (LOS) across hospitals is affected by factors such as case-mix and severity complexity, payer-mix,

- market areas and hospital ownership, affiliation or teaching status. Any analysis of inpatient LOS at the hospital level should consider the above factors.
- Any analysis of mortality should note that the data reflect only patients who died in the hospital and not those who died after discharge from the hospital.
- The data are a snapshot in time. Hospitals must submit data no later than 60 days after the close of a calendar quarter. Depending on hospitals' collection and billing cycles, not all inpatient discharge encounters from ED visits or outpatient ED visits may have been billed or reported during the particular quarter the patient received the services. Those services may appear in the following quarter's data. This can affect the accuracy of source of payment data, particularly self-pay and charity that may later qualify for Medicaid, Medicare, or other payment sources.
- Updates to PUDF CD records, if any, are available through the THCIC website, <a href="http://www.dshs.texas.gov/thcic/">http://www.dshs.texas.gov/thcic/</a>, which should be checked periodically as notifications of an update will not be sent.
- DSHS collects data from all hospitals in the state not specifically exempted (and not owned by the United States of America). Some hospitals may be exempted for certain situations (for example, natural or other disasters, or other unusual conditions) for limited time periods.
- The hospital patient mix (the types of patients treated at hospitals vary, due to the hospital's interest and specialty services availability) should be considered when drawing conclusions about the data or making comparisons with other data.
- Any conclusions drawn from the data are subject to errors caused by the inability of the facility to communicate complete data due to form constraints, subjectivity in the assignment of codes, system mapping, and clerical error. The data are submitted by providers as their best effort to meet statutory requirements.

#### **HOSPITAL COMMENTS FILE & OUTPATIENT FACILITY COMMENTS FILE**

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

Included with the Hospital ED PUDF is are two separate files ("Hospital Comments File" and (Outpatient Facility Comments File") containing the unedited comments (except for removal of individual identifying information) submitted by hospitals 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 (or physicians or healthcare practitioners within those hospitals) and are not necessarily the views of the DSHS. Hospitals that submitted comments are identified in two separate files called the 'Hospital Comments' (for inpatient data) and 'Outpatient Facility Comments' (for outpatient data).

DSHS/THCIC	Page	DSHS Document #25-15013
www.dshs.texas.gov/THCIC	12	Last Updated: August, 2019

#### **CITATION**

Any statistical reporting or analysis based on the data shall cite the source as the following:

Texas Hospital Emergency Department Data Set, [quarter and year of data]. Texas Department of State Health Services, Center for Health Statistics, Austin, Texas. [date of publication].



## Texas Department of State Health Services

## **Texas Hospital Emergency Department Data Set**

#### **DATA DICTIONARY**

The purpose of this document is to provide the user with the necessary information to use and understand the data in the Hospital Emergency Department (ED) Data Set. 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** Provided by the health care facility on the claim form (Claim)

Source

Provided to THCIC by the healthcare facility (Provider)

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.
Alphanumeric or numeric

**Coding** Valid codes for a data field. Values taken from specifications manuals.

scheme

Type

Note a change: Any code provided by a facility that has been determined to be invalid has been assigned the "back quote" value ` .

Any data element that is blank should be interpreted as 'missing', no data provided, unless otherwise noted.

#### **INPATIENT BASE DATA #1 FILE**

Field 1:	RECORD ID				
Description:	Record Identification Number. Unique number assigned to identify the record. The				
		•	ot linkable to the Record ID in the ED		
	Outpatient PUDF or ED F	Research Data Fil	es (RDFs).		
<b>Beginning Position:</b>	1	Data Source:	Assigned		
Length:	12	Type:	Alphanumeric		
Field 2:	DISCHARGE				
Description:	Discharge Quarter. Year an	d quarter of discha	rge. yyyyQn.		
<b>Beginning Position:</b>	13	Data Source:	Assigned		
Length:	6	Туре:	Alphanumeric		
Field 3:	THCIC_ID				
Description:	Provider ID. Unique identifier assigned to the provider by DSHS.				

DSHS/THCIC	Page	DSHS Document #25-15013
www.dshs.texas.gov/THCIC	14	Last Updated: August, 2019

Hospitals with fewer than 50 discharges have been aggregated into the Provider ID '999999'. If Suppression: a hospital has fewer than 5 discharges of a particular gender, including 'unknown', Provider ID is '999998'. **Assigned Beginning Position:** 19 **Data Source:** Length: Alphanumeric Type: Field 4: TYPE\_OF\_ADMISSION **Description:** Code indicating the type of admission **Coding Scheme:** Emergency 2 Urgent 3 Elective 4 Newborn 5 Trauma 9 Information not available Invalid **Beginning Position: Data Source:** Claim Length: Alphanumeric Type: Field 5: SOURCE\_OF\_ADMISSION **Description:** Code indicating source of the admission. **Coding Scheme:** Non-Healthcare Facility Point of Origin (Beginning July 1, 2010) 1 2 Clinic or Physician's Office 4 Transfer from a hospital 5 Transfer from a skilled nursing facility, intermediate care facility or assisted living facility Transfer from another health care facility 6 8 Court/Law Enforcement 9 Information not available Transfer from One Distinct Unit of the Hospital to another Distinct Unit of the Same Hospital D Resulting in a Separate Claim to the Payer Е Transfer from Ambulatory Surgery Center Transfer from a Hospice Facility F Invalid If Type of Admission=4 (Newborn) Born inside this hospital 6 Born outside this hospital **Beginning Position:** 26 **Data Source:** Claim Lenath: Alphanumeric Type: Field 6: SPEC UNIT 1 **Description:** Specialty Units in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. Coronary Care Unit Pediatric Unit **Coding Scheme:** D Detoxification Unit Υ Psychiatric Unit Intensive Care Unit R Rehabilitation Unit Н Hospice Unit U Sub-acute Care Unit N Nursery S Skilled Nursing Unit В Obstetric Unit Blank Acute Care Oncology Unit  $\cap$ **Beginning Position:** 27 **Data Source:** Calculated Length: Type: **Alphanumeric** Field 7: SPEC UNIT 2 **Description:** Specialty Units in which 2<sup>nd</sup> most days during stay occurred based on number of days by Type of Bill or Revenue Code. **Coding Scheme:** Same as SPEC\_UNIT\_1. Calculated **Beginning Position:** 28 **Data Source:** Length: Alphanumeric Type: Field 8: SPEC\_UNIT\_3 **Description:** Specialty Units in which 3<sup>rd</sup> most days during stay occurred based on number of days by Type of Bill or Revenue Code. **Coding Scheme:** Same as SPEC UNIT 1. **Beginning Position: Data Source:** Calculated 29 Length: Alphanumeric Type: Field 9: SPEC\_UNIT\_4 **Description:** Specialty Units in which 4th most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC\_UNIT\_1. **Coding Scheme: Beginning Position:** 30 **Data Source:** Calculated Length: Alphanumeric 1 Type: DSHS/THCIC DSHS Document #25-15013 Page

15

Last Updated: August, 2019

www.dshs.texas.gov/THCIC

Field 10: SPEC\_UNIT\_5

**Description:** Specialty Units in which 5<sup>th</sup> most days during stay occurred based on number of days

by Type of Bill or Revenue Code.

**Coding Scheme:** Same as SPEC\_UNIT\_1.

Beginning Position:31Data Source:CalculatedLength:1Type:Alphanumeric

Field 11: PAT\_STATE

**Description:** State of the patient's mailing address in Texas and contiguous states. Standard 2-

character Postal Service abbreviation.

Coding Scheme: AR Arkansas

LA Louisiana NM New Mexico OK Oklahoma TX Texas

ZZ All other states and American Territories

FC Foreign country

XX Foreign country

**Beginning Position:** 32 **Data Source:** Claim

**Length:** 2 **Type:** Alphanumeric

Field 12: PAT\_ZIP

**Description:** Patient's five-digit ZIP code.

**Suppression:** Last two digits are blank if a ZIP code has fewer than 30 discharges. If state equals

'ZZ', ZIP code equals '88888'. If state equals 'FC' (foreign country) ZIP code is blank. If ICD-10-CM indicates alcohol or drug use or an HIV-STD diagnosis the ZIP code is blank. If ICD-10-CM indicates alcohol or drug use or an HIV diagnosis (patients covered by 42 USC §290dd-2 and 42 CFR Part 2 rules) the ZIP code is reported as "'" (back quote). If a hospital has fewer than fifty discharges the ZIP code is blank. If a hospital has fewer than 5 discharges of a particular gender, including 'unknown',

the ZIP Code is blank.

**Beginning Position:** 34 **Data Source:** Claim

**Length:** 5 **Type:** Alphanumeric

Field 13: PAT\_COUNTRY

**Description:** Country of patient's residential address. List maintained by the International

Organization for Standardization (ISO). If ICD-10-CM indicates alcohol or drug use or an HIV diagnosis (patients covered by 42 USC §290dd-2 and 42 CFR Part 2 rules),

the country is reported as "\" (back quote).
Suppressed if fewer than 5 patients from one country.

**Suppression:** Suppressed if fewer than 5 patients **Coding scheme:** See *www.ISO.org* for complete list.

**Beginning Position:** 39 **Data Source:** Claim

**Length:** 2 **Type:** Alphanumeric

Field 14: PAT\_COUNTY

**Description:** FIPS code of patient's county.

Coding scheme:

ıg	scne	eme:						
	001	Anderson	037	Bowie	073	Cherokee	109	Culberson
	003	Andrews	039	Brazoria	075	Childress	111	Dallam
	005	Angelina	041	Brazos	077	Clay	113	Dallas
	007	Aransas	043	Brewster	079	Cochran	115	Dawson
	009	Archer	045	Briscoe	081	Coke	117	Deaf Smith
	011	Armstrong	047	Brooks	083	Coleman	119	Delta
	013	Atascosa	049	Brown	085	Collin	121	Denton
	015	Austin	051	Burleson	087	Collingsworth	123	Dewitt
	017	Bailey	053	Burnet	089	Colorado	125	Dickens
	019	Bandera	055	Caldwell	091	Comal	127	Dimmit
	021	Bastrop	057	Calhoun	093	Comanche	129	Donley
	023	Baylor	059	Callahan	095	Concho	131	Duval
	025	Bee	061	Cameron	097	Cooke	133	Eastland
	027	Bell	063	Camp	099	Coryell	135	Ector
	029	Bexar	065	Carson	101	Cottle	137	Edwards
	031	Blanco	067	Cass	103	Crane	139	Ellis
	033	Borden	069	Castro	105	Crockett	141	El Paso
	035	Bosque	071	Chambers	107	Crosby	143	Erath

DSHS/THCIC Page DSHS Document #25-15013

145	Falls	239	Jackson	333	Mills	427	Starr
147	Fannin	241	Jasper	335	Mitchell	429	Stephens
149	Fayette	243	Jeff Davis	337	Montague	431	Sterling
151	Fisher	245	Jefferson	339	Montgomery	433	Stonewall
153	Floyd	247	Jim Hogg	341	Moore	435	Sutton
155	Foard	249	Jim Wells	343	Morris	437	Swisher
157	Fort Bend	251	Johnson	345	Motley	439	Tarrant
159	Franklin	253	Jones	347	Nacogdoches	441	Taylor
161	Freestone	255	Karnes	349	Navarro	443	Terrell
163	Frio	257	Kaufman	351	Newton	445	Terry
165	Gaines	259	Kendall	353	Nolan	447	Throckmorton
167	Galveston	261	Kenedy	355	Nueces	449	Titus
169	Garza	263	Kent	357	Ochiltree	451	Tom Green
171	Gillespie	265	Kerr	359	Oldham	453	Travis
173	Glasscock	267	Kimble	361	Orange	455	Trinity
175	Goliad	269	King	363	Palo Pinto	457	Tyler
177	Gonzales	271	Kinney	365	Panola	459	Upshur
179	Gray	273	Kleberg	367	Parker	461	Upton
181	Grayson	275	Knox	369	Parmer	463	Uvalde
183	Gregg	283	La Salle	371	Pecos	465	Val Verde
185	Grimes	277	Lamar	373	Polk	467	Van Zandt
187	Guadalupe	279	Lamb	375	Potter	469	Victoria
189	Hale	281	Lampasas	377	Presidio	471	Walker
191	Hall	285	Lavaca	379	Rains	473	Waller
193	Hamilton	287	Lee	381	Randall	475	Ward
195	Hansford	289	Leon	383	Reagan	477	Washington
197	Hardeman	291	Liberty	385	Real	479	Webb
199	Hardin	293	Limestone	387	Red River	481	Wharton
201	Harris	295	Lipscomb	389	Reeves	483	Wheeler
203	Harrison	297	Live Oak	391	Refugio	485	Wichita
205	Hartley	299	Llano	393	Roberts	487	Wilbarger
207	Haskell	301	Loving	395	Robertson	489	Willacy
209	Hays	303	Lubbock	397	Rockwall	491	Williamson
211	Hemphill	305	Lynn	399	Runnels	493	Wilson
213	Henderson	307	McCulloch	401	Rusk	495	Winkler
215	Hidalgo	309	McLennan	403	Sabine	497	Wise
217	Hill	311	McMullen	405	San Augustine	499	Wood
219	Hockley	313	Madison	407	San Jacinto	501	Yoakum
221	Hood	315	Marion	409	San Patricio	503	Young
223	Hopkins	317	Martin	411	San Saba	505	Zapata
225	Houston	319	Mason	413	Schleicher	507	Zavala
227	Howard	321	Matagorda	415	Scurry		
229	Hudspeth	323	Maverick	417	Shackelford		Invalid
231	Hunt	325	Medina	419	Shelby		
233	Hutchinson	327	Menard	421	Sherman		
235	Irion	329	Midland	423	Smith		
237	Jack	331	Milam	425	Somervell		

Beginning Position:41Data Source:Assigned; based on patient ZIP codeLength:3Type:Alphanumeric

#### Field 15: PUBLIC\_HEALTH\_REGION

Description: Coding Scheme: Public Health Region of patient's address.

- Armstrong, Bailey, Briscoe, Carson, Castro, Childress, Cochran, Collingsworth, Crosby, Dallam, Deaf Smith, Dickens, Donley, Floyd, Garza, Gray, Hale, Hall, Hansford, Hartley, Hemphill, Hockley, Hutchinson, King, Lamb, Lipscomb, Lubbock, Lynn, Moore, Motley, Ochiltree, Oldham, Parmer, Potter, Randall Roberts, Sherman, Swisher, Terry, Wheeler, Yoakum counties
- Randall, Roberts, Sherman, Swisher, Terry, Wheeler, Yoakum counties

  Archer, Baylor, Brown, Callahan, Clay, Coleman, Comanche, Cottle, Eastland, Fisher, Foard,
  Hardeman, Haskell, Jack, Jones, Kent, Knox, Mitchell, Montague, Nolan, Runnels, Scurry, Shackleford,
  Stephens, Stonewall, Taylor, Throckmorton, Wichita, Wilbarger, Young counties
- 3 Collin, Cooke, Dallas, Denton, Ellis, Erath, Fannin, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, Tarrant, Wise counties

- Anderson, Bowie, Camp, Cass, Cherokee, Delta, 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 5 Augustine, San Jacinto, Shelby, Trinity, Tyler counties
- Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Harris, Liberty, Matagorda, Montgomery, Walker, Waller, Wharton counties
- Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hays, Hill, Lampasas, Lee, Leon, Limestone, Llano, McLennan, Madison, Milam, Mills, Robertson, San Saba, Travis, Washington, Williamson counties
- Atascosa, Bandera, Bexar, Calhoun, Comal, DeWitt, Dimmit, Edwards, Frio, Gillespie, Goliad, Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr, Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala counties
- Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, 9 Kimble, Loving, McCulloch, Martin, Mason, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward, Winkler counties
- Brewster, Culberson, El Paso, Hudspeth, Jeff Davis, Presidio counties 10
- Aransas, Bee, Brooks, Cameron, Duval, Hidalgo, Jim Hogg, Jim Wells, Kenedy, Kleberg, Live Oak, 11 McMullen, Nueces, Refugio, San Patricio, Starr, Webb, Willacy, Zapata counties

**Beginning Position:** 44 Data Source: Assigned Length: Alphanumeric Type:

Field 16: **PAT\_STATUS** 

**Description:** Code indicating patient status as of the ending date of service for the period of care

reported

Discharged/transferred to Medicaid-certified

psychiatric distinct part of a hospital

Discharged/transferred to Critical Access

Discharged/transferred to psychiatric hospital or

#### **Coding Scheme:**

01 Discharged/Transferred to a designated disaster Discharged to home or self-care (routine discharge) alternate care (effective 10-1-2013) 02 Discharged to other short term general hospital Discharge/transfer to another type of health care institution not defined elsewhere in the 03 Discharged to skilled nursing facility code list 04 Discharged to intermediate care facility Discharged/transferred to other outpatient 71 Discharged/transferred to a Designated Cancer 05 Discharged/transferred to institution outpatient 72 Center or Children's Hospital 06 Discharged to care of home health service Discharged to Home or Self Care with a Planned Acute Care Hospital Inpatient Readmission 07 Left against medical advice (effective 10-1-2013) 08 Discharged to care of Home IV provider Discharged/Transferred to a Short Term General Hospital for Inpatient Care with a Planned Acute 09 Admitted as inpatient to this hospital Care Hospital Inpatient Readmission (effective 20 Expired 10-1-2013) Discharged/Transferred to a Skilled Nursing Discharged/transferred to Court/Law 21 Facility (SNF) with Medicare Certification with a Enforcement Planned Acute Care Hospital Inpatient 30 Still patient Readmission (effective 10-1-2013) Expired at home 40 Discharged/Transferred to a Facility that Provides Custodial or Supportive Care with a 41 Expired in a medical facility Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013) 42 Expired, place unknown Discharged/transferred to a Designated Cancer 43 Discharged/transferred to federal health care Center or Children's Hospital with a Planned facility Acute Care Hospital Inpatient Readmission 50 Discharged to hospice-home (effective 10-1-2013) 51 Discharged to hospice-medical facility Discharged/Transferred to Home under Care of Organized Home Health Service Organization 61 Discharged/transferred within this institution to with a Planned Acute Care Hospital Inpatient Medicare-approved swing bed Readmission (effective 10-1-2013) 62 Discharged/transferred to inpatient Discharged/Transferred to Court/Law rehabilitation facility Enforcement with a Planned Acute Care Hospital 63 Discharged/transferred to Medicare-certified Inpatient Readmission (effective 10-1-2013) long term care hospital Discharged/Transferred to a Federal Health Care

Facility with a Planned Acute Care Hospital

Inpatient Readmission (effective 10-1-2013)

Discharged/Transferred to a Hospital-based

(effective 10-1-2013)

Medicare Approved Swing Bed with a Planned Acute Care Hospital Inpatient Readmission

65

nursing facility

Hospital (CAH)

- 90 Discharged/Transferred to an Inpatient Rehabilitation Facility (IRF) including Rehabilitation Distinct Part Units of a Hospital with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- Discharged/Transferred to a Medicare Certified 91 Long Term Care Hospital (LTCH) with a Planned Acute Care Hospital Inpatient Réadmission (effective 10-1-2013)
- Discharged/Transferred to a Nursing Facility 92 Certified Under Medicaid but not Certified Under Medicare with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- Discharged/Transferred to a Psychiatric Hospital or Psychiatric Distinct Part Unit of a Hospital with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- Discharged/Transferred to a Critical Access Hospital (CAH) with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-
- Discharged/Transferred to Another Type of Health Care Institution not Defined Elsewhere in this Code List with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- Invalid

			2 4		
Beginning Position: Length:	46 2	Data Source: Type:	Claim Alphanumeric		
Field 17:	SEX_CODE				
Description:	Gender of the patient as	recorded at dat	e of admission or start of care.		
Suppression:	Code is suppressed if an ICD-10-CM code indicates drug or alcohol use or an HIV-STD diagnosis. If ICD-10-CM indicates alcohol or drug use or an HIV diagnosis (patients covered by 42 USC §290dd-2 and 42 CFR Part 2 rules), the Gender of the patient is reported as "U" (Unknown). If a hospital has fewer than 5 patients of a particular gender, including unknown, Provider ID is '999998' and Hospital Name and Patient ZIP Code are blank for those patients.				
Coding Scheme:	M Male F Female U Unknown ` Invalid	·			
<b>Beginning Position:</b>	48	Data Source:	Claim		
Length:	1	Туре:	Alphanumeric		
Field 18:	RACE				

Field 18:

**Description:** Code indicating the patient's race.

Suppression: If a hospital has fewer than ten patients of one race that race is changed to 'Other'

(code equals 5).

**Coding Scheme:** American Indian/Eskimo/Aleut

2 Asian or Pacific Islander

3 Black

4 White

5 Other

Invalid

**Beginning Position:** 49 **Data Source:** Claim Length: Alphanumeric Type:

Field 19: **ETHNICITY** 

**Description:** Code indicating the Hispanic origin of the patient.

Suppression: If a hospital has fewer than ten patients of one race the ethnicity of patients of that

race is suppressed (code is blank).

**Coding Scheme:** Hispanic Origin

2 Not of Hispanic Origin

Invalid

**Beginning Position:** 50 **Data Source:** Claim

Length: Type: Alphanumeric

Field 20: ADMIT\_WEEKDAY

**Description:** Code indicating day of week patient is admitted

**Coding Scheme:** Monday Friday 1

2 Tuesday 6 Saturday 3 Wednesday Sunday 7 4 Thursday Invalid

**Beginning Position: Data Source:** 51 Assigned Length: Type: Alphanumeric

Field 21: LENGTH\_OF\_STAY

DSHS/THCIC	Page	DSHS Document #25-15013
www.dshs.texas.gov/THCIC	19	Last Updated: August, 2019

**Description:** 

Length of stay in days equals Statement covers period through date minus Admission/start of care date. The minimum length of stay is 1 day. The maximum is

9999 days.

**Beginning Position:** 52 **Data Source:** Calculated Length: 4 Type: Alphanumeric

Field 22:	DAT ACE							_
Field 22: Description:	PAT_AGE	na ago of not	iont in	daye or	. voore er	data at	dical	nargo
Coding Scheme:	00 1-28 day	ng age of pat	10 lent	35-39	years or	i date oi	20	1arye. 85-89
coding Scheme:	01 29-365 d		11	40-44			21	90+
	02 1-4 year	•	12	45-49			HI	/-STD and drug/alcohol use patients:
	03 5-9		13	50-54			22	0-17
	04 10-14		14	55-59			23	18-44
	05 15-17		15	60-64			24	45-64
	06 18-19 07 20-24		16 17	65-69 70-74			25 26	65-74 75+
	08 25-29		18	75-79			20	Invalid
	09 30-34		19	80-84				2
<b>Beginning Position:</b>	56	l	Data S	ource:	Assigned			
Length:	2		Туре:		Alphanur	neric		
Field 23:	FIRST_PAY	_						
Description:		ng the expect						
Coding Scheme:	,	Removed from 5) beginning 2Q201		nat,	НМ		aintena	ance Organization
		Certification			LI	Liability	\4 - d:	
		n-federal Progran Provider Organiz		P()	LM MA	Liability I Medicare		
		Service (POS)	zacion (i	10)	MB	Medicare		
		Provider Organiz	zation (E	PO)	MC	Medicaid		
		y Insurance	.:	(LIMO)	TV	Title V	ما احتجاد	
	Medicare		nzation (	(ПМО)	OF	Other Fe		_
		ile Medical			VA			stration Plan
	BL Blue Cros	ss/Blue Shield			WC ZZ			nsation Health Claim nt or Unknown
		cial Insurance			* * *			Z, combined for 2004 & 2005
	DS Disability	Insurance			`	Invalid		
<b>Beginning Position:</b>	58	İ	Data S	ource:	Claim			
Length:	2		Type:		Alphanur	neric		
Field 24:		_PAYMENT						
Description:		ng the expect		condary	source of	payme	nt.	
Coding Scheme:		FIRST_PAYMEN			<b>.</b>			
Beginning Position:	60		Data S	ource:	Claim			
Length: Field 25:	Z TYPE_OF_B		Type:		Alphanur	neric		
Description:		pecific type of	hill					
Coding Scheme:	1 <sup>st</sup> digit-Type			diait-Typ	e of Care		3 <sup>rd</sup> o	ligit-Sequence of claim
county ouncine.	1 Hospital	or r demey	1	. , ,	, including N	1edicare	0	Non-payment/Zero claim
	·			Part A	_			, ,
	2 Skilled nur	sing	2	Inpatient, only	, Medicare F	art B	1	Admit through discharge claim
	3 Home healt		3	Outpatier			2	Interim-first claim
	4 Religious n		4	•	nt Other, Me	dicare	3	Interim-continuing claim
	health care 5 Religious n		5	Part B on Intermed	iy iate Care-L	evel I	4	Interim-last claim
	health care	-Extended care	J	2				and the state of t
	6 Intermedia 7 Clinic	te care	6		iate Care-L		5	Late charge(s) only claim
	7 Clinic		7	III	e inpatient -	- Levei	6	Adjustment of prior claim (Not used by Medicare)
	8 Special fac	lity	8	Swing be	d		7	Replacement of prior claim
		•		-			8	Void/cancel of prior claim
Beginning Position:	62		Data S	ource:	Claim			
Length:	3		Type:		Alphanur	neric		
Field 26:	TOTAL_CHA							
Danasala Maria					verea aco	commoa	ation	charges, ancillary
Description:			marv c	narges.				
•	charges, non		,		Clains			
Beginning Position:	charges, non 65	ı	Datá S	ource:	Claim			
Beginning Position: Length:	charges, non 65 12	-	Datá S Type:	ource:	Claim Numeric			
Beginning Position: Length: Field 27:	charges, non 65 12 <b>TOTAL_NO</b>	I_COV_CHAI	Data Se Type: RGES		Numeric	n-cover	ad an	rillary charges
Beginning Position: Length: Field 27: Description:	charges, non 65 12 <b>TOTAL_NOI</b> Sum of non-		Data Se Type: RGES mmoda	ntion cha	Numeric arges, no	n-covere	ed an	cillary charges.
Beginning Position: Length: Field 27: Description: Beginning Position:	charges, non 65 12 <b>TOTAL_NO</b>		Data Se Type: RGES	ntion cha	Numeric	n-covere	ed an	cillary charges.
Beginning Position: Length: Field 27: Description:	charges, non 65 12 <b>TOTAL_NOI</b> Sum of non- 77		Data Se Type: RGES mmoda Data Se	ntion cha	Numeric arges, no Claim	n-covere	ed and	cillary charges.
Beginning Position: Length: Field 27: Description: Beginning Position: Length:  DSHS/THCIC	charges, non 65 12 TOTAL_NOI Sum of non- 77 12		Data Son Type: RGES Type: Data Son Type: Pag	otion cha	Numeric arges, no Claim	n-covere	DSH	S Document #25-15013
Beginning Position: Length: Field 27: Description: Beginning Position: Length:	charges, non 65 12 TOTAL_NOI Sum of non- 77 12		Data So Type: RGES mmoda Data So Type:	otion cha	Numeric arges, no Claim	n-covere	DSH	

Field 28: TOTAL\_CHARGES\_ACCOMM **Description:** Sum of covered and non-covered accommodation charges. **Beginning Position:** 89 **Data Source:** Claim Length: Numeric 12 Type: Field 29: TOTAL\_NON\_COV\_CHARGES\_ACCOMM **Description:** Sum of non-covered accommodations charges. **Beginning Position:** 101 **Data Source:** Claim Length: Numeric 12 Type: Field 30: TOTAL\_CHARGES\_ANCIL **Description:** Sum of covered and non-covered ancillary charges. **Beginning Position:** 113 **Data Source:** Claim Length: Numeric 12 Type: Field 31: TOTAL\_NON\_COV\_CHARGES\_ANCIL **Description:** Sum of non-covered ancillary charges. **Beginning Position:** 125 **Data Source:** Claim Length: Type: Numeric 12 Field 32: ADMITTING\_DIAGNOSIS **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Data Source: Beginning Position:** 137 Claim Length: Type: Alphanumeric Field 33: PRINC\_DIAG\_CODE Description: ICD-10-CM diagnosis code for the principal diagnosis, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. Claim **Beginning Position:** 144 **Data Source:** Alphanumeric Lenath: Type: Field 34: POA\_PRINC\_DIAG\_CODE **Description:** Code identifying whether Principal Diagnosis code was present at the time the patient was admitted to the hospital **Coding Scheme:** Yes Υ Ν No U Unknown W Clinically Undetermined Space (1st & 2nd Qtr. 2012 only) 1 Invalid **Beginning Position:** 151 **Data Source:** Claim Lenath: Alphanumeric Type: Field 35: OTH\_DIAG\_CODE\_1 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position: Data Source:** 152 Claim Length: Type: Alphanumeric Field 36: POA\_OTH\_DIAG\_CODE\_1 **Description:** Code identifying whether Oth\_Diag\_Code\_1 code was present at the time the patient was admitted to the hospital Same as Field POA\_PRINC\_DIAG\_CODE **Coding Scheme: Beginning Position:** 159 Data Source: Claim Length: **Alphanumeric** Type: Field 37: OTH\_DIAG\_CODE\_2 Description: ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position: Data Source:** 160 Claim Length: Type: Alphanumeric Field 38: POA\_OTH\_DIAG\_CODE\_2 **Description:** Code identifying whether Oth\_Diag\_Code\_2 code was present at the time the patient was admitted to the hospital Same as Field POA\_PRINC\_DIAG\_CODE Coding Scheme: **Beginning Position:** 167 Data Source: Claim Length: Type: Alphanumeric

Page

22

DSHS Document #25-15013

Last Updated: August, 2019

DSHS/THCIC

www.dshs.texas.gov/THCIC

DSHS/THCIC	Page	DSHS Document #25-1501

Field 39: OTH\_DIAG\_CODE\_3

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 168 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 40: POA\_OTH\_DIAG\_CODE\_3

**Description:** Code identifying whether Oth\_Diag\_Code\_3 code was present at the time the patient

was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG CODE

Beginning Position:175Data Source:ClaimLength:1Type:Alphanumeric

 Length:
 1
 Type:
 A

 Field 41:
 OTH\_DIAG\_CODE\_4

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

Beginning Position:176Data Source:ClaimLength:7Type:Alphanumeric

Field 42: POA\_OTH\_DIAG\_CODE\_4

**Description:** Code identifying whether Oth\_Diag\_Code\_4 code was present at the time the patient

was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position:** 183 **Data Source:** Claim

**Length:** 1 **Type:** Alphanumeric

Field 43: OTH\_DIAG\_CODE\_5

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 184 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 44: POA\_OTH\_DIAG\_CODE\_5

**Description:** Code identifying whether Oth\_Diag\_Code\_5 code was present at the time the patient

was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position:** 191 **Data Source:** Claim

**Length:** 1 **Type:** Alphanumeric

Field 45: OTH\_DIAG\_CODE\_6

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

192 Data Source: Claim

Beginning Position: 192 Data Source:

**Length:** 7 **Type:** Alphanumeric

Field 46: POA\_OTH\_DIAG\_CODE\_6

**Description:** Code identifying whether Oth\_Diag\_Code\_6 code was present at the time the patient

was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position:** 199 **Data Source:** Claim

**Length:** 1 **Type:** Alphanumeric

Field 47: OTH\_DIAG\_CODE\_7

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 200 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 48: POA\_OTH\_DIAG\_CODE\_7

**Description:** Code identifying whether Oth\_Diag\_Code\_7 code was present at the time the patient

was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position: 207 Data Source: Claim** 

**Length:** 1 **Type:** Alphanumeric

Field 49: OTH\_DIAG\_CODE\_8

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 208 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 24 Last Updated: August, 2019

Field 50: POA\_OTH\_DIAG\_CODE\_8

**Description:** Code identifying whether Oth Diag Code 8 code was present at the time the patient

was admitted to the hospital

Same as Field POA\_PRINC\_DIAG\_CODE **Coding Scheme:** 

**Beginning Position:** 215 **Data Source:** Claim Lenath: Type: **Alphanumeric** 

Field 51: OTH\_DIAG\_CODE\_9

Description: ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position: Data Source:** 216 Claim

Length: Type: **Alphanumeric** 

POA\_OTH\_DIAG\_CODE\_9 Field 52:

**Description:** Code identifying whether Oth Diag Code 9 code was present at the time the patient

was admitted to the hospital

Same as Field POA\_PRINC\_DIAG\_CODE **Coding Scheme:** 

**Beginning Position:** 223 Data Source: Claim Length: Type: Alphanumeric

OTH DIAG CODE 10 Field 53:

Description: ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position: Data Source:** Claim

Length: Type: Alphanumeric

Field 54: POA\_OTH\_DIAG\_CODE\_10

**Description:** Code identifying whether Oth\_Diag\_Code\_10 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position:** 231 **Data Source:** Claim

Length: Alphanumeric Type:

Field 55: OTH\_DIAG\_CODE\_11

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

> Decimal is implied following the third character. 232 **Data Source:** Claim

**Beginning Position:** Length: Type:

Alphanumeric

Field 56: POA\_OTH\_DIAG\_CODE\_11

Description: Code identifying whether Oth\_Diag\_Code\_11 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Data Source: Beginning Position:** 239 Claim Lenath: Type: Alphanumeric

OTH\_DIAG\_CODE\_12 Field 57:

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

> Decimal is implied following the third character. Claim

**Data Source: Beginning Position:** 

Length: Type: Alphanumeric

Field 58: POA\_OTH\_DIAG\_CODE\_12

**Description:** Code identifying whether Oth\_Diag\_Code\_12 code was present at the time the

patient was admitted to the hospital

Same as Field POA\_PRINC\_DIAG\_CODE **Coding Scheme:** 

**Beginning Position:** 247 **Data Source:** Claim

Length: Type: Alphanumeric

OTH DIAG CODE 13 Field 59:

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Claim

Decimal is implied following the third character.

**Beginning Position:** 248 **Data Source:** Length: Type:

Alphanumeric

Field 60: POA\_OTH\_DIAG\_CODE\_13

**Description:** Code identifying whether Oth\_Diag\_Code\_13 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position:** 255 Data Source: Claim

Alphanumeric Length: Type:

DSHS/THCIC DSHS Document #25-15013 Page www.dshs.texas.gov/THCIC Last Updated: August, 2019 25

Field 61: OTH\_DIAG\_CODE\_14

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 256 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 62: POA\_OTH\_DIAG\_CODE\_14

**Description:** Code identifying whether Oth\_Diag\_Code\_14 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position:263Data Source:ClaimLength:1Type:Alphanumeric

Field 63: OTH\_DIAG\_CODE\_15

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

Beginning Position: 264 Data Source: Claim

**Length:** 7 **Type:** Alphanumeric

Field 64: POA\_OTH\_DIAG\_CODE\_15

**Description:** Code identifying whether Oth\_Diag\_Code\_15 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position:271Data Source:ClaimLength:1Type:Alphanumeric

Field 65: OTH\_DIAG\_CODE\_16

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 272 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 66: POA OTH DIAG CODE 16

**Description:** Code identifying whether Oth\_Diag\_Code\_16 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position:** 279 **Data Source:** Claim

**Length:** 1 **Type:** Alphanumeric

Field 67: OTH\_DIAG\_CODE\_17

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

280 **Data Source:** Claim

Beginning Position: 280 Data Source:

**Length:** 7 **Type:** Alphanumeric

Field 68: POA OTH DIAG CODE 17

**Description:** Code identifying whether Oth\_Diag\_Code\_17 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position:** 287 **Data Source:** Claim

**Length:** 1 **Type:** Alphanumeric

Field 69: OTH\_DIAG\_CODE\_18

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

Beginning Position: 288 Data Source: Claim

**Length:** 7 **Type:** Alphanumeric

Field 70: POA\_OTH\_DIAG\_CODE\_18

**Description:** Code identifying whether Oth\_Diag\_Code\_18 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position: 295 Data Source: Claim** 

**Length:** 1 **Type:** Alphanumeric

Field 71: OTH\_DIAG\_CODE\_19

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Length:** 7 **Type:** Alphanumeric

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 26 Last Updated: August, 2019

Field 72: POA\_OTH\_DIAG\_CODE\_19

**Description:** Code identifying whether Oth Diag Code 19 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position:303Data Source:ClaimLength:1Type:Alphanumeric

Field 73: OTH\_DIAG\_CODE\_20

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 304 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 74: POA\_OTH\_DIAG\_CODE\_20

**Description:** Code identifying whether Oth Diag Code 20 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position:311Data Source:ClaimLength:1Type:Alphanumeric

Field 75: OTH\_DIAG\_CODE\_21

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

Beginning Position:312Data Source:ClaimLength:7Type:Alphanumeric

Field 76: POA\_OTH\_DIAG\_CODE\_21

**Description:** Code identifying whether Oth\_Diag\_Code\_21 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position: 319 Data Source: Claim

Length: 1 Type: Alphanumeric

Field 77: OTH\_DIAG\_CODE\_22

**Beginning Position:** 

Description:

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Alphanumeric

Claim

Decimal is implied following the third character.

320 **Data Source:** Claim

Length: 7 Type:

Field 78: POA\_OTH\_DIAG\_CODE\_22

Code identifying whether Oth\_Diag\_Code\_22 code was present at the time the

patient was admitted to the hospital

Coding Scheme: Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position: 327 Data Source: Claim

Length: 1 Type: Alphanumeric

Field 79: OTH\_DIAG\_CODE\_23

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 328 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 80: POA\_OTH\_DIAG\_CODE\_23

**Description:** Code identifying whether Oth\_Diag\_Code\_23 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position: 335 Data Source: Claim

**Length:** 1 **Type:** Alphanumeric

Field 81: OTH DIAG CODE 24

**Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

Beginning Position: 336 Data Source:

**Length:** 7 **Type:** Alphanumeric

Field 82: POA\_OTH\_DIAG\_CODE\_24

**Description:** Code identifying whether Oth\_Diag\_Code\_24 code was present at the time the

patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position:** 343 **Data Source:** Claim

Length: 1 Type: Alphanumeric

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 27 Last Updated: August, 2019

Field 83: E\_CODE\_1

**Description:** ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if

applicable, of the primary external cause of injury. A decimal is implied following the

third character.

Beginning Position:344Data Source:ClaimLength:7Type:Alphanumeric

Field 84: POA E CODE 1

**Description:** Code identifying whether E Code 1 external cause of injury code was present at the

time the patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position:351Data Source:ClaimLength:1Type:Alphanumeric

Field 85: E CODE 2

**Description:** ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if

applicable, of an additional external cause of injury. Decimal is implied following the

third character.

**Beginning Position:** 352 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 86: POA\_E\_CODE\_2

**Description:** Code identifying whether external cause of injury E\_Code\_2 code was present at the

time the patient was admitted to the hospital

**Coding Scheme:** Same as Field POA PRINC DIAG CODE

**Beginning Position:** 359 **Data Source:** Claim

**Length:** 1 **Type:** Alphanumeric

Field 87: E\_CODE\_3

**Description:** ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if

applicable, of an additional external cause of injury. Decimal is implied following the

third character.

**Beginning Position:** 360 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 88: POA\_E\_CODE\_3

**Description:** Code identifying whether E Code 3 external cause of injury code was present at the

time the patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position: 367 Data Source: Claim

Length: 1 Type: Alphanumeric

Field 89: E\_CODE\_4

**Description:** ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if

applicable, of an additional external cause of injury. Decimal is implied following the

third character.

Beginning Position: 368 Data Source: Claim

**Length:** 7 **Type:** Alphanumeric

Field 90: POA\_E\_CODE\_4

**Description:** Code identifying whether E\_Code\_4 external cause of injury code was present at the

time the patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

Beginning Position:375Data Source:ClaimLength:1Type:Alphanumeric

Field 91: E\_CODE\_5

**Description:** ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if

applicable, of an additional external cause of injury. Decimal is implied following the

third character.

**Beginning Position:** 376 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 92: POA\_E\_CODE\_5

**Description:** Code identifying whether E\_Code\_5 external cause of injury code was present at the

time the patient was admitted to the hospital

**Coding Scheme:** Same as Field POA\_PRINC\_DIAG\_CODE

**Beginning Position:** 383 **Data Source:** Claim

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 28 Last Updated: August, 2019

Length:	1	Туре:	Alphanumeric
Field 93:	E_CODE_6		
Description:	ICD-10-CM external cau		e, including the 4th, 5th, 6th and 7th digits if se of injury. Decimal is implied following the
Beginning Position: Length:	384 7	Data Source: Type:	Claim Alphanumeric
Field 94:	POA_E_CODE_6		
Description:			ernal cause of injury code was present at the
Cadina Cahama	time the patient was adr Same as Field POA PRINC		spital
Coding Scheme: Beginning Position:	391	Data Source:	Claim
Length:	1	Type:	Alphanumeric
Field 95:	E_CODE_7	-	•
Description:			e, including the 4th, 5th, 6th and 7th digits if se of injury. Decimal is implied following the
Beginning Position:	392	Data Source:	Claim
Length: Field 96:	7 <b>POA_E_CODE_7</b>	Туре:	Alphanumeric
Description:		r E Code 7 ext	ernal cause of injury code was present at the
Description	time the patient was adr		
Coding Scheme:	Same as Field POA_PRINC_		
<b>Beginning Position:</b>	399	Data Source:	Claim
Length:	1	Туре:	Alphanumeric
Field 97:	E_CODE_8	aa af indum, aad	a including the 1th 5th 6th and 7th digita if
Description:			e, including the 4th, 5th, 6th and 7th digits if se of injury. Decimal is implied following the
<b>Beginning Position:</b>	400	Data Source:	Claim
Length:	7	Туре:	Alphanumeric
Field 98: Description:	POA_E_CODE_8	r E Codo 9 ovt	ernal cause of injury code was present at the
Description.	time the patient was adr		
Coding Scheme:	Same as Field POA_PRINC_		Spical
Beginning Position:	407	Data Source:	Claim
Length:	1	Туре:	Alphanumeric
Field 99:	E_CODE_9	aa af indum, aad	a including the 4th 5th 6th and 7th digita if
Description:			e, including the 4th, 5th, 6th and 7th digits if se of injury. Decimal is implied following the
Beginning Position:	408	Data Source:	Claim
Length:	7	Туре:	Alphanumeric
Field 100:	POA_E_CODE_9		
Description:			ernal cause of injury code was present at the
Coding Scheme:	time the patient was adr Same as Field POA_PRINC_		Spitai
Beginning Position:	415	Data Source:	Claim
Length:	1	Туре:	Alphanumeric
Field 101:	E_CODE_10		
Description:			e, including the 4th, 5th, 6th and 7th digits if se of injury. Decimal is implied following the
<b>Beginning Position:</b>	416	Data Source:	Claim
Length:	7	Туре:	Alphanumeric
Field 102:	POA_E_CODE_10	C - d - d 0	
Description: Coding Scheme:	the time the patient was Same as Field POA_PRINC_	admitted to the	ternal cause of injury code was present at e hospital
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DSHS/THCIC	/TUCIC	Page	DSHS Document #25-15013
www.dshs.texas.gov/	INCIC	29	Last Updated: August, 2019

Beginning Position:423Data Source:ClaimLength:1Type:Alphanumeric

Field 103: PRINC\_SURG\_PROC\_CODE

**Description:** Code for the principal surgical or other B performed during the period covered by the

bill. ICD-10-PCS code.

**Beginning Position:** 424 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 104: PRINC\_SURG\_PROC\_DAY

**Description:** Day of principal surgical or other procedure *equals* Principal Surgical Procedure Date

minus Admission/Start of Care Date

Beginning Position:431Data Source:CalculatedLength:4Type:Alphanumeric

Field 105: OTH\_SURG\_PROC\_CODE\_1

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 435 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 106: OTH\_SURG\_PROC\_DAY\_1

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date

Beginning Position:442Data Source:CalculatedLength:4Type:Alphanumeric

Field 107: OTH\_SURG\_PROC\_CODE\_2

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 446 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 108: OTH\_SURG\_PROC\_DAY\_2

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date

Beginning Position:453Data Source:CalculatedLength:4Type:Alphanumeric

Field 109: OTH\_SURG\_PROC\_CODE\_3

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 457 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 110: OTH\_SURG\_PROC\_DAY\_3

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date

Beginning Position:464Data Source:CalculatedLength:4Type:Alphanumeric

Field 111: OTH\_SURG\_PROC\_CODE\_4

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

Beginning Position: 468 Data Source: Claim

**Length:** 7 **Type:** Alphanumeric

Field 112: OTH\_SURG\_PROC\_DAY\_4

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date

Beginning Position:475Data Source:CalculatedLength:4Type:Alphanumeric

Field 113: OTH\_SURG\_PROC\_CODE\_5

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 479 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 114: OTH\_SURG\_PROC\_DAY\_5

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 30 Last Updated: August, 2019

**Description:** Day of other surgical or other procedure equals Other Surgical Procedure Date minus

Admission/Start of Care Date

Data Source: **Beginning Position:** 486 Calculated Length: 4 Alphanumeric Type:

Field 115: OTH\_SURG\_PROC\_CODE\_6

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Data Source: Beginning Position:** 490 Claim

Length: Type: Alphanumeric

Field 116: OTH SURG PROC DAY 6

Description: Day of other surgical or other procedure equals Other Surgical Procedure Date minus

Admission/Start of Care Date

**Data Source: Beginning Position:** 497 Calculated Length: Type: **Alphanumeric** 

Field 117: OTH\_SURG\_PROC\_CODE\_7

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 501 **Data Source:** Claim

Lenath: 7 **Alphanumeric** Type:

Field 118: OTH\_SURG\_PROC\_DAY\_7

**Description:** Day of other surgical or other procedure equals Other Surgical Procedure Date minus

Admission/Start of Care Date

**Beginning Position:** 508 Data Source: Calculated Length: **Alphanumeric** Type:

Field 119: OTH SURG PROC CODE 8

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position: Data Source:** Claim 512 Length: Type: **Alphanumeric** 

Field 120: OTH SURG PROC DAY 8

Description: Day of other surgical or other procedure equals Other Surgical Procedure Date minus

Admission/Start of Care Date

**Beginning Position:** 519 **Data Source:** Calculated Length: Type: Alphanumeric

Field 121: OTH SURG PROC CODE 9

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 523 **Data Source:** Claim Length: Type: **Alphanumeric** 

Field 122: OTH\_SURG\_PROC\_DAY\_9

**Description:** Day of other surgical or other procedure equals Other Surgical Procedure Date minus

Admission/Start of Care Date.

**Beginning Position:** 530 Data Source: Calculated Lenath: Type: **Alphanumeric** 

Field 123: OTH SURG PROC CODE 10

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 534 Length: Type:

Alphanumeric

Field 124: OTH\_SURG\_PROC\_DAY\_10

Description: Day of other surgical or other procedure equals Other Surgical Procedure Date minus

**Data Source:** 

Claim

Admission/Start of Care Date.

**Beginning Position: Data Source:** 541 Calculated Length: Type: **Alphanumeric** 

Field 125: OTH SURG PROC CODE 11

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

545 **Data Source:** Claim **Beginning Position:** 

Length: Type: Alphanumeric

Field 126: OTH SURG PROC DAY 11

DSHS/THCIC DSHS Document #25-15013 Page www.dshs.texas.gov/THCIC 31 Last Updated: August, 2019

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:552Data Source:CalculatedLength:4Type:Alphanumeric

Field 127: OTH\_SURG\_PROC\_CODE\_12

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 556 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 128: OTH\_SURG\_PROC\_DAY\_12

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:563Data Source:CalculatedLength:4Type:Alphanumeric

Field 129: OTH\_SURG\_PROC\_CODE\_13

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 567 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 130: OTH\_SURG\_PROC\_DAY\_13

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:574Data Source:CalculatedLength:4Type:Alphanumeric

Field 131: OTH\_SURG\_PROC\_CODE\_14

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

Beginning Position: 578
Length: 7
Data Source: Claim
Type: Alphanumeric

Field 132: OTH\_SURG\_PROC\_DAY\_14

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:585Data Source:CalculatedLength:4Type:Alphanumeric

Field 133: OTH\_SURG\_PROC\_CODE\_15

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

Beginning Position:589Data Source:ClaimLength:7Type:Alphanumeric

Field 134: OTH\_SURG\_PROC\_DAY\_15

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:596Data Source:CalculatedLength:4Type:Alphanumeric

Field 135: OTH\_SURG\_PROC\_CODE\_16

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

Beginning Position: 600 Data Source: Claim

**Length:** 7 **Type:** Alphanumeric

Field 136: OTH\_SURG\_PROC\_DAY\_16

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:607Data Source:CalculatedLength:4Type:Alphanumeric

Field 137: OTH SURG PROC CODE 17

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 611 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 138: OTH SURG PROC DAY 17

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 32 Last Updated: August, 2019

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:618Data Source:CalculatedLength:4Type:Alphanumeric

Field 139: OTH\_SURG\_PROC\_CODE\_18

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 622 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 140: OTH\_SURG\_PROC\_DAY\_18

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:629Data Source:CalculatedLength:4Type:Alphanumeric

Field 141: OTH SURG PROC CODE 19

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 633 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 142: OTH\_SURG\_PROC\_DAY\_19

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:640Data Source:CalculatedLength:4Type:Alphanumeric

Field 143: OTH\_SURG\_PROC\_CODE\_20

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 644 **Data Source:** Claim

Length: 7 Type: Alphanumeric

Field 144: OTH SURG PROC DAY 20

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:651Data Source:CalculatedLength:4Type:Alphanumeric

Field 145: OTH\_SURG\_PROC\_CODE\_21

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 655 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 146: OTH\_SURG\_PROC\_DAY\_21

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:662Data Source:CalculatedLength:4Type:Alphanumeric

Field 147: OTH\_SURG\_PROC\_CODE\_22

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 666 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

Field 148: OTH\_SURG\_PROC\_DAY\_22

**Description:** Day of other surgical or other procedure *equals* Other Surgical Procedure Date *minus* 

Admission/Start of Care Date.

Beginning Position:673Data Source:CalculatedLength:4Type:Alphanumeric

Field 149: OTH\_SURG\_PROC\_CODE\_23

**Description:** Code for surgical or other procedure other than the principal procedure performed

during the period covered by the bill. ICD-10-PCS code.

**Beginning Position:** 677 **Data Source:** Claim

**Length:** 7 **Type:** Alphanumeric

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 33 Last Updated: August, 2019

Field 150:	OTH_SURG_PROC_DAY_23
Description:	Day of other surgical or other procedure <i>equals</i> Other Surgical Procedure Date <i>minus</i>
Beginning Position:	Admission/Start of Care Date.  684 Data Source: Calculated
Length:	4 <b>Type:</b> Alphanumeric
Field 151:	OTH_SURG_PROC_CODE_24
Description:	Code for surgical or other procedure other than the principal procedure performed
•	during the period covered by the bill. ICD-10-PCS code.
<b>Beginning Position:</b>	688 Data Source: Claim
Length:	7 <b>Type:</b> Alphanumeric
Field 152:	OTH_SURG_PROC_DAY_24
Description:	Day of other surgical or other procedure <i>equals</i> Other Surgical Procedure Date <i>minus</i>
Designing Desitions	Admission/Start of Care Date.  695
Beginning Position: Length:	695 <b>Data Source:</b> Calculated 4 <b>Type:</b> Alphanumeric
Field 153:	MS_MDC
Description:	Major Diagnostic Category (MDC) as assigned by Centers for Medicare and Medicaid
	Services (CMS) (formerly Health Care Financing Administration (HCFA)) for hospital
	payment for Medicare beneficiaries. First available 2004.
<b>Beginning Position:</b>	699 <b>Data Source:</b> Assigned
Length:	2 <b>Type:</b> Alphanumeric
Field 154:	MS_DRG
Description:	Centers for Medicare and Medicaid Services (CMS) Diagnosis Related Group (DRG),
	as assigned for hospital payment for Medicare beneficiaries.
Beginning Position:	701 <b>Data Source:</b> Assigned
Length:	3 Type: Alphanumeric
Field 155:	MS_GROUPER_VERSION_NBR
Description:	CMS Medicare Severity Diagnosis Related Grouper (formerly CMS DRG Grouper and
	previously reported as HCFA_GROUPER_VERSION_NBR) version used to assign MS
Beginning Position:	DRG and, MS MDC codes
	704 <b>Data Source:</b> Assigned 5 <b>Type:</b> Alphanumeric
Length: Field 156:	5 <b>Type:</b> Alphanumeric
Length: Field 156:	5 Type: Alphanumeric MS_GROUPER_ERROR_CODE
Length: Field 156: Description:	Type: Alphanumeric  MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  DisableHac = 0 and at least one HAC POA is invalid.
Length: Field 156:	Type: Alphanumeric  MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  No errors. DRG successfully assigned. 19 DisableHac = 0 and at least one HAC POA is invalid or exempt
Length: Field 156: Description:	Type: Alphanumeric  MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  No errors. DRG successfully assigned.  Diagnosis code cannot be used as  Diagnosis code cannot be used as  Diagnosis code cannot be used as
Length: Field 156: Description:	Type: Alphanumeric  MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  ON No errors. DRG successfully assigned.  Diagnosis code cannot be used as principal diagnosis  Record does not meet criteria for any DisableHac is invalid and at least one HAC POA is Nor UDisableHac is invalid and at least one HAC POA is Nor UDisableHac is invalid and at least one HAC POA is Nor UDISABLEHAC is invalid and at least one HAC POA is Nor UDISABLEHAC is invalid and at least one HAC POA is Nor UDISABLEHAC is invalid and at least one HAC POA is Nor UDISABLEHAC is invalid and at least one HAC POA is Nor UDISABLEHAC is invalid and at least one HAC POA is Nor UDISABLEHAC IS INVALID AND
Length: Field 156: Description:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned.  01 Diagnosis code cannot be used as principal diagnosis  02 Record does not meet criteria for any DRG  03 DisableHac is invalid and at least one HAC POA is nor U  04 DisableHac is invalid and at least one HAC POA is nor U  05 DisableHac is invalid and at least one HAC POA is invalid or exempt
Length: Field 156: Description:	Type: Alphanumeric  MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 01 Diagnosis code cannot be used as principal diagnosis 02 Record does not meet criteria for any DRG 03 Invalid Age  Alphanumeric  DisableHac = 0 and at least one HAC POA is invalid or exempt  DisableHac is invalid and at least one HAC POA is invalid or exempt  21 DisableHac is invalid and at least one HAC POA is invalid or exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac is invalid and at least one HAC POA is exempt
Length: Field 156: Description:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned.  01 Diagnosis code cannot be used as principal diagnosis  02 Record does not meet criteria for any DRG  03 DisableHac is invalid and at least one HAC POA is nor U  04 DisableHac is invalid and at least one HAC POA is nor U  05 DisableHac is invalid and at least one HAC POA is invalid or exempt
Length: Field 156: Description:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  No errors. DRG successfully assigned.  Diagnosis code cannot be used as principal diagnosis  Record does not meet criteria for any DRG  Invalid Age  Invalid Sex  Alphanumeric  DisableHac = 0 and at least one HAC POA is invalid or exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac = 0 and there are multiple HACs that
Length: Field 156: Description:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 01 Diagnosis code cannot be used as principal diagnosis 02 Record does not meet criteria for any DRG 03 Invalid Age 04 Invalid Sex 05 Invalid Discharge Status  Alphanumeric  DisableHac = 0 and at least one HAC POA is invalid or exempt  DisableHac = 0 and at least one HAC POA is exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N,
Length: Field 156: Description:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  No errors. DRG successfully assigned.  Diagnosis code cannot be used as principal diagnosis  Record does not meet criteria for any DRG  Invalid Age  Invalid Sex  Alphanumeric  DisableHac = 0 and at least one HAC POA is invalid or exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac = 0 and there are multiple HACs that
Length: Field 156: Description:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  Oo No errors. DRG successfully assigned.  O1 Diagnosis code cannot be used as principal diagnosis  O2 Record does not meet criteria for any DRG  O3 Invalid Age  O4 Invalid Sex  D5 Invalid Discharge Status  D3 Invalid Discharge Status  D4 Illogical Principal Diagnosis (CMS only)  D5 Alphanumeric  DisableHac = 0 and at least one HAC POA is invalid or exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or
Length: Field 156: Description:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned.  01 Diagnosis code cannot be used as principal diagnosis  02 Record does not meet criteria for any DRG  03 Invalid Age  04 Invalid Sex  Diagnosis code cannot be used as principal diagnosis  19 DisableHac is invalid and at least one HAC POA is nor U  DisableHac is invalid and at least one HAC POA is invalid or exempt  DisableHac = 0 and at least one HAC POA is invalid or exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac = 0 and at least one HAC POA is exempt  DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W
Length: Field 156: Description: Coding Scheme:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  Oo No errors. DRG successfully assigned.  O1 Diagnosis code cannot be used as principal diagnosis  O2 Record does not meet criteria for any DRG  O3 Invalid Age  O4 Invalid Sex  D5 Invalid Discharge Status  D3 Invalid Discharge Status  D4 Illogical Principal Diagnosis (CMS only)  D5 Alphanumeric  DisableHac = 0 and at least one HAC POA is invalid or exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac is invalid and at least one HAC POA is exempt  DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or
Length: Field 156: Description: Coding Scheme:  Beginning Position: Length:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 01 Diagnosis code cannot be used as principal diagnosis 02 Record does not meet criteria for any DRG 03 Invalid Age 04 Invalid Sex 05 Invalid Discharge Status 06 Invalid Discharge Status 17 DisableHac is invalid and at least one HAC POA is exempt 06 DisableHac is invalid and at least one HAC POA is exempt 07 DisableHac is invalid and at least one HAC POA is exempt 08 DisableHac is invalid and at least one HAC POA is exempt 09 DisableHac is invalid and at least one HAC POA is exempt 09 DisableHac is invalid and at least one HAC POA is exempt 09 DisableHac is invalid and at least one HAC POA is exempt 09 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y, W, N, U 00 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W 01 Invalid Principal Diagnosis 03 Type: 04 Assigned 05 Alphanumeric
Length: Field 156: Description: Coding Scheme:  Beginning Position:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 19 DisableHac = 0 and at least one HAC POA is invalid or exempt  01 Diagnosis code cannot be used as principal diagnosis  02 Record does not meet criteria for any DRG  03 Invalid Age 22 DisableHac is invalid and at least one HAC POA is invalid or exempt  04 Invalid Sex 23 DisableHac = 0 and at least one HAC POA is exempt  05 Invalid Discharge Status 24 DisableHac is invalid and at least one HAC POA is exempt  06 DisableHac = 0 and at least one HAC POA is exempt  07 DisableHac is invalid and at least one HAC POA is exempt  08 DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W  10 Illogical Principal Diagnosis (CMS only) 25 that have different HAC POA values that are not Y or W  11 Invalid Principal Diagnosis (CMS only) 25 Assigned  22 Assigned  APR_MDC
Length: Field 156: Description: Coding Scheme:  Beginning Position: Length: Field 157: Description:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned.  01 Diagnosis code cannot be used as principal diagnosis  02 Record does not meet criteria for any DRG  03 Invalid Age  04 Invalid Sex  05 Invalid Discharge Status  06 Invalid Discharge Status  17 DisableHac is invalid and at least one HAC POA is invalid or exempt  18 DisableHac is invalid and at least one HAC POA is invalid or exempt  19 DisableHac is invalid and at least one HAC POA is invalid or exempt  10 DisableHac = 0 and at least one HAC POA is exempt  10 DisableHac = 0 and at least one HAC POA is exempt  11 DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W  11 Invalid Principal Diagnosis  10 Type: Assigned Alphanumeric  APR_MDC  Major Diagnostic Category (MDC) as assigned by 3M™ APR-DRG Grouper.
Length: Field 156: Description: Coding Scheme:  Beginning Position: Length: Field 157: Description: Beginning Position:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 01 Diagnosis code cannot be used as principal diagnosis 02 Record does not meet criteria for any DRG 03 Invalid Age 04 Invalid Sex 05 Invalid Discharge Status 06 Invalid Discharge Status 07 Invalid Principal Diagnosis (CMS only) 08 Data Source: 19 DisableHac = 0 and at least one HAC POA is invalid or exempt 09 DisableHac is invalid and at least one HAC POA is invalid or exempt 09 DisableHac is invalid and at least one HAC POA is exempt 09 DisableHac is invalid and at least one HAC POA is exempt 09 DisableHac is invalid and at least one HAC POA is exempt 09 DisableHac is invalid and at least one HAC POA is exempt 09 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  DisableHac is invalid and there are multiple HACs 10 Illogical Principal Diagnosis (CMS only) 25 that have different HAC POA values that are not Y or W  11 Invalid Principal Diagnosis 709 20 Data Source: Assigned 21 Assigned 22 Assigned 23 Assigned 24 Alphanumeric  APR_MDC  Major Diagnostic Category (MDC) as assigned by 3M™ APR-DRG Grouper. 711 Data Source: Assigned
Length: Field 156: Description: Coding Scheme:  Beginning Position: Length: Field 157: Description: Beginning Position: Length:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 19 DisableHac = 0 and at least one HAC POA is invalid or exempt  01 Diagnosis code cannot be used as principal diagnosis  02 Record does not meet criteria for any DRG  03 Invalid Age  04 Invalid Sex  05 Invalid Discharge Status  06 Invalid Discharge Status  07 Illogical Principal Diagnosis  18 Data Source: APR_MDC  Major Diagnostic Category (MDC) as assigned  19 DisableHac = 0 and at least one HAC POA is invalid or exempt DisableHac = 0 and at least one HAC POA is exempt DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W  10 Illogical Principal Diagnosis  11 Invalid Principal Diagnosis  12 APR_MDC  Major Diagnostic Category (MDC) as assigned Alphanumeric  APR_MDC  Apr_MDC  Apr_MDC  Apr_MDC  Major Diagnostic Category (MDC) as assigned Alphanumeric
Length: Field 156: Description: Coding Scheme:  Beginning Position: Length: Field 157: Description: Beginning Position: Length: Field 158:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  No errors. DRG successfully assigned.  Diagnosis code cannot be used as principal diagnosis principal diagnosis  Record does not meet criteria for any DRG  Invalid Age  Invalid Sex  Invalid Discharge Status  Invalid Discharge Status  DisableHac = 0 and at least one HAC POA is invalid or exempt  DisableHac is invalid and at least one HAC POA is invalid or exempt  DisableHac = 0 and at least one HAC POA is invalid or exempt  DisableHac = 0 and at least one HAC POA is exempt  DisableHac = 0 and at least one HAC POA is exempt  DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W  Invalid Principal Diagnosis (CMS only)  Data Source: Assigned  APR_MDC  Major Diagnostic Category (MDC) as assigned by 3M™ APR-DRG Grouper.  APR_DRG
Length: Field 156: Description: Coding Scheme:  Beginning Position: Length: Field 157: Description: Beginning Position: Length:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 01 Diagnosis code cannot be used as principal diagnosis 02 Record does not meet criteria for any DRG 03 Invalid Age 04 Invalid Sex  05 Invalid Discharge Status  06 Illogical Principal Diagnosis (CMS only)  17 Invalid Principal Diagnosis  18 Data Source: 19 DisableHac = 0 and at least one HAC POA is invalid or exempt  20 DisableHac is invalid and at least one HAC POA is invalid or exempt  21 DisableHac = 0 and at least one HAC POA is exempt  22 DisableHac = 0 and at least one HAC POA is exempt  23 DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  24 DisableHac is invalid and at least one HAC POA is exempt  25 DisableHac is invalid and at least one HAC POA is exempt  26 DisableHac is invalid and at least one HAC POA is exempt  27 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  28 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  29 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  20 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  21 DisableHac is invalid and at least one HAC POA is exempt  22 DisableHac is invalid and at least one HAC POA is exempt  23 DisableHac is invalid and at least one HAC POA is exempt  24 DisableHac is invalid and at least one HAC POA is exempt  25 DisableHac is invalid and at least one HAC POA is exempt  26 DisableHac is invalid and at least one HAC POA is exempt  27 DisableHac is invalid and at least one HAC POA is exempt  28 DisableHac is invalid and at least one HAC POA is exempt  29 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y, W, N, U  29 DisableHac is invalid and at least one HAC POA is exempt  29 Disab
Length: Field 156: Description: Coding Scheme:  Beginning Position: Length: Field 157: Description: Beginning Position: Length: Field 158: Description:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 01 Diagnosis code cannot be used as principal diagnosis 02 DRG 03 Invalid Age 04 Invalid Sex 05 Invalid Discharge Status 06 Illogical Principal Diagnosis (CMS only) 17 Invalid Principal Diagnosis 18 Data Source: 19 DisableHac = 0 and at least one HAC POA is invalid or exempt 19 DisableHac is invalid and at least one HAC POA is invalid or exempt 10 DisableHac = 0 and at least one HAC POA is exempt 10 DisableHac = 0 and at least one HAC POA is exempt 11 DisableHac is invalid and at least one HAC POA is exempt 12 DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U 10 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W 11 Invalid Principal Diagnosis 10 Illogical Principal Diagnosis 10 Type: Assigned 11 APR_DRG 12 APR_DRG 13 All Patient Refined (APR) Diagnosis Related Group (DRG) as assigned by 3M™ APR-DRG 14 Patient Refined (APR) Diagnosis Related Group (DRG) as assigned by 3M™ APR-DRG 15 APR_DRG 16 All Patient Refined (APR) Diagnosis Related Group (DRG) as assigned by 3M™ APR-DRG 16 All Patient Refined (APR) Diagnosis Related Group (DRG) as assigned by 3M™ APR-DRG 17 APR_DRG 18 All Patient Refined (APR) Diagnosis Related Group (DRG) as assigned by 3M™ APR-DRG 18 All Patient Refined (APR) Diagnosis Related Group (DRG) as assigned by 3M™ APR-DRG
Length: Field 156: Description: Coding Scheme:  Beginning Position: Length: Field 157: Description: Beginning Position: Length: Field 158: Description: Beginning Position:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 01 Diagnosis code cannot be used as principal diagnosis 02 Record does not meet criteria for any DRG 03 Invalid Age 04 Invalid Sex 05 Invalid Discharge Status 06 Invalid Discharge Status 07 Invalid Discharge Status 08 Invalid Principal Diagnosis 09 Data Source: 10 Tuvalid Principal Diagnosis 10 Data Source: 21 Data Source: 22 DisableHac is invalid and at least one HAC POA is exempt DisableHac is invalid and teat one HAC POA
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Length: Field 156: Description: Coding Scheme:  Beginning Position: Length: Field 157: Description: Beginning Position: Length: Field 158: Description: Beginning Position:	MS_GROUPER_ERROR_CODE  Error codes identify potential variations with MS DRG code assignment  00 No errors. DRG successfully assigned. 01 Diagnosis code cannot be used as principal diagnosis 02 Record does not meet criteria for any DRG 03 Invalid Age 04 Invalid Sex 05 Invalid Discharge Status 06 Invalid Discharge Status 07 Invalid Discharge Status 08 Invalid Principal Diagnosis 09 Data Source: 10 Tuvalid Principal Diagnosis 10 Data Source: 21 Data Source: 22 DisableHac is invalid and at least one HAC POA is exempt DisableHac is invalid and teat one HAC POA

Page 34

DSHS Document #25-15013
Last Updated: August, 2019

DSHS/THCIC www.dshs.texas.gov/THCIC

Description:	Assignment of a risk of mortality score from the All Patient Refined (APR) Diagnosis				
Description	Related Group (DRG) from the 3M™ APR-DRG Grouper. Indicates the likelihood of				
	dying.				
Coding Scheme:	1 Minor				
	2 Moderate				
	3 Major 4 Extreme				
<b>Beginning Position:</b>	717 <b>Data Source:</b> Assigned				
Length:	1 Type: Alphanumeric				
Field 160:	ILLNESS_SEVERITY				
Description:	Assignment of a severity of illness score from the All Patient Refined (APR) Diagnosis				
	Related Group (DRG) from the 3M™ APR-DRG Grouper. Indicates the extent of physiologic decompensation.				
Coding Scheme:	1 Minor				
<b>3</b>	2 Moderate				
	3 Major				
	4 Extreme				
Beginning Position:	0 No class specified 718 <b>Data Source:</b> Assigned				
Length:	1 Type: Alphanumeric				
Field 161:	APR_GROUPER_VERSION_NBR				
Description:	3M™ All Patient Refined Diagnosis Related Grouper version used to assign APR DRG				
	codes, APR MDC codes, Risk of Mortality rankings, and Severity of Illness rankings				
Beginning Position: Length:	719 <b>Data Source:</b> Assigned 5 <b>Type:</b> Alphanumeric				
Field 162:	APR_GROUPER_ERROR_CODE				
Description:	Error codes identify potential variations with APR DRG code assignment				
Coding Scheme:	00 No errors. DRG successfully 12 Gestational age/birth weight conflict (APR only)				
	assigned. 01 Diagnosis code cannot be used as 19 DisableHac = 0 and at least one HAC POA is invalid or				
	principal diagnosis exempt  O2 Record does not meet criteria for any 20 DisableHac is invalid and at least one HAC POA is N or				
	DRG U  03 Invalid Age 21 DisableHac is invalid and at least one HAC POA is				
	invalid or exempt				
	04 Invalid Sex 22 DisableHac = 0 and at least one HAC POA is exempt 05 Invalid Discharge Status 23 DisableHac is invalid and at least one HAC POA is				
	exempt  Of Invalid highweight (AD & ADD only) 24 DisableHas - 0 and there are multiple HACs that				
	06 Invalid birthweight (AP & APR only) 24 DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U				
	09 Invalid discharge age in days (AP & 25 DisableHac is invalid and there are multiple HACs that				
	APR only) have different HAC POA values that are not Y or W 11 Invalid Principal Diagnosis				
Beginning Position:	724 <b>Data Source:</b> Assigned				
Length:	2 <b>Type:</b> Alphanumeric				
Field 163:	ATTENDING_PHYSICIAN_UNIF_ID				
Description:	Attending Physician Uniform Identifier. Unique identifier assigned to the licensed				
	physician expected to certify medical necessity of services rendered, with primary				
	responsibility for the patient's medical care and treatment. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include an				
	individual other than a physician who admits patients to hospitals or who provides				
	diagnostic or therapeutic procedures to inpatients, including psychologists,				
	chiropractors, dentists, nurse practitioners, nurse midwives, and podiatrists				
	authorized by the hospital to admit or treat patients.				
Suppression:	Suppressed when the number of physicians represented in a DRG for a hospital is less than the				
Coding Schame	minimum cell size of five. 999999998 Cell size less than 5				
Coding Scheme:	99999999999999999999999999999999999999				
<b>Beginning Position:</b>	726 <b>Data Source:</b> Assigned				
Length:	10 <b>Type:</b> Alphanumeric				
Field 164:	OPERATING_PHYSICIAN_UNIF_ID				

Page 35

DSHS Document #25-15013
Last Updated: August, 2019

DSHS/THCIC www.dshs.texas.gov/THCIC

**Description:** Operating or other Physician Uniform Identifier (if applicable). Unique identifier

assigned to the operating physician or physician other than the attending physician. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include an individual other than a physician who admits patients to hospitals or who provides diagnostic or therapeutic procedures to inpatients,

including psychologists, chiropractors, dentists, nurse practitioners, nurse midwives,

and podiatrists authorized by the hospital to admit or treat patients.

**Suppression:** Suppressed when the number of physicians represented in a DRG for a hospital is

less than the minimum cell size of five.

**Coding Scheme:** 9999999998 Cell size less than 5

9999999999 Temporary license or license number could not be matched

Beginning Position:736Data Source:AssignedLength:10Type:Alphanumeric

Field 165: ENCOUNTER\_INDICATOR

**Description:** Indicates the number of claims used to create the encounter

Beginning Position:746Data Source:CalculatedLength:2Type:Alphanumeric

Field 166: PROVIDER\_NAME

**Description:** Hospital name provided by the hospital.

**Suppression:** Hospitals with fewer than 50 discharges (Provider ID equals '999999') are assigned the name

'Low Discharge Volume Hospital'. If a hospital has fewer than 5 discharges of a particular

gender, including 'unknown', Hospital Name is blank.

Beginning Position:748Data Source:ProviderLength:55Type:Alphanumeric

### **INPATIENT BASE DATA #2 FILE**

Field 1: RECORD\_ID

**Description:** Record Identification Number. Unique number assigned to identify the record. The

Record\_ID in the ED Inpatient PUDF is not linkable to the Record\_ID in the ED

Outpatient PUDF or ED Research Data Files (RDFs).

Beginning Position:1Data Source:AssignedLength:12Type:Alphanumeric

Field 2: PRIVATE\_AMOUNT

**Description:** Accommodation Charge, Private Room Charge Amount. Calculated using MEDPAR

algorithm. Sum of charges associated with revenue codes 0100-0219, revenue

center 011X, 014X

Beginning Position:13Data Source:CalculatedLength:12Type:Numeric

Field 3: SEMI PRIVATE AMOUNT

**Description:** Accommodation Charge, Semi-private Room Charge Amount. Calculated using

MEDPAR algorithm. Sum of charges associated with revenue codes 0100-0219,

revenue center 010X, 012X-014X, 016X-019X

Beginning Position:25Data Source:CalculatedLength:12Type:Numeric

Field 4: WARD AMOUNT

**Description:** Accommodation Charge, Ward Charge Amount. Calculated using MEDPAR algorithm.

Sum of charges associated with revenue codes 0100-0219, revenue center 015X.

Beginning Position:37Data Source:CalculatedLength:12Type:Numeric

Field 5: ICU AMOUNT

**Description:** Accommodation Charge, Intensive Care Unit Charge Amount. Calculated using

MEDPAR algorithm. Sum of charges associated with revenue codes 0100-0219,

revenue center 020X.

Beginning Position:49Data Source:CalculatedLength:12Type:Numeric

Field 6: CCU AMOUNT

**Description:** Accommodation Charge, Coronary Care Unit Charge Amount. Calculated using

MEDPAR algorithm. Sum of charges associated with revenue codes 0100-0219,

revenue center 021X.

Beginning Position:61Data Source:CalculatedLength:12Type:Numeric

Field 7: OTHER AMOUNT

**Description:** Ancillary Service Charge, Other Charge Amount. Calculated using MEDPAR algorithm.

Sum of charges associated with revenue codes other than 0100-0219, revenue center 0002-0099, 022X-024X, 052X-053X, 055X-060X, 064X-070X, 076X-078X,

090X-095X, 099X.

Beginning Position:73Data Source:CalculatedLength:12Type:Numeric

Field 8: PHARM\_AMOUNT

**Description:** Ancillary Service Charge, Pharmacy Charge Amount. Calculated using MEDPAR

algorithm. Sum of charges associated with revenue codes other than 0100-0219,

revenue center 025X, 026X, and 063X.

Beginning Position:85Data Source:CalculatedLength:12Type:Numeric

Field 9: MEDSURG\_AMOUNT

**Description:** Ancillary Service Charge, Medical/Surgical Supply Charge Amount. Calculated using

MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-

0219, revenue center 027X, 062X.

Beginning Position:97Data Source:CalculatedLength:12Type:Numeric

Field 10: DME\_AMOUNT **Description:** Ancillary Service Charge, Durable Medical Equipment Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue centers 0290-0292, 0294-0299. **Beginning Position: Data Source:** Calculated Length: Numeric 12 Type: Field 11: **USED DME AMOUNT Description:** Ancillary Service Charge, Used Durable Medical Equipment Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 0293. **Beginning Position: Data Source:** Calculated 121 Length: 12 Type: Numeric PT AMOUNT Field 12: **Description:** Ancillary Service Charge, Physical Therapy Charge Amount, Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 042X. **Beginning Position:** 133 **Data Source:** Calculated Length: Numeric 12 Type: **OT AMOUNT** Field 13: **Description:** Ancillary Service Charge, Occupational Therapy Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 043X. **Beginning Position:** 145 **Data Source:** Calculated Length: Numeric 12 Type: SPEECH AMOUNT Field 14: **Description:** Ancillary Service Charge, Speech Pathology Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 044X, 047X. **Beginning Position:** 157 Data Source: Calculated Length: 12 Type: Numeric IT\_AMOUNT Field 15: **Description:** Ancillary Service Charge, Inhalation Therapy Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 041X, 046X. **Beginning Position:** 169 **Data Source:** Calculated Length: 12 Type: Numeric Field 16: **BLOOD\_AMOUNT Description:** Ancillary Service Charge for blood provided during the patient's stay. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 038X. **Beginning Position:** 181 **Data Source:** Calculated Length: Numeric Type: 12 Field 17: **BLOOD ADMIN AMOUNT Description:** Ancillary Service Charge for blood storage and processing related to the patient's stay. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 039X. **Beginning Position:** 193 **Data Source:** Calculated Length: Numeric 12 Type: Field 18: OR AMOUNT **Description:** Ancillary Service Charge, Operating Room Charge amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 036X, 071X-072X. **Beginning Position:** 205 **Data Source:** Calculated Length: Numeric 12 Type: Field 19: LITH AMOUNT **Description:** Ancillary Service Charge, Lithotripsy Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 079X.

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 38 Last Updated: August, 2019

**Data Source:** 

Type:

Calculated

Numeric

**Beginning Position:** 

Length:

217

12

Field 20: CARD\_AMOUNT Description: Ancillary Service Charge, Cardiology Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 048X, 073X. **Beginning Position:** 229 **Data Source:** Calculated Length: Type: Numeric Field 21: **ANES AMOUNT Description:** Ancillary Service Charge, Anesthesia Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 037X. **Beginning Position:** 241 **Data Source:** Calculated Length: Numeric Type: Field 22: LAB AMOUNT **Description:** Ancillary Service Charge, Laboratory Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 030X-031X, 074X-075X. **Beginning Position:** 253 Data Source: Calculated Lenath: 12 Type: Numeric RAD\_AMOUNT Field 23: **Description:** Ancillary Service Charge, Radiology Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 028X, 032X-035X, 040X. Data Source: Calculated **Beginning Position:** 265 Length: Numeric Type: Field 24: MRI\_AMOUNT **Description:** Ancillary Service Charge, MRI Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 061X. **Beginning Position:** Data Source: 277 Calculated Length: 12 Type: Numeric Field 25: OP\_AMOUNT **Description:** Ancillary Service Charge, Outpatient Services Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 049X-050X. **Beginning Position:** 289 **Data Source:** Calculated Length: 12 Type: Numeric Field 26: **ER\_AMOUNT Description:** Ancillary Service Charge, Emergency Room Charge Amount, Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 045X. **Beginning Position: Data Source:** Calculated Length: 12 Type: Numeric Field 27: AMBULANCE AMOUNT **Description:** Ancillary Service Charge, Ambulance Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 054X. **Beginning Position: Data Source:** Calculated 313 Length: Type: Numeric Field 28: PRO FEE AMOUNT **Description:** Ancillary Service Charge, Professional Fee Charge Amount, Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 096X-098X. **Beginning Position:** 325 **Data Source:** Calculated Length: Numeric 12 Type: Field 29: **ORGAN AMOUNT Description:** Ancillary Service Charge, Organ Acquisition Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 081X, 089X. **Beginning Position:** Data Source: Calculated

Page

**39** 

DSHS Document #25-15013

Last Updated: August, 2019

DSHS/THCIC

Length:		12		Type:	Numeric						
Field 30	<b>.</b>		ESRD_AMOUNT								
Descript	ion:	Ancillary Service Charge, End Stage Renal Dialysis Charge Amount. Calculated using									
		MEDPAR algorithm. Sum of charges associated with revenue codes other than 010									
Danimai	Dooition.		0219, revenue center 080X, 082X-085X, 088X. <b>Data Source:</b> Calculated								
Length:	ng Position:	349 12		Type:	Numeric						
Field 31	:		CLINIC_AMOUNT								
Descript	ion:	<del>-</del>		ge, Clinic Visit Ch	arge Amoun	t. Cal	culated using MEDPAR				
		_		-	ith revenue	code	s other than 0100-0219,				
		revenue center (	)51X.								
Length:	ng Position:	361 12		Data Source: Type:	Calculated Numeric						
Field 32	<b>.</b>	OCCUR_CODE_	1	.,,,,							
Descript		Code describing	a sigi	nificant event relat	ting to the c	laim.					
Coding S	Scheme:										
01	Auto accident		27	Date Home Health Place Established or Last R		47	Date cost outlier status begins				
02		ance Involved -	28	Date Comprehensive		A1	Birthdate - Insured A				
03	Accident/ Tort	Accident/Other Liability		Rehabilitation Plan Es or Last Reviewed		A2	Effective Date - Insured A Policy				
04	Accident/ Emp	loyment Related	29	Date Outpatient PT P		А3	Payer A benefits exhausted				
05	Other accident	t		established or last re		A4	Split Bill Date				
06	Crime Victim		30	Date Outpatient ST P established or last re		В1	Birthdate - Insured B				
09	Start of Inferti	ility Treatment	31	Date beneficiary noti		В2	Effective date - Insured B Policy				
	Cycle	,		intent to bill (accomn	•	В3	Payer B benefits exhausted				
10	Last Menstrua		32	Date beneficiary noti intent to bill (procedu		C1	, Birthdate - Insured C				
11	Onset of Symp	otoms/ Illness		treatments)	31.03.01	C2	Effective date - Insured C Policy				
12	Date of Onset Dependent Inc	for a Chronically dividual	37	Date of inpatient hos discharge for non-co		C3	Payer C benefits exhausted				
16	Date of Last T	herapy		transplant patients		DR	Katrina disaster related				
17	Date Outpatie	nt OT Plan Last Reviewed	38	Date treatment starte home IV therapy	ed for	E1	Birthdate - Insured D				
18	Date of Retire Patient/Benefi		39	Date discharged on a continuous course if		E2	Effective date - Insured D Policy				
19		ment - Spouse	40	Scheduled date of ad	mission	E3	Payer D benefits exhausted				
20	Date Guarante	ee of Payment	41	Date of first test of p admission testing	re-	F1	Birthdate - Insured E				
21	Began  Date UR Notice	e Received	42	Date of discharge (ho	ospice	F2	Effective date - Insured E Policy				
22	Date Active Ca		42	only)		F3	Payer E benefits exhausted				
24	Date Insuranc		43	Scheduled date of ca surgery	nceiea	G1	Birthdate - Insured F				
25		Terminated by	44	Date treatment start	ed - OT	G2	Effective date - Insured F Policy				
23	Primary Payer		45	Date treatment starte	ed - ST	G3	Payer F benefits exhausted				
26	Date SNF Bed	Became Available	46	Date treatment starte Cardiac rehabilitation							
Beginnii Length:	ng Position:	373 2		Data Source: Type:	Claim Alphanume	ric					
Field 33	:	OCCUR_DAY_1		турсі	Alphananic	110					
Descript			equa	ls Occurrence Date	e <i>minus</i> Adn	nissio	n/Start of Care Date.				
_	ng Position:	375		Data Source:	Calculated						
Length: Field 34	•	4 OCCUR_CODE_	2	Туре:	Alphanume	:FIC					
Descript	='			nificant event relat	ting to the c	laim.					
Coding S		Same as Field OCC		ODE_1.							
Beginnii Length:	ng Position:	379 2		Data Source: Type:	Claim Alphanume	ric					
Field 35	=	OCCUR_DAY_2			•						
Descript	ion:	Occurrence Day	equa	ls Occurrence Date	e <i>minus</i> Adm	nissio	n/Start of Care Date.				
DSHS/				Page			DSHS Document #25-15013				
www.d	shs.texas.gov/	THCIC		40			Last Updated: August, 2019				

**Beginning Position:** 381 **Data Source:** Calculated Length: **Alphanumeric** Type: Field 36: OCCUR CODE 3 **Description:** Code describing a significant event relating to the claim. **Coding Scheme:** Same as Field OCCUR CODE 1. **Beginning Position:** 385 Data Source: Claim Length: Alphanumeric Type: Field 37: OCCUR\_DAY\_3 **Description:** Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. **Beginning Position:** Data Source: Calculated 387 Lenath: Alphanumeric Type: Field 38: OCCUR\_CODE\_4 Description: Code describing a significant event relating to the claim. Coding Scheme: Same as Field OCCUR CODE 1. **Beginning Position:** 391 **Data Source:** Claim Length: Alphanumeric Type: Field 39: OCCUR\_DAY\_4 Description: Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. **Beginning Position: Data Source:** Calculated Length: **Alphanumeric** Type: Field 40: OCCUR\_CODE\_5 **Description:** Code describing a significant event relating to the claim. Same as Field OCCUR\_CODE 1. **Coding Scheme: Beginning Position: Data Source:** 397 Claim Length: Type: Alphanumeric Field 41: OCCUR\_DAY\_5 **Description:** Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. **Beginning Position:** 399 Data Source: Calculated Length: Type: Alphanumeric Field 42: OCCUR CODE 6 **Description:** Code describing a significant event relating to the claim. Coding Scheme: Same as Field OCCUR CODE 1. **Beginning Position:** 403 **Data Source:** Claim Length: Type: Alphanumeric Field 43: OCCUR\_DAY\_6 **Description:** Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. **Beginning Position:** 405 **Data Source:** Calculated Length: Type: **Alphanumeric** Field 44: OCCUR\_CODE\_7 **Description:** Code describing a significant event relating to the claim. **Coding Scheme:** Same as Field OCCUR\_CODE\_1. **Beginning Position:** 409 Data Source: Claim Length: Alphanumeric Type: Field 45: OCCUR DAY 7 **Description:** Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. **Beginning Position: Data Source:** Calculated 411 Length: 4 Type: Alphanumeric Field 46: OCCUR\_CODE\_8 **Description:** Code describing a significant event relating to the claim. Coding Scheme: Same as Field OCCUR CODE 1. **Beginning Position:** 415 **Data Source:** Claim Length: Alphanumeric Type: Field 47: OCCUR\_DAY\_8 **Description:** Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. Calculated **Beginning Position:** 417 **Data Source:** Length: Type: **Alphanumeric** Field 48: OCCUR\_CODE\_9 Description: Code describing a significant event relating to the claim. Coding Scheme: Same as Field OCCUR CODE 1. **Beginning Position:** 421 **Data Source:** Alphanumeric Length: Type: Field 49: OCCUR\_DAY\_9 DSHS/THCIC DSHS Document #25-15013 Page

41

Last Updated: August, 2019

**Description:** Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. **Beginning Position:** 423 **Data Source:** Calculated Alphanumeric Length: Type: Field 50: OCCUR CODE 10 **Description:** Code describing a significant event relating to the claim. Coding Scheme: Same as Field OCCUR CODE 1. **Beginning Position:** 427 Data Source: Claim Length: Alphanumeric Type: Field 51: OCCUR\_DAY\_10 **Description:** Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. **Beginning Position:** 429 Data Source: Calculated Length: Alphanumeric Type: Field 52: OCCUR\_CODE\_11 **Description:** Code describing a significant event relating to the claim. Same as Field OCCUR\_CODE 1. **Coding Scheme: Beginning Position:** 433 **Data Source:** Claim Length: Type: Alphanumeric Field 53: OCCUR\_DAY\_11 **Description:** Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. **Beginning Position:** 435 **Data Source:** Calculated Length: Type: **Alphanumeric** OCCUR CODE 12 Field 54: **Description:** Code describing a significant event relating to the claim. Coding Scheme: Same as Field OCCUR CODE 1. **Beginning Position:** 439 **Data Source:** Claim Length: Alphanumeric Type: Field 55: OCCUR\_DAY\_12 Description: Occurrence Day equals Occurrence Date minus Admission/Start of Care Date. **Beginning Position: Data Source:** Calculated 441 Length: Type: Alphanumeric Field 56: OCCUR SPAN CODE 1 Description: Code describing a significant event relating to the claim that may affect payer processing. Oualifying stay dates (for SNF use only) 78 SNF prior stay dates **Coding Scheme:** 70 71 Prior stay dates 80 Prior Same SNF prior stay dates for Payment Ban Purposes 72 First/Last Visit 81 Antepartum Days at Reduced Level of Care 73 Benefit eligibility period Μ0 QIO/UR approved stay dates 74 Noncovered level of care/Leave of absence М1 Provider liability - no utilization 75 SNF level of care M2 Inpatient respite dates 76 Patient Liability Period М3 ICF level of care 77 Provider Liability - Utilization Charged Μ4 Residential level of care **Beginning Position:** 445 **Data Source:** Claim Length: Alphanumeric Type: Field 57: OCCUR SPAN FROM 1 **Description:** Occurrence Span From equals Beginning Date of Event minus Admission/Start of Care Date. **Beginning Position: Data Source:** 447 Calculated Length: Alphanumeric Type: Field 58: OCCUR\_SPAN\_THRU\_1 Description: Occurrence Span Thru equals Ending Date of Event minus Admission/Start of Care Date. **Beginning Position:** 453 **Data Source:** Calculated Lenath: **Alphanumeric** Type: Field 59: OCCUR\_SPAN\_CODE\_2 **Description:** Code describing a significant event relating to the claim that may affect payer processing. **Coding Scheme:** Same as Field OCCUR\_CODE\_SPAN\_1. **Beginning Position:** 459 **Data Source:** Claim Length: Alphanumeric Type: Field 60: OCCUR\_SPAN\_FROM\_2 **Description:** Occurrence Span From equals Beginning Date of Event minus Admission/Start of Care Date. DSHS/THCIC DSHS Document #25-15013 Page

42

Last Updated: August, 2019

**Beginning Position:** 461 **Data Source:** Calculated Length: Alphanumeric Type: Field 61: OCCUR SPAN THRU **Description:** Occurrence Span Thru equals Ending Date of Event minus Admission/Start of Care Date. **Beginning Position:** 467 **Data Source:** Calculated Lenath: Alphanumeric Type: Field 62: OCCUR SPAN CODE 3 **Description:** Code describing a significant event relating to the claim that may affect payer processing. **Coding Scheme:** Same as Field OCCUR\_CODE\_SPAN\_1. **Beginning Position:** 473 **Data Source:** Claim Length: Alphanumeric Type: Field 63: OCCUR\_SPAN\_FROM\_3 Description: Occurrence Span From equals Beginning Date of Event minus Admission/Start of Care Date. **Beginning Position:** 475 **Data Source:** Calculated Alphanumeric Length: Type: Field 64: OCCUR SPAN THRU 3 **Description:** Occurrence Span Thru equals Ending Date of Event minus Admission/Start of Care **Beginning Position:** 481 Data Source: Calculated Length: Alphanumeric 6 Type: Field 65: OCCUR\_SPAN\_CODE\_4 Description: Code describing a significant event relating to the claim that may affect payer processina. **Coding Scheme:** Same as Field OCCUR\_CODE\_SPAN\_1. **Beginning Position: Data Source:** 487 Claim Length: Type: Alphanumeric Field 66: **OCCUR SPAN FROM 4** Description: Occurrence Span From equals Beginning Date of Event minus Admission/Start of Care Date. **Beginning Position:** 489 **Data Source:** Calculated Length: 6 Type: Alphanumeric Field 67: OCCUR\_SPAN\_THRU\_4 **Description:** Occurrence Span Thru equals Ending Date of Event minus Admission/Start of Care Date. **Beginning Position:** 495 Data Source: Calculated Lenath: **Alphanumeric** Type: Field 68: CONDITION\_CODE\_1 **Description:** Code describing a condition relating to the claim. **Coding Scheme:** 01 Military service related 11 Disabled beneficiary but no 27 Patient referred to a sole community hospital for a LGHP coverage exists 02 Condition is employment diagnostic laboratory test 17 Patient is homeless related 28 Patient and/or spouse's EGHP is 03 Patient covered by insurance 18 Maiden name retained secondary to Medicare not reflected here 19 Child retains mother's name Disabled beneficiary and/or 29 04 Information only bill. family member's LGHP is 20 Beneficiary requested billing secondary to Medicare 05 Lien has been filed 21 Billing for denial notice 30 Non-research services provided 06 ESRD patient in first 18 months to patients enrolled in a of entitlement covered by EGHP 22 Patient on multiple drug qualified clinical trial regimen 07 Treatment of non-terminal 31 Patient is student (full time -23 Home care giver available condition for hospice patient day) 08 Beneficiary would not provide 24 Home IV patient also receiving Patient is student 32 information concerning other **HHA** services (cooperative/work study insurance coverage 25 Patient is non-US resident program) 09 Neither patient or spouse is Patient is student (full time -33 26 VA eligible patient chooses to employed night) receive services in a Medicare 10 Patient and/or spouse is certified facility 34 Patient is student (part-time) employed but no EGHP exists DSHS/THCIC DSHS Document #25-15013 Page

43

Last Updated: August, 2019

36	General care patient in a	74	Home	AM	Non-emergency medically
37	special unit Ward accommodation at patient	75	Home - 100% reimbursement		necessary stretcher transport required
	request	76	Back-up in facility dialysis	AN	Pre-admission screening not required
38	Semi-private room not available	77	Provider accepts or is obligated/required due to a	В0	Medicare coordinated care demonstration claim
39	Private room medically necessary		contractual arrangement or law to accept payment by a primary payer as payment	В1	Beneficiary is ineligible for
40	Same day transfer	78	New coverage not implemented	В4	demonstration program  Admission unrelated to
41	Partial hospitalization	70	by HMO		discharge on same day
42	Continuing care not related to inpatient admission	79 80	CORF services provided offsite  Home dialysis - nursing facility	BP	Gulf Oil Spill of 2010
43	Continuing care not provided within prescribed postdischarge	81	C-section/Inductions <39	C1 C2	Approved as billed
	window	82	weeks-Medical Necessity C-section/Inductions <39		Automatic approval as billed based on focused review
44	Inpatient admission changed to outpatient	02	weeks-Elective	C3	Partial approval
45	Ambiguous Gender Category	83	C-section/Inductions 39 weeks	C4	Admission/services denied
46	Non-availability statement on	84	or greater Dialysis for Acute Kidney Injury	C5 C6	Postpayment review applicab
47	file Transfer from another Home		(AKI)		Admission Preauthorization
"	Health Agency	85	Delayed Recertification of Hospice Terminal Illness	C7 D0	Extended Authorization Changes to Service Dates
48	Psychiatric residential treatment centers for children	86	Additional Hemodialysis	D0	Changes to Charges
	and adolescents (RTCs)		Treatment with Medical Justification	D3	Second or Subsequent Interior
49	Product replacement within product lifecycle	Α0	TRICARE external partnership		PPS Bill
50	Product Replacement for Known Recall of a Product	A1	program EPSDT/CHAP	D4	Change in clinical codes (ICD for diagnosis and/or procedu codes.
51	Attestation of Unrelated Outpatient Nondiagnostic	A2	Physically handicapped children's program	D5	Cancel to correct Insured's II
	Services	А3	Special Federal Funding	D6	or Provider ID Cancel Only to Repay a
52	Out of Hospice Service Area	A4	Family planning		Duplicate or OIG Overpayme
53	Initial placement of a medical device provided as part of a	A5	Disability	D7	Change to Make Medicare th Secondary Payer
54	clinical trial or a free sample No Skilled Home Health Visits in	A6	Vaccines/Medicare 100% payment	D8	Change to Make Medicare the Primary Payer
	Billing Period. Policy Exception  Documented at the Home	A9	Second opinion surgery	D9	Any Other Change
	Health Agency	AA	Abortion performed due to rape	DR	Disaster related
55	SNF bed not available	AB	Abortion performed due to incest	E0	Changes in Patient Status
56	Medical appropriateness	AC	Abortion performed due to	G0	Distinct Medical Visit
57	SNF readmission		serious fatal genetic defect, deformity, or abnormality	H0	Delayed Filing, Statement of Intent Submitted
58	Terminated Medicare+Choice organization enrollee	AD	Abortion performed due to life endangering physical condition	H2	Discharge by a Hospice Provider for Cause
59	Non-primary ESRD facility	AE	Abortion performed due to	Н3	Reoccurrence of GI Bleed
60	Day outlier		physical health of mother that is not life endangering		Comorbid Category
61	Cost outlier	AF	Abortion performed due to	H4	Reoccurrence of Pneumonia Comorbid Category
66	Provider does not wish cost outlier payment		emotional/psychological health of mother	Н5	Recurrence of Pericarditis Comorbid Category
67	Beneficiary elects not to use life time reserve (LTR) days	AG	Abortion performed due to social or economic reasons	P1	Do not Resuscitate Order (D
68	Beneficiary elects to use life time reserve (LTR) days	АН	Elective abortion	P7	Direct Inpatient Admission fr Emergency Room
69	IME/DGME/N&AH Payment Only	ΑI	Sterilization	R1	Request for reopening Reason
70	Self-administered anemia management drug	AJ	Payer responsible for co- payment		Code - Mathematical or Computational Mistake
71	Full care in unit	AK	Air ambulance required	R2	Request for reopening Reaso
72	Self-care in unit	AL	Specialized treatment/bed	R3	Code -Inaccurate Data Entry Request for reopening Reaso
73	Self-care training		unavailable		Code - Misapplication of a Fe Schedule
SHS/	THCIC		Dogo		DSHS Document #25-150
	Ishs.texas.gov/THCIC		Page		Last Updated: August, 20

R4	Request for re Code - Compu	opening Reason iter Errors	R7	Request for reopening Code - Corrections ot		WO	United Mine Workers of America (UMWA) Demonstration
R5		opening Reason		clerical errors			Indicator
		ectly Identified	R8	Request for reopening		W2	Duplicate of Original Bill
D.C	Duplicate Clair			Code - New and Mate Evidence	:i idi	W3	Level I Appeal
R6		opening Reason Clerical Errors or	R9	Request for reopening	a Reason	W4	Level II Appeal
		nd Omissions not	IC)	Code - Faulty Evidence			• •
	Specified in R	1-R5 above				W5	Level III Appeal
Beginnin Length:	g Position:	501 2		Data Source: Type:	Claim Alphanum	ıeric	
ield 69:		CONDITION_	CODE_	_2			
Descript				dition relating to t	he claim.		
Coding S		Same as Field CC	NDITIC				
	g Position:	503		Data Source:	Claim		
Length: Field 70:		2 CONDITION (	CODE	Type:	Alphanum	eric	
		CONDITION_O			ho claim		
Descript Coding S		Same as Field 68		dition relating to t	ile Cidiiii.		
	cneme: g Position:	505	•	Data Source:	Claim		
ength:	g : 05:00:11	2		Type:	Alphanum	ieric	
ield 71:		CONDITION_	CODE		p		
Descript	ion:	<del></del>		_ · dition relating to t	he claim.		
Coding S		Same as Field CC					
Beginnin	g Position:	507		Data Source:	Claim		
ength:		2		Туре:	Alphanum	eric	
Field 72	==	CONDITION_		_			
Descrip				dition relating to t	:he claim.		
Coding S		Same as Field CO	NDITIC		- ·		
	g Position:	509		Data Source:	Claim	. aula	
Length: Field 73:		CONDITION (		Type:	Alphanum	eric	
rieia 73: Descript		CONDITION_O			ho claim		
•		Same as Field CC		dition relating to t	ne ciaim.		
Coding S Beginnin	cneme: g Position:	511	אווזטאיי	Data Source:	Claim		
Length:	9 . 00	2		Type:	Alphanum	ieric	
Field 74:		CONDITION_	CODE	7.			
Descript	ion:			 idition relating to t	he claim.		
Coding S		Same as Field CC					
	g Position:	513		Data Source:	Claim		
Length:		2		Туре:	Alphanum	eric	
Field 75:		CONDITION_					
Descript			_	dition relating to t	:he claim.		
Coding S		Same as Field CC	אווטאנ		Claim		
beginnin Length:	g Position:	515 2		Data Source: Type:	Claim Alphanum	oric	
Field 76:		VALUE_CODE	1	.,,,.	, apriarium	CITC	
Descript				mation that may at	ffect naver	proces	ssina.
Coding S		Sout acoci ibility	,	chac may a	ccc payer	p. 0003	·-····9·
01		semi-private rate	09	Coinsurance amount calendar year	in the first	15	Worker's compensation
02	Hospital has n rooms	o semi-private	10	Lifetime reserve amore second calendar year		16	Public health service (PHS) or other federal agency
04	Inpatient profe component ch combined bille	arges which are	11	Coinsurance amount second calendar year		21	Catastrophic
05	Professional co		12	Working aged		22	Surplus
	included in ch	arges and also ely to carrier		beneficiary/spouse wi employer group healt	th plan	23	Recurring monthly income
U.S	billed Separate		13	ESRD beneficiary in a		24	Medicaid Rate Code
06	Blood deductil	ole		coordination period w		~-	Off
	Blood deductil	ve amount in the	14	coordination period w employer group healt No fault, including au	th plan	25	Offset to the patient - payment amount - prescription drugs
06	Blood deductil Life time reser first calendar	ve amount in the	14	employer group healt	th plan	25	Offset to the patient - payment amount - prescription drugs  DSHS Document #25-15013

26		patient - payment	53	Cardiac rehab visits	AA	-5,,
	amount - hear services		54	Newborn birth weight	in grams	assessments, allowances or health care related taxes - payer A
27	Offset to the p amount - vision services	patient - payment on and eye	55	Eligibility threshold fo care	r charity AB	
28	Offset to the pamount - dent	patient - payment cal services	56	Skilled nurse - home	visit hours B1	education) - payer A Deductible payer B
29		patient - payment opractic services	57	Home health aide - ho hours	ome visit B2	Coinsurance payer B
30	Preadmission	•	58	Arterial blood gas	В3	Estimated responsibility payer
31	Patient Liabilit	y Amount	59	Oxygen saturation	В7	B Co-payment payer B
32	Multiple patier transport	nt ambulance	60	HHA branch MSA	ВА	3 , 3 ,
33	•	patient - payment atric services	61	Place of Residence wh service is furnished (H hospice)		assessments, allowances or health care related taxes - payer B
34	Offset to the pamount - othe	patient - payment er medical	66	Medicaid spend down	amount BB	Other assessments or allowances (e.g., medical
	services		67	Peritoneal dialysis		education) - payer B
35	amount - heal	patient - payment th insurance	68	EPO-drug	C1	
37	premiums Units of blood	furnished	69	State charity care per	centage C2	Coinsurance payer C
38	Blood deductib		80	Covered Days	C3	Estimated responsibility payer C
39	Units of blood	replaced	81	Non-covered Days	C7	Co-payment payer C
40	New coverage by HMO	not implemented	82	Co-insurance Days	CA	assessments, allowances or
41	Black lung		83	Lifetime Reserve Days	5	health care related taxes - payer C
42	VA		84	Shorter Duration Hem	nodialysis CB	Other assessments or allowances (e.g., medical education) - payer C
43	Disabled bene	ficiary under age	A0	Special zip code repor	ting D3	, , ,
	65 with LGHP		A1	Deductible payer A	D4	Clinical Trial Number Assigned
44	Amount provid		A2	Coinsurance payer A		by NLM/NIH
	charges but hi	igher than	А3	Estimated responsibili		, ,
45	Accident hour		A4	Covered self-administ	FC rable:	Patient Paid Amount
46	Number of gra	ace days	A5	drugs - emergency Covered self-administ	FD	Manufacturer for a Medical
47	Any liability in	surance	AS	drugs - administrable and situation furnishe	in form	
48	Hemoglobin re	eading	4.6	patient	rable Y1	Service is Delivered Part A Demonstration Payment
49	Hematocrit rea	ading	A6	Covered self-administ drugs - diagnostic stu other	45.6	,
50	Physical Thera	pv visits	A7	Co-payment payer A		,
51	Occupational	•	A8	Patient weight	Y3	Part B Coinsurance
52	Speech Therag	.,	Α9	Patient height	Y4	Conventional Provider Payment
32	эреесп тпегар	Dy VISILS	, 13	radient neight	Y5	Part B Deductible
Beginnii Length:	ng Position:	517 2		Data Source: Type:	Claim Alphanumeric	
Field 77	:	VALUE_AMOU	NT 1	ı ype.	Alphanument	
Descript		Dollar amount	_	ay be affected.		
Beginnir	ng Position:	519		Data Source:	Claim	
Length:		9		Туре:	Alphanumeric	

Field 78: VALUE\_CODE\_2 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field VALUE\_CODE\_1. **Beginning Position:** 528 **Data Source:** Claim Length: Type: **Alphanumeric** Field 79: **VALUE AMOUNT 2 Description:** Dollar amount that may be affected. **Beginning Position:** 530 Data Source: Claim Length: Alphanumeric Type: VALUE\_CODE\_3 Field 80: **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field VALUE CODE 1. **Beginning Position:** 539 **Data Source:** Claim Length: Type: Alphanumeric Field 81: VALUE\_AMOUNT\_3 **Description:** Dollar amount that may be affected. **Beginning Position: Data Source:** Claim Length: Type: Alphanumeric Field 82: VALUE\_CODE\_4 **Description:** Code describing information that may affect payer processing. Same as Field VALUE\_CODE 1. **Coding Scheme: Beginning Position:** 550 **Data Source:** Claim Length: Type: Alphanumeric Field 83: **VALUE AMOUNT 4 Description:** Dollar amount that may be affected. **Beginning Position: Data Source:** 552 Claim Length: Type: Alphanumeric Field 84: VALUE CODE 5 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field VALUE\_CODE\_1. **Beginning Position:** 561 **Data Source:** Claim Lenath: Alphanumeric Type: Field 85: **VALUE AMOUNT 5** Description: Dollar amount that may be affected. **Beginning Position: Data Source:** 563 Claim Length: Type: Alphanumeric Field 86: **VALUE CODE 6 Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field VALUE\_CODE\_1. **Beginning Position:** 572 **Data Source:** Claim Length: Alphanumeric Type: Field 87: **VALUE AMOUNT 6 Description:** Dollar amount that may be affected. **Beginning Position:** 574 **Data Source:** Claim Length: Alphanumeric Type: Field 88: VALUE\_CODE\_7 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field VALUE\_CODE\_1. **Beginning Position:** 583 **Data Source:** Claim Length: Alphanumeric Type: Field 89: **VALUE AMOUNT 7 Description:** Dollar amount that may be affected. **Beginning Position:** 585 **Data Source:** Claim Length: Type: Alphanumeric Field 90: VALUE\_CODE\_8 Code describing information that may affect payer processing. **Description: Coding Scheme:** Same as Field VALUE\_CODE\_1. **Beginning Position:** 594 **Data Source:** Claim Length: **Alphanumeric** 2 Type: Field 91: **VALUE AMOUNT 8 Description:** Dollar amount that may be affected. **Beginning Position:** 596 **Data Source:** Claim DSHS/THCIC DSHS Document #25-15013 Page

47

www.dshs.texas.gov/THCIC

Last Updated: August, 2019

Length: Type: Alphanumeric Field 92: VALUE\_CODE\_9 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field VALUE\_CODE\_1. **Beginning Position: Data Source:** Alphanumeric Length: Type: Field 93: VALUE\_AMOUNT\_9 Description: Dollar amount that may be affected. **Beginning Position: Data Source:** Claim Length: Alphanumeric Type: Field 94: VALUE\_CODE\_10 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field VALUE CODE 1. **Beginning Position: Data Source:** 616 Claim Alphanumeric Lenath: Type: Field 95: **VALUE AMOUNT 10 Description:** Dollar amount that may be affected. **Beginning Position:** 618 **Data Source:** Claim Length: Alphanumeric Type: VALUE\_CODE\_11 Field 96: **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field VALUE CODE 1. **Beginning Position:** 627 **Data Source:** Claim Length: Alphanumeric Type: Field 97: **VALUE AMOUNT 11** Description: Dollar amount that may be affected. **Beginning Position:** 629 Data Source: Claim Length: Alphanumeric Type: Field 98: VALUE\_CODE\_12 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field VALUE\_CODE\_1. **Beginning Position:** 638 **Data Source:** Claim Length: Alphanumeric Type: Field 99: **VALUE AMOUNT 12 Description:** Dollar amount that may be affected. **Beginning Position:** 640 **Data Source:** Claim Length: 9 Alphanumeric Type:

## **INPATIENT CHARGES DATA FILE**

Field 1: RECORD\_ID

**Description:** Record Identification Number. Unique number assigned to identify the record. First

available 1st quarter 2002. Does NOT match the RECORD\_ID in THCIC Research

Data Files (RDF's).

**Beginning Position: Data Source:** Assigned 1 Length: Alphanumeric 12 Type:

Field 2: REVENUE\_CODE

**Description:** Code corresponding to each specific accommodation, ancillary service or billing

calculation related to the services being billed.

### **Coding Scheme:**

DSHS/	ГНСІС		Page		DSHS Document #25-15013
0131	Room charges for semi-private - 3/4 beds - rooms - medical/surgical/GYN	0154	Room charges for ward rooms - psychiatric		care)
0130	Room charges for semi-private - 3/4 beds - rooms - general	0153	Room charges for ward rooms - pediatric	0192	Room charges for subacute care - Level II (comprehensive
0129	Room charges for semi-private rooms - other	0152	Room charges for ward rooms - obstetrics	0191	Room charges for subacute care - Level I (skilled care)
0128	Room charges for semi-private rooms - rehabilitation	0151	Room charges for ward rooms - medical/surgical/GYN	0190	Room charges for subacute care - general
0127	Room charges for semi-private rooms - oncology	0150	Room charges for ward rooms - general	0189	Room charges for LOA - other
0126	Room charges for semi-private rooms - detoxification	0149	Room charges for private (deluxe) rooms - other	0185	Room charges for LOA – nursing home (for hospitalization)
0125	Room charges for semi-private rooms - hospice	0148	Room charges for private (deluxe) rooms - rehabilitation	0183	Room charges for LOA - therapeutic leave
0124	Room charges for semi-private rooms - psychiatric	0147	Room charges for private (deluxe) rooms - oncology	0182	Room charges for LOA - patient convenience-charges billable
0123	Room charges for semi-private rooms - pediatric	0146	Room charges for private (deluxe) rooms - detoxification	0180	Room charges for LOA - general
0122	Room charges for semi-private rooms - obstetrics	0145	Room charges for private (deluxe) rooms - hospice	0179	Room charges for nursery - other
0121	Room charges for semi-private rooms - medical/surgical/GYN	0144	Room charges for private (deluxe) rooms - psychiatric	0174	Room charges for nursery - newborn level IV
0120	Room charges for semi-private rooms - general	0143	Room charges for private (deluxe) rooms - pediatric	0173	Room charges for nursery - newborn level III
0119	Room charges for private rooms - other	0142	medical/surgical/GYN Room charges for private (deluxe) rooms - obstetrics	0172	Room charges for nursery - newborn level II
0118	Room charges for private rooms - rehabilitation	0141	Room charges for private (deluxe) rooms -	0171	Room charges for nursery - newborn level I
0117	Room charges for private rooms - oncology	0140	Room charges for private (deluxe) rooms - general	0170	Room charges for nursery - general
0116	Room charges for private rooms - detoxification	0139	Room charges for semi-private - 3/4 beds - rooms - other	0169	Room charges for other rooms - other
0115	Room charges for private rooms - hospice	0138	Room charges for semi-private - 3/4 beds - rooms - rehabilitation	0167	Sterile Environment     Room charges for other rooms     self care
0114	Room charges for private rooms - psychiatric	0137	Room charges for semi-private - 3/4 beds - rooms - oncology	0164	general  Room charges for other rooms  - Sterile Environment
0113	Room charges for private rooms - pediatric	0127	- 3/4 beds - rooms - detoxification	0160	other  Room charges for other rooms -
0112	Room charges for private rooms - obstetrics	0136	- 3/4 beds - rooms - hospice  Room charges for semi-private	0159	rehabilitation  Room charges for ward rooms -
0111	Room charges for private rooms - medical/surgical/GYN	0135	- 3/4 beds - rooms - psychiatric Room charges for semi-private	0158	oncology  Room charges for ward rooms
0110	Room charges for private rooms - general	0134	Room charges for semi-private	0157	Room charges for ward rooms -
0101	All-inclusive room charges	0133	Room charges for semi-private - 3/4 beds - rooms - pediatric	0156	Room charges for ward rooms - detoxification
0100	All-inclusive room charges plus ancillary	0132	Room charges for semi-private - 3/4 beds - rooms - obstetrics	0155	Room charges for ward rooms - hospice

0193	Room charges for subacute care - Level III (complex care)	0239	Incremental nursing care - other	0289	Oncology - other
0194	Room charges for subacute care - Level IV (intensive care)	0240	All-inclusive ancillary - general	0290	DME - general
0199	Room charges for subacute care - other	0241	All-inclusive ancillary - basic	0291	DME - rental
0200	Room charges for intensive	0242	All-inclusive ancillary - comprehensive	0292	DME - purchase of new
0201	care - general Room charges for intensive	0243	All-inclusive ancillary - specialty	0293	DME - purchase of used
0202	care - surgical Room charges for intensive	0249	All-inclusive ancillary - other	0294	DME - supplies/drugs for DME effectiveness
	care - medical	0250	Pharmacy - general	0299	DME - other equipment
0203	Room charges for intensive care - pediatric	0251	Pharmacy - generic drugs	0300	Laboratory - general
0204	Room charges for intensive care - psychiatric	0252	Pharmacy - nongeneric drugs	0301	Laboratory - chemistry
0206	Room charges for intensive care - intermediate intensive	0253	Pharmacy - take-home drugs	0302	Laboratory - immunology
0207	care unit (ICU) Room charges for intensive	0254	Pharmacy - drugs incident to other diagnostic services	0303	Laboratory - renal patient (home)
	care - burn care	0255	Pharmacy - drugs incident to radiology	0304	Laboratory - nonroutine dialysis
0208	Room charges for intensive care - trauma	0256	Pharmacy - experimental drugs	0305	Laboratory - hematology
0209	Room charges for intensive care - other	0257	Pharmacy - nonprescription	0306	Laboratory - bacteriology and microbiology
0210	Room charges for coronary care - general	0258	Pharmacy - IV solutions	0307	Laboratory - urology
0211	Room charges for coronary care - myocardial infarction	0259	Pharmacy - other	0309	Laboratory - other
0212	Room charges for coronary care - pulmonary care	0260	IV Therapy - general	0310	Laboratory pathological - general
0213	Room charges for coronary care	0261	IV Therapy - infusion pump	0311	Laboratory pathological - cytology
0214	<ul> <li>heart transplant</li> <li>Room charges for coronary care</li> </ul>	0262	IV Therapy - pharmacy services	0312	Laboratory pathological - histology
	<ul> <li>intermediate coronary care unit (CCU)</li> </ul>	0263	IV Therapy - drug/supply delivery	0314	Laboratory pathological -
0219	Room charges for coronary care - other	0264	IV Therapy - supplies	0319	biopsy Laboratory pathological - other
0220	Special charges - general	0269	IV Therapy - other	0320	Radiology - diagnostic - general
0221	Special charges - admission	0270	Medical surgical supplies and devices - general	0321	Radiology - diagnostic -
0222	charge Special charges - technical	0271	Medical surgical supplies and devices - nonsterile	0322	angiocardiography Radiology - diagnostic -
0223	Special charges - UR service	0272	Medical surgical supplies and devices - sterile	0323	arthrography Radiology - diagnostic -
0224	charge Special charges - late	0273	Medical surgical supplies and devices - take-home	0324	arteriography Radiology - diagnostic - chest
0229	discharge, medically necessary  Special charges - other	0274	Medical surgical supplies and		x-ray
		0275	devices - prosthetic/orthotic  Medical surgical supplies and	0329	Radiology - diagnostic - other
0230	Incremental nursing care - general		devices - pacemaker	0330	Radiology - therapeutic and/or chemotherapy administration -
0231	Incremental nursing care - nursery	0276	Medical surgical supplies and devices - intraocular lens (IOL)	0331	general  Radiology - therapeutic and/or
0232	Incremental nursing care - OB	0277	Medical surgical supplies and devices - oxygen - take-home		chemotherapy administration - chemotherapy - injected
0233	Incremental nursing care - ICU (includes transitional care)	0278	Medical surgical supplies and devices - other implants	0332	Radiology - therapeutic and/or chemotherapy administration -
0234	Incremental nursing care - CCU (includes transitional care)	0279	Medical surgical supplies and devices - other	0333	chemotherapy - oral Radiology - therapeutic and/or
0235	Incremental nursing care - hospice	0280	Oncology - general		chemotherapy administration - radiation therapy

	THCIC shs.texas.gov/THCIC		Page 51		DSHS Document #25-15013 Last Updated: August, 2019
> 0110 =	TVA			5521	by Member to RHC/FQHC
0389	Blood - other	0442	Speech-language pathology - hourly charge	0520 0521	Freestanding Clinic - general  Freestanding Clinic - Clinic Visit
0387	Blood - other derivatives (cryoprecipitate)	0441	Speech-language pathology - visit charge	0519	Clinic - other
386	Blood - other components	0440	Speech-language pathology - general	0517	Clinic - family practice
385	Blood - leukocytes	0439	Occupational therapy - other	0516	Clinic - urgent care
384	Blood - platelets	0434	Occupational therapy - evaluation or reevaluation	0515	Clinic - pediatric
)382	Blood - whole blood  Blood - plasma	0433	Occupational therapy - group rate	0514	Clinic - OB/GYN
0381	Blood - packed red cells	0432	Occupational therapy - hourly charge	0512	Clinic - psychiatric
0380	Blood - general	0431	Occupational therapy - visit charge	0511	Clinic - chronic pain  Clinic - dental
379	Anesthesia - other	0430	Occupational therapy - general	0510 0511	Clinic - general  Clinic - chronic pain
374	Anesthesia - acupuncture	0429	Physical therapy - other	0509	Outpatient services - other
372	Anesthesia - incident to other diagnostic services	0424	Physical therapy - evaluation or reevaluation	0500	Outpatient services - general
371	Anesthesia - incident to radiology	0423	charge Physical therapy - group rate	0499	Ambulatory surgical care - other
370	Anesthesia - general	0422	Physical therapy - hourly	0490	Ambulatory surgical care - general
369	Operating room services - other	0421	Physical therapy - visit charge	0489	Cardiology - other
367	Operating room services - kidney transplant	0420	Physical therapy - general	0483	Cardiology - echocardiology
JUZ	organ transplant other than kidney	0419	hyperbaric oxygen therapy Respiratory services - other	0482	Cardiology - stress test
361	Operating room services - minor surgery Operating room services -	0413	inhalation Respiratory services -	0480 0481	Cardiology - general  Cardiology - cardiac cath lab
	Operating room services - general	0410	Respiratory services -	0479	Audiology - other
)359 )360	CT scan - other	0409 0410	Other imaging services - other  Respiratory services - general	0472	Audiology - treatment
352	CT scan - body			0471	Audiology - diagnostic
351	CT scan - head	0404	screening mammography Other imaging services - PET	0470	Audiology - general
350	CT scan - general	0403	ultrasound Other imaging services -	0469	Pulmonary function - other
349	Nuclear medicine - other	0402	diagnostic mammography Other imaging services -	0460	Pulmonary function - general
344	Nuclear medicine - therapeutic radiopharmaceuticals	0401	Other imaging services -	0459	Emergency room - other
343	Nuclear medicine - diagnostic radiopharmaceuticals	0400	Other imaging services - general	0456	EMTALA screening Emergency room - urgent care
342	Nuclear medicine - therapeutic procedures	0399	Blood and blood component administration, storage and processing - other	0452	services Emergency room - beyond
341	Nuclear medicine - diagnostic procedures	0399	processing – processing and storage	0451	Emergency room - EMTALA emergency medical screening
340	Nuclear medicine - general	0392	Blood and blood component administration, storage and	0450	Emergency room - general
,555	chemotherapy administration - other		administration, storage and processing - administration	0449	Speech-language pathology - other
)339	chemotherapy - IV Radiology - therapeutic and/or	0391	processing - general  Blood and blood component	0444	Speech-language pathology - evaluation or reevaluation
0335	Radiology - therapeutic and/or chemotherapy administration -	0390	Blood and blood component administration, storage and	0443	Speech-language pathology - group rate

0522	Freestanding Clinic - Home Visit by RHC/FQHC Practitioner	0562	Medical social services - hourly charge	0622	Medical/surgical supplies - incident to other diagnostic
0523	Freestanding Clinic - family practice	0569	Medical social services - other	0623	services  Medical/surgical supplies -
0524	Freestanding Clinic - Visit by	0570	Home health aide - general		surgical dressings
	RHC/FQHC Practitioner to a Member in a Covered Part A	0571	Home health aide - visit charge	0624	Medical/surgical supplies - FDA investigational devices
0525	Stay at SNF Freestanding Clinic - Visit by	0572	Home health aide - hourly charge	0631	Drugs requiring specific identification - single source
	RHC/FQHC Practitioner to a Member in a SNF (not Covered	0579	Home health aide - other	0632	Drugs requiring specific identification - multiple source
0526	Part A Stay) or NF or ICF MR or Other Residential Facility Freestanding Clinic - urgent	0580	Other visits (home health) - general	0633	Drugs requiring specific identification - restrictive
0020	care	0581	Other visits (home health) - visit charge	0634	prescription Drugs requiring specific
		0582	Other visits (home health) - hourly charge	0031	identification - EPO, less than 10,000 units
0527	Freestanding Clinic - Visiting Nurse Services(s) to a	0583	Other visits (home health) - assessment	0635	Drugs requiring specific identification - EPO, 10,000 or more units
0528	Member's Home when in a Home Health Shortage Area Freestanding Clinic – Visit by	0589	Other visits (home health) - other	0636	Drugs requiring specific identification - requiring
0320	RHC/FQHC Practitioner to Other	0590	Units of service (home health) - general	0627	detailed coding
0529	non RHC/FQHC Site (e.g. Scene of Accident) Freestanding Clinic - other	0600	Oxygen (home health) - general	0637	Drugs requiring specific identification - self-administrable
		0601	Oxygen (home health) - stat/equip/supply or contents	0640	Home IV therapy services - general
0530	Osteopathic service - general	0602	Oxygen (home health) - stat/equip/supply under 1 liter	0641	Home IV therapy services - nonroutine nursing, central line
0531	Osteopathic service - therapy	0603	per minute Oxygen (home health) -	0642	Home IV therapy services - IV site care, central line
0539	Osteopathic service - other		stat/equip/supply over 4 liters per minute	0643	Home IV therapy services - IV start/change, peripheral line
0540	Ambulance service - general	0604	Oxygen (home health) - portable add-in	0644	Home IV therapy services - nonroutine nursing, peripheral
0541	Ambulance service - supplies	0609	Oxygen (home health) - other	0645	line
0542	Ambulance service - medical transport	0610	Magnetic Resonance	0645	Home IV therapy services - training patient/caregiver, central line
0543	Ambulance service - heart mobile		Technology (MRT) - MRI - general	0646	Home IV therapy services - training, disabled patient,
0544	Ambulance service - oxygen	0611	Magnetic Resonance Technology (MRT) - MRI - brain	0647	central line Home IV therapy services -
0545	Ambulance service - air ambulance	0612	(including brain stem)  Magnetic Resonance		training, patient/caregiver, peripheral
0546	Ambulance service - neonatal		Technology (MRT) - MRI - spinal cord (including spine)	0648	Home IV therapy services - training, disabled patient,
0547	Ambulance service - pharmacy	0614	Magnetic Resonance Technology (MRT) - MRI - other	0640	peripheral
0548	Ambulance service - telephone transmission EKG	0615	3, ( )	0649	Home IV therapy services - other
0549	Ambulance service - other	0613	Magnetic Resonance Technology (MRT) - MRA – head and neck	0650	Hospice services - general
0550	Skilled nursing - general	0616	Magnetic Resonance Technology (MRT) - MRA -	0651	Hospice services - routine home care
0551	Skilled nursing - visit charge		lower extremities	0652	Hospice services - continuous home care
0552	Skilled nursing - hourly charge	0618	Magnetic Resonance Technology (MRT) - MRA – other	0655	Hospice services - inpatient respite care
0559	Skilled nursing - other	0619	Magnetic Resonance Technology (MRT) - Other MRT	0656	Hospice services - general inpatient care (nonrespite)
0560	Medical social services - general	0621	Medical/surgical supplies -	0657	Hospice services - physician services
0561	Medical social services - visit charge		incident to radiology	0658	Hospice services - room and board - nursing facility
DSHS/	ГНСІС		Page		DSHS Document #25-15013
www.ds	shs.texas.gov/THCIC		52		Last Updated: August, 2019

0659	Hospice services - other	0730	EKG/ECG services - general	0821	Hemodialysis - outpatient or home - composite or other rate
0660	Respite care - general	0731	EKG/ECG services - holter monitor	0822	Hemodialysis - outpatient or home - home supplies
0661	Respite care - hourly charge/skilled nursing	0732	EKG/ECG services - telemetry	0823	Hemodialysis - outpatient or home – home equipment
0662	Respite care - hourly charge/aide/homemaker/compa	0739	EKG/ECG services - other	0824	Hemodialysis - outpatient or
0660	nion	0740	EEG services - general	0825	home – maintenance 100% Hemodialysis - outpatient or
0663	Respite care - daily charge	0750	Gastrointestinal services - general		home - support services
0669	Respite care - other	0760	Treatment or observation room services - general	0826	Hemodialysis - outpatient or home - shorter duration (effective 7/1/17)
0670	Outpatient special residence - general	0761	Specialty Room - Treatment/ Observation Room - Treatment	0829	Hemodialysis - outpatient or home - other
0671	Outpatient special residence - hospital based	0762	Room Specialty Room Treatment/	0830	Peritoneal dialysis - outpatient
0672	Outpatient special residence - contracted	0762	Specialty Room - Treatment/ Observation Room - Observation Room	0831	or home - general Peritoneal dialysis - outpatient
0679	Outpatient special residence - other	0769	Treatment or observation room services - other		or home - composite or other rate
0681	Trauma response - level I			0832	Peritoneal dialysis - outpatient or home - home supplies
0682	Trauma response - level II	0770	Preventive care services - general	0833	Peritoneal dialysis - outpatient or home - home equipment
0683	Trauma response - level III	0771	Preventive care services - vaccine administration	0834	Peritoneal dialysis - outpatient or home - maintenance 100%
0684	Trauma response - level IV	0780	Telemedicine services - general	0835	Peritoneal dialysis - outpatient or home - support services
0689 0690	Trauma response - other	0790	Extra-corporeal shockwave therapy - general	0839	Peritoneal dialysis - outpatient or home - other
	Pre-hospice/Palliative Care Services - general	0800	Inpatient renal dialysis services - general	0840	CAPD - outpatient or home -
0691	Pre-hospice/Palliative Care Services – visit charge	0801	Inpatient renal dialysis services - hemodialysis	0841	general CAPD - outpatient or home -
0692	Pre-hospice/Palliative Care Services – hourly charge	0802	Inpatient renal dialysis services - peritoneal (non-CAPD)	0842	composite or other rate CAPD - outpatient or home –
0693	Pre-hospice/Palliative Care Services - evaluation	0803	Inpatient renal dialysis services - continuous ambulatory	0843	home supplies  CAPD - outpatient or home -
0694	Pre-hospice/Palliative Care Services – consultation and	0804	peritoneal dialysis (CAPD)  Inpatient renal dialysis services	0844	home equipment  CAPD - outpatient or home -
0695	education Pre-hospice/Palliative Care	0001	- continuous cycling peritoneal dialysis (CAPD)	0845	maintenance 100%  CAPD - outpatient or home -
	Services – inpatient care	0809	Inpatient renal dialysis services	0043	support services
0696	Pre-hospice/Palliative Care Services – physician services		- other	0849	CAPD - outpatient or home - other
0699	Pre-hospice/Palliative Care Services - other	0810	Acquisition of body components- general	0850	CCPD - outpatient or home - general
0700	Cast Room services - general	0811	Acquisition of body components - living donor	0851	CCPD - outpatient or home - composite or other rate
0710	Recovery Room services - general	0812	Acquisition of body components - cadaver donor	0852	CCPD - outpatient or home - home supplies
0720	Labor/Delivery Room services - general	0813	Acquisition of body components - unknown donor	0853	CCPD - outpatient or home - home equipment
0721	Labor/Delivery Room services - labor	0814	Acquisition of body components - unsuccessful organ search-	0854	CCPD - outpatient or home - maintenance 100%
0722	Labor/Delivery Room services - delivery	0815	donor bank charges Acquisition of body components	0855	CCPD - outpatient or home - support services
0723	Labor/Delivery Room services - circumcision		- stem cells- allogeneic	0859	CCPD - outpatient or home - other
0724	Labor/Delivery Room services - birthing center	0819	Acquisition of body components - other donor	0860	Magnetoencephalography (MEG) - General
0729	Labor/Delivery Room services - other	0820	Hemodialysis - outpatient or home - general	0861	Magnetoencephalography (MEG) - MEG

DSHS/THCIC www.dshs.texas.gov/THCIC

0880	Miscellaneous dialysis - general	0924	Other diagnostic services - allergy test	0977	Professional fees - physical therapy
0881	Miscellaneous dialysis - ultrafiltration	0925	Other diagnostic services - pregnancy test	0978	Professional fees - occupational therapy
0882	Miscellaneous dialysis - home aide visit	0929	Other diagnostic services - other	0979	Professional fees - speech therapy
0889	Miscellaneous dialysis - other	0931	Medical rehabilitation day program - half day	0981	Professional fees - emergency room
0900	Behavior health treatments/services - general	0932	Medical rehabilitation day program - full day	0982	Professional fees - outpatient services
0901	Behavior health treatments/services -	0940	Other therapeutic services - general	0983	Professional fees - clinic
0902	electroshock Behavior health	0941	Other therapeutic services - recreational therapy	0984	Professional fees - medical social services
	treatments/services - milieu therapy	0942	Other therapeutic services - education/training	0985	Professional fees - EKG
0903	Behavioral health treatments/services - play	0943	Other therapeutic services - cardiac rehabilitation	0986	Professional fees - EEG
0904	therapy Behavior health	0944	Other therapeutic services -	0987	Professional fees - hospital visit
0304	treatments/services - activity		drug rehabilitation	0988	Professional fees - consultation
0005	therapy	0945	Other therapeutic services - alcohol rehabilitation		
0905	Behavior health treatments/services - intensive	0946	Other therapeutic services -	0989	Professional fees - private duty nurse
0906	outpatient services - psychiatric Behavior health	0310	complex medical equipment - routine	0990	Patient convenience items -
	treatments/services - intensive outpatient services - chemical	0947	Other therapeutic services - complex medical equipment -	0991	Patient convenience items - cafeteria/guest tray
0907	dependency Rehavior health		ancillary	0992	Patient convenience items -
0907	Behavior health treatments/services -	0948	Other therapeutic services – pulmonary rehabilitation		private linen service
	community behavioral health program	0949	Other therapeutic services - other	0993	Patient convenience items - telephone/telegraph
0911	Behavior health treatment/services -	0951	Other therapeutic services –	0994	Patient convenience items - TV/radio
0012	rehabilitation	0952	athletic training Other therapeutic services -	0995	Patient convenience items -
0912	Behavior health treatment/services - partial hospitalization - less intensive		kinesiotherapy	0996	nonpatient room rentals Patient convenience items - late
0913	Behavior health	0953	Other therapeutic services – chemical dependency (drug and		discharge charge
	treatment/services - partial hospitalization - intensive	0960	alcohol)  Professional fees - general	0997	Patient convenience items - admission kits
0914	Behavior health treatment/services - individual	0961	Professional fees - psychiatric	0998	Patient convenience items - beauty shop/barber
	therapy	0301	r roressionar rees psychiatric	0999	Patient convenience items -
0915	Behavior health treatment/services - group	0962	Professional fees - ophthalmology	1000	other Behavior health
0916	therapy Behavior health	0963	Professional fees - anesthesiologist (MD)	1001	accommodations - general  Behavior health
0,10	treatment/services - family therapy	0964	Professional fees - anesthetist (CRNA)	1001	accommodations - residential treatment - psychiatric
0917	Behavior health treatment/services -	0969	Professional fees - other	1002	Behavior health accommodations - residential
0918	biofeedback Behavior health	0971	Professional fees - laboratory		treatment - chemical dependency
	treatment/services - testing	0972	Professional fees - radiology -	1003	Behavior health
0919	Behavior health treatment/services - other		diagnostic		accommodations - supervised living
0920	Other diagnostic services - general	0973	Professional fees - radiology - therapeutic	1004	Behavior health accommodations - halfway
0921	Other diagnostic services -	0974	Professional fees - radiology - nuclear medicine	1005	house
0022	peripheral vascular lab	0975	Professional fees - operating	1005	Behavior health accommodations - group home
0922	Other diagnostic services - electromyogram	0076	room	2100	Alternative therapy services -
0923	Other diagnostic services - pap smear	0976	Professional fees - respiratory therapy		general

2101	Alternative thera acupuncture	py services -	2105	Alternative therapy servi biofeedback	ces -	3102	Adult day care, social - hourly
2102	Alternative thera acupressure	py services -	2106	Alternative therapy serving hypnosis	ces -	3103	Adult day care, medical and social - daily
2103	Alternative thera massage	py services -	2109	Alternative therapy servi	ces -	3104	Adult day care, social - daily
2104	Alternative thera reflexology	py services -	3101	Adult day care, medical a social - hourly	and	3105	Adult foster care - daily
	3,			,		3109	Adult foster care - other
Regir	nning Position:	13		Data Source:	Claim		
Leng		4		Type:	Alphani	umerio	
Field	3:	HCPCS_QUA	LIFI	ER			
Desci	ription:	Code identify HCPCS PROC		e type/source of the d RE CODE	escriptiv	e nu	mber used in
Begir	nning Position:	17		Data Source:	Claim		
Leng		2		Туре:	Alphanı	umerio	
Field		HCPCS_PRO		<del></del>			
Desci	ription:				i (HCPCS	s) coo	de applicable to ancillary
Codir	ng Scheme:	services or ac			odeSets/	'ANHC	PCS/list.asp for complete list.
	_	19	w.ciiis.	Data Source:	Claim	ANTIC	resyllst.asp for complete list.
Lengi	nning Position: th:	5		Type:	Alphani	ımerio	-
Field		MODIFIER_	1	.,,,,	7 (ipriarie	annen	•
Desc	ription:			rcumstances related t	o the pe	rform	nance of the service
Codir	ng Scheme:	•			•		
22	Increased procedure	al services	59	Distinct Procedural Service		91	Repeat Clinical Diagnostic
23	Unusual Anesthesia		62	Two Surgeons		0.0	Laboratory Test
24	Unrelated Evaluatio		63	Procedure Performed on Inf	ants	92	Alternative Laboratory Platform Testing
	Management Service Physician or Other (	•		less than 4kg		95	Synchronous Telemedicine Service
	Care Professional du	uring a	66	Surgical Team			Rendered Via a Real-Time Interactive Audio and Video
25	Postoperative Period		73	Discontinued Outpatient Hospital/Ambulatory Surger	·v		Telecommunications System
25	Significant, Separat Evaluation and Man			Center (ASC) Procedure prior to			Multiple Modifiers
	Service by the Sam	e Physician or	74	the Administration of Anesthesia		1P	Performance Measure Exclusion
	Other Qualified Hea Professional on the		74 Discontinued Outpatient Hospital/Ambulatory Surgery		У	2P	Modifier due to Medical Reasons
	the Procedure or Ot			Center (ASC) Procedure after		21	Performance Measure Exclusion Modifier due to Patient Reasons
26	Professional Compo		76	Administration of Anesthesia Repeat Procedure by Same			Performance Measure Exclusion
27	Multiple Outpatient Encounters on the S			Physician or Other Qualified	Health	8P	Modifier due to System Reasons Performance Measure Reporting
32	Mandated Services		77	Care Professional  Repeat Procedure by Another			Modifier- Action not performed,
33	Preventive Service			Physician or Other Qualified		P1	reason not otherwise specified A normal healthy patient
47	Anesthesia by Surge	eon	78	Care Professional Unplanned Return to the		P2	A patient with mild systemic
50	Bilateral Procedure		70	Operating/Procedure Room		12	disease
51	Multiple Procedures			Same Physician or Other Qu Health Care Professional Fol	llowing	Р3	A patient with severe systemic disease
52	Reduced Services			Initial Procedure for a Relate Procedure During the	ed	P4	A patient with severe systemic
53	Discontinued Proced	dure		Postoperative Period			disease that is a constant threat to life
54	Surgical Care Only		79	Unrelated Procedure or Servithe Same Physician or Othe		P5	A moribund patient who is not
55	Postoperative Mana	•		Qualified Health Care Profes During the Postoperative Pe	ssional		expected to survive without the operation
56	Preoperative Manag	ement Only	80	Assistant Surgeon		P6	A declared brain-dead patient
57	Decision for Surgery	/	81	Minimum Assistant Surgeon			whose organs are being removed
58	Staged or Related P			-		E1	for donor purposes Upper left eyelid
	Service by the Sam Other Qualified Hea		82	Repeat procedure by same physician			,
	Professional During	the	90	Reference (Outside) Labora	tory	E2	Lower left eyelid
	Postoperative Period	<b>J</b>				E3	Upper right eyelid

Page 55

DSHS/THCIC

www.dshs.texas.gov/THCIC

DSHS Document #25-15013 Last Updated: August, 2019

E4	Lower right eyelid		GH		ic mammogram		T1	Left foot, second digit
F1	Left hand, second dig	git			d from screening gram on same day		T2	Left foot, third digit
F2	Left hand, third digit		LC	Left circu	ımflex coronary arter	ry	T3	Left foot, fourth digit
F3	Left hand, fourth dig	it	LD	Left ante	rior descending coro	nary	T4	Left foot, fifth digit
F4	Left hand, fifth digit			artery			T5	Right foot, great toe
F5	Right hand, thumb		LM		coronary artery		Т6	Right foot, second digit
F6	Right hand, second o	ligit	LT		of the body procedu		T7	Right foot, third digit
F7	Right hand, third dig	it	Q M		nce service provided under ment by a provider of			Right foot, fourth digit
F8	Right hand, fourth di	git		services	ione by a provider of		Т9	Right foot, fifth digit
F9	Right hand, fifth digi	t	QN		ce service furnished by a provider of servi	icoc	TA	Left foot, great toe
FA	Left hand, thumb		RC	•	onary artery	ices	XE	Separate Encounter
GG	Performance and pay	ment of a	RI	Ramus intermedius coronary			XS	Separate Structure
	screening mammogr	aphy and	111	artery	•		XP	Separate Practitioner
	diagnostic mammogi same patient, same		RT	Right side	e of the body proced	lure	ΧU	Unusual Non-Overlapping Service
		,-					λυ	Onusual Non-Overlapping Service
_	nning Position:	24			Data Source:	Claim		
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	ng Scheme:	Same as Field			tances related to	o the p	CITOI	mance of the service.
	nning Position:	26			Data Source:	Claim		
Leng		2			Туре:	Alphar	nume	ric
Field		MODIFIER_	_	_:			<b>c</b>	
	ription: ng Scheme:	Same as Field			tances related to	o the p	erior	mance of the service.
	nning Position:	28	11100.	II ILIX_I	Data Source:	Claim		
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Field	-	MODIFIER_		_:			<b>c</b>	
	ription: ng Scheme:	Same as Field			tances related to	o the p	error	mance of the service.
	nning Position:	30	11100.		Data Source:	Claim		
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Field	_	UNIT_MEA						
	ription: ng Scheme:	DA Days		ne units	in which a value	e is bei	ng e	xpressea.
Coun	ng Schemer	•	, nation	al unit				
			Hatioi	iai uiiit				
		UN Unit	nacioi	iai uiiit		- ·		
_	nning Position:	32	riacioi	iai uiiic	Data Source:	Claim	nume	ric
Leng Field	th:	32 2			Data Source: Type:	Claim Alphar	nume	ric
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# **OUTPATIENT BASE DATA FILE**

SERVICE_QUARTER		33117112			
Description:   Quarter during which service occurred. Year and quarter of service. yyyyQn. Beginning Position:   Data Source: Assigned to identify the record. The Record ID in the ED Outpatient PUDF is not linkable to the Record_ID in the ED Inpatient PUDF or ED Research Data Files (RIDFs).   Data Source: Assigned to identify the record. The Record_ID in the ED Outpatient PUDF is not linkable to the Record_ID in the ED Inpatient PUDF is not linkable to the Record_ID in the ED Inpatient PUDF or ED Research Data Files (RIDFs).   Data Source: Assigned Alphanumeric   THCIC_ID   Provider ID. Unique identifier assigned to the provider by DSHS.   Facilities reporting fewer than 50 events have been aggregated into the Provider ID 999999. If a facility reported fewer than 5 events for a particular gender, including 'unknown', Provider ID is '999998.   Assigned   Provider ID is '999998.   Provider ID is '999998.   Assigned   Provider ID is '999998.   Assigned   Provider ID is '999998.   Provider ID	Field 1:	SERVICE QUARTER			
Beginning Position:	Description:		ervice occurred. \	ear and quarter of serv	vice. yyyyOn.
Field 2:     Description:     Record Identification Number. Unique number assigned to identify the record. The Record ID in the ED Outpatient PUDF is not linkable to the Record_ID in the ED Inpatient PUDF or ED Research Data Files (RDFs).  Reginning Position:  Inpatient PUDF or ED Research Data Files (RDFs).  Provider ID. Unique identifier assigned to the provider by DSHS.  Suppression:  Field 3:  THCIC_ID  Provider ID. Unique identifier assigned to the provider by DSHS.  Suppression:  Facilities reporting fewer than 50 events have been aggregated into the Provider ID 19999999. If a facility reported fewer than 5 events for a particular gender, including vunknown', Provider ID is '999998'.  Reginning Position:  Provider ID. Unique identifier assigned to the provider by DSHS.  Field 4:  SPEC_UNIT_1  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.  Coding Scheme:  Beginning Position:  Provider ID. Unique identifier assigned to the provider by DSHS.  Specialty Units in which most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Coding Scheme:  Beginning Position:  Specialty Unit in which 2nd most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Coding Scheme:  Beginning Position:  Length:  1 Type:  Data Source:  Calculated Alphanumeric  Calculated Alphanumeric  Field 6:  SPEC_UNIT_4  Specialty Unit in which 3nd most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Same as SPEC_UNIT_1.  Data Source:  Calculated Alphanumeric  Calculated Alphanumeric  Field 7:  SPEC_UNIT_4  Specialty Unit in which 5th most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Same as SPEC_UNIT_1.  Data Source:  Calculated Alphanumeric  Calculated Alphanumeric  Field 9:  SPEC_UNIT_1.  Data Source:  Calculated Alphanumeric  Calculated Alphanumeric  Calculated Alphanumeric  Calculated Alphanumeric  Ca	Beginning Position:				,,,,
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Inpatient PUDF or ED Research Data Files (RDFs).					
Beginning Position:   12   Type: Alphanumeric   12   Type: Alphanumeric   12   Type: Alphanumeric   12   Type: Alphanumeric   13   14   15   15   15   15   15   15   15					_
Field 3:  Description: Suppression:  Facilities reporting fewer than 50 events have been aggregated into the Provider ID (1999999). If a facility reported fewer than 50 events for a particular gender, including vunknown/, Provider ID is '999998'.  Beginning Position: Length: Field 4:  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.  Coding Scheme: Beginning Position: Length: Field 5: Description: Specialty Units in which with 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.  Coding Scheme: Beginning Position: Length: Field 5: Description: Specialty Unit in which 2nd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1 Data Source: Coding Scheme: Beginning Position: Length: Field 6: SPEC_UNIT_3 Description: Data Source: Coding Scheme: Beginning Position: Length: Field 7: Description: Data Source: Coding Scheme: Beginning Position: Length: Field 7: Specialty Unit in which 3nd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1 Data Source: Coding Scheme: Beginning Position: Length: Field 7: Specialty Unit in which 3nd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1 Data Source: Calculated Alphanumeric  Field 7: Description: Data Source: Calculated Alphanumeric  SPEC_UNIT_5 Specialty Unit in which 4th most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. Data Source: Calculated Alphanumeric  Field 9: Data Source: Calculated Alphanumeric  Calculated Alphanumeric  Field 9: Data Source: Calculated Alphanumeric  Coding Scheme: Beginning Position: Length: Field 9: Description: Specialty Unit in which 5th most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC	<b>Beginning Position:</b>				
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'999999'. If a facility reported fewer than 5 events for a particular gender, including 'unknown', Provider ID is '999998'.   Beginning Position:	-	Provider ID. Unique ide	ntifier assigned to	the provider by DSHS.	•
Seginning Position:   19	Suppression:	Facilities reporting fewe	r than 50 events	have been aggregated	into the Provider ID
Beginning Position:   19		'999999'. If a facility re	ported fewer thar	5 events for a particul	ar gender, including
Field 4: SPEC_UNIT_1  Description: Coding Scheme: Pield 5: SPEC_UNIT_1  Beginning Position: Length: 1  Field 6: SPEC_UNIT_3  Coding Scheme: SPEC_UNIT_1  Beginning Position: Length: 1  Field 6: SPEC_UNIT_3  Coding Scheme: Specialty Unit in which 3rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 2  Beginning Position: Length: 1  Field 7: SPEC_UNIT_1  Description: Specialty Unit in which 3rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 2  Description: Specialty Unit in which 3rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 2  Description: Specialty Unit in which 3rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 2  Description: Specialty Unit in which 3rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 2  Description: Specialty Unit in which 4rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 2  Description: Specialty Unit in which 4rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 2  Description: Specialty Unit in which 4rd source: Calculated Alphanumeric  Coding Scheme: Beginning Position: Length: 1  Field 8: Spec_UNIT_3  Description: Specialty Unit in which 5rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 28  Data Source: Calculated Alphanumeric  Coding Scheme: Beginning Position: Length: 1  Field 8: Spec_UNIT_5  Description: Specialty Unit in which 5rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 28  Description: Specialty Unit in which 5rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1. 29  Desc		'unknown', Provider ID	is '999998'.		
Field 4: 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.  Coding Scheme:  Coding Scheme:  Coding Scheme:  Description:  Beginning Position: Length: Field 5: Description:  Coding Scheme: Beginning Position: Length: Field 5: Description: Coding Scheme: Beginning Position: Length: Field 5: Description: Coding Scheme: Beginning Position: Length: Field 5: Description: Coding Scheme: Beginning Position: Length: Field 6: SPEC_UNIT_3 Description: Coding Scheme: Beginning Position: Length: Field 7: Description: Specialty Unit in which 3rd most days during stay occurred based on number of days by Type of Bill or Revenue Code. Same as SPEC_UNIT_1  Field 7: Description: Coding Scheme: Beginning Position: Length: Field 8: Description: Coding Scheme: Beginning Position: Length: Field 9: Description: Coding Scheme: Beginning P	<b>Beginning Position:</b>		Data Source:		
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Beginning Position: Length: Type: Calculated Length: Type: Calculated  Specialty Unit in which 2nd most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Coding Scheme: Beginning Position: Length: Type: Alphanumeric  Field 6: SPEC_UNIT_3  Description: Specialty Unit in which 3nd most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Same as SPEC_UNIT_1  Field 6: SPEC_UNIT_3  Specialty Unit in which 3nd most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Coding Scheme: Beginning Position: Length: Type: Alphanumeric  Field 7: SPEC_UNIT_1.  Specialty Unit in which 4th most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Coding Scheme: Specialty Unit in which 4th most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Coding Scheme: Specialty Unit in which 4th most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Coding Scheme: Same as SPEC_UNIT_1.  Beginning Position: Length: Data Source: Calculated Length: Data Source: Calculated Length: Alphanumeric  Field 8: SPEC_UNIT_5  Specialty Unit in which 5th most days during stay occurred based on number of days by Type of Bill or Revenue Code.  Coding Scheme: Same as SPEC_UNIT_1.  Beginning Position: Length: Alphanumeric  Field 9: SEX_CODE  Gender of the patient as recorded at date of start of care.  Code is suppressed if an ICD-10-CM code indicates drug or alcohol use or an HIV diagnosis. If ICD-10-CM indicates alcohol or drug use or an HIV diagnosis (patients covered by 42 USC					
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	Suppression:	Code is suppressed if an IO	CD-10-CM code indi	cates drug or alcohol use o	
§290dd-2 and 42 CFR Part 2 rules), the Gender of the patient is reported as "U" (Unknown). If					
		§290dd-2 and 42 CFR Part	2 rules), the Gende	er of the patient is reporte	d as "U" (Unknown). If

Page 57

DSHS Document #25-15013 Last Updated: August, 2019

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a facility reported fewer than 5 patients of a particular gender, including unknown, Provider ID is '999998' and Provider Name and Patient ZIP Code are blank for those patients.

Claim

**Coding Scheme:** 

Male Female Unknown Invalid

**Beginning Position:** 

**Data Source:** 

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Description: FIPS code of patient's county.   Coding scheme:	Field 10:				, p. c.		7.1.p.1.a.1.a.1.1.c.1.c		
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Orange   O				•					•
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Armstrong   109									-
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O115   Austin   113   Dallas   211   Hemphill   309   McLennan   O117   Balley   115   Dawson   213   Henderson   311   McMullen   O119   Bandera   117   Deaf Smith   215   Hidalgo   313   Madison   O118   Bastrop   119   Delfa   217   Hill   315   Marion   O120   Bastrop   121   Denton   219   Hockley   317   Martin   O125   Bee   123   Dewitt   221   Hood   319   Mason   O127   Bell   125   Dickens   223   Hopkins   321   Matagorda   O129   Bexar   127   Dimmit   225   Houston   323   Mayerick   O118   Blanco   129   Donley   227   Howard   325   Medina   O137   Borden   131   Duval   229   Hudspeth   327   Menard   O137   Bovile   135   Ector   233   Hutchinson   331   Milan   O137   Bovile   135   Ector   233   Hutchinson   331   Milan   O139   Brazoria   137   Edwards   235   Irion   333   Mills   O141   Brazos   139   Ellis   237   Jack   335   Michell   O143   Brewster   141   El Paso   239   Jackson   337   Montague   O147   Brooks   145   Falls   241   Jasper   339   Montgomery   O147   Brooks   145   Falls   241   Jasper   339   Montgomery   O149   Brown   147   Fannin   245   Jefferson   343   Morris   O157   Caliboun   155   Foard   255   Karmes   351   Newton   O157   Caliboun   155   Foard   255   Karmes   351   Newton   O159   Calibana   157   Fort Bend   255   Karmes   353   Nolan   O169   Castro   167   Galveston   265   Kerr   363   Palo Pinto   O149		_							•
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131   Duval   229   Hudspeth   327   Menard   328   329									
133				•					
135   Ector   233   Hutchinson   331   Milam   339   Brazoria   137   Edwards   235   Irion   333   Mills   335   Mitchell   336   Mitchell   337   Jack   335   Mitchell   338   Mitchell   338   Mitchell   339   Ellis   337   Jack   335   Mitchell   338   Mitchell   338   Mitchell   338   Mitchell   338   Mitchell   339   Montague   345   Montague   345   Briscoe   143   Erath   241   Jasper   339   Montague   347   Moore   349   Brown   147   Fannin   245   Jefferson   343   Morris   345   Motley   345   Mot							=		
039         Brazoria         137         Edwards         235         Irion         333         Mills           041         Brazos         139         Ellis         237         Jack         335         Mitchell           043         Brewster         141         El Paso         239         Jackson         337         Montague           045         Briscoe         143         Erath         241         Jasper         339         Montague           047         Brooks         145         Falls         243         Jeff Davis         341         Moore           049         Brown         147         Fannin         245         Jefferson         343         Mortis           051         Burleson         149         Fayette         247         Jim Hogg         345         Motely           053         Burnet         151         Fisher         249         Jim Wells         347         Nacogdoches           055         Caldwell         153         Floyd         251         Johnson         349         Navarro           057         Caldwell         153         Floyd         251         Johnson         349         Navarro           05									
041         Brazos         139         Ellis         237         Jack         335         Mitchell           043         Brewster         141         El Paso         239         Jackson         337         Montague           045         Briscoe         143         Erath         241         Jasper         339         Montgomery           047         Brooks         145         Falls         243         Jeff Davis         341         Moore           049         Brown         147         Fannin         245         Jefferson         343         Morris           051         Burleson         149         Fayette         247         Jim Hogg         345         Motley           053         Burnet         151         Fisher         249         Jim Wells         347         Nacogdoches           055         Caldwell         153         Floyd         251         Johnson         349         Navarro           057         Calloun         155         Foard         253         Jones         351         Newton           057         Calloun         155         Foard         253         Jones         351         Newton           050 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
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049         Brown         147         Fannin         245         Jefferson         343         Morris           051         Burleson         149         Fayette         247         Jim Hogg         345         Motley           053         Burnet         151         Fisher         249         Jim Wells         347         Nacogdoches           055         Caldwell         153         Floyd         251         Johnson         349         Navarro           057         Calhoun         155         Foard         253         Jones         351         Newton           059         Callahan         157         Fort Bend         255         Karnes         353         Nolan           061         Cameron         159         Franklin         257         Kaufman         355         Nucces           063         Camp         161         Freestone         259         Kendall         357         Ochlitree           065         Carson         163         Frio         261         Kenedy         359         Oldham           067         Castro         167         Galveston         265         Kert         361         Orange           069<							•		- ,
051         Burleson         149         Fayette         247         Jim Hogg         345         Motley           053         Burnet         151         Fisher         249         Jim Wells         347         Nacogdoches           055         Caldwell         153         Floyd         251         Johnson         349         Navarro           057         Calhoun         155         Foard         253         Johnson         349         Navarro           059         Caldwell         155         Foard         253         Johnson         349         Navarro           059         Callahan         157         Fort Bend         255         Karnes         353         Nolan           061         Cameron         159         Franklin         257         Kaufman         355         Nueces           063         Camp         161         Freestone         259         Kenddll         357         Ochlitree           065         Carson         163         Frio         261         Kenedy         359         Oldham           067         Cass         165         Gaines         263         Kert         361         Orange           069 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
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055         Caldwell         153         Floyd         251         Johnson         349         Navarro           057         Calhoun         155         Foard         253         Jones         351         Newton           059         Callahan         157         Fort Bend         255         Karnes         353         Nolan           061         Cameron         159         Franklin         257         Kaufman         355         Nueces           063         Camp         161         Freestone         259         Kendall         357         Ochiltree           065         Carson         163         Frio         261         Kenedy         359         Oldham           067         Cass         165         Gaines         263         Kent         361         Orange           069         Castro         167         Galveston         265         Kerr         363         Palo Pinto           071         Chambers         169         Garza         267         Kimble         365         Panola           073         Cherokee         171         Gillespie         269         King         367         Parker           075				•					•
057         Calhoun         155         Foard         253         Jones         351         Newton           059         Callahan         157         Fort Bend         255         Karnes         353         Nolan           061         Cameron         159         Franklin         257         Kaufman         355         Nueces           063         Camp         161         Freestone         259         Kendall         357         Ochiltree           065         Carson         163         Frio         261         Kenedy         359         Oldham           067         Cass         165         Gaines         263         Kent         361         Orange           069         Castro         167         Galveston         265         Kerr         363         Palo Pinto           071         Chambers         169         Garza         267         Kimble         365         Panola           073         Cherokee         171         Gillespie         269         King         367         Parker           075         Childress         173         Glasscock         271         Kinney         369         Parmer           077									=
059         Callahan         157         Fort Bend         255         Karnes         353         Nolan           061         Cameron         159         Franklin         257         Kaufman         355         Nueces           063         Camp         161         Freestone         259         Kendall         357         Ochiltree           065         Carson         163         Frio         261         Kenedy         359         Oldham           067         Cass         165         Gaines         263         Kent         361         Orange           069         Castro         167         Galveston         265         Kerr         363         Palo Pinto           071         Chambers         169         Garza         267         Kimble         365         Panola           073         Cherokee         171         Gillespie         269         King         367         Parker           075         Childress         173         Glasscock         271         Kinney         369         Parmer           077         Clay         175         Goliad         273         Kleberg         371         Pecos           079				•					
061         Cameron         159         Franklin         257         Kaufman         355         Nueces           063         Camp         161         Freestone         259         Kendall         357         Ochiltree           065         Carson         163         Frio         261         Kenedy         359         Oldham           067         Cass         165         Gaines         263         Kent         361         Orange           069         Castro         167         Galveston         265         Kerr         363         Palo Pinto           071         Chambers         169         Garza         267         Kimble         365         Panola           073         Cherokee         171         Gillespie         269         King         367         Parker           075         Childress         173         Glasscock         271         Kinney         369         Parmer           077         Clay         175         Goliad         273         Kleberg         371         Pecos           079         Cochran         177         Gonzales         275         Knox         373         Polk           081         <		Calhoun					Jones		Newton
063         Camp         161         Freestone         259         Kendall         357         Ochiltree           065         Carson         163         Frio         261         Kenedy         359         Oldham           067         Cass         165         Gaines         263         Kent         361         Orange           069         Castro         167         Galveston         265         Kerr         363         Palo Pinto           071         Chambers         169         Garza         267         Kimble         365         Panola           073         Cherokee         171         Gillespie         269         King         367         Parker           075         Childress         173         Glasscock         271         Kinney         369         Parmer           075         Childress         175         Goliad         273         Kleberg         371         Pecos           079         Cochran         177         Gonzales         275         Knox         373         Polke           081         Coke         179         Gray         283         La Salle         375         Potter           083         <		Callahan		Fort Bend			Karnes		Nolan
065         Carson         163         Frio         261         Kenedy         359         Oldham           067         Cass         165         Gaines         263         Kent         361         Orange           069         Castro         167         Galveston         265         Kerr         363         Palo Pinto           071         Chambers         169         Garza         267         Kimble         365         Panola           073         Cherokee         171         Gillespie         269         King         367         Parker           075         Childress         173         Glasscock         271         Kinney         369         Parmer           077         Clay         175         Goliad         273         Kleberg         371         Pecos           079         Cochran         177         Gonzales         275         Knox         373         Polk           081         Coke         179         Gray         283         La Salle         375         Potter           083         Collin         181         Grayson         277         Lamar         377         Presidio           085         Collin		Cameron	159	Franklin			Kaufman		Nueces
067       Cass       165       Gaines       263       Kent       361       Orange         069       Castro       167       Galveston       265       Kerr       363       Palo Pinto         071       Chambers       169       Garza       267       Kimble       365       Panola         073       Cherokee       171       Gillespie       269       King       367       Parker         075       Childress       173       Glasscock       271       Kinney       369       Parmer         077       Clay       175       Goliad       273       Kleberg       371       Pecos         079       Cochran       177       Gonzales       275       Knox       373       Polk         081       Coke       179       Gray       283       La Salle       375       Potter         083       Coleman       181       Grayson       277       Lamar       377       Presidio         085       Collin       183       Gregg       279       Lamb       379       Rains         087       Collingsworth       185       Grimes       281       Lampasas       381       Randall <t< td=""><td></td><td>Camp</td><td>161</td><td>Freestone</td><td></td><td>259</td><td>Kendall</td><td>357</td><td>Ochiltree</td></t<>		Camp	161	Freestone		259	Kendall	357	Ochiltree
069         Castro         167         Galveston         265         Kerr         363         Palo Pinto           071         Chambers         169         Garza         267         Kimble         365         Panola           073         Cherokee         171         Gillespie         269         King         367         Parker           075         Childress         173         Glasscock         271         Kinney         369         Parmer           077         Clay         175         Goliad         273         Kleberg         371         Pecos           079         Cochran         177         Gonzales         275         Knox         373         Polk           081         Coke         179         Gray         283         La Salle         375         Potter           083         Coleman         181         Grayson         277         Lamar         377         Presidio           085         Collin         183         Gregg         279         Lamb         379         Rains           087         Collingsworth         185         Grimes         281         Lampasas         381         Randall           089		Carson	163	Frio		261	Kenedy	359	Oldham
071       Chambers       169       Garza       267       Kimble       365       Panola         073       Cherokee       171       Gillespie       269       King       367       Parker         075       Childress       173       Glasscock       271       Kinney       369       Parmer         077       Clay       175       Goliad       273       Kleberg       371       Pecos         079       Cochran       177       Gonzales       275       Knox       373       Polk         081       Coke       179       Gray       283       La Salle       375       Potter         083       Coleman       181       Grayson       277       Lamar       377       Presidio         085       Collin       183       Gregg       279       Lamb       379       Rains         087       Collingsworth       185       Grimes       281       Lampasas       381       Randall         089       Colorado       187       Guadalupe       285       Lavaca       383       Reagan         091       Comal       189       Hale       287       Lee       385       Real	067	Cass	165	Gaines		263	Kent	361	Orange
073         Cherokee         171         Gillespie         269         King         367         Parker           075         Childress         173         Glasscock         271         Kinney         369         Parmer           077         Clay         175         Goliad         273         Kleberg         371         Pecos           079         Cochran         177         Gonzales         275         Knox         373         Polk           081         Coke         179         Gray         283         La Salle         375         Potter           083         Coleman         181         Grayson         277         Lamar         377         Presidio           085         Collin         183         Gregg         279         Lamb         379         Rains           087         Collingsworth         185         Grimes         281         Lampasas         381         Randall           089         Colorado         187         Guadalupe         285         Lavaca         383         Reagan           091         Comal         189         Hale         287         Lee         385         Real           093         Co	069	Castro	167	Galveston		265	Kerr	363	Palo Pinto
075         Childress         173         Glasscock         271         Kinney         369         Parmer           077         Clay         175         Goliad         273         Kleberg         371         Pecos           079         Cochran         177         Gonzales         275         Knox         373         Polk           081         Coke         179         Gray         283         La Salle         375         Potter           083         Coleman         181         Grayson         277         Lamar         377         Presidio           085         Collin         183         Gregg         279         Lamb         379         Rains           087         Collingsworth         185         Grimes         281         Lampasas         381         Randall           089         Colorado         187         Guadalupe         285         Lavaca         383         Reagan           091         Comal         189         Hale         287         Lee         385         Real           093         Comanche         191         Hall         289         Leon         387         Red River           095         Conc		Chambers	169	Garza			Kimble		Panola
077         Clay         175         Goliad         273         Kleberg         371         Pecos           079         Cochran         177         Gonzales         275         Knox         373         Polk           081         Coke         179         Gray         283         La Salle         375         Potter           083         Coleman         181         Grayson         277         Lamar         377         Presidio           085         Collin         183         Gregg         279         Lamb         379         Rains           087         Collingsworth         185         Grimes         281         Lampasas         381         Randall           089         Colorado         187         Guadalupe         285         Lavaca         383         Reagan           091         Comal         189         Hale         287         Lee         385         Real           093         Comanche         191         Hall         289         Leon         387         Red River           095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke </td <td>073</td> <td>Cherokee</td> <td>171</td> <td>Gillespie</td> <td></td> <td>269</td> <td>King</td> <td>367</td> <td>Parker</td>	073	Cherokee	171	Gillespie		269	King	367	Parker
079         Cochran         177         Gonzales         275         Knox         373         Polk           081         Coke         179         Gray         283         La Salle         375         Potter           083         Coleman         181         Grayson         277         Lamar         377         Presidio           085         Collin         183         Gregg         279         Lamb         379         Rains           087         Collingsworth         185         Grimes         281         Lampasas         381         Randall           089         Colorado         187         Guadalupe         285         Lavaca         383         Reagan           091         Comal         189         Hale         287         Lee         385         Real           093         Comanche         191         Hall         289         Leon         387         Red River           095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke         195         Hansford         293         Limestone         391         Refugio    DSHS/THCIC		Childress	173	Glasscock		271	Kinney	369	Parmer
081         Coke         179         Gray         283         La Salle         375         Potter           083         Coleman         181         Grayson         277         Lamar         377         Presidio           085         Collin         183         Gregg         279         Lamb         379         Rains           087         Collingsworth         185         Grimes         281         Lampasas         381         Randall           089         Colorado         187         Guadalupe         285         Lavaca         383         Reagan           091         Comal         189         Hale         287         Lee         385         Real           093         Comanche         191         Hall         289         Leon         387         Red River           095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke         195         Hansford         293         Limestone         391         Refugio    DSHS Document #25-15013	077	Clay	175	Goliad		273	Kleberg	371	Pecos
083         Coleman         181         Grayson         277         Lamar         377         Presidio           085         Colling         183         Gregg         279         Lamb         379         Rains           087         Collingsworth         185         Grimes         281         Lampasas         381         Randall           089         Colorado         187         Guadalupe         285         Lavaca         383         Reagan           091         Comal         189         Hale         287         Lee         385         Real           093         Comanche         191         Hall         289         Leon         387         Red River           095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke         195         Hansford         293         Limestone         391         Refugio    DSHS/THCIC	079	Cochran	177	Gonzales		275	Knox	373	Polk
085         Collin         183         Gregg         279         Lamb         379         Rains           087         Collingsworth         185         Grimes         281         Lampasas         381         Randall           089         Colorado         187         Guadalupe         285         Lavaca         383         Reagan           091         Comal         189         Hale         287         Lee         385         Real           093         Comanche         191         Hall         289         Leon         387         Red River           095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke         195         Hansford         293         Limestone         391         Refugio           DSHS Document #25-15013	081	Coke	179	Gray		283	La Salle	375	Potter
087         Collingsworth         185         Grimes         281         Lampasas         381         Randall           089         Colorado         187         Guadalupe         285         Lavaca         383         Reagan           091         Comal         189         Hale         287         Lee         385         Real           093         Comanche         191         Hall         289         Leon         387         Red River           095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke         195         Hansford         293         Limestone         391         Refugio           DSHS Document #25-15013	083	Coleman	181	Grayson		277	Lamar	377	Presidio
089         Colorado         187         Guadalupe         285         Lavaca         383         Reagan           091         Comal         189         Hale         287         Lee         385         Real           093         Comanche         191         Hall         289         Leon         387         Red River           095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke         195         Hansford         293         Limestone         391         Refugio           DSHS/THCIC         Page         DSHS Document #25-15013	085	Collin	183	Gregg		279	Lamb	379	Rains
091         Comal         189         Hale         287         Lee         385         Real           093         Comanche         191         Hall         289         Leon         387         Red River           095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke         195         Hansford         293         Limestone         391         Refugio           DSHS/THCIC         Page         DSHS Document #25-15013	087	Collingswor	rth 185	Grimes		281	Lampasas	381	Randall
093         Comanche         191         Hall         289         Leon         387         Red River           095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke         195         Hansford         293         Limestone         391         Refugio           DSHS/THCIC         Page         DSHS Document #25-15013	089	Colorado	187	Guadalupe		285	Lavaca	383	Reagan
095         Concho         193         Hamilton         291         Liberty         389         Reeves           097         Cooke         195         Hansford         293         Limestone         391         Refugio           DSHS/THCIC         Page         DSHS Document #25-15013	091	Comal	189	Hale		287	Lee	385	Real
097 Cooke         195 Hansford         293 Limestone         391 Refugio           DSHS/THCIC         Page         DSHS Document #25-15013	093	Comanche	191	Hall		289	Leon	387	Red River
DSHS/THCIC Page DSHS Document #25-15013	095	Concho	193	Hamilton		291	Liberty	389	Reeves
DSHS/THCIC Page DSHS Document #25-15013							•		
	Datia mir				D-			Dalla D	-
			THOIC						

Field 11:	PAT_S	TATE					
Beginning I Length:	Position: 31		Data Type	Source:	Assigned; based Alphanumeric	on patient Z	IP code
421	Sherman	451	Tom Green	481	Wharton	`	Invalid
419	Shelby	449	Titus	479	Webb		
417	Shackelford	447	Throckmorton	477	Washington	507	Zavala
415	Scurry	445	Terry	475	Ward	505	Zapata
413	Schleicher	443	Terrell	473	Waller	503	Young
411	San Saba	441	Taylor	471	Walker	501	Yoakum
409	San Patricio	439	Tarrant	469	Victoria	499	Wood
407	San Jacinto	437	Swisher	467	Van Zandt	497	Wise
405	San Augustine	435	Sutton	465	Val Verde	495	Winkler
403	Sabine	433	Stonewall	463	Uvalde	493	Wilson
401	Rusk	431	Sterling	461	Upton	491	Williamson
399	Runnels	429	Stephens	459	Upshur	489	Willacy
397	Rockwall	427	Starr	457	Tyler	487	Wilbarger
395	Robertson	425	Somervell	455	Trinity	485	Wichita
393	Roberts	423	Smith	453	Travis	483	Wheeler

**Description:** State of the patient's mailing address in Texas and contiguous states. Standard 2-

character Postal Service abbreviation.

**Coding Scheme:** AR Arkansas

> LA Louisiana NM New Mexico OK Oklahoma TX Texas

All other states and American Territories 77

FC Foreign country XX Foreign country

34 **Beginning Position:** Data Source: Claim

Length: Alphanumeric Type:

Field 12: PAT\_ZIP

Field 13:

**Description:** Patient's five-digit ZIP code.

Last two digits are blank if a ZIP code has fewer than 30 patients. If state equals 'ZZ', ZIP code Suppression:

equals '88888'. If state equals 'FC' (foreign country) ZIP code is blank. If ICD-10-CM indicates alcohol or drug use or an HIV diagnosis the ZIP code is blank. If a facility has fewer than fifty outpatient services reported for the quarter the ZIP code is blank. If a facility has fewer than 5 patients reported of a particular gender, including 'unknown', the ZIP Code is blank.

Alphanumeric

**Beginning Position:** 36 **Data Source:** Claim

Length:

**Description:** Country of patient's residential address. List maintained by the International

Type:

Organization for Standardization (ISO).

Suppression: Suppressed if fewer than 5 patients from one country.

See www.ISO.org for complete list. Coding scheme:

**Beginning Position: Data Source:** Claim

Length: Type: Alphanumeric

#### Field 14: **PUBLIC\_HEALTH\_REGION**

**Description:** Public Health Region of patient's address.

PAT\_COUNTRY

Coding scheme: Armstrong, Bailey, Briscoe, Carson, Castro, Childress, Cochran, Collingsworth, Crosby, Dallam, Deaf Smith, Dickens, Donley, Floyd, Garza, Gray, Hale, Hall, Hansford, Hartley, Hemphill, Hockley, Hutchinson, King, Lamb, Lipscomb, Lubbock, Lynn, Moore, Motley, Ochiltree, Oldham, Parmer, Potter, Randall, Roberts, Sherman, Swisher, Terry, Wheeler, Yoakum counties

2 Archer, Baylor, Brown, Callahan, Clay, Coleman, Comanche, Cottle, Eastland, Fisher, Foard, Hardeman, Haskell, Jack, Jones, Kent, Knox, Mitchell, Montague, Nolan, Runnels, Scurry, Shackleford, Stephens, Stonewall, Taylor, Throckmorton, Wichita, Wilbarger, Young counties

Collin, Cooke, Dallas, Denton, Ellis, Erath, Fannin, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, Tarrant, Wise counties 3

4 Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood counties

5 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, Wharton counties

DSHS/THCIC DSHS Document #25-15013 Page www.dshs.texas.gov/THCIC Last Updated: August, 2019 **59** 

- Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hays, Hill, Lampasas, Lee, Leon, Limestone, Llano, McLennan, Madison, Milam, Mills, Robertson, San Saba, Travis, Washington, Williamson counties
- Atascosa, Bandera, Bexar, Calhoun, Comal, DeWitt, Dimmit, Edwards, Frio, Gillespie, Goliad, 8 Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr, Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala counties
- Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble, Loving, McCulloch, Martin, Mason, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward, Winkler counties
- 10 Brewster, Culberson, El Paso, Hudspeth, Jeff Davis, Presidio counties
- Aransas, Bee, Brooks, Cameron, Duval, Hidalgo, Jim Hogg, Jim Wells, Kenedy, Kleberg, Live Oak, 11 McMullen, Nueces, Refugio, San Patricio, Starr, Webb, Willacy, Zapata counties

<b>Beginning Position:</b>	43	Data Source:	Assigned
Length:	2	Type:	Alphanumeric

Field 15: LENGTH\_OF\_SERVICE

**Description:** Length of service in days equals Statement From Date through Statement Thru Date.

The minimum length of service is 1 day. The maximum is 30 days.

	1110	minimum ichigan	Of SCI VICC 13	ı day.	THE HIGAIIIGH IS	50 ac	1 9 3 .
<b>Beginning Position:</b>	45		Data So	urce:	Calculated		
Length:	2		Type:		Alphanumeric		
Field 16:	PAT	AGE					
Description:	Code	e indicating age o	of patient in o	days or	years on date of	servi	ce.
Coding Scheme:	00	1-28 days	10	35-39		20	85-89
J	01	29-365 days	11	40-44		21	90+
	02	1-4 years	12	45-49		HIV	-STD and drug/alcohol use
							patients:
	03	5-9	13	50-54		22	0-17
	04	10-14	14	55-59		23	18-44
	05	15-17	15	60-64		24	45-64
	06	18-19	16	65-69		25	65-74
	07	20-24	17	70-74		26	75+
	80	25-29	18	75-79		`	Invalid
	09	30-34	19	80-84			
<b>Beginning Position:</b>	47		Data So	urce:	Assigned		
Length:	2		Type:		Alphanumeric		
Field 17.	D 4 C	-	·				·

Field 17: **RACE** 

**Description:** Code indicating the patient's race.

Suppression: If a facility has fewer than ten patients of one race that race is changed to 'Other' (code equals

**Coding Scheme:** 1 American Indian/Eskimo/Aleut

- 2 Asian or Pacific Islander
- 3 Black 4 White
- 5 Other

Invalid **Beginning Position:** 49

**Data Source:** Claim Length: Type: Alphanumeric

**ETHNICITY** Field 18:

**Description:** Code indicating the Hispanic origin of the patient.

If a facility has fewer than ten patients of one race the ethnicity of patients of that race is Suppression:

suppressed (code is blank).

**Coding Scheme:** 1 Hispanic Origin

2 Not of Hispanic Origin

Invalid

**Beginning Position:** 50 **Data Source:** Claim

Length: Type: Alphanumeric

Field 19: FIRST PAYMENT SRC

**Description:** Code indicating the expected primary source of payment.

Self Pay (Removed from 5010 format, Health Maintenance Organization **Coding Scheme:** НМ beginning 202012 data) Liability 10 Central Certification ΙT 11 Other Non-federal Programs LM Liability Medical

12 Preferred Provider Organization (PPO) MA Medicare Part A Point of Service (POS) Medicare Part B 13 MB Exclusive Provider Organization (EPO) 14 MC Medicaid 15 Indemnity Insurance TV Title V

Health Maintenance Organization (HMO) 16 OF Other Federal Program

Medicare Risk

DSHS/THCIC DSHS Document #25-15013 Page www.dshs.texas.gov/THCIC Last Updated: August, 2019 **60** 

		AM BL CH CI DS	Automobile N Blue Cross/B CHAMPUS Commercial Disability Ins	lue Shield Insurance		VA WC ZZ	Workers	Comp	istration Plan ensation Health Claim nt or Unknown
Beginning .ength:	Position:	51 2			Data Source: Type:	Claim Alphanur	neric		
ield 20:			ONDARY_I	PAYMEN		Alphanui	HEHIC		
escriptio	n:	Code	e indicating	the exp	ected secondary	source of	paymer	nt.	
oding Sc			e as field 16,	FIRST_P	AYMENT_SRC				
Beginning .ength:	Position:	53 2			Data Source: Type:	Claim Alphanur	neric		
ield 21:			E_OF_BILI	L	туре.	Aipilaliui	Heric		
escriptio		Prov facil 1 <sup>st</sup> di	ides specific	c inform digit = t	type of care. Thi 2 <sup>nd</sup> digit-Ty	ird digit = s	sequenc	e of	First digit = type of the claim. digit–Sequence of claim Non-payment/Zero claim
		2	Skilled nursing		Part A 2 Inpatier only	nt, Medicare Pa	art B	1	Admit through discharge claim
		4	Home health Religious non-r		3 Outpatie 4 Outpatie	ent Other, Med	dicare	2 3	Interim-first claim Interim-continuing claim
		5	health care–Ho Religious non-r health care–Ex	nedical		only ediate Care–Le	vel I	4	Interim-last claim
			Intermediate c Clinic	are		diate Care-Le ite inpatient -		5 6	Late charge(s) only claim Adjustment of prior claim (Not used by Medicare)
			Special facility		8 Swing b			7 8	Replacement of prior claim Void/cancel of prior claim
Beginning	Position:	55 3			Data Source:	Claim Alphanur	noric		
ength: ield 22:			IDITION_C	ODF 1	Туре:	Aipilailui	nenc		
					tion relating to	the claim.			
oding Sc	neme:								
01	Military servi	ce rela	ted	23	Home care giver av	/ailable	38		ni-private room not
02	Condition is e	employ	ment	24	Home IV patient als HHA services	so receiving	39	Priv	ailable vate room medically cessary
03	Patient cover		insurance	25	Patient is non-US r	esident	40		ne day transfer
04	not reflected Information		I.	26	VA eligible patient		41		tial hospitalization
05	Lien has been	•	**		receive services in certified facility	а мешсаге	42		ntinuing care not related to
06	ESRD patient		t 18 months	27	Patient referred to		42		atient admission
06	of entitlemer	nt cove	red by EGHP	20	community hospita diagnostic laborato	ry test	43	wit	ntinuing care not provided hin prescribed postdischarg
	condition for	hospic	e patient	28	Patient and/or spot secondary to Medic		44		ndow Patient admission changed t
80	Beneficiary winformation of			29	Disabled beneficiar		77		patient
	insurance co		_		family member's LO secondary to Medic		45	Am	biguous Gender Category
09	Neither patie employed			30	Non-research servito patients enrolled	ces provided I in a	46	file	
10	Patient and/o	t no EC	SHP exists	31	qualified clinical trial Patient is student (		47	Hea	Insfer from another Home alth Agency
11 17	Disabled ben LGHP covera Patient is hor	ge exis		32	day) Patient is student	ctudy	48	tre	vchiatric residential atment centers for children d adolescents (RTCs)
			and		(cooperative/work program)	stuty	49	Pro	duct replacement within
18 19	Maiden name Child retains			33	Patient is student (	full time -	F0		duct lifecycle
20	Beneficiary re			34	night) Patient is student (	part-time)	50		duct Replacement for Know call of a Product
21	Billing for de	-	_	36	General care patier	•	51		estation of Unrelated tpatient Nondiagnostic
21	_			27	special unit Ward accommodati	ion at nationt	<b>5</b> 0	Ser	vices
22	Patient on m regimen	ultiple		37		ion at patient	52	Ou	t of Hospice Service Area
	regimen	ultiple		37	request Page	ion at patient	52		HS Document #25-1501

Length:			Туре:	Aiphanananienic	DGHG D
Beginnin Length:	g Position: 58		Data Source:	Claim Alphanumeric	
A2	Physically handicapped children's program		for diagnosis and/or pr codes.	rocedure	
A1	program EPSDT/CHAP	D4	PPS Bill Change in clinical code	w5 es (ICD)	Level III Appeal
Α0	TRICARE external partnership	D3	Second or Subsequent		Level II Appeal
	Treatment with Medical Justification	D1	Changes to Charges	W3	Level I Appeal
86	Additional Hemodialysis	D0	Changes to Service Da	W/2	Duplicate of Original Bill
85	Delayed Recertification of Hospice Terminal Illness	C6 C7	Admission Preauthorization  Extended Authorization		(UMWA) Demonstration Indicator
84	Dialysis for Acute Kidney Injury (AKI)	C5	Post-payment review a	WO	United Mine Workers of America
0.4	or greater	C4	Admission/services der	K3	Request for reopening Reason Code - Faulty Evidence
83	C-section/Inductions 39 weeks	C3	Partial approval		Code - New and Material Evidence
82	C-section/Inductions <39 weeks-Elective	C2	Automatic approval as based on focused revie		clerical errors Request for reopening Reason
81	C-section/Inductions <39 weeks-Medical Necessity	C1	Approved as billed	137	Code - Corrections other than
80	Home dialysis - nursing facility	BP	Gulf Oil Spill of 2010	R7	Specified in R1-R5 above Request for reopening Reason
79	CORF services provided offsite	B4	Admission unrelated to discharge on same day		Minor Errors and Omissions not
78	New coverage not implemented by HMO	B1	Beneficiary is ineligible demonstration program	n R6	Request for reopening Reason Code - Other Clerical Errors or
	to accept payment by a primary payer as payment	B0	Medicare coordinated of demonstration claim	N.S	Request for reopening Reason Code - Incorrectly Identified Duplicate Claim
77	Provider accepts or is obligated/required due to a contractual arrangement or law	AN	Pre-admission screenir required		Request for reopening Reason Code - Computer Errors
76	Back-up in facility dialysis		required		Schedule
75	Home - 100% reimbursement	AM	Non-emergency medic necessary stretcher tra		Request for reopening Reason Code - Misapplication of a Fee
74	Home	AL	unavailable	bed R2	Request for reopening Reason Code -Inaccurate Data Entry
73	Self-care training	AK AL	Air ambulance required Specialized treatment/		Computational Mistake
72	Self-care in unit		payment	R1	Request for reopening Reason Code - Mathematical or
71	management drug Full care in unit	AJ	Payer responsible for c	00-	Emergency Room
70	Self-administered anemia	AH AI	Elective abortion Sterilization	P1 P7	Do not Resuscitate Order (DNR)  Direct Inpatient Admission from
69	IME/DGME/N&AH Payment Only	A.I.I	social or economic reas		Comorbid Category
68	Beneficiary elects to use life time reserve (LTR) days	AG	of mother  Abortion performed du		Comorbid Category Reoccurrence of Pericarditis
67	Beneficiary elects not to use life time reserve (LTR) days	AF	Abortion performed du emotional/psychologica		Comorbid Category Reoccurrence of Pneumonia
66	Provider does not wish cost outlier payment		physical health of motl is not life endangering	her that H3	Provider for Cause Reoccurrence of GI Bleed
61	Cost outlier	AE	endangering physical of Abortion performed du	113	Discharge by a Hospice
60	Day outlier	AD	Abortion performed du		Delayed Filing, Statement of Intent Submitted
59	organization enrollee Non-primary ESRD facility		serious fatal genetic de deformity, or abnorma	· (¬()	Distinct Medical Visit
58	Terminated Medicare+Choice	AC	Abortion performed du		Changes in Patient Status
57	SNF readmission	AB	Abortion performed du incest	e to DR	Disaster related
56	Medical appropriateness	AA	Abortion performed du	e to rape D9	Any Other Change
55	SNF bed not available	A9	Second opinion surger	y D8	Change to Make Medicare the Primary Payer
34	Billing Period. Policy Exception Documented at the Home Health Agency	A6	Vaccines/Medicare 100 payment		Change to Make Medicare the Secondary Payer
54	clinical trial or a free sample  No Skilled Home Health Visits in	A5	Disability	D6	Cancel Only to Repay a  Duplicate or OIG Overpayment
53	Initial placement of a medical device provided as part of a	A3 A4	Special Federal Fundin Family planning	g D5	Cancel to correct Insured's ID or Provider ID
E2	Initial placement of a modical	۸۵	Coocial Fodoral Fundin	a DE	Cancel to correct Incurad's ID

Field 23:			
	CONDITION_CODE_2		
	Code describing a condit		he claim.
Coding Scheme:	Same as Field CONDITION_	_CODE_1.	
<b>Beginning Position:</b>	60	Data Source:	Claim
Length:	2	Туре:	Alphanumeric
Field 24:	CONDITION_CODE_3		
	Code describing a condit	ion relating to t	he claim.
Coding Scheme:	Same as Field CONDITION_	CODE 1.	
Beginning Position:	62	Data Source:	Claim
Length:	2	Туре:	Alphanumeric
Field 25:	CONDITION_CODE_4		
	Code describing a condition	relating to the cla	aim.
Coding Scheme:	Same as Field 22.		
Beginning Position:	64	Data Source:	Claim
Length:	2	Туре:	Alphanumeric
Field 26:	CONDITION_CODE_5		
	Code describing a condit		he claim.
Coding Scheme:	Same as Field CONDITION_		
Beginning Position:	66	Data Source:	Claim
Length:	2	Туре:	Alphanumeric
Field 27:	CONDITION_CODE_6		
	Code describing a condit	ion relating to t	he claim.
Coding Scheme:	Same as Field CONDITION_		
Beginning Position:	68	Data Source:	Claim
Length:	2	Туре:	Alphanumeric
Field 28:	CONDITION_CODE_7		
	Code describing a condit	ion relating to t	he claim.
Coding Scheme:	Same as Field CONDITION_		Cl.:
Beginning Position:	70	Data Source:	Claim
Length: Field 29:	CONDITION CODE O	Туре:	Alphanumeric
Field 29:	CONDITION_CODE_8		
	Code describing a condit		ne claim.
Coding Scheme:	Same as Field CONDITION_		Cl.:
Beginning Position:	72	Data Source:	Claim
Length: Field 30:	2 PAT_REASON_FOR_V	Type:	Alphanumeric
riela 30.			Ath Eth Cth and 7th digita if applicable
			e 4th, 5th, 6th and 7th digits if applicable.
Pasinning Pasition	Decimal is implied follow 74	nng the third ch <b>Data Source:</b>	aracter. Claim
Beginning Position:	/4	Data Source:	Claiii
Lanath	7	Type:	Alphanumeric
Length: Field 31:	PRINC DIAG CODE	Туре:	Alphanumeric
Length: Field 31:	PRINC_DIAG_CODE		·
	PRINC_DIAG_CODE ICD-10-CM diagnosis cod	de for the princi	pal diagnosis, including the 4th, 5th, 6th and
Field 31:	PRINC_DIAG_CODE ICD-10-CM diagnosis coo 7th digits if applicable. [	de for the princi Decimal is implie	pal diagnosis, including the 4th, 5th, 6th and d following the third character.
Field 31:  Beginning Position:	PRINC_DIAG_CODE ICD-10-CM diagnosis coo 7th digits if applicable. E 81	de for the princi Decimal is implie Data Source:	pal diagnosis, including the 4th, 5th, 6th and d following the third character.  Claim
Field 31:  Beginning Position: Length:	PRINC_DIAG_CODE ICD-10-CM diagnosis coo 7th digits if applicable. E 81 7	de for the princi Decimal is implie	pal diagnosis, including the 4th, 5th, 6th and d following the third character.
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Field 31:  Beginning Position: Length:	PRINC_DIAG_CODE ICD-10-CM diagnosis coo 7th digits if applicable. E 81 7 OTH_DIAG_CODE_1 ICD-10-CM diagnosis coo	de for the princi Decimal is implie Data Source: Type: de, including the	pal diagnosis, including the 4th, 5th, 6th and d following the third character. Claim Alphanumeric 4th, 5th, 6th and 7th digits if applicable.
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Field 31:  Beginning Position: Length: Field 32:  Beginning Position: Length: Field 33:  Beginning Position: Length: Field 34:	PRINC_DIAG_CODE ICD-10-CM diagnosis con 7th digits if applicable. It is applicable.	de for the princi Decimal is implie Data Source: Type:  de, including the ving the third che Data Source: Type:  de, including the ving the third che Data Source: Type:  de, including the ving the third che Data Source: Type:	pal diagnosis, including the 4th, 5th, 6th and d following the third character. Claim Alphanumeric  4th, 5th, 6th and 7th digits if applicable. aracter. Claim Alphanumeric  4th, 5th, 6th and 7th digits if applicable. aracter. Claim Alphanumeric  4th, 5th, 6th and 7th digits if applicable. aracter. Claim Alphanumeric  4th, 5th, 6th and 7th digits if applicable. aracter. Claim Claim
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Field 31:  Beginning Position: Length: Field 32:  Beginning Position: Length: Field 33:  Beginning Position: Length: Field 34:  Beginning Position: Length: Field 35:  DSHS/THCIC	PRINC_DIAG_CODE ICD-10-CM diagnosis con 7th digits if applicable. If applicable appli	de for the principle decimal is implied Data Source: Type:  de, including the ring the third chara Source: Type:  de, including the ring the third chara Source: Type:  de, including the ring the third chara Source: Type:  de, including the ring the third chara Source: Type:  Page	pal diagnosis, including the 4th, 5th, 6th and d following the third character. Claim Alphanumeric  4 4th, 5th, 6th and 7th digits if applicable. aracter. Claim Alphanumeric  4 4th, 5th, 6th and 7th digits if applicable. aracter. Claim Alphanumeric  4 4th, 5th, 6th and 7th digits if applicable. aracter. Claim Alphanumeric  4 4th, 5th, 6th and 7th digits if applicable. aracter. Claim Alphanumeric  DSHS Document #25-15013
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	ICD-10-CM diagnosis cod	de, including the	4th, 5th, 6th and 7th digits if applicable.
	Decimal is implied follow		
Beginning Position:	109	Data Source:	Claim
Length: Field 36:	7	Туре:	Alphanumeric
rieiu 30:	OTH_DIAG_CODE_5	do including the	4th, 5th, 6th and 7th digits if applicable.
	Decimal is implied follow		
Beginning Position:	116	Data Source:	Claim
Length:	7	Туре:	Alphanumeric
Field 37:	OTH_DIAG_CODE_6		
			4th, 5th, 6th and 7th digits if applicable.
Beginning Position:	Decimal is implied follow 123	nng the third cha	racter. Claim
Length:	7	Type:	Alphanumeric
Field 38:	OTH_DIAG_CODE_7	7,1	<u></u>
			4th, 5th, 6th and 7th digits if applicable.
	Decimal is implied follow	-	
Beginning Position:	130	Data Source:	Claim
Length: Field 39:	7 OTH_DIAG_CODE_8	Туре:	Alphanumeric
i icia 551		de, including the	4th, 5th, 6th and 7th digits if applicable.
	Decimal is implied follow	ing the third cha	aracter.
<b>Beginning Position:</b>	137	Data Source:	Claim
Length:	7	Туре:	Alphanumeric
Field 40:	OTH_DIAG_CODE_9	مالا مالا ماله الماله ماله ما	Ath Tth Cth and Tth divite if annulisable
	Decimal is implied follow		4th, 5th, 6th and 7th digits if applicable.
Beginning Position:	144	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 41:	OTH_DIAG_CODE_10		
			4th, 5th, 6th and 7th digits if applicable.
Danimaina Danisiana	Decimal is implied follow		
Beginning Position: Length:	151 7	Data Source: Type:	Claim Alphanumeric
Field 42:	OTH_DIAG_CODE_11	.,,,	учрнанинене
		de, including the	4th, 5th, 6th and 7th digits if applicable.
	Decimal is implied follow		
Beginning Position:	158	Data Source:	Claim
Length: Field 43:	7 OTH_DIAG_CODE_12	Туре:	Alphanumeric
ricia 45.		de, including the	4th, 5th, 6th and 7th digits if applicable.
	Decimal is implied follow		
<b>Beginning Position:</b>	165	Data Source:	Claim
Length:	7	Туре:	Alphanumeric
Field 44:	OTH_DIAG_CODE_13	do including the	4th Eth 6th and 7th digits if applicable
	Decimal is implied follow		4th, 5th, 6th and 7th digits if applicable.
Beginning Position:	172	Data Source:	Claim
Length:	7	Туре:	Alphanumeric
Field 45:	OTH_DIAG_CODE_14		
			4th, 5th, 6th and 7th digits if applicable.
Beginning Position:	Decimal is implied follow 179	ing the third cha <b>Data Source:</b>	aracter. Claim
Length:	7	Type:	Alphanumeric
Field 46:	OTH_DIAG_CODE_15	, r -	
	ICD-10-CM diagnosis cod		4th, 5th, 6th and 7th digits if applicable.
	Decimal is implied follow		
Beginning Position:	186 7	Data Source:	Claim Alphanumeric
Length: Field 47:	OTH_DIAG_CODE_16	Туре:	Alphanamenc

Page 64

DSHS Document #25-15013
Last Updated: August, 2019

DSHS/THCIC www.dshs.texas.gov/THCIC

ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applical	ICD-10-C	M diagnosis co	le, including the	4th, 5th, 6th and	7th digits if applicable
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Decimal is implied following the third character.

Data Source: **Beginning Position:** 193 Claim

Length: 7 Alphanumeric Type:

Field 48: OTH\_DIAG\_CODE\_17

ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 200 **Data Source:** 

Length: Alphanumeric Type:

Field 49: OTH DIAG CODE 18

ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 207 **Data Source:** Claim Alphanumeric Length: Type:

Field 50: OTH\_DIAG\_CODE\_19

ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 214 Data Source: Claim

Alphanumeric Length: Type:

Field 51: OTH\_DIAG\_CODE\_20

ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 221 **Data Source:** Claim Length: Alphanumeric Type:

Field 52: OTH\_DIAG\_CODE\_21

ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 228 **Data Source:** Claim

Length: Alphanumeric Type:

Field 53: OTH DIAG CODE 22

ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position: Data Source:** 235 Claim

Alphanumeric Length: Type:

Field 54: OTH\_DIAG\_CODE\_23

ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character. 242 **Data Source:** Claim

Length: Type:

Alphanumeric

Field 55: OTH\_DIAG\_CODE\_24

ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable.

Decimal is implied following the third character.

**Beginning Position:** 249 **Data Source:** Claim

Length: Alphanumeric Type:

Field 56: RELATED\_CAUSE\_CODE\_1

Code identifying an accompanying cause of an illness, injury or an accident.

**Coding Scheme:** AΑ Auto accident

**Beginning Position:** 

AΒ Abuse

AP Another party responsible

FΜ **Employment** 

OA Other accident

**Beginning Position:** 256 **Data Source:** Claim

Length: Type: Alphanumeric

Field 57: **RELATED CAUSE CODE 2** 

Code identifying an accompanying cause of an illness, injury or an accident.

**Coding Scheme:** Same as Field RELATED CAUSE CODE 1.

**Beginning Position:** 258 **Data Source:** Claim

Length: Alphanumeric Type:

Field 58: RELATED\_CAUSE\_CODE \_3

Code identifying an accompanying cause of an illness, injury or an accident.

DSHS/THCIC DSHS Document #25-15013 Page www.dshs.texas.gov/THCIC Last Updated: August, 2019 **65** 

**Coding Scheme:** Same as Field RELATED CAUSE CODE 1. **Beginning Position:** 260 **Data Source:** Claim Length: 2 Type: Alphanumeric Field 59: E CODE 1 ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of the primary external cause of injury. A decimal is implied following the third character. **Beginning Position:** 262 **Data Source:** Claim Length: Type: Alphanumeric E\_CODE 2 Field 60: ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character. **Beginning Position:** 269 **Data Source:** Claim Length: Alphanumeric 7 Type: E\_CODE 3 Field 61: ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character. **Beginning Position:** 276 **Data Source:** Claim Length: Alphanumeric Type: Field 62: E\_CODE 4 ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character. **Beginning Position:** 283 **Data Source:** Claim Length: Type: Alphanumeric Field 63: E CODE 5 ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character. **Beginning Position:** 290 **Data Source:** Claim Length: Alphanumeric Type: Field 64: E CODE 6 ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character. **Beginning Position:** 297 **Data Source:** Claim Length: Type: Alphanumeric E CODE 7 Field 65: ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character. **Beginning Position:** 304 **Data Source:** Claim Length: Alphanumeric Type: E CODE 8 Field 66: ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character. **Beginning Position:** 311 **Data Source:** Claim Length: Type: Alphanumeric Field 67: E CODE 9 ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of injury. Decimal is implied following the

DSHS/THCIC	Page	DSHS Document #25-15013
www.dshs.texas.gov/THCIC	66	Last Updated: August, 2019

**Data Source:** 

Type:

Claim

Alphanumeric

third character.

E\_CODE\_10

318

**Beginning Position:** 

Lenath:

Field 68:

ICD-10-CM external cause of injury code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of injury. Decimal is implied following the

third character.

**Beginning Position:** 325 **Data Source:** Claim Length: 7 Type: Alphanumeric

Field 69: PROC CODE 1

Code for the surgical or other procedure with the highest charge performed during

the period covered by the bill. HCPCS or CPT code.

**Beginning Position: Data Source:** 

Length: Type: Alphanumeric

Field 70: PROC\_CODE\_2

**Beginning Position:** 

Code for surgical or other procedure with the next highest charge performed during

the period covered by the bill. HCPCS or CPT code. **Data Source:** 337 Claim

Length: Type:

Alphanumeric Field 71: PROC\_CODE\_3

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: Data Source:** Claim 342 Alphanumeric Length: Type:

Field 72: PROC\_CODE\_4

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: Data Source:** 347 Claim

Length: Alphanumeric Type:

Field 73: PROC\_CODE\_5

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:** 352 **Data Source:** Claim Alphanumeric Type:

Length: Field 74: PROC\_CODE\_6

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: Data Source:** 357 Claim

Alphanumeric Length: Type:

Field 75: PROC CODE 7

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:** 362 **Data Source:** Claim Length: Alphanumeric Type:

Field 76: PROC\_CODE\_8

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:** 367 **Data Source:** Claim

Length: Alphanumeric Type:

Field 77: PROC\_CODE\_9

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:** 372 **Data Source:** Claim

Alphanumeric Length: Type:

Field 78: PROC CODE 10

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:** 377 Data Source: Claim

Length: Alphanumeric Type:

Field 79: PROC\_CODE\_11

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:** 382 **Data Source:** Claim

DSHS/THCIC DSHS Document #25-15013 Page www.dshs.texas.gov/THCIC Last Updated: August, 2019 **67** 

Length:	5	Туре:	Alphanumeric	
Field 80:	PROC_CODE_12		•	
	Code for surgical or other	r procedure with	n the next highest	charge performed during
	the period covered by the	bill. HCPCS or	CPT code.	5 .
Beginning Position:	387	Data Source:	Claim	
Length:	5	Type:	Alphanumeric	
Field 81:	PROC_CODE_13		•	
	Code for surgical or other	r procedure with	the next highest	charge performed during
	the period covered by the			and go particular and a
Beginning Position:	392	Data Source:	Claim	
Length:	5	Type:	Alphanumeric	
Field 82:	PROC CODE 14	- /		
	Code for surgical or other	r procedure with	the next highest	charge performed during
	the period covered by the			charge performed daming
Beginning Position:	397	Data Source:	Claim	
Length:	5	Type:	Alphanumeric	
Field 83:	PROC_CODE_15	турс.	Alphanameric	
i iciu osi		r procedure with	the next highest	charge performed during
	Code for surgical or other			charge performed during
Doglania a Doglato	the period covered by the			
Beginning Position:	402 5	Data Source:	Claim	
Length:		Туре:	Alphanumeric	
Field 84:	PROC_CODE_16		المائيا المراجع الماسان	
	Code for surgical or other			charge performed during
	the period covered by the			
Beginning Position:	407	Data Source:	Claim	
Length:	5	Туре:	Alphanumeric	
Field 85:	PROC_CODE_17			
	Code for surgical or other			charge performed during
	the period covered by the	e bill. HCPCS or	CPT code.	
Beginning Position:	412	Data Source:	Claim	
Length:	5	Туре:	Alphanumeric	
Field 86:	PROC_CODE_18			
	Code for surgical or other	r procedure with	n the next highest	charge performed during
	the period covered by the			5 .
Beginning Position:	417	Data Source:	Claim	
Length:	5	Type:	Alphanumeric	
Field 87:	PROC_CODE_19			
	Code for surgical or other	r procedure with	n the next highest	charge performed during
	the period covered by the			and go particular action,
Beginning Position:	422	Data Source:	Claim	
Length:	5	Type:	Alphanumeric	
Field 88:	PROC_CODE_20	/ I	p	
		r procedure with	the next highest	charge performed during
	Code for surgical or other			charge performed during
	Code for surgical or other the period covered by the	bill. HCPCS or	CPT code.	charge performed during
Beginning Position:	Code for surgical or other the period covered by the 427	bill. HCPCS or <b>Data Source:</b>	CPT code.	charge performed during
Beginning Position: Length:	Code for surgical or other the period covered by the 427 5	bill. HCPCS or	CPT code.	charge performed during
Beginning Position: Length:	Code for surgical or other the period covered by the 427 5 PROC_CODE_21	e bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric	
Beginning Position: Length:	Code for surgical or other the period covered by the 427 5  PROC_CODE_21 Code for surgical or other	bill. HCPCS or Data Source: Type: r procedure with	CPT code. Claim Alphanumeric  the next highest	
Beginning Position: Length: Field 89:	Code for surgical or other the period covered by the 427 5 PROC_CODE_21 Code for surgical or other the period covered by the	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or	CPT code. Claim Alphanumeric  the next highest CPT code.	
Beginning Position: Length: Field 89: Beginning Position:	Code for surgical or other the period covered by the 427 5 PROC_CODE_21 Code for surgical or other the period covered by the 432	bill. HCPCS or Data Source: Type: r procedure with bill. HCPCS or Data Source:	CPT code. Claim Alphanumeric  the next highest CPT code. Claim	
Beginning Position: Length: Field 89: Beginning Position: Length:	Code for surgical or other the period covered by the 427 5 PROC_CODE_21 Code for surgical or other the period covered by the 432 5	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or	CPT code. Claim Alphanumeric  the next highest CPT code.	
Beginning Position: Length: Field 89: Beginning Position: Length:	Code for surgical or other the period covered by the 427 5 PROC_CODE_21 Code for surgical or other the period covered by the 432 5 PROC_CODE_22	bill. HCPCS or Data Source: Type: r procedure with bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric  the next highest CPT code. Claim Alphanumeric	charge performed during
Beginning Position: Length: Field 89: Beginning Position: Length:	Code for surgical or other the period covered by the 427 5 PROC_CODE_21 Code for surgical or other the period covered by the 432 5 PROC_CODE_22 Code for surgical or other	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric  the next highest CPT code. Claim Alphanumeric  the next highest	charge performed during
Beginning Position: Length: Field 89: Beginning Position: Length:	Code for surgical or other the period covered by the 427 5 PROC_CODE_21 Code for surgical or other the period covered by the 432 5 PROC_CODE_22	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric  the next highest CPT code. Claim Alphanumeric  the next highest	charge performed during
Beginning Position: Length: Field 89: Beginning Position: Length: Field 90:	Code for surgical or other the period covered by the 427 5 PROC_CODE_21 Code for surgical or other the period covered by the 432 5 PROC_CODE_22 Code for surgical or other	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric  the next highest CPT code. Claim Alphanumeric  the next highest	charge performed during
Beginning Position: Length: Field 89:  Beginning Position: Length: Field 90:  Beginning Position: Length:	Code for surgical or other the period covered by the 427 5  PROC_CODE_21  Code for surgical or other the period covered by the 432 5  PROC_CODE_22  Code for surgical or other the period covered by the 437 5	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or	CPT code. Claim Alphanumeric  The next highest CPT code. Claim Alphanumeric  The next highest CPT code.	charge performed during
Beginning Position: Length:	Code for surgical or other the period covered by the 427 5  PROC_CODE_21  Code for surgical or other the period covered by the 432 5  PROC_CODE_22  Code for surgical or other the period covered by the 437	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric  The next highest CPT code. Claim Alphanumeric  The next highest CPT code. Claim CPT code. Claim	charge performed during
Beginning Position: Length: Field 89:  Beginning Position: Length: Field 90:  Beginning Position: Length:	Code for surgical or other the period covered by the 427 5  PROC_CODE_21  Code for surgical or other the period covered by the 432 5  PROC_CODE_22  Code for surgical or other the period covered by the 437 5  PROC_CODE_23	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  Type:	CPT code. Claim Alphanumeric  The next highest CPT code. Claim Alphanumeric  The next highest CPT code. Claim Alphanumeric CPT code. Claim Alphanumeric	charge performed during
Beginning Position: Length: Field 89:  Beginning Position: Length: Field 90:  Beginning Position: Length:	Code for surgical or other the period covered by the 427 5  PROC_CODE_21 Code for surgical or other the period covered by the 432 5  PROC_CODE_22 Code for surgical or other the period covered by the 437 5  PROC_CODE_23 Code for surgical or other the period covered by the 437 5	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with c bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric  The next highest CPT code. Claim Alphanumeric  The next highest CPT code. Claim Alphanumeric  Claim Alphanumeric  The next highest CPT code. Claim Alphanumeric	charge performed during
Beginning Position: Length: Field 89:  Beginning Position: Length: Field 90:  Beginning Position: Length: Field 91:	Code for surgical or other the period covered by the 427 5  PROC_CODE_21 Code for surgical or other the period covered by the 432 5  PROC_CODE_22 Code for surgical or other the period covered by the 437 5  PROC_CODE_23 Code for surgical or other the period covered by the 437 th	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric  the next highest CPT code.	charge performed during
Beginning Position: Length: Field 89:  Beginning Position: Length: Field 90:  Beginning Position: Length: Field 91:  Beginning Position:	Code for surgical or other the period covered by the 427 5  PROC_CODE_21 Code for surgical or other the period covered by the 432 5  PROC_CODE_22 Code for surgical or other the period covered by the 437 5  PROC_CODE_23 Code for surgical or other the period covered by the 442	procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric  the next highest CPT code. Claim CPT code. Claim	charge performed during
Beginning Position: Length: Field 89:  Beginning Position: Length: Field 90:  Beginning Position: Length:	Code for surgical or other the period covered by the 427 5  PROC_CODE_21 Code for surgical or other the period covered by the 432 5  PROC_CODE_22 Code for surgical or other the period covered by the 437 5  PROC_CODE_23 Code for surgical or other the period covered by the 437 th	bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:  r procedure with bill. HCPCS or Data Source: Type:	CPT code. Claim Alphanumeric  the next highest CPT code.	charge performed during

Field 92:	PROC_CODE_24		
		r procedure with	the next highest charge performed during
	the period covered by the	e bill. HCPCS or	CPT code.
Beginning Position: Length:	447 5	Data Source:	Claim Alphanumeric
Field 93:	PROC_CODE_25	Туре:	Alphanumenc
		r procedure with	the next highest charge performed during
	the period covered by the		
Beginning Position:	452	Data Source:	Claim
Length: Field 94:	5 OTHER_AMOUNT	Туре:	Alphanumeric
ricia 541	<del>_</del>	Other Charge A	mount. Calculated using MEDPAR algorithm.
			codes other than 0100-0219, revenue
		-024X, 052X-05	3X, 055X-060X, 064X-070X, 076X-078X,
Doginaina Dogition.	090X-095X, 099X.	Data Carres	Coloulated
Beginning Position: Length:	457 12	Data Source: Type:	Calculated Numeric
Field 95:	PHARM_AMOUNT	.,,,	Hameric
	Ancillary Service Charge,		ge Amount. Calculated using MEDPAR
			th revenue codes other than 0100-0219,
Beginning Position:	revenue center 026X, 06 469	3X. Data Source:	Calculated
Length:	12	Type:	Numeric
Field 96:	MEDSURG_AMOUNT	-	
			al Supply Charge Amount. Calculated using
			ciated with revenue codes other than 0100-
Beginning Position:	0219, revenue center 02 481	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 97:	DME_AMOUNT		
			I Equipment Charge Amount. Calculated
	0100-0219, revenue cen		s associated with revenue codes other than
Beginning Position:	493	Data Source:	Calculated
Length:	12	Туре:	Numeric
Field 98:	USED_DME_AMOUNT	Head Durable M	Andical Equipment Charge Amount
			Medical Equipment Charge Amount.  In of charges associated with revenue codes
	other than 0100-0219, re		
Beginning Position:	505	Data Source:	Calculated
Length: Field 99:	PT_AMOUNT	Туре:	Numeric
rieiu 99.		Physical Theran	by Charge Amount. Calculated using MEDPAR
			th revenue codes other than 0100-0219,
	revenue center 042X.		
Beginning Position:	517	Data Source:	Calculated
Length: Field 100:	12 OT_AMOUNT	Туре:	Numeric
		Occupational TI	nerapy Charge Amount. Calculated using
	MEDPAR algorithm. Sum	of charges asso	ciated with revenue codes other than 0100-
	0219, revenue center 04		
Beginning Position: Length:	529 12	Data Source: Type:	Calculated Numeric
Field 101:	SPEECH_AMOUNT	турс.	Numeric
		Speech Patholo	gy Charge Amount. Calculated using
			ciated with revenue codes other than 0100-
Posinning Desitions	0219, revenue center 04	•	Calculated
Beginning Position: Length:	541 12	Data Source: Type:	Calculated Numeric
Field 102:	IT_AMOUNT	,	-
DSHS/THCIC		Dogo	DSHS Document #25-15013
www.dshs.texas.gov/	THCIC	Page 69	Last Updated: August, 2019
w w w.usiis.icAas.guv/	111010	UF	Last Opulied. August, 2019

	Ancillary Service Charge	, Inhalation The	rapy Charge Amount. Calculated using			
	MEDPAR algorithm. Sum	of charges asso	ociated with revenue codes other than 0100-			
Doninging Docition.	0219, revenue center 04	•	Calculated			
Beginning Position: Length:	553 12	Data Source: Type:	Calculated Numeric			
Field 103:	BLOOD_AMOUNT	•				
			ded during the patient's stay. Calculated			
			es associated with revenue codes other than			
Beginning Position:	0100-0219, revenue cer 565	Data Source:	Calculated			
Length:	12	Туре:	Numeric			
Field 104:	BLOOD_ADMIN_AMOUNT					
	Ancillary Service Charge for blood storage and processing related to the patient's stay. Calculated using MEDPAR algorithm. Sum of charges associated with revenue					
		codes other than 0100-0219, revenue center 039X.				
<b>Beginning Position:</b>	577	Data Source:	Calculated			
Length: Field 105:	OD AMOUNT	Туре:	Numeric			
rieiu 105:	<del>_</del>	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 036X, 07					
Beginning Position: Length:	589 12	Data Source: Type:	Calculated Numeric			
Field 106:	LITH_AMOUNT	турсі	Numeric			
			arge Amount. Calculated using MEDPAR			
		es associated w	ith revenue codes other than 0100-0219,			
Beginning Position:	revenue center 079X. 601	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 107:	CARD_AMOUNT	0 1: 1 01	A			
	algorithm Sum of charge	, Cardiology Cha	arge Amount. Calculated using MEDPAR ith revenue codes other than 0100-0219,			
	revenue center 048X, 07		ici revenue codes other than 0100 0215,			
<b>Beginning Position:</b>	613	Data Source:	Calculated			
Length: Field 108:	ANES_AMOUNT	Туре:	Numeric			
riela 100.		, Anesthesia Cha	arge Amount. Calculated using MEDPAR			
			ith revenue codes other than 0100-0219,			
Danimaina Danisiana	revenue center 037X.	D-1- C	Calaulahad			
Beginning Position: Length:	625 12	Data Source: Type:	Calculated Numeric			
Field 109:	LAB_AMOUNT	- /				
			arge Amount. Calculated using MEDPAR			
	revenue center 030X-03		ith revenue codes other than 0100-0219,			
Beginning Position:	637	Data Source:	Calculated			
Length:	12	Туре:	Numeric			
Field 110:	RAD_AMOUNT	Padiology Cha	rge Amount. Calculated using MEDPAR			
			ith revenue codes other than 0100-0219,			
	revenue center 028X, 03					
Beginning Position:	649	Data Source:	Calculated			
Length: Field 111:	MRI_AMOUNT	Туре:	Numeric			
	<del>_</del>	, MRI Charge Ar	mount. Calculated using MEDPAR algorithm.			
	Sum of charges associat		codes other than 0100-0219, revenue			
Beginning Position:	center 061X. 661	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 112:	OP_AMOUNT					

Page

**70** 

DSHS/THCIC

www.dshs.texas.gov/THCIC

DSHS Document #25-15013

Last Updated: August, 2019

MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 049X-050X. **Beginning Position:** 673 **Data Source:** Calculated Length: 12 Type: Numeric Field 113: **ER\_AMOUNT** Ancillary Service Charge, Emergency Room Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 045X. **Beginning Position:** 685 **Data Source:** Calculated Length: 12 Numeric Type: Field 114: AMBULANCE AMOUNT Ancillary Service Charge, Ambulance Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 054X. **Beginning Position:** 697 **Data Source:** Calculated Length: 12 Type: Numeric Field 115: PRO\_FEE\_AMOUNT Ancillary Service Charge, Professional Fee Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 096X-098X. **Beginning Position:** 709 **Data Source:** Calculated Length: 12 Type: Numeric Field 116: ORGAN\_AMOUNT Ancillary Service Charge, Organ Acquisition Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 081X, 089X. **Beginning Position:** 721 **Data Source:** Calculated Length: Numeric Type: Field 117: ESRD\_AMOUNT Ancillary Service Charge, End Stage Renal Dialysis Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 080X, 082X-085X, 088X. **Beginning Position:** 733 **Data Source:** Calculated Length: 12 Type: Numeric **CLINIC AMOUNT** Field 118: Ancillary Service Charge, Clinic Visit Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 051X. **Beginning Position:** 745 **Data Source:** Calculated Length: 12 Numeric Type: Field 119: TOTAL\_CHARGES Sum of accommodation charges, non-covered accommodation charges, ancillary charges, non-covered ancillary charges. **Beginning Position:** 757 **Data Source:** Claim Length: 12 Type: Numeric Field 120: TOTAL\_NON\_COV\_CHARGES Sum of non-covered accommodation charges, non-covered ancillary charges. **Beginning Position:** 769 **Data Source:** Claim Length: 12 Numeric Type: Field 121: TOTAL CHARGES ANCIL Sum of covered and non-covered ancillary charges. **Beginning Position:** 781 **Data Source:** Claim Length: 12 Type: Numeric Field 122: TOTAL\_NON\_COV\_CHARGES\_ANCIL Sum of non-covered ancillary charges. **Beginning Position:** 793 **Data Source:** Claim

Ancillary Service Charge, Outpatient Services Charge Amount. Calculated using

DSHS/THCIC	Page	DSHS Document #25-15013
www.dshs.texas.gov/THCIC	71	Last Updated: August, 2019

Numeric

Type:

Length:

12

Field 123: PHYSICIAN1\_INDEX\_NUMBER **Description:** Unique identifier assigned to the licensed physician reported as the Operating Physician, if reported in the 837 Institutional Guide format, or Rendering Physician 1, if reported in the 837 Professional Guide format. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include a health practitioner other than a physician who provides a diagnostic or therapeutic procedure related to the outpatient's surgical or radiological procedure, including a technician, psychologist, chiropractor, dentist, nurse practitioner, nurse midwife or podiatrist, authorized by the facility to treat patients. Suppression: Suppressed when the number of physicians reported for a facility or the number of physicians reported for CCS\_PROC\_CODE\_1 for the facility is less than five. **Coding Scheme:** 999999998 Cell size less than 5 999999999 Temporary license or license number could not be matched 805 **Data Source: Beginning Position: Assigned** Length: 10 Type: Alphanumeric Field 124: PHYSICIAN2\_INDEX\_NUMBER **Description:** Unique identifier assigned to the licensed physician reported as the other provider, if reported in the 837 Institutional Guide format, or the Rendering Physician 2, if reported in the 837 Professional Guide format. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include a health practitioner other than a physician who provides a diagnostic or therapeutic procedure related to the outpatient's surgical or radiological procedure, including a technician, psychologist, chiropractor, dentist, nurse practitioner, nurse midwife or podiatrist, authorized by the facility to treat patients. Suppression: Suppressed when the number of physicians reported for a facility or the number of physicians represented for CCS PROC CODE 1 for a facility is less than five. **Coding Scheme:** 999999998 Cell size less than 5 Temporary license or license number could not be matched 999999999 **Beginning Position:** 815 **Data Source: Assigned** Length: Alphanumeric Type: Field 125: INPUT\_FORMAT Format in which the outpatient data file was submitted by the facility **Coding Scheme:** 0 837 Professional 837 Institutional 1 **Beginning Position:** 825 **Data Source: Assigned** Length: Type: Alphanumeric Field 126: SOURCE\_OF\_ADMISSION **Description:** Code indicating source of the admission. **Coding Scheme:** Non-Healthcare Facility Point of Origin (Beginning July 1, 2010) Clinic or Physician's Office 4 Transfer from a hospital Transfer from a skilled nursing facility, intermediate care facility or assisted living facility Transfer from another health care facility Court/Law Enforcement Information not available 9 D Transfer from One Distinct Unit of the Hospital to another Distinct Unit of the Same Hospital Resulting in a Separate Claim to the Payer Transfer from Ambulatory Surgery Center Transfer from a Hospice Facility Invalid If Type of Admission=4 (Newborn) Born inside this hospital Born outside this hospital 6 **Beginning Position:** 826 **Data Source:** Claim Length: Alphanumeric Type: Field 127: PAT\_STATUS Description: Code indicating patient status as of the ending date of service for the period of care reported **Coding Scheme:** 01 Discharged to home or self-care (routine 03 Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation discharge) of skilled care Discharged/transferred to a short term general hospital for inpatient care DSHS/THCIC DSHS Document #25-15013 Page

72

Last Updated: August, 2019

04	Discharged/transferred to a facility that provides custodial or supportive care		Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)			
05	Discharged/transferred to a Designated Cancer Center or Children's Hospital (effective 10-1- 2007)	83	Discharged/Transferred to a Facility that Provides Custodial or Supportive Care with a Planned Acute Care Hospital Inpatient			
06	Discharged/transferred to home under care of an organized home health service organization in anticipation of covered skilled care	84	Readmission (effective 10-1-2013)  Discharged/transferred to a Designated Cancer Center or Children's Hospital with a Planned			
07	Left against medical advice		Acute Care Hospital Inpatient Readmission (effective 10-1-2013)			
80	Admitted as inpatient to this hospital	85	Discharged/Transferred to Home under Care of			
09	Expired		Organized Home Health Service Organization with a Planned Acute Care Hospital Inpatient			
20	Discharged/transferred to Court/Law Enforcement	86	Readmission (effective 10-1-2013)  Discharged/Transferred to Court/Law			
21	Still patient		Enforcement with a Planned Acute Care Hospital			
30	Expired at home	87	Inpatient Readmission (effective 10-1-2013)  Discharged/Transferred to a Federal Health Care			
40	Expired in a medical facility	07	Facility with a Planned Acute Care Hospital			
41	Expired, place unknown	88	Inpatient Readmission (effective 10-1-2013)  Discharged/Transferred to a Hospital-based			
42	Discharged/transferred to federal government operated health facility	00	Medicare Approved Swing Bed with a Planned Acute Care Hospital Inpatient Readmission			
43	Hospice-home		(effective 10-1-2013)			
50	Hospice–medical facility (Certified) providing hospice level of care	89	Discharged/Transferred to an Inpatient Rehabilitation Facility (IRF) including Rehabilitation Distinct Part Units of a Hospital			
51	Discharged/transferred within this institution to Medicare-approved swing bed		with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)			
61	Discharged/transferred to inpatient rehabilitation facility	90	Discharged/Transferred to a Medicare Certified Long Term Care Hospital (LTCH) with a Planned			
62	Discharged/transferred to Medicare-certified long term care hospital		Acute Care Hospital Inpatient Readmission (effective 10-1-2013)			
63	Discharged/transferred to Medicaid-certified nursing facility under Medicaid but not certified under Medicare	91	Discharged/Transferred to a Nursing Facility Certified Under Medicaid but not Certified Under Medicare with a Planned Acute Care Hospital			
64	Discharged/transferred to psychiatric hospital or psychiatric distinct part of a hospital	92	Inpatient Readmission (effective 10-1-2013)  Discharged/Transferred to a Psychiatric Hospital			
65	Discharged/transferred to Critical Access Hospital (CAH)	92	or Psychiatric Distinct Part Unit of a Hospital with a Planned Acute Care Hospital Inpatient			
66	Discharged/Transferred to a designated disaster alternate care (effective 10-1-2013)	93	Readmission (effective 10-1-2013)  Discharged/Transferred to a Critical Access			
69	Discharge/transfer to another type of health care institution not defined elsewhere in the code list		Hospital (CAH) with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1- 2013)			
70	Discharged to Home or Self Care with a Planned Acute. Care Hospital Inpatient Readmission (effective 10-1-2013)	94	Discharged/Transferred to Another Type of Health Care Institution not Defined Elsewhere in this Code List with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-			
81	Discharged/Transferred to a Short Term General Hospital for Inpatient Care with a Planned Acute Care Hospital Inpatient Readmission (effective	95	2013)  Discharged to home or self-care (routine discharge)			
0.2	10-1-2013)	•	Invalid			
82	Discharged/Transferred to a Skilled Nursing Facility (SNF) with Medicare Certification with a					

**Beginning Position:** 827 Data Source: Claim Length: Alphanumeric Type: Field 128: PROVIDER\_NAME **Description:** Name provided by the facility. Facilities reporting fewer than 50 events (Provider ID equals '999999') are assigned the name **Suppression:** 'Low Volume Facility'. If a facility reported fewer than 5 events for a particular gender, including 'unknown', Provider Name is blank. **Beginning Position:** 829 **Data Source:** Provider Length: 55 Type: Alphanumeric

OUTPATIENT CLASSIFICAT	ION DA	TA FILE
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Field 1: RECORD_ID Description: Record Identification Number. Unique number assigned to identify the record. The Record_ID in the ED Outpatient PUDF is not linkable to the Record_ID in the ED Inpatient PUDF or Den Research Data Files. (RDF)  Beginning Position: 12		OUTPATIENT CLASSIFICA	ALION DATA LIFE			
Record_ID in the ED Outpatient PUDF is not linkable to the Record_ID in the ED Inpatent PUDF or ED Research Data Files (RDFs).  Beginning Position:  12	Field 1:	RECORD_ID				
Record JD in the ED Outpatient PUDF is not linkable to the Record_ID in the ED Inpatient PUDF or ED Research Data Files (RDFs).  Beginning Position:  12	Description:	escription: Record Identification Number. Unique number assigned to identify the record.				
Inpatient PUDF or ED Research Data Files (RDFs).						
Beginning Position:  1						
Engith:   12	Beginning Position:	•				
CCS_PRIN_DIAG_CODE   Clinical Classifications Software (CCS) classification of PRIN_DIAG_CODE into clinically meaningful diagnosis category.   Assigned Alphanumeric   Alphanum			3			
Clinical Classifications Software (CCS) classification of PRIN_DIAG_CODE into clinically meaningful diagnosis category.   13			, ii prinaria ii c			
meaning Position: Length: Field 3: CCS_OTH_DIAG_CODE_1 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_1 into clinically meaningful diagnosis category.  Beginning Position: Length: Field 4: CCS_OTH_DIAG_CODE_2 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_2 into clinically meaningful diagnosis category.  Beginning Position: Length: Field 5: CCS_OTH_DIAG_CODE_3 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.  Beginning Position: Length: Field 6: CCS_OTH_DIAG_CODE_4 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.  Beginning Position: Length: Field 7: CCS_OTH_DIAG_CODE_4 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_4 into clinically meaningful diagnosis category.  Beginning Position: Length: Field 7: CCS_OTH_DIAG_CODE_5 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_5 into clinically meaningful diagnosis category.  Beginning Position: CCS_OTH_DIAG_CODE_6 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_5 into clinically meaningful diagnosis category.  Beginning Position: CCS_OTH_DIAG_CODE_6 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6 into clinically meaningful diagnosis category.  Beginning Position: Length: Field 9: CCS_OTH_DIAG_CODE_6 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6 into clinically meaningful diagnosis category.  Beginning Position: Length: Field 1: CCS_OTH_DIAG_CODE_7 CCS_OTH_DIAG_CODE_8 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_7 into clinically meaningful diagnosis category.  Beginning Position: Length: Field 1: CCS_OTH_DIAG_CODE_1 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: Length: Field 1: CCS_OTH_DIAG_CODE_1 CCS_OTH_DIAG_CODE_1 CLINICAL Classif	11010 21	classification of PRIN DIAG CODE into clinically				
Beginning Position:   13			classification of PRIN_DIAG_CODE into clinically			
Length:   4   Type:   Alphanumeric	B		A I			
Field 3: CCS_OTH_DIAG_CODE_1 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_1 into clinically meaningful diagnosis category.  Beginning Position: 17						
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_1 into clinically meaningful diagnosis category.  Beginning Position:  CCS_OTH_DIAG_CODE_2  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_2 into clinically meaningful diagnosis category.  Beginning Position:  Length:  CCS_OTH_DIAG_CODE_3  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.  Beginning Position:  Length:  CCS_OTH_DIAG_CODE_3  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.  Beginning Position:  Length:  CCS_OTH_DIAG_CODE_4  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_4 into clinically meaningful diagnosis category.  Beginning Position:  Length:  CCS_OTH_DIAG_CODE_4  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_4 into clinically meaningful diagnosis category.  Beginning Position:  Length:  CCS_OTH_DIAG_CODE_5  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_5 into clinically meaningful diagnosis category.  Beginning Position:  Length:  CCS_OTH_DIAG_CODE_6  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6 into clinically meaningful diagnosis category.  Beginning Position:  Length:  4		71: -	Alphanumeric			
Clinical y meaningful diagnosis category.	Field 3:					
Beginning Position: 4 Type: Alphanumeric  Field 4: CCS_OTH_DIAG_CODE_2  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_2 into clinically meaningful diagnosis category.  Beginning Position: 21 Data Source: Assigned  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.  Beginning Position: 2 CCS_OTH_DIAG_CODE_3  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.  Beginning Position: 2 CCS_OTH_DIAG_CODE_4  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_4 into clinically meaningful diagnosis category.  Beginning Position: 29 Data Source: Assigned  Alphanumeric  Field 7: CCS_OTH_DIAG_CODE_5  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_5 into clinically meaningful diagnosis category.  Beginning Position: 33 Data Source: Assigned  Alphanumeric  Field 8: CCS_OTH_DIAG_CODE_6  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6 into clinically meaningful diagnosis category.  Beginning Position: 37 Data Source: Assigned  Alphanumeric  Field 9: CCS_OTH_DIAG_CODE_7  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6 into clinically meaningful diagnosis category.  Beginning Position: 4 Type: Alphanumeric  Field 10: CCS_OTH_DIAG_CODE_7  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_7 into clinically meaningful diagnosis category.  Beginning Position: 4 Type: Alphanumeric  CCS_OTH_DIAG_CODE_7  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.  Beginning Position: 4 Type: Alphanumeric  CCS_OTH_DIAG_CODE_7  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: 4 Type: Alphanumeric  CCS_OTH_DIAG_CODE_9  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically						
Length: 4		clinically meaningful diagnosis categor	у.			
CCS_OTH_DIAG_CODE_2   Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_2 into clinically meaningful diagnosis category.   21	Beginning Position:		<b>3</b>			
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_2 into clinically meaningful diagnosis category.			Alphanumeric			
Clinically meaningful diagnosis category.	Field 4:	CCS_OTH_DIAG_CODE_2				
Clinical Uses in Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.   Beginning Position:   25   Data Source:   Alphanumeric		Clinical Classifications Software (CCS)	classification of OTH DIAG CODE 2 into			
Beginning Position: 21						
Field 5:   CCS_OTH_DIAG_CODE_3	<b>Beginning Position:</b>					
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.			<b>3</b>			
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.	Field 5:	CCS OTH DIAG CODE 3				
Clinically meaningful diagnosis category.			classification of OTH DIAG CODE 3 into			
Beginning Position:   25						
Field 6:   CCS_OTH_DIAG_CODE_4   Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_4 into clinically meaningful diagnosis category.   Assigned Alphanumeric   Assigned Alphanu	Posinning Position					
CLINICAL CODE						
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_4 into clinically meaningful diagnosis category.  Beginning Position: Length:  CCS_OTH_DIAG_CODE_5 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_5 into clinically meaningful diagnosis category.  Beginning Position: Length:  CCS_OTH_DIAG_CODE_6 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6 into clinically meaningful diagnosis category.  Beginning Position: Length:  CCS_OTH_DIAG_CODE_6 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6 into clinically meaningful diagnosis category.  Beginning Position: Length:  CCS_OTH_DIAG_CODE_7 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_7 into clinically meaningful diagnosis category.  Beginning Position: Length:  CCS_OTH_DIAG_CODE_8 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.  Beginning Position: Length:  4			Alphanumeric			
Clinically meaningful diagnosis category.	rieid 6:		- 'C - ' COTH DIAG CODE 4: 1			
Beginning Position: Length:         29         Data Source: Type:         Assigned Alphanumeric           Field 7:         CCS_OTH_DIAG_CODE_5         Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_5 into clinically meaningful diagnosis category.         Assigned Alphanumeric           Beginning Position: Length:         4         Type: Alphanumeric         Assigned Alphanumeric           Field 8:         CCS_OTH_DIAG_CODE_6         Alphanumeric           Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6 into clinically meaningful diagnosis category.         Assigned Alphanumeric           Beginning Position: Length:         4         Type: Alphanumeric           Field 9:         CCS_OTH_DIAG_CODE_7         Assigned Alphanumeric           Cinical Classifications Software (CCS) classification of OTH_DIAG_CODE_7 into clinically meaningful diagnosis category.         Assigned Alphanumeric           Field 10:         CCS_OTH_DIAG_CODE_8         Assigned Alphanumeric           Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.         Assigned Alphanumeric           Field 11:         CCS_OTH_DIAG_CODE_9         Alphanumeric           Field 11:         CCS_OTH_DIAG_CODE_9         Alphanumeric           Field 12:         CCS_OTH_DIAG_CODE_10         Assigned Alphanumeric           Field 12:         CCS_OTH_D						
Field 7:   CCS_OTH_DIAG_CODE_5   Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_5 into clinically meaningful diagnosis category.    Beginning Position:   Length:   CCS_OTH_DIAG_CODE_6   Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6   Clinically meaningful diagnosis category.   Beginning Position:   Length:   4   Type:   Assigned   Alphanumeric						
CCS_OTH_DIAG_CODE_5	Beginning Position:	29 Data Source				
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_5 into clinically meaningful diagnosis category.   33		- 7F	Alphanumeric			
Clinically meaningful diagnosis category.   Assigned   Alphanumeric	Field 7:	CCS_OTH_DIAG_CODE_5				
Beginning Position: Length: 4 Type: Assigned Alphanumeric		Clinical Classifications Software (CCS)	classification of OTH_DIAG_CODE_5 into			
Beginning Position: Length: 4 Type: Assigned Alphanumeric		clinically meaningful diagnosis categor	γ.			
Length: 4   Type: Alphanumeric	<b>Beginning Position:</b>		•			
CCS_OTH_DIAG_CODE_6						
Beginning Position:  Beginning Position: Length:  Field 9:  CCS_OTH_DIAG_CODE_7 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_7 into clinically meaningful diagnosis category.  Beginning Position: Length:  CCS_OTH_DIAG_CODE_7 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_7 into clinically meaningful diagnosis category.  Beginning Position: CCS_OTH_DIAG_CODE_8 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.  Beginning Position: Length: CCS_OTH_DIAG_CODE_9 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.  Field 11: CCS_OTH_DIAG_CODE_9 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: Length: CCS_OTH_DIAG_CODE_10 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.  Field 12: Page DSHS Document #25-15013		CCS OTH DIAG CODE 6	·			
Clinically meaningful diagnosis category. 37   Data Source: 4   Type: Alphanumeric			classification of OTH_DIAG_CODE_6 into			
Beginning Position: Length: 4						
Length: 4   Type: Alphanumeric	Reginning Position					
CCS_OTH_DIAG_CODE_7   Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_7 into clinically meaningful diagnosis category.    Beginning Position: Length:						
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_7 into clinically meaningful diagnosis category.  Beginning Position: Length:  Field 10:  CCS_OTH_DIAG_CODE_8  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.  Beginning Position: Length:  Field 11:  CCS_OTH_DIAG_CODE_9  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: Length:  CCS_OTH_DIAG_CODE_9  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: Length:  CCS_OTH_DIAG_CODE_10  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.  DSHS/THCIC  Page  DSHS Document #25-15013			Alphanumenc			
Clinically meaningful diagnosis category.   Assigned   Alphanumeric	riela 5.		alacsification of OTH DIAC CODE 7 into			
Beginning Position: Length:  Field 10:  CCS_OTH_DIAG_CODE_8  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.  Beginning Position: Length:  Field 11:  CCS_OTH_DIAG_CODE_9  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: Length:  Assigned Alphanumeric  CCS_OTH_DIAG_CODE_9  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: Length:  Assigned Alphanumeric  CCS_OTH_DIAG_CODE_10  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.  DSHS/THCIC  Page  DSHS Document #25-15013						
Length: 4   Type: Alphanumeric		, , ,	•			
CCS_OTH_DIAG_CODE_8 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.  Beginning Position: Length: 45 Data Source: Assigned 4 Type: Alphanumeric  CCS_OTH_DIAG_CODE_9 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: 49 Data Source: Assigned Length: 49 Data Source: Alphanumeric  Field 12: CCS_OTH_DIAG_CODE_10 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.  DSHS/THCIC Page DSHS Document #25-15013			3			
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.  Beginning Position: Length:  CCS_OTH_DIAG_CODE_9 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: Length:  4			Alphanumeric			
Clinically meaningful diagnosis category.   45   Data Source:   Assigned   Alphanumeric	Field 10:					
Beginning Position: Length: 45		Clinical Classifications Software (CCS)	classification of OTH_DIAG_CODE_8 into			
Length: 4   Type: Alphanumeric		clinically meaningful diagnosis categor	у.			
Field 11:  CCS_OTH_DIAG_CODE_9  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  Beginning Position: Length:  49  Data Source: Assigned 4  Type: Alphanumeric  CCS_OTH_DIAG_CODE_10  Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.  DSHS/THCIC  Page  DSHS Document #25-15013	<b>Beginning Position:</b>					
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.  49	Length:	4 Type:	Alphanumeric			
Clinically meaningful diagnosis category.	Field 11:	CCS_OTH_DIAG_CODE_9				
Clinically meaningful diagnosis category.			classification of OTH DIAG CODE 9 into			
Beginning Position: 49 Data Source: Assigned Alphanumeric  Field 12: CCS_OTH_DIAG_CODE_10 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.  DSHS/THCIC Page DSHS Document #25-15013						
Length: 4 Type: Alphanumeric  Field 12: CCS_OTH_DIAG_CODE_10 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.  DSHS/THCIC Page DSHS Document #25-15013	Reginning Docitions		•			
CCS_OTH_DIAG_CODE_10 Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.  DSHS/THCIC Page DSHS Document #25-15013						
Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.  DSHS/THCIC Page DSHS Document #25-15013			, aphanamene			
clinically meaningful diagnosis category.  DSHS/THCIC Page DSHS Document #25-15013	i iciu 12.		classification of OTH DIAC CODE 10 into			
DSHS/THCIC Page DSHS Document #25-15013						
		clinically meaningful diagnosis categor	у.			
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www.usiis.texas.gov/1HCiC 7/4 Last Updated: August, 2019						
	www.ashs.texas.gov	/IHCIC 74	Last Updated: August, 2019			

Beginning Position: Length:	53 4	Data Source:	Assigned Alphanumeric
ield 13:	, , , , , , , , , , , , , , , , , , , ,		
icia 15.			assification of OTH_DIAG_CODE_11 into
Paginning Dagitians	clinically meaningful diag 57	• •	
Beginning Position:	4	Data Source:	Assigned Alphanumeric
.ength: Field 14:	CCS_OTH_DIAG_CODE	Type:	Alphanumenc
iciu 14.			: Giantian of OTH DIAC CODE 12 into
			assification of OTH_DIAG_CODE_12 into
	clinically meaningful diag	, ,	
Beginning Position:	61	Data Source:	Assigned
_ength:	4	Туре:	Alphanumeric
Field 15:	CCS_OTH_DIAG_CODE		
			assification of OTH_DIAG_CODE_13 into
	clinically meaningful diag		
Beginning Position:	65	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 16:	CCS_OTH_DIAG_CODE		
	Clinical Classifications So	ftware (CCS) cl	assification of OTH_DIAG_CODE_14 into
	clinically meaningful diag	nosis category.	
Beginning Position:	69	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 17:	CCS_OTH_DIAG_CODE	15	
			assification of OTH_DIAG_CODE_15 into
	clinically meaningful diag		
Beginning Position:	73	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 18:	CCS_OTH_DIAG_CODE		, iip it a real to the control of th
			assification of OTH_DIAG_CODE_16 into
	clinically meaningful diag		
Posinning Position	77		
Beginning Position:	4	Data Source:	Assigned
Length: Field 19:		Type:	Alphanumeric
riela 19:	CCS_OTH_DIAG_CODE		'C
			assification of OTH_DIAG_CODE_17 into
	clinically meaningful diag	• •	
Beginning Position:	81	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 20:	CCS_OTH_DIAG_CODE		
		` ,	assification of OTH_DIAG_CODE_18 into
	clinically meaningful diag		
Beginning Position:	85	Data Source:	Assigned
Length:	4	Туре:	Alphanumeric
Field 21:	CCS_OTH_DIAG_CODE		
	Clinical Classifications So	ftware (CCS) cl	assification of OTH_DIAG_CODE_19 into
	clinically meaningful diag		
Beginning Position:	89	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 22:	CCS_OTH_DIAG_CODE		
			assification of OTH_DIAG_CODE_20 into
	clinically meaningful diag		
Beginning Position:	93	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 23:	CCS_OTH_DIAG_CODE		, apriandition to
·			assification of OTH_DIAG_CODE_21 into
Posinning Position:	clinically meaningful diag		
Beginning Position:	97 4	Data Source:	Assigned
Length:		Type:	Alphanumeric
Eiald 74.	CCS_OTH_DIAG_CODE		(C. I. COTH DIAG COST CO. )
Field 24:		ntware (CCS) cl.	assification of OTH_DIAG_CODE_22 into
Field 24:			
	clinically meaningful diag	nosis category.	
Field 24:  Beginning Position:  DSHS/THCIC	clinically meaningful diag	nosis category.	

Length:	4 Type:	Alphanumeric		
Field 25:	CCS_OTH_DIAG_CODE_23			
	Clinical Classifications Software (CCS)	classification of OTH_DIAG_CODE_23 into		
	clinically meaningful diagnosis category			
<b>Beginning Position:</b>	105 Data Source:	Assigned		
Length:	4 <b>Type:</b>	Alphanumeric		
Field 26:	CCS_OTH_DIAG_CODE_24			
	Clinical Classifications Software (CCS)	classification of OTH_DIAG_CODE_24 into		
	clinically meaningful diagnosis category	<i>'</i> .		
<b>Beginning Position:</b>	109 Data Source:	Assigned		
Length:	4 Type:	Alphanumeric		
Field 27:	CCS_PROC_CODE_1			
	Clinical Classifications Software (CCS)	for Services and Procedures classification of		
	PROC_CODE_1 into clinically meaningform	ul procedure category.		
Beginning Position:	113 Data Source:	Assigned		
Length:	3 <b>Type:</b>	Alphanumeric		
Field 28:	CCS_PROC_CODE_2			
	Clinical Classifications Software (CCS)	for Services and Procedures classification of		
	PROC_CODE_2 into clinically meaningform	ul procedure category.		
Beginning Position:	Data Source:	Assigned		
Length:	3 <b>Type:</b>	Alphanumeric		
Field 29:	CCS_PROC_CODE_3			
	Clinical Classifications Software (CCS)	for Services and Procedures classification of		
	PROC_CODE_3 into clinically meaningform	ul procedure category.		
Beginning Position:	119 Data Source:	Assigned		
Length:	3 <b>Type:</b>	Alphanumeric		
Field 30:	CCS_PROC_CODE_4			
	Clinical Classifications Software (CCS)	for Services and Procedures classification of		
	PROC_CODE_4 into clinically meaningform	ul procedure category.		
Beginning Position:	Data Source:			
Length:	3 <b>Type:</b>	Alphanumeric		
Field 31:	CCS_PROC_CODE_5			
	Clinical Classifications Software (CCS)	for Services and Procedures classification of		
	PROC_CODE_5 into clinically meaningform	ul procedure category.		
Beginning Position:	125 <b>Data Source:</b>			
Length:	3 <b>Type:</b>	Alphanumeric		
Field 32:	CCS_PROC_CODE_6			
		for Services and Procedures classification of		
	PROC_CODE_6 into clinically meaningform			
Beginning Position:	128 Data Source:	Assigned		
Length:	3 Type:	Alphanumeric		
Field 33:	CCS_PROC_CODE_7			
		for Services and Procedures classification of		
	PROC_CODE_7 into clinically meaningform			
Beginning Position:	131 Data Source:	Assigned		
Length:	3 Type:	Alphanumeric		
Field 34:	CCS_PROC_CODE_8			
		or Services and Procedures classification of		
B	PROC_CODE_8 into clinically meaningform			
Beginning Position:	Data Source:	Assigned		
Length:	3 Type:	Alphanumeric		
Field 35:	CCS_PROC_CODE_9			
		for Services and Procedures classification of		
nadanta a na 191	PROC_CODE_9 into clinically meaningform			
Beginning Position:	Data Source:	3		
Length: Field 36:	3 Type:	Alphanumeric		
rieiū 30:	CCS_PROC_CODE_10	Condense and Durand		
		for Services and Procedures classification of		
	PROC_CODE_10 into clinically meaning			
Beginning Position:	140 Data Source:	Assigned		
	3 <b>Type:</b>	Alphanumeric		
Length:	<i>'</i> '			
DSHS/THCIC www.dshs.texas.gov	Page _	DSHS Document #25-15013 Last Updated: August, 2019		

Field 37:	CCS_PROC_CODE_11		
		ftware (CCS) for	Services and Procedures classification of
	PROC_CODE_11 into clin	ically meaningfu	l procedure category.
Beginning Position:	143	Data Source:	Assigned
ength: ield 38:	CCS_PROC_CODE_12	Туре:	Alphanumeric
iciu 30:		ftware (CCS) for	Services and Procedures classification of
	PROC_CODE_12 into clini		
Seginning Position:	146	Data Source:	Assigned
ength:	3	Туре:	Alphanumeric
ield 39:	CCS_PROC_CODE_13		
			Services and Procedures classification of
Beginning Position:	PROC_CODE_13 into clini	cally meaningfu  Data Source:	
ength:	3	Type:	Assigned Alphanumeric
ield 40:	CCS_PROC_CODE_14	. , , , ,	7.10.10.10
		ftware (CCS) for	Services and Procedures classification of
	PROC_CODE_14 into clini		
Beginning Position:	152	Data Source:	Assigned
ength: ield 41:	CCS DDOC CODE 15	Туре:	Alphanumeric
iciu 41:	CCS_PROC_CODE_15 Clinical Classifications So	ftware (CCS) for	Services and Procedures classification of
	PROC_CODE_15 into clini		
Beginning Position:	155	Data Source:	Assigned
ength:	3	Туре:	Alphanumeric
ield 42:	CCS_PROC_CODE_16		
			Services and Procedures classification of
	PROC_CODE_16 into clini		
Seginning Position: .ength:	158 3	Data Source: Type:	Assigned Alphanumeric
ield 43:	CCS_PROC_CODE_17	туре.	Alphanumenc
		ftware (CCS) for	Services and Procedures classification of
	PROC_CODE_17 into clini		
Beginning Position:	161	Data Source:	Assigned
ength:	3	Туре:	Alphanumeric
ield 44:	CCS_PROC_CODE_18	ft	- Compiese and Durandouse alongification of
	PROC_CODE_18 into clini		Services and Procedures classification of
Beginning Position:	164	Data Source:	Assigned
ength:	3	Type:	Alphanumeric
ield 45:	CCS_PROC_CODE_19	- //-	
		ftware (CCS) for	Services and Procedures classification of
	PROC_CODE_19 into clini		
Beginning Position:	167	Data Source:	Assigned
ength: Field 46:	3	Туре:	Alphanumeric
iela 46:	CCS_PROC_CODE_20	ftware (CCC) for	Services and Procedures classification of
	PROC_CODE_20 into clini		
Beginning Position:	170	Data Source:	Assigned
ength:	3	Type:	Alphanumeric
ield 47:	CCS_PROC_CODE_21		·
		C (CCC) C	r Services and Procedures classification of
	PROC_CODE_21 into clin	ically meaningfu	l procedure category.
	PROC_CODE_21 into clini 173	ically meaningfu  Data Source:	l procedure category. Assigned
ength:	PROC_CODE_21 into clini 173 3	ically meaningfu	l procedure category.
Beginning Position: _ength: Field 48:	PROC_CODE_21 into clini 173 3 CCS_PROC_CODE_22	ically meaningfu  Data Source:  Type:	l procedure category. Assigned Alphanumeric
ength:	PROC_CODE_21 into clini 173 3  CCS_PROC_CODE_22 Clinical Classifications So	ically meaningfu  Data Source:  Type:  ftware (CCS) for	I procedure category. Assigned Alphanumeric  Services and Procedures classification of
ength:	PROC_CODE_21 into clini 173 3 CCS_PROC_CODE_22	ically meaningfu  Data Source:  Type:  ftware (CCS) for	I procedure category. Assigned Alphanumeric  Services and Procedures classification of Il procedure category.
ength: ield 48:	PROC_CODE_21 into clini 173 3  CCS_PROC_CODE_22 Clinical Classifications So PROC_CODE_22 into clini	ically meaningfu  Data Source: Type:  ftware (CCS) for ically meaningfu	I procedure category. Assigned Alphanumeric  Services and Procedures classification of
ength: ield 48: Beginning Position:	PROC_CODE_21 into clini 173 3  CCS_PROC_CODE_22 Clinical Classifications So PROC_CODE_22 into clini 176	ically meaningfu  Data Source: Type:  ftware (CCS) for ically meaningfu  Data Source:	Il procedure category. Assigned Alphanumeric  Services and Procedures classification of Il procedure category. Assigned

Field 49:	CCS_PROC_CODE_23					
	Clinical Classifications Software (CCS) for Services and Procedures classification of					
	PROC_CODE_23 into clini					
Beginning Position:	179	Data Source:	Assigned			
Length:	3	Туре:	Alphanumeric			
Field 50:	CCS_PROC_CODE_24	fturare (CCC) for	Complete and Dress dures also ification of			
	PROC_CODE_24 into clini		Services and Procedures classification of			
Beginning Position:	182	Data Source:	Assigned			
Length:	3	Type:	Alphanumeric			
Field 51:	CCS_PROC_CODE_25	/ I	F			
	Clinical Classifications Sof	ftware (CCS) for	Services and Procedures classification of			
	PROC_CODE_25 into clini					
Beginning Position:	185	Data Source:	Assigned			
Length: Field 52:	3 EAPG_GRP_VER	Туре:	Alphanumeric			
rieiu 52:		iont Group Vor	sion Number, as assigned by 3M™ EAPG			
	Grouper	lient Group vers	sion Number, as assigned by 514 LAFG			
Beginning Position:	188					
Length:	12	Type:	Alphanumeric			
Field 53:	APC_GRP_VER		<u>-</u>			
			Version Number as assigned by 3M™ APC			
	Grouper. Not available 40	-				
Beginning Position:	200	Data Source:	Assigned			
Length: Field 54:	12 CRG_STATUS_1	Туре:	Alphanumeric			
i iciu 54.		status code as	assigned by 3M™ CRG Grouper. Not			
	available 4Q09.	status code as	assigned by 514 CRG Grouper. Not			
Beginning Position:	212	Data Source:	Assigned			
Length:	1	Type:	Alphanumeric			
Field 55:	CRG_STATUS_2					
		status code as	assigned by 3M™ CRG Grouper. Not			
	available 4Q09.					
Beginning Position:	213	Data Source:	Assigned			
Length: Field 56:	CRG_STATUS_3	Туре:	Alphanumeric			
i ieiu 30.		status code as	assigned by 3M™ CRG Grouper. Not			
	available 4Q09.	status couc as	assigned by SM CRG Grouper. Not			
Beginning Position:	214	Data Source:	Assigned			
Length:	1	Туре:	Alphanumeric			
Field 57:	CRG_STATUS_4					
		status code as	assigned by 3M™ CRG Grouper. Not			
	available 4Q09.					
–						
	215	Data Source:	Assigned			
Length:	215 1	Data Source: Type:	Assigned Alphanumeric			
Beginning Position: Length: Field 58:	215 1 CRG_STATUS_5	Туре:	Alphanumeric			
Length:	215 1 CRG_STATUS_5 Clinical Risk Group (CRG)	Туре:	5			
Length: Field 58:	215 1 CRG_STATUS_5	Туре:	Alphanumeric			
Length: Field 58: Beginning Position: Length:	215 1 CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1	<b>Type:</b> status code as	Alphanumeric assigned by 3M™ CRG Grouper. Not			
Length: Field 58: Beginning Position:	215 1 CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1 CRG_STATUS_6	Type: status code as  Data Source: Type:	Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric			
Length: Field 58: Beginning Position: Length:	215 1  CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1  CRG_STATUS_6 Clinical Risk Group (CRG)	Type: status code as  Data Source: Type:	Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned			
Length: Field 58:  Beginning Position: Length: Field 59:	215 1  CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1  CRG_STATUS_6 Clinical Risk Group (CRG) available 4Q09.	Type: status code as  Data Source: Type: status code as	Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not			
Length: Field 58:  Beginning Position: Length: Field 59:  Beginning Position:	215 1  CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1  CRG_STATUS_6 Clinical Risk Group (CRG) available 4Q09. 217	status code as  Data Source: Type:  status code as  Data Source:	Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned			
Length: Field 58:  Beginning Position: Length: Field 59:  Beginning Position: Length:	215 1  CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1  CRG_STATUS_6 Clinical Risk Group (CRG) available 4Q09. 217 1	Type: status code as  Data Source: Type: status code as	Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not			
Length: Field 58:  Beginning Position: Length: Field 59:  Beginning Position:	215 1  CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1  CRG_STATUS_6 Clinical Risk Group (CRG) available 4Q09. 217 1 CRG_STATUS_7	status code as  Data Source: Type:  status code as  Data Source: Type:	Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric			
Length: Field 58:  Beginning Position: Length: Field 59:  Beginning Position: Length:	215 1  CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1  CRG_STATUS_6 Clinical Risk Group (CRG) available 4Q09. 217 1  CRG_STATUS_7 Clinical Risk Group (CRG)	status code as  Data Source: Type:  status code as  Data Source: Type:	Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned			
Length: Field 58:  Beginning Position: Length: Field 59:  Beginning Position: Length: Field 60:	215 1  CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1  CRG_STATUS_6 Clinical Risk Group (CRG) available 4Q09. 217 1  CRG_STATUS_7 Clinical Risk Group (CRG) available 4Q09.	status code as  Data Source: Type:  status code as  Data Source: Type:  status code as	Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not			
Length: Field 58:  Beginning Position: Length: Field 59:  Beginning Position: Length:	215 1  CRG_STATUS_5 Clinical Risk Group (CRG) available 4Q09. 216 1  CRG_STATUS_6 Clinical Risk Group (CRG) available 4Q09. 217 1  CRG_STATUS_7 Clinical Risk Group (CRG)	status code as  Data Source: Type:  status code as  Data Source: Type:	Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric			

Length:	1	Туре:	Alphanumeric
Field 61:	CRG_STATUS_8		
	Clinical Risk Group (CRG) available 4Q09.	status code as	assigned by 3M™ CRG Grouper. Not
Beginning Position:	219	Data Source:	Assigned
Length: Field 62:	CRG STATUS 9	Туре:	Alphanumeric
rieiu 62.		status code as	assigned by 3M™ CRG Grouper. Not
Beginning Position:	220	Data Source:	Assigned
Length: Field 63:	1	Туре:	Alphanumeric
riela 63:	CRG_STATUS_10 Clinical Risk Group (CRG) available 4Q09.	status code as	assigned by 3M™ CRG Grouper. Not
Beginning Position: Length:	221 1	Data Source: Type:	Assigned Alphanumeric
Field 64:	CRG_CODE_1	туре.	Alphanumenc
i iciu 04.		code as assign	ed by 3M™ CRG Grouper. Not available
Beginning Position: Length:	222 5	Data Source: Type:	Assigned Alphanumeric
Field 65:		code as assign	ed by 3M™ CRG Grouper. Not available
Beginning Position:	4Q09. 227	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 66:	CRG_CODE_3	<b>71</b>	F 2 2 2 2
		code as assign	ed by 3M™ CRG Grouper. Not available
Beginning Position: Length:	232 5	Data Source: Type:	Assigned Alphanumeric
Field 67:	CRG_CODE_4	турсі	Auphanamene
		code as assign	ed by 3M™ CRG Grouper. Not available
Beginning Position: Length:	237 5	Data Source: Type:	Assigned Alphanumeric
Field 68:	CRG_CODE_5	7,1-	F 2 2 2 2
		code as assign	ed by 3M™ CRG Grouper. Not available
Beginning Position: Length:	242 5	Data Source: Type:	Assigned Alphanumeric
Field 69:	CRG CODE 6	туре.	Alphanumenc
i icia osi		code as assign	ed by 3M™ CRG Grouper. Not available
Beginning Position:	247	Data Source:	Assigned
Length:	5	Туре:	Alphanumeric
Field 70:		code as assign	ed by 3M™ CRG Grouper. Not available
Beginning Position:	4009		ca by 511 cita crouper. Not available
	4Q09. 252	_	·
	4Q09. 252 5	Data Source: Type:	Assigned
Length:	252 5	Data Source:	·
Length: Field 71:	252 5 CRG_CODE_8 Clinical Risk Group (CRG) 4Q09.	Data Source: Type:	Assigned Alphanumeric ed by 3M™ CRG Grouper. Not available
Length: Field 71: Beginning Position: Length:	252 5 CRG_CODE_8 Clinical Risk Group (CRG)	Data Source: Type:	Assigned Alphanumeric
Length: Field 71: Beginning Position:	252 5 CRG_CODE_8 Clinical Risk Group (CRG) 4Q09. 257 5 CRG_CODE_9 Clinical Risk Group (CRG)	Data Source: Type:  code as assign  Data Source: Type:	Assigned Alphanumeric  ed by 3M <sup>™</sup> CRG Grouper. Not available  Assigned
Length: Field 71:  Beginning Position: Length: Field 72:  Beginning Position:	252 5 CRG_CODE_8 Clinical Risk Group (CRG) 4Q09. 257 5 CRG_CODE_9 Clinical Risk Group (CRG) 4Q09. 262	Data Source: Type:  code as assign  Data Source: Type:  code as assign  Data Source:	Assigned Alphanumeric  ed by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  ed by 3M™ CRG Grouper. Not available  Assigned Assigned
Length: Field 71:  Beginning Position: Length: Field 72:	252 5 CRG_CODE_8 Clinical Risk Group (CRG) 4Q09. 257 5 CRG_CODE_9 Clinical Risk Group (CRG) 4Q09.	Data Source: Type:  code as assign  Data Source: Type:  code as assign	Assigned Alphanumeric  ed by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  ed by 3M™ CRG Grouper. Not available

Field 73:	CRG_CODE_10		
		code as assign	ned by 3M™ CRG Grouper. Not available
	4Q09.	2342 43 433191	.c. 2, 511 Cite Grouper Hot available
Beginning Position:	267	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 74:	CRG_SEVERITY_1		
		severity code	as assigned by 3M™ CRG Grouper. Not
	available 4Q09.	•	·
Beginning Position:	272	Data Source:	Assigned
Length:	1	Туре:	Alphanumeric
Field 75:	CRG_SEVERITY_2		
		severity code	as assigned by 3M™ CRG Grouper. Not
B	available 4Q09.	<b>D</b> . I. G.	A. S. J. J.
Beginning Position:	273 1	Data Source:	Assigned
<u>Length:</u> Field 76:	CRG_SEVERITY_3	Туре:	Alphanumeric
1 ICIU 7 U.		severity code	as assigned by 3M™ CRG Grouper. Not
	available 4Q09.	severity code	as assigned by sin CNG Grouper, Not
Beginning Position:	274	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 77:	CRG_SEVERITY_4	•	•
		severity code	as assigned by 3M™ CRG Grouper. Not
	available 4Q09.	,	, ,
Beginning Position:	275	Data Source:	Assigned
Length:	1	Туре:	Alphanumeric
Field 78:	CRG_SEVERITY_5		
		severity code	as assigned by 3M™ CRG Grouper. Not
	available 4Q09.		
Beginning Position:	276	Data Source:	Assigned
Length: Field 79:	CRG_SEVERITY_6	Туре:	Alphanumeric
ı iciu / J.		severity code	as assigned by 3M™ CRG Grouper. Not
	available 4Q09.	severity code	as assigned by Sin CRG Grouper, Not
Beginning Position:	277	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 80:	CRG_SEVERITY_7		
		severity code	as assigned by 3M™ CRG Grouper. Not
	available 4Q09.	,	- '
Beginning Position:	278	Data Source:	Assigned
Length:	1	Туре:	Alphanumeric
Field 81:	CRG_SEVERITY_8		
		_	
	Clinical Risk Group (CRG)	severity code	as assigned by 3M™ CRG Grouper. Not
B	Clinical Risk Group (CRG) available 4Q09.	•	
	Clinical Risk Group (CRG) available 4Q09. 279	Data Source:	Assigned
Length:	Clinical Risk Group (CRG) available 4Q09. 279	•	
Length:	Clinical Risk Group (CRG) available 4Q09. 279 1 CRG_SEVERITY_9	Data Source: Type:	Assigned Alphanumeric
Length:	Clinical Risk Group (CRG) available 4Q09. 279 1 CRG_SEVERITY_9 Clinical Risk Group (CRG)	Data Source: Type:	Assigned
Length: Field 82:	Clinical Risk Group (CRG) available 4Q09. 279 1 CRG_SEVERITY_9 Clinical Risk Group (CRG) available 4Q09.	Data Source: Type: severity code	Assigned Alphanumeric  as assigned by 3M™ CRG Grouper. Not
Length: Field 82: Beginning Position:	Clinical Risk Group (CRG) available 4Q09. 279 1 CRG_SEVERITY_9 Clinical Risk Group (CRG) available 4Q09. 280	Data Source: Type: severity code Data Source:	Assigned Alphanumeric  as assigned by 3M™ CRG Grouper. Not  Assigned
Length: Field 82: Beginning Position: Length:	Clinical Risk Group (CRG) available 4Q09. 279 1 CRG_SEVERITY_9 Clinical Risk Group (CRG) available 4Q09. 280 1	Data Source: Type: severity code	Assigned Alphanumeric  as assigned by 3M™ CRG Grouper. Not
Length: Field 82: Beginning Position: Length:	Clinical Risk Group (CRG) available 4Q09. 279 1 CRG_SEVERITY_9 Clinical Risk Group (CRG) available 4Q09. 280 1 CRG_SEVERITY_10	Data Source: Type: severity code Data Source: Type:	Assigned Alphanumeric  as assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric
Length: Field 82: Beginning Position: Length:	Clinical Risk Group (CRG) available 4Q09. 279 1 CRG_SEVERITY_9 Clinical Risk Group (CRG) available 4Q09. 280 1 CRG_SEVERITY_10	Data Source: Type: severity code Data Source: Type:	Assigned Alphanumeric  as assigned by 3M™ CRG Grouper. Not  Assigned
Beginning Position: Length: Field 82:  Beginning Position: Length: Field 83:  Beginning Position:	Clinical Risk Group (CRG) available 4Q09. 279 1 CRG_SEVERITY_9 Clinical Risk Group (CRG) available 4Q09. 280 1 CRG_SEVERITY_10 Clinical Risk Group (CRG)	Data Source: Type: severity code Data Source: Type:	Assigned Alphanumeric  as assigned by 3M™ CRG Grouper. Not  Assigned Alphanumeric

DSHS/THCIC	Page	DSHS Document #25-15013
www.dshs.texas.gov/THCIC	80	Last Updated: August, 2019

#### **OUTPATIENT CHARGES DATA FILE**

Field 1: RECORD\_ID

**Description:** Record Identification Number. Unique number assigned to identify the record. The

Record ID in the ED Outpatient PUDF is not linkable to the Record ID in the ED

Inpatient PUDF or ED Research Data Files (RDFs).

**Beginning Position: Data Source:** Assigned 1 Length: Alphanumeric 12 Type:

Field 2: REVENUE\_CODE

**Description:** Code corresponding to each specific accommodation, ancillary service or billing

calculation related to the services being billed.

#### **Coding Scheme:**

DSHS/	THCIC		Page		DSHS Document #25-15013
	- 3/4 beds - rooms - medical/surgical/GYN	0154	Room charges for ward rooms - psychiatric		·
0130	Room charges for semi-private - 3/4 beds - rooms - general Room charges for semi-private	0153	Room charges for ward rooms - pediatric	0192	Room charges for subacute care - Level II (comprehensive care)
0129	Room charges for semi-private rooms - other	0152	Room charges for ward rooms - obstetrics	0191	Room charges for subacute care - Level I (skilled care)
0128	Room charges for semi-private rooms - rehabilitation	0151	Room charges for ward rooms - medical/surgical/GYN	0190	Room charges for subacute care - general
0127	Room charges for semi-private rooms - oncology	0150	Room charges for ward rooms - general	0189	Room charges for LOA - other
0126	Room charges for semi-private rooms - detoxification	0149	Room charges for private (deluxe) rooms - other	0103	nursing home (for hospitalization)
0125	Room charges for semi-private rooms - hospice	0148	Room charges for private (deluxe) rooms - rehabilitation	0185	therapeutic leave  Room charges for LOA –
0124	Room charges for semi-private rooms - psychiatric	0147	Room charges for private (deluxe) rooms - oncology	0182 0183	Room charges for LOA - patient convenience-charges billable Room charges for LOA -
0123	Room charges for semi-private rooms - pediatric	0146	Room charges for private (deluxe) rooms - detoxification	0180	Room charges for LOA - general
0122	Room charges for semi-private rooms - obstetrics	0145	Room charges for private (deluxe) rooms - hospice	0179	Room charges for nursery - other
0121	Room charges for semi-private rooms - medical/surgical/GYN	0144	Room charges for private (deluxe) rooms - psychiatric	0174	Room charges for nursery - newborn level IV
0120	Room charges for semi-private rooms - general	0143	Room charges for private (deluxe) rooms - pediatric	0173	Room charges for nursery - newborn level III
0119	Room charges for private rooms - other	0142	Room charges for private (deluxe) rooms - obstetrics	0172	Room charges for nursery - newborn level II
0118	Room charges for private rooms - rehabilitation	0141	Room charges for private (deluxe) rooms - medical/surgical/GYN	0171	Room charges for nursery - newborn level I
0117	Room charges for private rooms - oncology	0140	Room charges for private (deluxe) rooms - general	0170	Room charges for nursery - general
0116	Room charges for private rooms - detoxification	0139	Room charges for semi-private - 3/4 beds - rooms - other	0169	Room charges for other rooms - other
0115	Room charges for private rooms - hospice	0130	- 3/4 beds - rooms - rehabilitation	0167	Room charges for other rooms – self care
0114	Room charges for private rooms - psychiatric	0137	- 3/4 beds - rooms - oncology Room charges for semi-private	0164	general  Room charges for other rooms  - Sterile Environment
0113	Room charges for private rooms - pediatric	0137	<ul> <li>3/4 beds - rooms - detoxification</li> <li>Room charges for semi-private</li> </ul>	0160	Room charges for other rooms -
0112	Room charges for private rooms - obstetrics	0136	- 3/4 beds - rooms - hospice  Room charges for semi-private	0159	rehabilitation Room charges for ward rooms - other
0111	Room charges for private rooms - medical/surgical/GYN	0135	Room charges for semi-private	0158	Room charges for ward rooms -
0110	Room charges for private rooms - general	0134	Room charges for semi-private - 3/4 beds - rooms - psychiatric	0157	Room charges for ward rooms - oncology
0101	All-inclusive room charges	0133	Room charges for semi-private - 3/4 beds - rooms - pediatric	0156	Room charges for ward rooms - detoxification
0100	All-inclusive room charges plus ancillary	0132	Room charges for semi-private - 3/4 beds - rooms - obstetrics	0155	Room charges for ward rooms - hospice

0193	Room charges for subacute care - Level III (complex care)	0239	Incremental nursing care - other	0289	Oncology - other
0194	Room charges for subacute care - Level IV (intensive care)	0240	All-inclusive ancillary - general	0290	DME - general
0199	Room charges for subacute care - other	0241	All-inclusive ancillary - basic	0291	DME - rental
0200	Room charges for intensive	0242	All-inclusive ancillary - comprehensive	0292	DME - purchase of new
0201	care - general Room charges for intensive	0243	All-inclusive ancillary - specialty	0293 0294	DME - purchase of used
0202	care - surgical Room charges for intensive	0249	All-inclusive ancillary - other		DME - supplies/drugs for DME effectiveness
0203	care - medical Room charges for intensive	0250	Pharmacy - general	0299	DME - other equipment
	care - pediatric	0251	Pharmacy - generic drugs	0300	Laboratory - general
0204	Room charges for intensive care - psychiatric	0252	Pharmacy – non-generic drugs	0301	Laboratory - chemistry
0206	Room charges for intensive care - intermediate intensive	0253	Pharmacy - take-home drugs	0302	Laboratory - immunology
0207	care unit (ICU) Room charges for intensive	0254	Pharmacy - drugs incident to other diagnostic services	0303	Laboratory - renal patient (home)
0208	care - burn care Room charges for intensive	0255	Pharmacy - drugs incident to radiology	0304	Laboratory – non-routine dialysis
	care - trauma	0256	Pharmacy - experimental drugs	0305	Laboratory - hematology
0209	Room charges for intensive care - other	0257	Pharmacy - nonprescription	0306	Laboratory - bacteriology and microbiology
0210	Room charges for coronary care - general	0258	Pharmacy - IV solutions	0307	Laboratory - urology
0211	Room charges for coronary care - myocardial infarction	0259	Pharmacy - other	0309	Laboratory - other
0212	Room charges for coronary care - pulmonary care	0260	IV Therapy - general	0310	Laboratory pathological - general
0213	Room charges for coronary care - heart transplant	0261	IV Therapy - infusion pump	0311	Laboratory pathological - cytology
0214	Room charges for coronary care	0262 0263	IV Therapy - pharmacy services	0312	Laboratory pathological - histology
	- intermediate coronary care unit (CCU)		IV Therapy - drug/supply delivery	0314	Laboratory pathological -
0219	Room charges for coronary care - other	0264	IV Therapy - supplies	0319	biopsy Laboratory pathological - other
0220	Special charges - general	0269 0270	IV Therapy - other	0320	Radiology - diagnostic - general
0221	Special charges - admission charge		Medical surgical supplies and devices - general	0321	Radiology - diagnostic -
0222	Special charges - technical support charge	0271	Medical surgical supplies and devices - nonsterile	0322	angiocardiography Radiology - diagnostic -
0223	Special charges - UR service charge	0272	Medical surgical supplies and devices - sterile	0323	arthrography Radiology - diagnostic -
0224	Special charges - late	0273	Medical surgical supplies and devices - take-home	0324	arteriography Radiology - diagnostic - chest
0229	discharge, medically necessary Special charges - other	0274	Medical surgical supplies and devices - prosthetic/orthotic	0329	x-ray Radiology - diagnostic - other
0230	Incremental nursing care -	0275	Medical surgical supplies and devices - pacemaker	0330	Radiology - therapeutic and/or
0231	general Incremental nursing care -	0276	Medical surgical supplies and devices - intraocular lens (IOL)		chemotherapy administration - general
0232	nursery Incremental nursing care - OB	0277	Medical surgical supplies and devices - oxygen - take-home	0331	Radiology - therapeutic and/or chemotherapy administration - chemotherapy - injected
0233	Incremental nursing care - ICU (includes transitional care)	0278	Medical surgical supplies and devices - other implants	0332	Radiology - therapeutic and/or chemotherapy administration -
0234	Incremental nursing care - CCU (includes transitional care)	0279	Medical surgical supplies and devices - other	0333	chemotherapy - oral Radiology - therapeutic and/or
0235	Incremental nursing care - hospice	0280	Oncology - general		chemotherapy administration - radiation therapy

0335	Radiology - therapeutic and/or chemotherapy administration -	0390	Blood and blood component administration, storage and	0443	Speech-language pathology - group rate
0339	chemotherapy - IV  Radiology - therapeutic and/or	0391	processing - general Blood and blood component	0444	Speech-language pathology - evaluation
	chemotherapy administration - other		administration, storage and processing - administration	0449	Speech-language pathology - other
0340	Nuclear medicine - general	0392	Blood and blood component administration, storage and	0450	Emergency room - general
0341	Nuclear medicine - diagnostic procedures		processing – processing and storage	0451	Emergency room - EMTALA emergency medical screening
0342	Nuclear medicine - therapeutic procedures	0399	Blood and blood component administration, storage and processing - other	0452	services  Emergency room - beyond
0343	Nuclear medicine - diagnostic radiopharmaceuticals	0400	Other imaging services -	0456	EMTALA screening  Emergency room - urgent care
0344	Nuclear medicine - therapeutic radiopharmaceuticals		general	0459	Emergency room - other
0349	Nuclear medicine - other	0401	Other imaging services - diagnostic mammography		- ,
0350	CT scan - general	0402	Other imaging services - ultrasound	0460 0469	Pulmonary function - general  Pulmonary function - other
0351	CT scan - head	0403	Other imaging services -		
		0404	screening mammography Other imaging services - PET	0470	Audiology - general
0352	CT scan - body			0471	Audiology - diagnostic
0359	CT scan - other	0409	Other imaging services - other	0472	Audiology - treatment
0360	Operating room services - general	0410	Respiratory services - general	0479	Audiology - other
0361	Operating room services - minor surgery	0412	Respiratory services - inhalation	0480	Cardiology - general
0362	Operating room services - organ transplant other than	0413	Respiratory services - hyperbaric oxygen therapy	0481	Cardiology - cardiac cath lab
0367	kidney Operating room services -	0419	Respiratory services - other	0482	Cardiology - stress test
	kidney transplant	0420	Physical therapy - general	0483	Cardiology - echocardiology
0369	Operating room services - other	0421	Physical therapy - visit charge	0489	Cardiology - other
0370	Anesthesia - general	0422	Physical therapy - hourly charge	0490	Ambulatory surgical care - general
0371	Anesthesia - incident to radiology	0423	Physical therapy - group rate	0499	Ambulatory surgical care - other
0372	Anesthesia - incident to other diagnostic services	0424	Physical therapy - evaluation or reevaluation	0500	Outpatient services - general
0374	Anesthesia - acupuncture	0429	Physical therapy - other	0509	Outpatient services - other
0379	Anesthesia - other	0430	Occupational therapy - general	0510	Clinic - general
0380	Blood - general	0431	Occupational therapy - visit	0511	Clinic - chronic pain
0381	Blood - packed red cells	0432	charge Occupational therapy - hourly	0512	Clinic - dental
0382	Blood - whole blood	0132	charge	0513	Clinic - psychiatric
0383	Blood - plasma	0433	Occupational therapy - group rate	0514	Clinic - OB/GYN
0384	Blood - platelets	0434	Occupational therapy - evaluation	0515	Clinic - pediatric
0385	Blood - leukocytes	0439	Occupational therapy - other	0516	Clinic - urgent care
0386	Blood - other components	0440	Speech-language pathology - general	0517	Clinic - family practice
0387	Blood - other derivatives	0441	Speech-language pathology - visit charge	0519	Clinic - other
0389	(cryoprecipitate) Blood - other	0442	Speech-language pathology -	0520	Freestanding Clinic - general
			hourly charge	0521	Freestanding Clinic - Clinic Visit by Member to RHC/FQHC
DSHS/	ГНСІС		Page		DSHS Document #25-15013
	shs.texas.gov/THCIC		83		Last Updated: August, 2019

0522	Freestanding Clinic - Home Visit by RHC/FQHC Practitioner	0562	Medical social services - hourly charge	0622	Medical/surgical supplies - incident to other diagnostic
0523	Freestanding Clinic - family practice	0569	Medical social services - other	0623	services  Medical/surgical supplies -
0524	Freestanding Clinic - Visit by	0570	Home health aide - general	0624	surgical dressings
	RHC/FQHC Practitioner to a Member in a Covered Part A	0571	Home health aide - visit charge	0624	Medical/surgical supplies - FDA investigational devices
0525	Stay at SNF Freestanding Clinic - Visit by	0572	Home health aide - hourly charge	0631	Drugs requiring specific identification - single source
	RHC/FQHC Practitioner to a Member in a SNF (not Covered Part A Stay) or NF or ICF MR or	0579	Home health aide - other	0632	Drugs requiring specific identification - multiple source
0526	Other Residential Facility Freestanding Clinic - urgent	0580	Other visits (home health) - general	0633	Drugs requiring specific identification - restrictive
0320	care	0581	Other visits (home health) - visit charge	0634	prescription Drugs requiring specific
		0582	Other visits (home health) - hourly charge		identification - EPO, less than 10,000 units
0527	Freestanding Clinic - Visiting Nurse Services(s) to a	0583	Other visits (home health) - assessment	0635	Drugs requiring specific identification - EPO, 10,000 or more units
	Member's Home when in a Home Health Shortage Area	0589	Other visits (home health) - other	0636	Drugs requiring specific identification - requiring
0528	Freestanding Clinic – Visit by RHC/FQHC Practitioner to Other non RHC/FQHC Site (e.g. Scene	0590	Units of service (home health) - general	0637	detailed coding  Drugs requiring specific
0529	of Accident)  Freestanding Clinic - other	0600	Oxygen (home health) - general	0037	identification - self- administrable
0323	Treestanding Clinic Other	0601	Oxygen (home health) - stat/equip/supply or contents	0640	Home IV therapy services - general
0530	Osteopathic service - general	0602	Oxygen (home health) - stat/equip/supply under 1 liter per minute	0641	Home IV therapy services – non-routine nursing, central line
0531	Osteopathic service - therapy	0603	Oxygen (home health) - stat/equip/supply over 4 liters	0642	Home IV therapy services - IV site care, central line
0539	Osteopathic service - other		per minute	0643	Home IV therapy services - IV
0540	Ambulance service - general	0604	Oxygen (home health) - portable add-in	0644	start/change, peripheral line Home IV therapy services –
0541	Ambulance service - supplies	0609	Oxygen (home health) - other		non-routine nursing, peripheral line
0542	Ambulance service - medical transport	0610	Magnetic Resonance Technology (MRT) - MRI -	0645	Home IV therapy services - training patient/caregiver,
0543	Ambulance service - heart mobile		general	0646	central line Home IV therapy services -
0544	Ambulance service - oxygen	0611	Magnetic Resonance Technology (MRT) - MRI - brain		training, disabled patient, central line
0545	Ambulance service - air ambulance	0612	(including brain stem)  Magnetic Resonance  Technology (MRT) - MRI -	0647	Home IV therapy services - training, patient/caregiver,
0546	Ambulance service - neonatal		spinal cord (including spine)	0648	peripheral Home IV therapy services -
0547	Ambulance service - pharmacy	0614	Magnetic Resonance Technology (MRT) - MRI - other		training, disabled patient, peripheral
0548	Ambulance service - telephone transmission EKG	0615	Magnetic Resonance	0649	Home IV therapy services - other
0549	Ambulance service - other		Technology (MRT) - MRA - head and neck	0650	Hospice services - general
0550	Skilled nursing - general	0616	Magnetic Resonance Technology (MRT) - MRA –	0651	Hospice services - routine home care
0551	Skilled nursing - visit charge	0618	lower extremities  Magnetic Resonance	0652	Hospice services - continuous home care
0552	Skilled nursing - hourly charge		Technology (MRT) - MRA – other	0655	Hospice services - inpatient respite care
0559	Skilled nursing - other	0619	Magnetic Resonance Technology (MRT) - Other MRT	0656	Hospice services - general inpatient care (non-respite)
0560	Medical social services - general	0621	Medical/surgical supplies - incident to radiology	0657	Hospice services - physician services
0561	Medical social services - visit charge				30.11003

0658	Hospice services - room and board - nursing facility	0729	Labor/Delivery Room services - other	0820	Hemodialysis - outpatient or home - general
0659	Hospice services - other	0730	EKG/ECG services - general	0821	Hemodialysis - outpatient or home - composite or other rate
0660	Respite care - general	0731	EKG/ECG services - Holter monitor	0822	Hemodialysis - outpatient or home - home supplies
0661	Respite care - hourly charge/skilled nursing	0732	EKG/ECG services - telemetry	0823	Hemodialysis - outpatient or home – home equipment
0662	Respite care - hourly charge/aide/homemaker/compa	0739	EKG/ECG services - other	0824	Hemodialysis - outpatient or home - maintenance 100%
	nion	0740	EEG services - general	0025	
0663	Respite care - daily charge	0750	Gastrointestinal services - general	0825	Hemodialysis - outpatient or home - support services
0669	Respite care - other	0760	Treatment or observation room services - general	0826	Hemodialysis - outpatient or home – shorter duration (effective 7/1/17)
0670	Outpatient special residence - general	0761	Specialty Room - Treatment/ Observation Room - Treatment	0829	Hemodialysis - outpatient or home - other
0671	Outpatient special residence - hospital based	0762	Room	0830	Peritoneal dialysis - outpatient
0672	Outpatient special residence - contracted	0762	Specialty Room - Treatment/ Observation Room - Observation Room	0831	or home - general  Peritoneal dialysis - outpatient
0679	Outpatient special residence - other	0769	Treatment or observation room services - other		or home - composite or other rate
0681	Trauma response - level I	0770		0832	Peritoneal dialysis - outpatient or home – home supplies
0682	Trauma response - level II	0770	Preventive care services - general	0833	Peritoneal dialysis - outpatient or home - home equipment
0683	Trauma response - level III	0771	Preventive care services - vaccine administration	0834	Peritoneal dialysis - outpatient or home - maintenance 100%
0684	Trauma response - level IV	0780	Telemedicine services - general	0835	Peritoneal dialysis - outpatient
0689	Trauma response - other	0790	Extra-corporeal shockwave therapy - general	0839	or home - support services Peritoneal dialysis - outpatient
0690	Pre-hospice/Palliative Care Services - general	0800	Inpatient renal dialysis services - general	0840	or home - other  CAPD - outpatient or home -
0691	Pre-hospice/Palliative Care Services – visit charge	0801	Inpatient renal dialysis services - hemodialysis	0841	general  CAPD - outpatient or home -
0692	Pre-hospice/Palliative Care Services – hourly charge	0802	Inpatient renal dialysis services	0842	composite or other rate  CAPD - outpatient or home -
0693	Pre-hospice/Palliative Care Services - evaluation	0803	<ul> <li>peritoneal (non-CAPD)</li> <li>Inpatient renal dialysis services</li> </ul>		home supplies
0694	Pre-hospice/Palliative Care Services – consultation and		<ul> <li>continuous ambulatory peritoneal dialysis (CAPD)</li> </ul>	0843	CAPD - outpatient or home – home equipment
0695	education	0804	Inpatient renal dialysis services - continuous cycling peritoneal	0844	CAPD - outpatient or home - maintenance 100%
	Pre-hospice/Palliative Care Services – inpatient care	0809	dialysis (CAPD)  Inpatient renal dialysis services	0845	CAPD - outpatient or home - support services
0696	Pre-hospice/Palliative Care Services – physician services		- other	0849	CAPD - outpatient or home - other
0699	Pre-hospice/Palliative Care Services - other	0810	Acquisition of body components- general	0850	CCPD - outpatient or home - general
0700	Cast Room services - general	0811	Acquisition of body components - living donor	0851	CCPD - outpatient or home - composite or other rate
0710	Recovery Room services - general	0812	Acquisition of body components - cadaver donor	0852	CCPD - outpatient or home - home supplies
0720	Labor/Delivery Room services - general	0813	Acquisition of body components - unknown donor	0853	CCPD - outpatient or home - home equipment
0721	Labor/Delivery Room services - labor	0814	Acquisition of body components - unsuccessful organ search-	0854	CCPD - outpatient or home -
0722	Labor/Delivery Room services - delivery	0815	donor bank charges Acquisition of body components	0855	maintenance 100%  CCPD - outpatient or home -
0723	Labor/Delivery Room services - circumcision	0013	- stem cells- allogeneic	0859	support services  CCPD - outpatient or home -
0724	Labor/Delivery Room services - birthing center	0819	Acquisition of body components - other donor	0860	other Magnetoencephalography (MEG) - General
D 0110 F			-		, , , , , , , , , , , , , , , , , , ,

0861	Magnetoencephalography (MEG) - MEG	0923	Other diagnostic services - pap smear	0976	Professional fees - respiratory therapy
0880	Miscellaneous dialysis - general	0924	Other diagnostic services - allergy test	0977	Professional fees - physical therapy
0881	Miscellaneous dialysis - ultrafiltration	0925	Other diagnostic services - pregnancy test	0978	Professional fees - occupational therapy
0882	Miscellaneous dialysis - home aide visit	0929	Other diagnostic services - other	0979	Professional fees - speech therapy
0889	Miscellaneous dialysis - other	0931	Medical rehabilitation day program - half day	0981	Professional fees - emergency room
0900	Behavior health treatments/services - general	0932	Medical rehabilitation day program - full day	0982	Professional fees - outpatient services
0901	Behavior health treatments/services -	0940	Other therapeutic services - general	0983	Professional fees - clinic
0902	electroshock Behavior health	0941	Other therapeutic services - recreational therapy	0984	Professional fees - medical social services
	treatments/services - milieu therapy	0942	Other therapeutic services - education/training	0985	Professional fees - EKG
0903	Behavioral health treatments/services - play	0943	Other therapeutic services - cardiac rehabilitation	0986	Professional fees - EEG
0904	therapy Behavior health	0944	Other therapeutic services - drug rehabilitation	0987	Professional fees - hospital visit
	treatments/services - activity therapy	0945	Other therapeutic services -	0988	Professional fees - consultation
0905	Behavior health treatments/services - intensive	0946	alcohol rehabilitation Other therapeutic services -	0989	Professional fees - private duty nurse
0906	outpatient services - psychiatric Behavior health		complex medical equipment - routine	0990	Patient convenience items - general
	treatments/services - intensive outpatient services - chemical	0947	Other therapeutic services - complex medical equipment -	0991	Patient convenience items - cafeteria/guest tray
0907	dependency Behavior health	0948	ancillary Other therapeutic services –	0992	Patient convenience items - private linen service
	treatments/services - community behavioral health program	0949	pulmonary rehabilitation Other therapeutic services -	0993	Patient convenience items - telephone/telegraph
0911	Behavior health		other	0994	Patient convenience items -
	treatment/services - rehabilitation	0951	Other therapeutic services – athletic training	0995	TV/radio Patient convenience items -
0912	Behavior health treatment/services - partial	0952	Other therapeutic services - kinesiotherapy		nonpatient room rentals
0012	hospitalization - less intensive	0953	Other therapeutic services –	0996	Patient convenience items - late discharge charge
0913	Behavior health treatment/services - partial hospitalization - intensive	0000	chemical dependency (drug and alcohol)	0997	Patient convenience items - admission kits
0914	Behavior health treatment/services - individual	0960	Professional fees - general	0998	Patient convenience items - beauty shop/barber
0915	therapy Behavior health	0961 0962	Professional fees - psychiatric  Professional fees -	0999	Patient convenience items - other
0313	treatment/services - group therapy		ophthalmology	1000	Behavior health accommodations - general
0916	Behavior health	0963	Professional fees - anesthesiologist (MD)	1001	Behavior health
	treatment/services - family therapy	0964	Professional fees - anesthetist (CRNA)		accommodations - residential treatment - psychiatric
0917	Behavior health treatment/services - biofeedback	0969	Professional fees - other	1002	Behavior health accommodations - residential treatment - chemical
0918	Behavior health treatment/services - testing	0971	Professional fees - laboratory	1003	dependency Behavior health
0919	Behavior health treatment/services - other	0972	Professional fees - radiology - diagnostic	1003	accommodations - supervised living
0920	Other diagnostic services - general	0973	Professional fees - radiology - therapeutic	1004	Behavior health accommodations - halfway
0921	Other diagnostic services -	0974	Professional fees - radiology - nuclear medicine	1005	house Behavior health
0922	peripheral vascular lab Other diagnostic services - electromyogram	0975	Professional fees - operating room		accommodations - group home

2100	Alternative thera general	py services -	2105	Alternative therapy servious biofeedback	ces -	3103	Adult day care, medical and social - daily
2101	Alternative thera acupuncture	py services -	2106	Alternative therapy service hypnosis	ces -	3104	Adult day care, social - daily
2102	2102 Alternative therapy services - acupressure		2109	Alternative therapy service other	ces -	3105	Adult foster care - daily
2103	Alternative thera	py services -	3101	Adult day care, medical a social - hourly	ınd	3109	Adult foster care - other
2104	Alternative thera reflexology	py services -	3102	Adult day care, social - h	ourly		
Beginn Length	ing Position:	13 4		Data Source: Type:	Claim	n anumeric	
Field 3		HCPCS_QUA	ALTETE		Alphic	and menc	
Descri	ption:		ing the	type/source of the d	escript	ive num	ber used in
Beginn	ing Position:	17	LDOKE	Data Source:	Claim	า	
Length	_	2		Type:		anumeric	
Field 4		HCPCS_PRC					
Descri	ption:				(HCPC	CS) code	applicable to ancillary
		services or a					
Coding	Scheme:			hs.gov/HCPCSReleaseC	odeSets	s/ANHCPC	S/list.asp for complete list o
Reginn	ing Position:	Level II HCPCS	coaes.	Data Source:	Claim	1	
Length		5		Type:		numeric	
Field 5		MODIFIER_	1				
Descri				cumstances related to	the p	erforma	nce of the service
Coding	Scheme:						
22	Increased proced	dural services	58	Staged or Related Proced			Professional During the
23	Unusual Anesthe	sia	Service by the Same Phy or Other Qualified Health			00	Postoperative Period
24	Unrelated Evalua	ition and		Professional During the	30.0	80	Assistant Surgeon
	Management Sei	vice by the		Postoperative Period		81	Minimum Assistant Surgeon
	Same Physician Qualified Health		59	Distinct Procedural Service	ce	82	Repeat procedure by same physician
	Professional duri	ng a	62	Two Surgeons		90	Reference (Outside) Laboratory
25	Postoperative Pe		63	Procedure Performed on 1	Infants		, , ,
25	Significant, Sepa Identifiable Eval		66	less than 4kg Surgical Team		91	Repeat Clinical Diagnostic Laboratory Test
	Management Ser			•		92	Alternative Laboratory Platform
	Same Physician Qualified Health		73	Discontinued Outpatient Hospital/Ambulatory Surg	gery	_	Testing
	Professional on t	he Same Day		Center (ASC) Procedure		95	Synchronous Telemedicine Service Rendered Via a Real-
	of the Procedure Service	or Other		the Administration of Anesthesia			Time Interactive Audio and
26	Professional Con	nponent	74	Discontinued Outpatient			Video Telecommunications System
27	Multiple Outpatie	•		Hospital/Ambulatory Surg		99	Multiple Modifiers
	E/M Encounters			Center (ASC) Procedure a Administration of Anesthe		1P	Performance Measure Exclusion
22	Date		76	Repeat Procedure by San	ne	TL	Modifier due to Medical Reason
32	Mandated Servic			Physician or Other Qualifi Health Care Professional	ied	2P	Performance Measure Exclusion
33	Preventive Servi		77	Repeat Procedure by Ano	ther	3P	Modifier due to Patient Reasons Performance Measure Exclusion
47 50	Anesthesia by Su	_		Physician or Other Qualifi Health Care Professional		ЭF	Modifier due to System Reason
50 E1	Bilateral Procedu		78	Unplanned Return to the		8P	Performance Measure Reporting Modifier- Action not performed
51 52	Multiple Procedu Reduced Service			Operating/Procedure Roo the Same Physician or Ot			reason not otherwise specified
52 52				Qualified Health Care		P1	A normal healthy patient
53 E4	Discontinued Pro			Professional Following Ini Procedure for a Related	tial	P2	A patient with mild systemic
54	Surgical Care On			Procedure During the		P3	disease A patient with severe systemic
55	Postoperative Ma Only	anagement	70	Postoperative Period	onvice	13	disease
56	Preoperative Mai	nagement Only	79	Unrelated Procedure or S by the Same Physician or		P4	A patient with severe systemic
·		jery		Qualified Health Care			disease that is a constant threat to life
57							
57 DSHS/1				Page			DSHS Document #25-15013

	nected to survi	ive without the	IA	Leit i	ialia, tilullib		KI	procedure
	eration	ive without the	GG		rmance and payment			•
	leclared brain-	dead patient			ning mammography a nostic mammography			Left foot, second digit
wh	ose organs are	e being			patient, same day.	UII	T2	Left foot, third digit
	removed for donor purpo		GH		nostic mammogram		T3	Left foot, fourth digit
• •	,				erted from screening mogram on same day		T4	Left foot, fifth digit
	wer left eyelid		LC		circumflex coronary ar		T5	Right foot, great toe
E3 Upp	per right eyeli	d	LD		anterior descending	,	T6	Right foot, second digit
E4 Lov	wer right eyeli	d	LD		nary artery		T7	Right foot, third digit
F1 Lef	t hand, second	d digit	LM	Left i	main coronary artery		T8	Right foot, fourth digit
F2 Lef	t hand, third o	ligit	LT	Left s	side of the body proce	dure	Т9	Right foot, fifth digit
F3 Lef	t hand, fourth	digit	Q		ulance service provide	d	TA	Left foot, great toe
F4 Lef	t hand, fifth d	igit	М		r arrangement by a der of services		XE	Separate Encounter
F5 Rig	ht hand, thum	nb	QN	•	ulance service furnishe	ed	XS	Separate Structure
F6 Rig	ht hand, seco	nd digit		direc servi	tly by a provider of		XP	Separate Practitioner
F7 Rig	ht hand, third	digit	RC		ces coronary artery		XU	Unusual Non-Overlapping
F8 Rig	ht hand, fourt	h digit	RI	_	us intermedius corona	rv	Λ0	Service
F9 Rig	ht hand, fifth	digit		arter		· /		
Beginning	Position	24			Data Source:	Claim		
Length:	Position.	2			Type:	Alphanum	neric	
Field 6:		MODIFIER_2				•		
Description					tances related to	the perfo	rmai	nce of the service.
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Beginning Length:	Position:	26 2			Data Source: Type:	Claim Alphanum	neric	
Field 7:		MODIFIER_3			.,,,	ларпапап	10110	
Description	n:		l circ	ums	tances related to	the perfo	rmai	nce of the service.
Coding Sch		Same as Field MO	DIFIE	R_1	D. I. C.	Claria		
Beginning Length:	Position:	28 <b>Data Source:</b> Claim 2 <b>Type:</b> Alphanumeric						
Field 8:		MODIFIER_4			.,,,	7.1.p.1.a.1.a.1.		
Description	n:	Identifies specia			tances related to	the perfo	rmai	nce of the service.
Coding Sch		Same as Field MO	DIFIE	R_1	D-1- C	Claire		
Beginning Length:	Position:	30 2			Data Source: Type:	Claim Alphanum	neric	
Field 9:		UNIT_MEASUR	EME	NT		лирианан	TOTTO	
Description	n:				in which a value	is being	expre	essed.
Coding Sch	neme:	DA Days						
		F2 Internation UN Unit	Jilai u	IIIC				
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Length:		2	D)/=-		Туре:	Alphanum	neric	
Field 10:		UNITS_OF_SE			,			
Description:		Numeric value o			•			
-		Numeric value o 34	ı qua	iiicicy	Data Source:	Claim		
Beginning Length:		34 7	ı qua	irrerey	Data Source: Type:	Claim Numeric		
Beginning Length: Field 11:	Position:	34 7 <b>UNIT_RATE</b>	u qua					
Beginning Length: Field 11: Description	Position: n:	34 7 <b>UNIT_RATE</b> Rate per unit	ı qua		Туре:	Numeric		
Beginning Length: Field 11: Description Beginning	Position: n:	34 7 <b>UNIT_RATE</b>	u qua		Type:  Data Source:	Numeric Claim		
Beginning Length: Field 11: Description	Position: n:	34 7 <b>UNIT_RATE</b> Rate per unit 41			Туре:	Numeric		
Beginning Length: Field 11: Description Beginning Length: Field 12: Description	Position: n: Position:	34 7 UNIT_RATE Rate per unit 41 12 CHRGS_LINE_ Total amount of	ITEM	1	Type:  Data Source: Type:	Numeric Claim Numeric		
Beginning Length: Field 11: Description Beginning Length: Field 12: Description Beginning	Position: n: Position:	34 7 <b>UNIT_RATE</b> Rate per unit 41 12 <b>CHRGS_LINE_</b> Total amount of 53	ITEM	1	Data Source: Type:  De Data Source:	Numeric  Claim Numeric  Assigned		
Beginning Length: Field 11: Description Beginning Length: Field 12: Description Beginning Length:	Position: n: Position:	34 7 UNIT_RATE Rate per unit 41 12 CHRGS_LINE_ Total amount of 53 14	ITEM the (	1	Type:  Data Source: Type:	Numeric Claim Numeric		
Beginning Length: Field 11: Description Beginning Length: Field 12: Description Beginning Length: Field 13:	n: Position:  n: Position:  Position:	34 7 UNIT_RATE Rate per unit 41 12 CHRGS_LINE_ Total amount of 53 14 CHRGS_NON_C	ITEM the c	<b>I</b> charç	Type:  Data Source: Type:  ge Data Source: Type:	Numeric  Claim Numeric  Assigned		
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Beginning Length: Field 11: Description Beginning Length: Field 12: Description Beginning Length: Field 13: Description Beginning	Position: n: Position: n: Position:	34 7  UNIT_RATE Rate per unit 41 12  CHRGS_LINE_ Total amount of 53 14  CHRGS_NON_C Total non-covered	ITEM the c	<b>I</b> charç	Data Source: Type:  Data Source: Type:  t of the charge Data Source:	Claim Numeric Assigned Numeric		DSHS Document #25-15013
Beginning Length: Field 11: Description Beginning Length: Field 12: Description Beginning Length: Field 13: Description Beginning DSHS/THC	Position: n: Position: n: Position:	34 7 UNIT_RATE Rate per unit 41 12 CHRGS_LINE_ Total amount of 53 14 CHRGS_NON_C Total non-covere 67	ITEM the c	<b>I</b> charç	Type:  Data Source: Type:  ge Data Source: Type:  t of the charge	Claim Numeric Assigned Numeric		DSHS Document #25-15013 Last Updated: August, 2019

FA Left hand, thumb

RT Right side of the body

A moribund patient who is not

Length:	14	Туре:	Numeric					
Field 14:	FINAL_EAPG_CATEG	ORY_CODE						
	Enhanced Ambulatory I	Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M™						
	EAPG Grouper. Not ava	ailable 4Q09.						
<b>Beginning Position:</b>	81	Data Source:	Assigned					
Length:	2	Туре:	Alphanumeric					
Field 15:	FINAL_EAPG_TYPE_	CODE						
	Enhanced Ambulatory I	Patient Group (E	APG) type code, as assigned by 3M™ EAPG					
	Grouper. Not available	4Q09.						
Beginning Position:	83	Data Source:	Assigned					
Length:	2	Туре:	Alphanumeric					
Field 16:	FINAL_EAPG							
			up (EAPG), as assigned by 3M™ EAPG					
	Grouper. Not available							
Beginning Position:	85	Data Source:	Assigned					
Length:	5	Туре:	Alphanumeric					
Field 17:	APC_PROCEDURE_CO							
			C) procedure code as assigned by 3M™ APC					
	Grouper. Not available	-						
Beginning Position:	90	Data Source:	Assigned					
Length:	5	Type:	Alphanumeric					
Field 18:	APC_PX_STATUS_IN		0)					
		•	C) procedure status indicator as assigned by					
B	3M™ APC Grouper. Not							
Beginning Position:	95 2	Data Source:	Assigned					
Length: Field 19:		Туре:	Alphanumeric					
riela 19:	APC_WEIGHT	laccification (AD	C) weighting as assigned by 2MIM ADC					
		•	C) weighting as assigned by 3M™ APC					
Designing Desitions	Grouper. Not available	•	Assigned					
Beginning Position: Length:	97 9	Data Source:	Assigned Alphanumeric					
Lengui:	<i>3</i>	Туре:	Alphanument					

#### **FACILITY TYPE INDICATOR FILE**

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

Field 1:	THCIC_ID							
Description:	Provider ID. Unique id	Provider ID. Unique identifier assigned to the provider by DSHS. The THCIC_ID is						
			data and generally throughout a full year. A					
			during the middle of a year. This will be					
			vare of those mid-year name changes.					
Paginning Pagition	1	Data Source:	Assigned					
Beginning Position:								
Length: Field 2:	6	Туре:	Alphanumeric					
	PROVIDER_NAME							
Description:	Hospital name provide							
Beginning Position:	7	Data Source:	Provider					
Length:	55	Туре:	Alphanumeric					
Field 3:	FAC_TEACHING_IN							
Description:	Teaching Facility Indic							
Suppression:			O discharges (Provider ID equals '999999').					
Coding Scheme:	A Member, Council of Te	aching Hospitals						
	X Other teaching facility							
Beginning Position:	62	Data Source:	Provider					
Length:	1	Туре:	Alphanumeric					
Field 4:	FAC_PSYCH_IND							
Description:	Psychiatric Facility Inc	licator.						
Suppression:			O discharges (Provider ID equals '999999').					
Beginning Position:	63	Data Source:	Provider					
Length:	1	Type:	Alphanumeric					
Field 5:	FAC_REHAB_IND		·					
Description:	Rehabilitation Facility	Indicator						
Suppression:			O discharges (Provider ID equals '999999').					
Beginning Position:	64	Data Source:	Provider					
Length:	1	Type:	Alphanumeric					
Field 6:	FAC_ACUTE_CARE_		, iiphanamene					
Description:	Acute Care Facility Inc							
Suppression:			O discharges (Provider ID equals '999999').					
Beginning Position:	65	Data Source:	Provider					
Length:	1	Type:	Alphanumeric					
Field 7:	FAC_SNF_IND	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, iiphanamene					
Description:	Skilled Nursing Facility	, Indicator						
Suppression:			O discharges (Provider ID equals '999999').					
Beginning Position:	66	Data Source:	Provider					
Length:	1	Type:	Alphanumeric					
Field 8:	FAC_LONG_TERM_A		Alphandmenc					
Description:	Long Term Acute Care							
Suppression:			D discharges (Provider ID equals '999999').					
Beginning Position:	67	Data Source:	Provider					
Length:	1	Type:	Alphanumeric					
Field 9:			Alphandmenc					
Description:	FAC_OTHER_LTC_IN							
•	Other Long Term Care							
Suppression:			O discharges (Provider ID equals '999999').					
Beginning Position:	68	Data Source:	Provider					
Length: Field 10:	TAC DEDC THE	Туре:	Alphanumeric					
	FAC_PEDS_IND							
Description:	Pediatric Facility Indic		0 11 1					
Suppression:			O discharges (Provider ID equals '999999').					
Coding Scheme:			's Hospitals and Related Institutions (NACHRI)					
Desired D. 111	X Facilities that also trea		Duranidan					
Beginning Position:	69	Data Source:	Provider					
Length:	1	Туре:	Alphanumeric					
DSHS/THCIC		Page	DSHS Document #25-15013					
www.dshs.texas.gov/TF	ICIC	90	Last Updated: August, 2019					
		70	Zust Spuntou. Hugust, 2017					

Pield 44.	EAG CARRIOVACCU	LAD TND	
Field 11:	FAC_CARDIOVASCU		
Description:	Cardiovascular facility		
Beginning Position:	70	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 12:	FAC_CHIROPRACTION		
Description:	Chiropractic care facilit	,	
Beginning Position:	71	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 13:	FAC_ENDOSCOPY_II		
Description:	Endoscopy facility indi		
Beginning Position:	72	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 14:	FAC_FOOT_IND		
Description:	Foot care facility indica		
Beginning Position:	73	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 15:	FAC_GASTROENTER		
Description:	Gastroenterology facili	•	
Beginning Position:	74	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 16:	FAC_GENERAL_IND		
Description:	General care facility in		
Beginning Position:	75	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 17:	FAC_NEUROLOGICA		
Description:	Neurological care facili	•	
Beginning Position:	76	Data Source:	Provider
Length:	1	Туре:	Alphanumeric
Field 18:	FAC_OB_GYN_IND		
Description:	Obstetric and gynecolo		
Beginning Position:	77	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 19:	FAC_OPTHAMOLOGY		
Description:	Ophthalmology facility		
Beginning Position:	78	Data Source:	Provider
Length: Field 20:	TAC ODAL TND	Туре:	Alphanumeric
	FAC_ORAL_IND	. to discharge	
Description:	Oral health care facility	y indicator.	D - 11
Beginning Position:	79 1	Data Source:	Provider
Length: Field 21:	EAC ORTHODERIC 1	Type:	Alphanumeric
	FAC_ORTHOPEDIC_I		
Description:	Orthopedic care facility	Data Source:	Duessiden
Beginning Position: Length:	80 1	Type:	Provider Alphanumeric
Field 22:	FAC_OTOLARYNGOL		Alphanamenc
Description:	Otolaryngology facility		
Beginning Position:	81	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 23:	FAC_ PAIN_MNGMT		Auphanamene
Description:	Pain management facil		
Beginning Position:	82	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 24:	FAC_PLASTIC_IND	. , pc.	ruphanamene
Description:	Plastic surgery facility	indicator	
Beginning Position:	83	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 25:	FAC_THORACIC_IND		, aprilation of
Description:	Thoracic care facility in		
Beginning Position:	84	Data Source:	Provider
Length:	1	Type:	Alphanumeric
	<del>-</del>	- / F	- np. m.

Page 91 DSHS Document #25-15013 Last Updated: August, 2019

DSHS/THCIC www.dshs.texas.gov/THCIC

Field 26: FAC\_UROLOGY\_IND **Description:** Urology care facility indicator. **Beginning Position:** 85 Data Source: Provider Length: Alphanumeric Type: Field 27: FAC\_OTHER\_IND **Description:** Other facility indicator. **Beginning Position: Data Source:** 86 Provider Length: Alphanumeric Type: Field 28: POA PROVIDER INDICATOR **Description:** Indicator identifying whether facility is required to submit Diagnosis Present on Admission (POA) codes. 25 TAC, Section 421.9(e) identifies the following facility types as exempt from reporting POA to the department: Critical Access Hospitals, Inpatient Rehabilitation Hospitals, Inpatient Psychiatric Hospitals, Cancer Hospitals, Children's or Pediatric Hospitals and Long Term Care Hospitals. **Coding Scheme:** Mixed (Facility has sections that would be exempted from reporting POA for those Μ patients) R Required Χ Exempt Invalid 87 Assigned **Beginning Position: Data Source:** Length: Type: Alphanumeric Field 29: CERT\_STATUS\_IP **Description:** Assignment of a code to indicate the certification of data (inpatient) and submission of comments by the hospital. Certified, without comment **Coding Scheme:** 1 2 Certified, with comment 3 Certified, with comment, comment not received by deadline 4 Hospital elected not to certify 5 Hospital closed, data not certified 6 Hospital out of compliance, did not certify data 7 Data not certified. Facility affected by natural or man-made disaster (4Q2016) 8 No Emergency Department data submitted **Beginning Position:** 88 **Data Source: Assigned** Alphanumeric Length: Type: Field 30: CERT\_STATUS\_OP **Description:** Assignment of a code to indicate the certification of data (outpatient) and submission of comments by the hospital. **Coding Scheme:** Certified, without comment Certified, with comment 2 3 Certified, with comment, comment not received by deadline 4 Hospital elected not to certify 5 Hospital closed, data not certified Hospital out of compliance, did not certify data 6 7 Data not certified. Facility affected by natural or man-made disaster (4Q2016) 8 No Emergency Department data submitted 89 **Beginning Position: Data Source: Assigned** Length: Type: Alphanumeric



# Texas Department of State Health Services

# **Texas Hospital Emergency Department Data Set DATA FILE LAYOUTS**

#### **Inpatient Base Data #1 File**

Number	FIELD NAME (IP Base Data #1 File)	Position	Length	Field Type
1	RECORD_ID - not linkable to the Record_ID in the ED Outpatient PUDF or ED Research Data Files (RDFs).	1	12	Alphanumeric
2	DISCHARGE	13	6	Alphanumeric
3	THCIC_ID	19	6	Alphanumeric
4	TYPE_OF_ADMISSION	25	1	Alphanumeric
5	SOURCE_OF_ADMISSION	26	1	Alphanumeric
6	SPEC_UNIT_1	27	1	Alphanumeric
7	SPEC_UNIT_2	28	1	Alphanumeric
8	SPEC_UNIT_3	29	1	Alphanumeric
9	SPEC_UNIT_4	30	1	Alphanumeric
10	SPEC_UNIT_5	31	1	Alphanumeric
11	PAT_STATE	32	2	Alphanumeric
12	PAT_ZIP	34	5	Alphanumeric
13	PAT_COUNTRY	39	2	Alphanumeric
14	PAT_COUNTY	41	3	Alphanumeric
15	PUBLIC_HEALTH_REGION	44	2	Alphanumeric
16	PAT_STATUS	46	2	Alphanumeric
17	SEX_CODE	48	1	Alphanumeric
18	RACE	49	1	Alphanumeric
19	ETHNICITY	50	1	Alphanumeric
20	ADMIT_WEEKDAY	51	1	Alphanumeric
21	LENGTH_OF_STAY	52	4	Alphanumeric
22	PAT_AGE	56	2	Alphanumeric
23	FIRST_PAYMENT_SRC	58	2	Alphanumeric
24	SECONDARY_PAYMENT_SRC	60	2	Alphanumeric
25	TYPE_OF_BILL	62	3	Alphanumeric
26	TOTAL_CHARGES	65	12	Numeric

DSHS/THCIC DSHS Document #25-15013 Page 93 Last Updated: August, 2019

Number	FIELD NAME (IP Base Data #1 File)	Position	Length	Field Type
27	TOTAL_NON_COV_CHARGES	77	12	Numeric
28	TOTAL_CHARGES_ACCOMM	89	12	Numeric
29	TOTAL_NON_COV_CHARGES_ACCOMM	101	12	Numeric
30	TOTAL_CHARGES_ANCIL	113	12	Numeric
31	TOTAL_NON_COV_CHARGES_ANCIL	125	12	Numeric
32	ADMITTING_DIAGNOSIS	137	7	Alphanumeric
33	PRINC_DIAG_CODE	144	7	Alphanumeric
34	POA_PRINC_DIAG_CODE	151	1	Alphanumeric
35	OTH_DIAG_CODE_1	152	7	Alphanumeric
36	POA_OTH_DIAG_CODE_1	159	1	Alphanumeric
37	OTH_DIAG_CODE_2	160	7	Alphanumeric
38	POA_OTH_DIAG_CODE_2	167	1	Alphanumeric
39	OTH_DIAG_CODE_3	168	7	Alphanumeric
40	POA_OTH_DIAG_CODE_3	175	1	Alphanumeric
41	OTH_DIAG_CODE_4	176	7	Alphanumeric
42	POA_OTH_DIAG_CODE_4	183	1	Alphanumeric
43	OTH_DIAG_CODE_5	184	7	Alphanumeric
44	POA_OTH_DIAG_CODE_5	191	1	Alphanumeric
45	OTH_DIAG_CODE_6	192	7	Alphanumeric
46	POA_OTH_DIAG_CODE_6	199	1	Alphanumeric
47	OTH_DIAG_CODE_7	200	7	Alphanumeric
48	POA_OTH_DIAG_CODE_7	207	1	Alphanumeric
49	OTH_DIAG_CODE_8	208	7	Alphanumeric
50	POA_OTH_DIAG_CODE_8	215	1	Alphanumeric
51	OTH_DIAG_CODE_9	216	7	Alphanumeric
52	POA_OTH_DIAG_CODE_9	223	1	Alphanumeric
53	OTH_DIAG_CODE_10	224	7	Alphanumeric
54	POA_OTH_DIAG_CODE_10	231	1	Alphanumeric
55	OTH_DIAG_CODE_11	232	7	Alphanumeric
56	POA_OTH_DIAG_CODE_11	239	1	Alphanumeric
57	OTH_DIAG_CODE_12	240	7	Alphanumeric
58	POA_OTH_DIAG_CODE_12	247	1	Alphanumeric
59	OTH_DIAG_CODE_13	248	7	Alphanumeric
60	POA_OTH_DIAG_CODE_13	255	1	Alphanumeric
61	OTH_DIAG_CODE_14	256	7	Alphanumeric
62	POA_OTH_DIAG_CODE_14	263	1	Alphanumeric
63	OTH_DIAG_CODE_15	264	7	Alphanumeric
64	POA_OTH_DIAG_CODE_15	271	1	Alphanumeric
65	OTH_DIAG_CODE_16	272	7	Alphanumeric
66	POA_OTH_DIAG_CODE_16	279	1	Alphanumeric

Number	FIELD NAME (IP Base Data #1 File)	Position	Length	Field Type
67	OTH_DIAG_CODE_17	280	7	Alphanumeric
68	POA_OTH_DIAG_CODE_17	287	1	Alphanumeric
69	OTH_DIAG_CODE_18	288	7	Alphanumeric
70	POA_OTH_DIAG_CODE_18	295	1	Alphanumeric
71	OTH_DIAG_CODE_19	296	7	Alphanumeric
72	POA_OTH_DIAG_CODE_19	303	1	Alphanumeric
73	OTH_DIAG_CODE_20	304	7	Alphanumeric
74	POA_OTH_DIAG_CODE_20	311	1	Alphanumeric
75	OTH_DIAG_CODE_21	312	7	Alphanumeric
76	POA_OTH_DIAG_CODE_21	319	1	Alphanumeric
77	OTH_DIAG_CODE_22	320	7	Alphanumeric
78	POA_OTH_DIAG_CODE_22	327	1	Alphanumeric
79	OTH_DIAG_CODE_23	328	7	Alphanumeric
80	POA_OTH_DIAG_CODE_23	335	1	Alphanumeric
81	OTH_DIAG_CODE_24	336	7	Alphanumeric
82	POA_OTH_DIAG_CODE_24	343	1	Alphanumeric
83	E_CODE_1	344	7	Alphanumeric
84	POA_E_CODE_1	351	1	Alphanumeric
85	E_CODE_2	352	7	Alphanumeric
86	POA_E_CODE_2	359	1	Alphanumeric
87	E_CODE_3	360	7	Alphanumeric
88	POA_E_CODE_3	367	1	Alphanumeric
89	E_CODE_4	368	7	Alphanumeric
90	POA_E_CODE_4	375	1	Alphanumeric
91	E_CODE_5	376	7	Alphanumeric
92	POA_E_CODE_5	383	1	Alphanumeric
93	E_CODE_6	384	7	Alphanumeric
94	POA_E_CODE_6	391	1	Alphanumeric
95	E_CODE_7	392	7	Alphanumeric
96	POA_E_CODE_7	399	1	Alphanumeric
97	E_CODE_8	400	7	Alphanumeric
98	POA_E_CODE_8	407	1	Alphanumeric
99	E_CODE_9	408	7	Alphanumeric
100	POA_E_CODE_9	415	1	Alphanumeric
101	E_CODE_10	416	7	Alphanumeric
102	POA_E_CODE_10	423	1	Alphanumeric
103	PRINC_SURG_PROC_CODE	424	7	Alphanumeric
104	PRINC_SURG_PROC_DAY	431	4	Alphanumeric
105	OTH_SURG_PROC_CODE_1	435	7	Alphanumeric
106	OTH_SURG_PROC_DAY_1	442	4	Alphanumeric

Number	FIELD NAME (IP Base Data #1 File)	Position	Length	Field Type
107	OTH_SURG_PROC_CODE_2	446	7	Alphanumeric
108	OTH_SURG_PROC_DAY_2	453	4	Alphanumeric
109	OTH_SURG_PROC_CODE_3	457	7	Alphanumeric
110	OTH_SURG_PROC_DAY_3	464	4	Alphanumeric
111	OTH_SURG_PROC_CODE_4	468	7	Alphanumeric
112	OTH_SURG_PROC_DAY_4	475	4	Alphanumeric
113	OTH_SURG_PROC_CODE_5	479	7	Alphanumeric
114	OTH_SURG_PROC_DAY_5	486	4	Alphanumeric
115	OTH_SURG_PROC_CODE_6	490	7	Alphanumeric
116	OTH_SURG_PROC_DAY_6	497	4	Alphanumeric
117	OTH_SURG_PROC_CODE_7	501	7	Alphanumeric
118	OTH_SURG_PROC_DAY_7	508	4	Alphanumeric
119	OTH_SURG_PROC_CODE_8	512	7	Alphanumeric
120	OTH_SURG_PROC_DAY_8	519	4	Alphanumeric
121	OTH_SURG_PROC_CODE_9	523	7	Alphanumeric
122	OTH_SURG_PROC_DAY_9	530	4	Alphanumeric
123	OTH_SURG_PROC_CODE_10	534	7	Alphanumeric
124	OTH_SURG_PROC_DAY_10	541	4	Alphanumeric
125	OTH_SURG_PROC_CODE_11	545	7	Alphanumeric
126	OTH_SURG_PROC_DAY_11	552	4	Alphanumeric
127	OTH_SURG_PROC_CODE_12	556	7	Alphanumeric
128	OTH_SURG_PROC_DAY_12	563	4	Alphanumeric
129	OTH_SURG_PROC_CODE_13	567	7	Alphanumeric
130	OTH_SURG_PROC_DAY_13	574	4	Alphanumeric
131	OTH_SURG_PROC_CODE_14	578	7	Alphanumeric
132	OTH_SURG_PROC_DAY_14	585	4	Alphanumeric
133	OTH_SURG_PROC_CODE_15	589	7	Alphanumeric
134	OTH_SURG_PROC_DAY_15	596	4	Alphanumeric
135	OTH_SURG_PROC_CODE_16	600	7	Alphanumeric
136	OTH_SURG_PROC_DAY_16	607	4	Alphanumeric
137	OTH_SURG_PROC_CODE_17	611	7	Alphanumeric
138	OTH_SURG_PROC_DAY_17	618	4	Alphanumeric
139	OTH_SURG_PROC_CODE_18	622	7	Alphanumeric
140	OTH_SURG_PROC_DAY_18	629	4	Alphanumeric
141	OTH_SURG_PROC_CODE_19	633	7	Alphanumeric
142	OTH_SURG_PROC_DAY_19	640	4	Alphanumeric
143	OTH_SURG_PROC_CODE_20	644	7	Alphanumeric
144	OTH_SURG_PROC_DAY_20	651	4	Alphanumeric
145	OTH_SURG_PROC_CODE_21	655	7	Alphanumeric
146	OTH_SURG_PROC_DAY_21	662	4	Alphanumeric

Number	FIELD NAME (IP Base Data #1 File)	Position	Length	Field Type
147	OTH_SURG_PROC_CODE_22	666	7	Alphanumeric
148	OTH_SURG_PROC_DAY_22	673	4	Alphanumeric
149	OTH_SURG_PROC_CODE_23	677	7	Alphanumeric
150	OTH_SURG_PROC_DAY_23	684	4	Alphanumeric
151	OTH_SURG_PROC_CODE_24	688	7	Alphanumeric
152	OTH_SURG_PROC_DAY_24	695	4	Alphanumeric
153	MS_MDC	699	2	Alphanumeric
154	MS_DRG	701	3	Alphanumeric
155	MS_GROUPER_VERSION_NBR	704	5	Alphanumeric
156	MS_GROUPER_ERROR_CODE	709	2	Alphanumeric
157	APR_MDC	711	2	Alphanumeric
158	APR_DRG	713	4	Alphanumeric
159	RISK_MORTALITY	717	1	Alphanumeric
160	ILLNESS_SEVERITY	718	1	Alphanumeric
161	APR_GROUPER_VERSION_NBR	719	5	Alphanumeric
162	APR_GROUPER_ERROR_CODE	724	2	Alphanumeric
163	ATTENDING_PHYSICIAN_UNIF_ID	726	10	Alphanumeric
164	OPERATING_PHYSICIAN_UNIF_ID	736	10	Alphanumeric
165	ENCOUNTER_INDICATOR	746	2	Alphanumeric
166	PROVIDER_NAME	748	55	Alphanumeric
	Record_Length		802	

### **Inpatient Base Data #2 File**

Number	Field Name (IP Base Data #2 File)	Position	Length	Field Type
	RECORD_ID - not linkable to the Record_ID in the ED Outpatient PUDF			
1	or ED Research Data Files (RDFs).	1	12	Alphanumeric
2	PRIVATE_AMOUNT	13	12	Numeric
3	SEMI_PRIVATE_AMOUNT	25	12	Numeric
4	WARD_AMOUNT	37	12	Numeric
5	ICU_AMOUNT	49	12	Numeric
6	CCU_AMOUNT	61	12	Numeric
7	OTHER_AMOUNT	73	12	Numeric
8	PHARM_AMOUNT	85	12	Numeric
9	MEDSURG_AMOUNT	97	12	Numeric
10	DME_AMOUNT	109	12	Numeric
11	USED_DME_AMOUNT	121	12	Numeric
12	PT_AMOUNT	133	12	Numeric
13	OT_AMOUNT	145	12	Numeric

DSHS/THCIC www.dshs.texas.gov/THCIC Page 97

DSHS Document #25-15013
Last Updated: August, 2019

Number	Field Name (IP Base Data #2 File)	Position	Length	Field Type
14	SPEECH_AMOUNT	157	12	Numeric
15	IT_AMOUNT	169	12	Numeric
16	BLOOD_AMOUNT	181	12	Numeric
17	BLOOD_ADM_AMOUNT	193	12	Numeric
18	OR_AMOUNT	205	12	Numeric
19	LITH_AMOUNT	217	12	Numeric
20	CARD_AMOUNT	229	12	Numeric
21	ANES_AMOUNT	241	12	Numeric
22	LAB_AMOUNT	253	12	Numeric
23	RAD_AMOUNT	265	12	Numeric
24	MRI_AMOUNT	277	12	Numeric
25	OP_AMOUNT	289	12	Numeric
26	ER_AMOUNT	301	12	Numeric
27	AMBULANCE_AMOUNT	313	12	Numeric
28	PRO_FEE_AMOUNT	325	12	Numeric
29	ORGAN_AMOUNT	337	12	Numeric
30	ESRD_AMOUNT	349	12	Numeric
31	CLINIC_AMOUNT	361	12	Numeric
32	OCCUR_CODE_1	373	2	Alphanumeric
33	OCCUR_DAY_1	375	4	Alphanumeric
34	OCCUR_CODE_2	379	2	Alphanumeric
35	OCCUR_DAY_2	381	4	Alphanumeric
36	OCCUR_CODE_3	385	2	Alphanumeric
37	OCCUR_DAY_3	387	4	Alphanumeric
38	OCCUR_CODE_4	391	2	Alphanumeric
39	OCCUR_DAY_4	393	4	Alphanumeric
40	OCCUR_CODE_5	397	2	Alphanumeric
41	OCCUR_DAY_5	399	4	Alphanumeric
42	OCCUR_CODE_6	403	2	Alphanumeric
43	OCCUR_DAY_6	405	4	Alphanumeric
44	OCCUR_CODE_7	409	2	Alphanumeric
45	OCCUR_DAY_7	411	4	Alphanumeric
46	OCCUR_CODE_8	415	2	Alphanumeric
47	OCCUR_DAY_8	417	4	Alphanumeric
48	OCCUR_CODE_9	421	2	Alphanumeric
49	OCCUR_DAY_9	423	4	Alphanumeric
50	OCCUR_CODE_10	427	2	Alphanumeric
51	OCCUR_DAY_10	429	4	Alphanumeric
52	OCCUR_CODE_11	433	2	Alphanumeric
53	OCCUR_DAY_11	435	4	Alphanumeric

Number	Field Name (IP Base Data #2 File)	Position	Length	Field Type
54	OCCUR_CODE_12	439	2	Alphanumeric
55	OCCUR_DAY_12	441	4	Alphanumeric
56	OCCUR_SPAN_CODE_1	445	2	Alphanumeric
57	OCCUR_SPAN_FROM_1	447	6	Alphanumeric
58	OCCUR_SPAN_THRU_1	453	6	Alphanumeric
59	OCCUR_SPAN_CODE_2	459	2	Alphanumeric
60	OCCUR_SPAN_FROM_2	461	6	Alphanumeric
61	OCCUR_SPAN_THRU_2	467	6	Alphanumeric
62	OCCUR_SPAN_CODE_3	473	2	Alphanumeric
63	OCCUR_SPAN_FROM_3	475	6	Alphanumeric
64	OCCUR_SPAN_THRU_3	481	6	Alphanumeric
65	OCCUR_SPAN_CODE_4	487	2	Alphanumeric
66	OCCUR_SPAN_FROM_4	489	6	Alphanumeric
67	OCCUR_SPAN_THRU_4	495	6	Alphanumeric
68	CONDITION_CODE_1	501	2	Alphanumeric
69	CONDITION_CODE_2	503	2	Alphanumeric
70	CONDITION_CODE_3	505	2	Alphanumeric
71	CONDITION_CODE_4	507	2	Alphanumeric
72	CONDITION_CODE_5	509	2	Alphanumeric
73	CONDITION_CODE_6	511	2	Alphanumeric
74	CONDITION_CODE_7	513	2	Alphanumeric
75	CONDITION_CODE_8	515	2	Alphanumeric
76	VALUE_CODE_1	517	2	Alphanumeric
77	VALUE_AMOUNT_1	519	9	Numeric
78	VALUE_CODE_2	528	2	Alphanumeric
79	VALUE_AMOUNT_2	530	9	Numeric
80	VALUE_CODE_3	539	2	Alphanumeric
81	VALUE_AMOUNT_3	541	9	Numeric
82	VALUE_CODE_4	550	2	Alphanumeric
83	VALUE_AMOUNT_4	552	9	Numeric
84	VALUE_CODE_5	561	2	Alphanumeric
85	VALUE_AMOUNT_5	563	9	Numeric
86	VALUE_CODE_6	572	2	Alphanumeric
87	VALUE_AMOUNT_6	574	9	Numeric
88	VALUE_CODE_7	583	2	Alphanumeric
89	VALUE_AMOUNT_7	585	9	Numeric
90	VALUE_CODE_8	594	2	Alphanumeric
91	VALUE_AMOUNT_8	596	9	Numeric
92	VALUE_CODE_9	605	2	Alphanumeric
93	VALUE_AMOUNT_9	607	9	Numeric

Number	Field Name (IP Base Data #2 File)	Position	Length	Field Type
94	VALUE_CODE_10	616	2	Alphanumeric
95	VALUE_AMOUNT_10	618	9	Numeric
96	VALUE_CODE_11	627	2	Alphanumeric
97	VALUE_AMOUNT_11	629	9	Numeric
98	VALUE_CODE_12	638	2	Alphanumeric
99	VALUE_AMOUNT_12	640	9	Numeric
	Record_Length		648	

#### **Inpatient Charges Data File**

Number	Field Name	Position	Length	Field Type
1	RECORD_ID - not linkable to the Record_ID in the ED Outpatient PUDF or ED Research Data Files (RDFs).	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
	Record_Length		80	

## **Outpatient Base Data File**

Number	Field Name (OP Base Data File)	Position	Length	Field Type
1	SERVICE_QUARTER	1	6	Alphanumeric
2	RECORD_ID - not linkable to the Record_ID in the ED Inpatient PUDF or ED Research Data Files (RDFs).	7	12	Alphanumeric
3	THCIC_ID	19	6	Alphanumeric
4	SPEC_UNIT_1	25	1	Alphanumeric
5	SPEC_UNIT_2	26	1	Alphanumeric
6	SPEC_UNIT_3	27	1	Alphanumeric
7	SPEC_UNIT_4	28	1	Alphanumeric

DSHS/THCIC DSHS Document #25-15013 Page www.dshs.texas.gov/THCIC

Number	Field Name (OP Base Data File)	Position	Length	Field Type
8	SPEC_UNIT_5	29	1	Alphanumeric
9	SEX_CODE	30	1	Alphanumeric
10	PAT_COUNTY	31	3	Alphanumeric
11	PAT_STATE	34	2	Alphanumeric
12	PAT_ZIP	36	5	Alphanumeric
13	PAT_COUNTRY	41	2	Alphanumeric
14	PUBLIC_HEALTH_REGION	43	2	Alphanumeric
15	LENGTH_OF_SERVICE	45	2	Alphanumeric
16	PAT_AGE	47	2	Alphanumeric
17	RACE	49	1	Alphanumeric
18	ETHNICITY	50	1	Alphanumeric
19	FIRST_PAYMENT_SRC	51	2	Alphanumeric
20	SECONDARY_PAYMENT_SRC	53	2	Alphanumeric
21	TYPE_OF_BILL	55	3	Alphanumeric
22	CONDITION_CODE_1	58	2	Alphanumeric
23	CONDITION_CODE_2	60	2	Alphanumeric
24	CONDITION_CODE_3	62	2	Alphanumeric
25	CONDITION_CODE_4	64	2	Alphanumeric
26	CONDITION_CODE_5	66	2	Alphanumeric
27	CONDITION_CODE_6	68	2	Alphanumeric
28	CONDITION_CODE_7	70	2	Alphanumeric
29	CONDITION_CODE_8	72	2	Alphanumeric
30	PAT_REASON_FOR_VISIT	74	7	Alphanumeric
31	PRINC_DIAG_CODE	81	7	Alphanumeric
32	OTH_DIAG_CODE_1	88	7	Alphanumeric
33	OTH_DIAG_CODE_2	95	7	Alphanumeric
34	OTH_DIAG_CODE_3	102	7	Alphanumeric
35	OTH_DIAG_CODE_4	109	7	Alphanumeric
36	OTH_DIAG_CODE_5	116	7	Alphanumeric
37	OTH_DIAG_CODE_6	123	7	Alphanumeric
38	OTH_DIAG_CODE_7	130	7	Alphanumeric
39	OTH_DIAG_CODE_8	137	7	Alphanumeric
40	OTH_DIAG_CODE_9	144	7	Alphanumeric
41	OTH_DIAG_CODE_10	151	7	Alphanumeric
42	OTH_DIAG_CODE_11	158	7	Alphanumeric
43	OTH_DIAG_CODE_12	165	7	Alphanumeric
44	OTH_DIAG_CODE_13	172	7	Alphanumeric
45	OTH_DIAG_CODE_14	179	7	Alphanumeric
46	OTH_DIAG_CODE_15	186	7	Alphanumeric
47	OTH_DIAG_CODE_16	193	7	Alphanumeric

Last Updated: August, 2

Number	Field Name (OP Base Data File)	Position	Length	Field Type
48	OTH_DIAG_CODE_17	200	7	Alphanumeric
49	OTH_DIAG_CODE_18	207	7	Alphanumeric
50	OTH_DIAG_CODE_19	214	7	Alphanumeric
51	OTH_DIAG_CODE_20	221	7	Alphanumeric
52	OTH_DIAG_CODE_21	228	7	Alphanumeric
53	OTH_DIAG_CODE_22	235	7	Alphanumeric
54	OTH_DIAG_CODE_23	242	7	Alphanumeric
55	OTH_DIAG_CODE_24	249	7	Alphanumeric
56	RELATED_CAUSE_CODE_1	256	2	Alphanumeric
57	RELATED_CAUSE_CODE_2	258	2	Alphanumeric
58	RELATED_CAUSE_CODE_3	260	2	Alphanumeric
59	E_CODE_1	262	7	Alphanumeric
60	E_CODE_2	269	7	Alphanumeric
61	E_CODE_3	276	7	Alphanumeric
62	E_CODE_4	283	7	Alphanumeric
63	E_CODE_5	290	7	Alphanumeric
64	E_CODE_6	297	7	Alphanumeric
65	E_CODE_7	304	7	Alphanumeric
66	E_CODE_8	311	7	Alphanumeric
67	E_CODE_9	318	7	Alphanumeric
68	E_CODE_10	325	7	Alphanumeric
69	PROC_CODE_1	332	5	Alphanumeric
70	PROC_CODE_2	337	5	Alphanumeric
71	PROC_CODE_3	342	5	Alphanumeric
72	PROC_CODE_4	347	5	Alphanumeric
73	PROC_CODE_5	352	5	Alphanumeric
74	PROC_CODE_6	357	5	Alphanumeric
75	PROC_CODE_7	362	5	Alphanumeric
76	PROC_CODE_8	367	5	Alphanumeric
77	PROC_CODE_9	372	5	Alphanumeric
78	PROC_CODE_10	377	5	Alphanumeric
79	PROC_CODE_11	382	5	Alphanumeric
80	PROC_CODE_12	387	5	Alphanumeric
81	PROC_CODE_13	392	5	Alphanumeric
82	PROC_CODE_14	397	5	Alphanumeric
83	PROC_CODE_15	402	5	Alphanumeric
84	PROC_CODE_16	407	5	Alphanumeric
85	PROC_CODE_17	412	5	Alphanumeric
86	PROC_CODE_18	417	5	Alphanumeric
87	PROC_CODE_19	422	5	Alphanumeric

Number	Field Name (OP Base Data File)	Position	Length	Field Type
88	PROC_CODE_20	427	5	Alphanumeric
89	PROC_CODE_21	432	5	Alphanumeric
90	PROC_CODE_22	437	5	Alphanumeric
91	PROC_CODE_23	442	5	Alphanumeric
92	PROC_CODE_24	447	5	Alphanumeric
93	PROC_CODE_25	452	5	Alphanumeric
94	OTHER_AMOUNT	457	12	Numeric
95	PHARM_AMOUNT	469	12	Numeric
96	MEDSURG_AMOUNT	481	12	Numeric
97	DME_AMOUNT	493	12	Numeric
98	USED_DME_AMOUNT	505	12	Numeric
99	PT_AMOUNT	517	12	Numeric
100	OT_AMOUNT	529	12	Numeric
101	SPEECH_AMOUNT	541	12	Numeric
102	IT_AMOUNT	553	12	Numeric
103	BLOOD_AMOUNT	565	12	Numeric
104	BLOOD_ADM_AMOUNT	577	12	Numeric
105	OR_AMOUNT	589	12	Numeric
106	LITH_AMOUNT	601	12	Numeric
107	CARD_AMOUNT	613	12	Numeric
108	ANES_AMOUNT	625	12	Numeric
109	LAB_AMOUNT	637	12	Numeric
110	RAD_AMOUNT	649	12	Numeric
111	MRI_AMOUNT	661	12	Numeric
112	OP_AMOUNT	673	12	Numeric
113	ER_AMOUNT	685	12	Numeric
114	AMBULANCE_AMOUNT	697	12	Numeric
115	PRO_FEE_AMOUNT	709	12	Numeric
116	ORGAN_AMOUNT	721	12	Numeric
117	ESRD_AMOUNT	733	12	Numeric
118	CLINIC_AMOUNT	745	12	Numeric
119	TOTAL_CHARGES	757	12	Numeric
120	TOTAL_NON_COV_CHARGES	769	12	Numeric
121	TOTAL_CHARGES_ANCIL	781	12	Numeric
122	TOTAL_NON_COV_CHARGES_ANCIL	793	12	Numeric
123	PHYSICIAN1_INDEX_NUMBER	805	10	Alphanumeric
124	PHYSICIAN2_INDEX_NUMBER	815	10	Alphanumeric
125	INPUT_FORMAT	825	1	Alphanumeric
126	SOURCE_OF_ADMISSION	826	1	Alphanumeric
127	PAT_STATUS	827	2	Alphanumeric

Number	Field Name (OP Base Data File)	Position	Length	Field Type
128	PROVIDER_NAME	829	55	Alphanumeric
	Record_Length		883	

## **Outpatient Classification File**

Number	Field Name (OP Classification File)	Position	Length	Field Type
1	RECORD_ID - not linkable to the Record_ID in the ED Inpatient PUDF or ED Research Data Files (RDFs).	1	12	Alphanumeric
2	CCS_PRINC_DIAG_CODE	13	4	Alphanumeric
3	CCS_OTH_DIAG_CODE_1	17	4	Alphanumeric
4	CCS_OTH_DIAG_CODE_2	21	4	Alphanumeric
5	CCS_OTH_DIAG_CODE_3	25	4	Alphanumeric
6	CCS_OTH_DIAG_CODE_4	29	4	Alphanumeric
7	CCS_OTH_DIAG_CODE_5	33	4	Alphanumeric
8	CCS_OTH_DIAG_CODE_6	37	4	Alphanumeric
9	CCS_OTH_DIAG_CODE_7	41	4	Alphanumeric
10	CCS_OTH_DIAG_CODE_8	45	4	Alphanumeric
11	CCS_OTH_DIAG_CODE_9	49	4	Alphanumeric
12	CCS_OTH_DIAG_CODE_10	53	4	Alphanumeric
13	CCS_OTH_DIAG_CODE_11	57	4	Alphanumeric
14	CCS_OTH_DIAG_CODE_12	61	4	Alphanumeric
15	CCS_OTH_DIAG_CODE_13	65	4	Alphanumeric
16	CCS_OTH_DIAG_CODE_14	69	4	Alphanumeric
17	CCS_OTH_DIAG_CODE_15	73	4	Alphanumeric
18	CCS_OTH_DIAG_CODE_16	77	4	Alphanumeric
19	CCS_OTH_DIAG_CODE_17	81	4	Alphanumeric
20	CCS_OTH_DIAG_CODE_18	85	4	Alphanumeric
21	CCS_OTH_DIAG_CODE_19	89	4	Alphanumeric
22	CCS_OTH_DIAG_CODE_20	93	4	Alphanumeric
23	CCS_OTH_DIAG_CODE_21	97	4	Alphanumeric
24	CCS_OTH_DIAG_CODE_22	101	4	Alphanumeric
25	CCS_OTH_DIAG_CODE_23	105	4	Alphanumeric
26	CCS_OTH_DIAG_CODE_24	109	4	Alphanumeric
27	CCS_PROC_CODE_1	113	3	Alphanumeric
28	CCS_PROC_CODE_2	116	3	Alphanumeric
29	CCS_PROC_CODE_3	119	3	Alphanumeric
30	CCS_PROC_CODE_4	122	3	Alphanumeric
31	CCS_PROC_CODE_5	125	3	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

DSHS/THCIC Page DSHS Document #25-15013 www.dshs.texas.gov/THCIC 105 Last Updated: August, 2019

Number	Field Name (OP Classification File)	Position	Length	Field Type
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	3	Alphanumeric
42	CCS_PROC_CODE_16	158	3	Alphanumeric
43	CCS_PROC_CODE_17	161	3	Alphanumeric
44	CCS_PROC_CODE_18	164	3	Alphanumeric
45	CCS_PROC_CODE_19	167	3	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	EAPG_GRP_VER	188	12	Alphanumeric
53	APC_GRP_VER	200	12	Alphanumeric
54	CRG_STATUS_1	212	1	Alphanumeric
55	CRG_STATUS_2	213	1	Alphanumeric
56	CRG_STATUS_3	214	1	Alphanumeric
57	CRG_STATUS_4	215	1	Alphanumeric
58	CRG_STATUS_5	216	1	Alphanumeric
59	CRG_STATUS_6	217	1	Alphanumeric
60	CRG_STATUS_7	218	1	Alphanumeric
61	CRG_STATUS_8	219	1	Alphanumeric
62	CRG_STATUS_9	220	1	Alphanumeric
63	CRG_STATUS_10	221	1	Alphanumeric
64	CRG_CODE_1	222	5	Alphanumeric
65	CRG_CODE_2	227	5	Alphanumeric
66	CRG_CODE_3	232	5	Alphanumeric
67	CRG_CODE_4	237	5	Alphanumeric
68	CRG_CODE_5	242	5	Alphanumeric
69	CRG_CODE_6	247	5	Alphanumeric
70	CRG_CODE_7	252	5	Alphanumeric
71	CRG_CODE_8	257	5	Alphanumeric
72	CRG_CODE_9	262	5	Alphanumeric
73	CRG_CODE_10	267	5	Alphanumeric
74	CRG_SEVERITY_1	272	1	Alphanumeric
75	CRG_SEVERITY_2	273	1	Alphanumeric
76	CRG_SEVERITY_3	274	1	Alphanumeric
77	CRG_SEVERITY_4	275	1	Alphanumeric

106

Number	Field Name (OP Classification File)	Position	Length	Field Type
78	CRG_SEVERITY_5	276	1	Alphanumeric
79	CRG_SEVERITY_6	277	1	Alphanumeric
80	CRG_SEVERITY_7	278	1	Alphanumeric
81	CRG_SEVERITY_8	279	1	Alphanumeric
82	CRG_SEVERITY_9	280	1	Alphanumeric
83	CRG_SEVERITY_10	281	1	Alphanumeric
	Record_Length		281	

## **Outpatient Charges Data File**

Number	Field Name	Position	Length	Field Type
1	RECORD_ID - not linkable to the Record_ID in the ED Inpatient PUDF or ED Research Data Files (RDFs).	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
14	FINAL_EAPG_CATEGORY_CODE	81	2	Alphanumeric
15	FINAL_EAPG_TYPE_CODE	83	2	Alphanumeric
16	FINAL_EAPG	85	5	Alphanumeric
17	APC_PROCEDURE_CODE	90	5	Alphanumeric
18	APC_PX_STATUS_IND_CODE	95	2	Alphanumeric
19	APC_WEIGHT	97	9	Alphanumeric
	Record_Length		105	

## **Facility Type Indicator 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
28	POA_PROVIDER_INDICATOR	87	1	Alphanumeric
29	CERT_STATUS_IP	88	1	Alphanumeric
30	CERT_STATUS_OP	89	1	Alphanumeric
	Record_Length	89		