

# **Texas Department of State Health Services**

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

# TEXAS OUTPATIENT SURGICAL AND RADIOLOGICAL PROCEDURE DATA PUBLIC USE DATA FILE (PUDF)

#### **USER MANUAL**

#### 2017

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#### **BACKGROUND**

The Texas Health Care Information Council (THCIC) was created by Chapter 108 of the Texas Health and Safety Code (THSC) and was responsible, under Sections 108.011 through 108.0135, for collecting hospital discharge data from all state licensed hospitals except those that are statutorily exempt from the reporting requirement. Exempt hospitals include those located in a county with a population less than 35,000, or those located in a county with a population more than 35,000 and with fewer than 100 licensed hospital beds and not located in an area that is delineated as an urbanized area by the United States Bureau of the Census (Section 108.0025). Exempt hospitals also include hospitals that do not seek insurance payment or government reimbursement (Section 108.009). THCIC became part of the Texas Department of State Health Services (DSHS) effective September 1, 2004 and the DSHS Center for Health Statistics is now responsible for the collection and release of hospital discharge data.

Senate Bill (SB) 7 (82nd Texas Legislature First Called Special Session) SECTION 7.06 repeals the facility exemption sections in Chapter 108 effective September 1, 2014. Rules were adopted implementing the rural provider requirements to begin with January 1, 2015 data. Rural providers and providers that are exempt from state franchise, sales, ad valorem, or other state or local taxes, and that do not seek or receive reimbursement for providing health care services to patients from any source will no longer be exempt from the data reporting requirements of Chapter 108.

#### **PUBLIC USE DATA FILE (PUDF)**

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

#### PATIENT/PHYSICIAN CONFIDENTIALITY

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

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

- The last two digits of the patient's ZIP code are suppressed if there are fewer than thirty patients included in the ZIP code.
- The ZIP code is changed to '88888' for patients from states other than Texas and the adjacent states.
- The entire ZIP code and gender code are suppressed if the ICD-10-CM or ICD-10-PCS codes indicates alcohol or drug use or an HIV diagnosis.
- The entire ZIP code and provider name are suppressed if a hospital has fewer than five 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 and 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 the HIV and alcohol and drug use patient populations.
- Race is changed to 'Other' and ethnicity is suppressed if a hospital has fewer than ten discharges of a race.

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

#### RESTRICTIONS ON DATA USE

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

Sections 108.013(c)(1) and (2) and 108.013 (g) of the Texas Health and Safety Code (THSC) prohibit the DSHS from releasing, and a person or entity from gaining access to, any data that could reveal the identity of a patient or the identity of a physician unless specifically authorized by the Act. Any effort to determine the identity of any person or to use the information for any purpose other than for analysis and aggregate statistical reporting violates the THSC and the Data Use Agreement. By virtue of the Agreement, the signer agrees that the data will not be used to identify an individual patient or physician. Because of these restrictions, under no circumstances will users of the data contact an individual patient or physician or hospital or ambulatory surgery center for the purpose of verifying information supplied in the DSHS Outpatient Services Public Use Data sets. Any questions about the data must be referred to DSHS only. Data analysis assistance is not provided by DSHS. The data are protected by United States copyright laws and international treaty provisions.

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

- The licensee will not release nor permit others to release the individual patient records or any part of them to any person who is not a staff member of the organization that has acquired the data, except with the written approval of DSHS;
- The licensee will not attempt to link nor permit others to attempt to link the outpatient records of patients in this data set with personally identifiable records from any other source, including any THCIC research data file (effective Aug 1, 2012);
- The licensee will not release nor permit others to release any information that identifies persons, directly or indirectly;
- The licensee will not attempt to use nor permit others to use the data to learn the identity of any physician;
- The licensee will not nor permit others to copy, sell, rent, license, lease, loan, or otherwise grant access to the data covered by 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 Outpatient Services Public Use Data File, [quarter and year of data]. Texas Department of State Health Services, Center for Health Statistics, Austin, Texas. [date of publication];

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

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

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

#### **OUTPATIENT FACILITY COMMENTS**

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

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

A Facility Type file with 29 variables, includes the THCIC\_ID and facility name. Variables clarifying the type of provider (Pediatric, Teaching Facility, Long Term Care, etc.) are included also. This is useful for data users focusing on a certain

type of facility. Additionally, POA provider indicator and certification status are included.

#### **DATA FILES**

The 2017 PUDF is available in four files, the Base Data, Classification data, Charges and Facility Type Data files. The files are also available in fixed length and tab-delimited formats. The size of the files are as follows:

#### First quarter, 967 facilities:

Base Data	4,517,153 records	129 variables	Fixed field format	3,817 MB	Tab-delimited	1,728 MB
Classification Data	4,517,153 records	83 variables	Fixed field format	1,219 MB	Tab-delimited	583 ME
Charges	29,985,682 records	19 variables	Fixed field format	3,060 MB	Tab-delimited	2,366 MB
Facility Type Data	967 records	29 variables	Fixed field format	85 KB	Tab-delimited	72 KE
econd quarter, 9	956 facilities:					
Base Data	4,515,375 records	129 variables	Fixed field format	3,815 MB	Tab-delimited	1,731 ME
Classification Data	4,515,375 records	83 variables	Fixed field format	1,219 MB	Tab-delimited	584 ME
Charges	30,302,286 records	19 variables	Fixed field format	3,092 MB	Tab-delimited	2,391 ME
Facility Type Data	956 records  4 facilities:	29 variables	Fixed field format	84 KB	Tab-delimited	71 KI
		29 variables	Fixed field format		Tab-delimited  Tab-delimited	
Facility Type Data	4 facilities:					1,649 MI
Facility Type Data  third quarter, 95  Base Data	4 facilities: 4,299,591 records	129 variables	Fixed field format	3,633 MB 1,160 MB	Tab-delimited	1,649 ME 556 ME
Facility Type Data  hird quarter, 95  Base Data Classification Data	4 facilities: 4,299,591 records 4,299,591 records	129 variables 83 variables 19 variables	Fixed field format Fixed field format	3,633 MB 1,160 MB	Tab-delimited Tab-delimited	71 KE  1,649 ME 556 ME 2,260 ME 71 KE
Facility Type Data  hird quarter, 95  Base Data Classification Data Charges	4 facilities:  4,299,591 records 4,299,591 records 28,630,164 records 954 records	129 variables 83 variables 19 variables	Fixed field format Fixed field format Fixed field format	3,633 MB 1,160 MB 2,922 MB	Tab-delimited Tab-delimited Tab-delimited	1,649 ME 556 ME 2,260 ME
Facility Type Data  Third quarter, 95  Base Data Classification Data Charges Facility Type Data	4 facilities:  4,299,591 records 4,299,591 records 28,630,164 records 954 records	129 variables 83 variables 19 variables	Fixed field format Fixed field format Fixed field format	3,633 MB 1,160 MB 2,922 MB 84 KB	Tab-delimited Tab-delimited Tab-delimited	1,649 ME 556 ME 2,260 ME
Facility Type Data  hird quarter, 95  Base Data Classification Data Charges Facility Type Data  ourth quarter, 9	4 facilities:  4,299,591 records 4,299,591 records 28,630,164 records 954 records	129 variables 83 variables 19 variables 29 variables	Fixed field format Fixed field format Fixed field format Fixed field format	3,633 MB 1,160 MB 2,922 MB 84 KB	Tab-delimited Tab-delimited Tab-delimited Tab-delimited	1,649 MI 556 MI 2,260 MI 71 KI

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

29 variables Fixed field format

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

Facility Type Data

975 records

73 KB

86 KB Tab-delimited

#### **DATA DICTIONARY**

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

Field	Unique, abbreviated name of the data element and brief explanation of the data element.
	Descriptions of data elements are taken from specifications manuals.
<b>Data Source</b>	Provided by the health care facility on the claim form (Claim)
	Assigned by DSHS (Assigned)
	Provided to THCIC by the healthcare facility (Provider)
	Calculated by DSHS (Calculated)
Type	Alphanumeric or numeric
<b>Coding scheme</b>	Valid codes for a data field. Values taken from specifications manuals.

Any data provided by a facility that has been determined to be invalid has been assigned the value ` (accent mark).

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

#### **CITATION**

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

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

# **DATA DICTIONARY**

### **BASE DATA FILE**

Coding Scheme: Beginning Position: Length: DSHS/THCIC	Same as SPEC_UNIT_1. 29 1	Data Source: Type: Page 8	Calculated Alphanumeric  DSHS	<b>Document</b> # E25-14164
<b>Beginning Position:</b>	29	Data Source:		
_			Calculated	
<b>Coding Scheme:</b>	Same as SPEC_UNIT_1.			
<u>.</u>	Bill or Revenue Code.	J8 ·		J. J. J.
Description:		5 <sup>th</sup> most days during s	stay occurred based on	number of days by Type of
Field 8:	SPEC UNIT 5	-J F	- 1171111111111111111111111111111111111	
Length:	1	Type:	Alphanumeric	
Beginning Position:	28	Data Source:	Calculated	
Coding Scheme:	Same as SPEC_UNIT_1.			
Description.	Bill or Revenue Code.	. most days during i	m, occurred based on	namoer or augs by Type or
Description:		1 <sup>th</sup> most days during o	stay occurred based on	number of days by Type of
Field 7:	SPEC UNIT 4	турс.	1 inplication in the	
Length:	1	Type:	Alphanumeric	
Beginning Position:	27	Data Source:	Calculated	
<b>Coding Scheme:</b>	Same as SPEC_UNIT_1.			
rescription.	Bill or Revenue Code.	most days during	say occurred based off	number of days by Type Of
Description:		Rrd most days during	stay occurred based on	number of days by Type of
Field 6:	SPEC_UNIT_3	rype.	Aiphallamette	
Length:	1	Type:	Alphanumeric	
Coding Scheme: Beginning Position:	Same as SPEC_UNIT_1. 26	Data Source:	Calculated	
Cading Sahama				
<b>Description:</b>	of Bill or Revenue Code.		stay occurred based on	number of days by Type
Field 5:	SPEC_UNIT_2	and most down drawing	otory occurred board	number of days by Tym-
Length:	1 CDEC LINES 2	Type:	Alphanumeric	
Beginning Position:	25	Data Source:	Calculated	
D!! D !!!	0	Oncology Unit	Calantiti	
	В	Obstetric Unit	Blank	Acute Care
	N	Nursery	S	Skilled Nursing Unit
	H	Hospice Unit	K U	Sub-acute Care Unit
	D I	Detoxification Unit Intensive Care Unit	Y R	Psychiatric Unit Rehabilitation Unit
<b>Coding Scheme:</b>	C	Coronary Care Unit	P	Pediatric Unit
	Bill or Revenue Code. In		-	
<b>Description:</b>				umber of days by Type of
Field 4:	SPEC_UNIT_1			
Length:	6	Type:	Alphanumeric	
<b>Beginning Position:</b>	19	<b>Data Source:</b>	Assigned	
	ID is '999998'.	•	<u>-</u>	
	a facility reported fewer t			
Suppression:				he Provider ID '999999'. If
Description:	Provider ID. Unique iden	ntifier assigned to the	provider by DSHS.	
Field 3:	THCIC_ID			
Length:	12	Type:	Alphanumeric	
<b>Beginning Position:</b>	7	Data Source:	Assigned	():
~ soripuon.				earch Data Files (RDF's).
Description:		mber Unique numbe	er assigned to identify t	he record. First available
Field 2:	RECORD_ID	туре.	Aiphanumene	
Length:	6	Type:	Alphanumeric	
Description: Beginning Position:	Quarter during which ser	Data Source:	Assigned	yyyy <b>Q</b> n.
Decementions	SERVICE_QUARTER		and assertant of consider	
Field 1:				

Field 9: SEX CODE

**Description:** Gender of the patient as recorded at date of start of care.

**Suppression:** Code is suppressed if an ICD-10-CM code indicates drug or alcohol use or an HIV diagnosis. If

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.

**Coding Scheme:** M Male

F Female U Unknown Invalid

**Beginning Position:** 30 **Data Source:** Claim

Length:	1		T	ype:	Alphar	numeric		
Field 10:	PAT	COUNTY			-			
<b>Description:</b>		ode of patient's	county.					
Coding scheme:	001	Anderson	129	Donley	257	Kaufman	385	Real
coung seneme.	003	Andrews	131	Duval	259	Kendall	387	Red River
	005	Angelina	133	Eastland	261	Kenedy	389	Reeves
	007	Aransas	135	Ector	263	Kent	391	Refugio
	009	Archer	137	Edwards	265	Kerr	393	Roberts
	011	Armstrong	139	Ellis	267	Kimble	395	Robertson
	013 015	Atascosa Austin	141 143	El Paso Erath	269 271	King Kinney	397 399	Rockwall Runnels
	013	Bailey	145	Falls	273	Kleberg	401	Rusk
	017	Bandera	143	Fannin	275	Knox	403	Sabine
	021	Bastrop	149	Fayette	283	La Salle	405	San Augustine
	023	Baylor	151	Fisher	277	Lamar	407	San Jacinto
	025	Bee	153	Floyd	279	Lamb	409	San Patricio
	027	Bell	155	Foard	281	Lampasas	411	San Saba
	029	Bexar	157	Fort Bend	285	Lavaca	413	Schleicher
	031	Blanco	159	Franklin	287	Lee	415	Scurry
	033	Borden	161	Freestone	289	Leon	417	Shackelford
	035	Bosque	163	Frio	291	Liberty	419	Shelby
	037	Bowie	165	Gaines	293	Limestone	421	Sherman
	039	Brazoria	167	Galveston	295	Lipscomb	423	Smith
	041	Brazos	169	Garza	297	Live Oak	425	Somervell
	043	Brewster	171	Gillespie	299	Llano	427	Starr
	045 047	Briscoe	173	Glasscock	301	Loving	429 431	Stephens Sterling
	047	Brooks Brown	175 177	Goliad Gonzales	303 305	Lubbock Lynn	433	Stonewall
	051	Burleson	177	Gray	307	McCulloch	435	Sutton
	053	Burnet	181	Grayson	309	McLennan	437	Swisher
	055	Caldwell	183	Gregg	311	McMullen	439	Tarrant
	057	Calhoun	185	Grimes	313	Madison	441	Taylor
	059	Callahan	187	Guadalupe	315	Marion	443	Terrell
	061	Cameron	189	Hale	317	Martin	445	Terry
	063	Camp	191	Hall	319	Mason	447	Throckmorton
	065	Carson	193	Hamilton	321	Matagorda	449	Titus
	067	Cass	195	Hansford	323	Maverick	451	Tom Green
	069	Castro	197	Hardeman	325	Medina	453	Travis
	071	Chambers	199	Hardin	327	Menard	455	Trinity
	073 075	Cherokee	201	Harris	329	Midland	457	Tyler
	073	Childress Clay	203 205	Harrison Hartley	331 333	Milam Mills	459 461	Upshur Upton
	077	Cochran	207	Haskell	335	Mitchell	463	Uvalde
	081	Coke	209	Hays	337	Montague	465	Val Verde
	083	Coleman	211	Hemphill	339	Montgomery	467	Van Zandt
	085	Collin	213	Henderson	341	Moore	469	Victoria
	087	Collingsworth	215	Hidalgo	343	Morris	471	Walker
	089	Colorado	217	Hill	345	Motley	473	Waller
	091	Comal	219	Hockley	347	Nacogdoches	475	Ward
	093	Comanche	221	Hood	349	Navarro	477	Washington
	095	Concho	223	Hopkins	351	Newton	479	Webb
	097	Cooke	225	Houston	353	Nolan	481	Wharton
	099	Coryell	227	Howard	355	Nueces	483	Wheeler
	101	Cottle	229	Hudspeth	357	Ochiltree	485	Wichita
	103	Crane	231	Hunt	359	Oldham	487	Wilbarger
	105	Crockett	233	Hutchinson	361	Orange Dala Binta	489	William
	107	Crosby	235	Irion	363	Palo Pinto Panola	491	Williamson Wilson
	109	Culberson Dallam	237	Jack Jackson	365 367	Panola Parker	493 495	Wilson Winkler
	111 113	Dallam Dallas	239 241	Jackson Jasper	367 369	Parker Parmer	495 497	Wise
	115	Danas Dawson	241	Jaspei Jeff Davis	371	Pecos	497	Wood
D 0440 /m4-0-0	110	Dumbon	243	JOH Davis	3/1			
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	117 Deaf Smith	245 Jefferson	373 Polk	501 Yoakum		
	119 Delta	247 Jim Hogg	375 Potter	503 Young		
	121 Denton 123 Dewitt	249 Jim Wells 251 Johnson	377 Presidio 379 Rains	505 Zapata 507 Zavala		
	125 Dewitt 125 Dickens	253 Jones	381 Randall	307 Zavaia		
	127 Dimmit	255 Karnes	383 Reagan	` Invalid		
<b>Beginning Position:</b>	31	Data Source	: Assigned; based on	patient ZIP code		
Length:	3	Type:	Alphanumeric	1		
Field 11:	PAT_STATE	<b>J.</b>	<b>I</b> i			
Description:		nt's mailing address in Texa	s and contiguous states	Standard 2-character		
Description.	Postal Service ab	•	s and configuous states	s. Standard 2 Character		
Coding Scheme:	AR Arkansas					
coung beneme.	LA Louisiana					
	NM New Mexi	ico				
	OK Oklahoma	ı				
	TX Texas					
		states and American Territories				
	FC Foreign co	•				
<b>Beginning Position:</b>	XX Foreign co	Data Source:	Claim			
	2					
Length:		Type:	Alphanumeric			
Field 12:	PAT_ZIP	'4 7TD 1.				
Description:	Patient's five-dig		1 20 1 7	1 (22) 210 1		
<b>Suppression:</b>	_			f state equals 'ZZ', ZIP code		
		equals '88888'. If state equals 'FC' (foreign country) ZIP code is blank. If ICD-10-CM				
	indicates alcohol	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					
	than fifty outpation	ent services reported for the	quarter the ZIP code is	s blank. If a facility has		
		ent services reported for the ents reported of a particular				
Beginning Position:	fewer than 5 patie					
Beginning Position: Length:	fewer than 5 paties blank.	ents reported of a particular	gender, including 'unk			
	fewer than 5 patie blank. 36 5	ents reported of a particular  Data Source: Type:	gender, including 'unk Claim			
Length: Field 13:	fewer than 5 patie blank. 36 5 PAT_COUNTR	Data Source: Type:	gender, including 'unk  Claim  Alphanumeric	nown', the ZIP Code is		
Length:	fewer than 5 patie blank. 36 5 PAT_COUNTR Country of patien	Data Source: Type: Y nt's residential address. List	gender, including 'unk  Claim  Alphanumeric	nown', the ZIP Code is		
Length: Field 13: Description:	fewer than 5 paties blank. 36 5  PAT_COUNTR Country of patien Standardization (	Data Source: Type: Y nt's residential address. List ISO).	gender, including 'unk Claim Alphanumeric maintained by the Inter	nown', the ZIP Code is		
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Length: Field 13: Description: Suppression: Coding scheme: Beginning Position:	fewer than 5 paties blank. 36 5  PAT_COUNTR Country of patien Standardization (Suppressed if few See www.ISO.org	Data Source: Type: Y nt's residential address. List ISO). ver than 5 patients from one g for complete list. Data Source:	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim	nown', the ZIP Code is		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length:	fewer than 5 paties blank. 36 5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41 2	Data Source: Type:  Y nt's residential address. List ISO). ver than 5 patients from one g for complete list. Data Source: Type:	gender, including 'unk Claim Alphanumeric maintained by the Inter country.	nown', the ZIP Code is		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14:	fewer than 5 paties blank. 36 5  PAT_COUNTR Country of patient Standardization ( Suppressed if few See www.ISO.org 41 2  PUBLIC_HEAL	Data Source: Type: Y nt's residential address. List ISO). ver than 5 patients from one g for complete list. Data Source: Type: LTH_REGION	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim	nown', the ZIP Code is		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14: Description:	fewer than 5 paties blank. 36 5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41 2  PUBLIC_HEAL Public Health Res	Data Source: Type: Y nt's residential address. List ISO). wer than 5 patients from one g for complete list. Data Source: Type: TTH_REGION gion of patient's address.	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric	nown', the ZIP Code is		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14:	fewer than 5 paties blank. 36 5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41 2  PUBLIC_HEAL Public Health Rep 1 Armstrong, E	Data Source: Type: Y nt's residential address. List ISO). ver than 5 patients from one g for complete list. Data Source: Type: LTH_REGION	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric  ildress, Cochran, Collingswo	rnational Organization for orth, Crosby, Dallam, Deaf Smith,		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14: Description:	fewer than 5 paties blank.  36  5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41  2  PUBLIC_HEAL Public Health Report Armstrong, EDickens, Dorg	Data Source: Type: Y nt's residential address. List ISO). ver than 5 patients from one g for complete list. Data Source: Type: TTH_REGION gion of patient's address. Bailey, Briscoe, Carson, Castro, Ch	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric  ildress, Cochran, Collingswo	rnational Organization for orth, Crosby, Dallam, Deaf Smith, hill, Hockley, Hutchinson, King,		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14: Description:	fewer than 5 paties blank.  36  5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41  2  PUBLIC_HEAI Public Health Rej 1 Armstrong, For Dickens, Dor Lamb, Lipsce Sherman, Sw	Data Source: Type:  Y nt's residential address. List ISO). ver than 5 patients from one g for complete list.  Data Source: Type:  TH_REGION gion of patient's address. Bailey, Briscoe, Carson, Castro, Chelley, Floyd, Garza, Gray, Hale, Halomb, Lubbock, Lynn, Moore, Motly isher, Terry, Wheeler, Yoakum co	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric  ildress, Cochran, Collingsworth, Hansford, Hartley, Hempher, Ochiltree, Oldham, Parmunties	rnational Organization for orth, Crosby, Dallam, Deaf Smith, nill, Hockley, Hutchinson, King, ler, Potter, Randall, Roberts,		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14: Description:	fewer than 5 paties blank.  36  5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41  2  PUBLIC_HEAL Public Health Report Lamb, Lipscus Sherman, Sw 2 Archer, Baylor  2	Data Source: Type: Y nt's residential address. List ISO). wer than 5 patients from one g for complete list. Data Source: Type: TTH_REGION gion of patient's address. Bailey, Briscoe, Carson, Castro, Chelley, Briscoe, Carson, Castro, Chelley, Briscoe, Carson, Castro, Chelley, Briscoe, Carson, Castro, Chelley, Floyd, Garza, Gray, Hale, Halomb, Lubbock, Lynn, Moore, Motlorisher, Terry, Wheeler, Yoakum coor, Brown, Callahan, Clay, Colema	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric  ildress, Cochran, Collingswo, Il, Hansford, Hartley, Hempher, Ochiltree, Oldham, Parmunties un, Comanche, Cottle, Eastlan	orth, Crosby, Dallam, Deaf Smith, hill, Hockley, Hutchinson, King, ler, Potter, Randall, Roberts, and, Fisher, Foard, Hardeman,		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14: Description:	fewer than 5 paties blank.  36  5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41  2  PUBLIC_HEAL Public Health Report Lamb, Lipscus Sherman, Sw 2 Archer, Bayle Haskell, Jack	Data Source: Type:  Y  Att's residential address. List ISO).  Wer than 5 patients from one g for complete list.  Data Source: Type:  TH_REGION  gion of patient's address. Bailey, Briscoe, Carson, Castro, Chelley, Briscoe, Carson, Castro, Chelley, Floyd, Garza, Gray, Hale, Halomb, Lubbock, Lynn, Moore, Motlorisher, Terry, Wheeler, Yoakum coor, Brown, Callahan, Clay, Colema, Jones, Kent, Knox, Mitchell, Mo	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric  ildress, Cochran, Collingswo Il, Hansford, Hartley, Hemph ey, Ochiltree, Oldham, Parm unties un, Comanche, Cottle, Eastlan ntague, Nolan, Runnels, Scu	orth, Crosby, Dallam, Deaf Smith, hill, Hockley, Hutchinson, King, ler, Potter, Randall, Roberts, and, Fisher, Foard, Hardeman,		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14: Description:	fewer than 5 paties blank.  36  5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41  2  PUBLIC_HEAL Public Health Results Armstrong, EDickens, Done Lamb, Lipsed Sherman, Sw 2 Archer, Bayle Haskell, Jack Stonewall, Takens Stonewal	Data Source: Type: Y nt's residential address. List ISO). wer than 5 patients from one g for complete list. Data Source: Type: TH_REGION gion of patient's address. Bailey, Briscoe, Carson, Castro, Chalomb, Lubbock, Lynn, Moore, Motly, Floyd, Garza, Gray, Hale, Halomb, Lubbock, Lynn, Moore, Motly, Fory, Wheeler, Yoakum coor, Brown, Callahan, Clay, Colema, Jones, Kent, Knox, Mitchell, Moaylor, Throckmorton, Wichita, Wil	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric  ildress, Cochran, Collingsword  Il, Hansford, Hartley, Hemphe  ey, Ochiltree, Oldham, Parm  unties  un, Comanche, Cottle, Eastlan  ntague, Nolan, Runnels, Scur  barger, Young counties	orth, Crosby, Dallam, Deaf Smith, hill, Hockley, Hutchinson, King, ler, Potter, Randall, Roberts, and, Fisher, Foard, Hardeman, rry, Shackleford, Stephens,		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14: Description:	fewer than 5 paties blank.  36  5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41  2  PUBLIC_HEAL Public Health Results Armstrong, EDickens, Dorse Lamb, Lipsed Sherman, Sw 2  Archer, Bayle Haskell, Jack Stonewall, Tack Stonewall, Tack Collin, Cooke	Data Source: Type: Y At's residential address. List ISO). Wer than 5 patients from one of for complete list. Data Source: Type: Type:  TH_REGION gion of patient's address. Bailey, Briscoe, Carson, Castro, Chenley, Floyd, Garza, Gray, Hale, Hale, Holyisher, Terry, Wheeler, Yoakum coor, Brown, Callahan, Clay, Colema (a., Jones, Kent, Knox, Mitchell, Moaylor, Throckmorton, Wichita, Wile, Dallas, Denton, Ellis, Erath, Fan	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric  ildress, Cochran, Collingsworth, Hartley, Hempheren, Ochiltree, Oldham, Parmunties un, Comanche, Cottle, Eastlantague, Nolan, Runnels, Scurbarger, Young counties nin, Grayson, Hood, Hunt, Jo	orth, Crosby, Dallam, Deaf Smith, hill, Hockley, Hutchinson, King, ler, Potter, Randall, Roberts, and, Fisher, Foard, Hardeman, rry, Shackleford, Stephens,		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14: Description:	fewer than 5 paties blank.  36  5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41  2  PUBLIC_HEAL Public Health Resolution Dickens, Dor Lamb, Lipscot Sherman, Sw 2 Archer, Bayle Haskell, Jack Stonewall, Tack Stonewall, Tack Stonewall, Tack Pinto, Parker	Data Source: Type:  Y  At's residential address. List ISO).  Wer than 5 patients from one of for complete list.  Data Source: Type:  TH_REGION  gion of patient's address. Bailey, Briscoe, Carson, Castro, Cholley, Floyd, Garza, Gray, Hale, Haomb, Lubbock, Lynn, Moore, Motley, Terry, Wheeler, Yoakum coor, Brown, Callahan, Clay, Colema Candon, Candon, Wichita, Wille, Dallas, Denton, Ellis, Erath, Fand, Rockwall, Somervell, Tarrant, Wille, Rockwall, Somervell, Tarrant, Willes, Montes, Rockwall, Somervell, Tarrant, Willes, Rockwall, Rockwa	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric  ildress, Cochran, Collingsworth, Hartley, Hemphey, Ochiltree, Oldham, Parmunties unt, Comanche, Cottle, Eastlantague, Nolan, Runnels, Scurbarger, Young counties nin, Grayson, Hood, Hunt, Joise counties	orth, Crosby, Dallam, Deaf Smith, mill, Hockley, Hutchinson, King, her, Potter, Randall, Roberts, and, Fisher, Foard, Hardeman, rry, Shackleford, Stephens, ohnson, Kaufman, Navarro, Palo		
Length: Field 13: Description: Suppression: Coding scheme: Beginning Position: Length: Field 14: Description:	fewer than 5 paties blank.  36  5  PAT_COUNTR Country of patient Standardization (Suppressed if few See www.ISO.org 41  2  PUBLIC_HEAL Public Health Resolution Dickens, Dor Lamb, Lipson Sherman, Sw 2 Archer, Bayle Haskell, Jack Stonewall, Tack Stonewall, Tack Stonewall, Tack Pinto, Parker 4 Anderson, Bo	Data Source: Type: Y At's residential address. List ISO). Wer than 5 patients from one of for complete list. Data Source: Type: Type:  TH_REGION gion of patient's address. Bailey, Briscoe, Carson, Castro, Chenley, Floyd, Garza, Gray, Hale, Hale, Holyisher, Terry, Wheeler, Yoakum coor, Brown, Callahan, Clay, Colema (a., Jones, Kent, Knox, Mitchell, Moaylor, Throckmorton, Wichita, Wile, Dallas, Denton, Ellis, Erath, Fan	gender, including 'unk  Claim Alphanumeric  maintained by the Inter  country.  Claim Alphanumeric  ildress, Cochran, Collingswoll, Hansford, Hartley, Hemphey, Ochiltree, Oldham, Parmunties un, Comanche, Cottle, Eastlantague, Nolan, Runnels, Scurbarger, Young counties nin, Grayson, Hood, Hunt, Joise counties n, Franklin, Gregg, Harrison,	orth, Crosby, Dallam, Deaf Smith, nill, Hockley, Hutchinson, King, ner, Potter, Randall, Roberts, and, Fisher, Foard, Hardeman, rry, Shackleford, Stephens, ohnson, Kaufman, Navarro, Palo Henderson, Hopkins, Lamar,		

Verde, Victoria, Wilson, Zavala counties

Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Harris, Liberty, Matagorda, Montgomery,

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

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 Jacinto, Shelby, Trinity, Tyler counties

San Saba, Travis, Washington, Williamson counties

Walker, Waller, Wharton counties

7

	9	Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimb Loving, McCulloch, Martin, Mason, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton,				
		Terrell, Tom Green, Upton, Ward, Winkler counties				
	10 11	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, Refug				
n ' ' n ''	12	Invalid	<b>D</b> 4 C		<b>A</b> •	1
Beginning Position: Length:	43 2		Data So	urce:	Assigned Alphanu	
Field 15:		GTH_OF_SERVICE	Type:		Aipiiaiiu	mene
Description:			uals State	ment F	rom Date	through Statement Thru Date. The
•		num length of service i				
<b>Beginning Position:</b>	45		Data So	urce:	Calculat	
Length:	2		Type:		Alphanu	meric
Field 16:		_AGE			1.4.	C
Description:	Code 00	indicating age of patie 1-28 days	ent in days 10	or year	s on date	of service.  20 85-89
<b>Coding Scheme:</b>	01	29-365 days	11	40-44		21 90+
	02	1-4 years	12	45-49		HIV and drug/alcohol use patients:
	03 04	5-9 10-14	13	50-54 55-59		22 0-17 23 18-44
	05	10-14 15-17	14 15	60-64		23 18-44 24 45-64
	06	18-19	16	65-69		25 65-74
	07	20-24	17	70-74		26 75+
	08 09	25-29 30-34	18 19	75-79 80-84		` Invalid
<b>Beginning Position:</b>	47	30 34	Data So		Assigned	d
Length:	2		Type:		Alphanu	
Field 17:	RAC	E				
<b>Description:</b>		indicating the patient's				
Suppression:		acility has fewer than to	en patients	of one	race that	race is changed to 'Other' (code equals 5).
Coding Scheme:	1 2	American Indian/Eskimo/A Asian or Pacific Islander	Aleut			
	3	Black				
	4 5	White Other				
	`	Invalid				
<b>Beginning Position:</b>	49		Data So	urce:	Claim	
Length:	1		Type:		Alphanu	meric
Field 18:		NICITY		241	4 4	
Description: Suppression:		indicating the Hispani				ethnicity of patients of that race is
Suppression:		essed (code is blank).		or one	race the t	enfincity of patients of that face is
Coding Scheme:	1	Hispanic Origin				
	2	Not of Hispanic Origin				
<b>Beginning Position:</b>	50	Invalid	Data So	uroot	Claim	
Length:	1		Type:	urce.	Alphanu	meric
Field 19:		ST_PAYMENT_SRC	1 јре.		1117111111	
<b>Description:</b>		indicating the expected	d primary	source	of payme	nt.
Coding Scheme:	09	Self Pay (Removed from 5	010 format,	use "ZZ"	HM	Health Maintenance Organization
	10	beginning 2Q2012 data) Central Certification			LI	Liability
	11	Other Non-federal Program			LM	Liability Medical
	12	Preferred Provider Organiz	zation (PPO)		MA	Medicare Part A
	13 14	Point of Service (POS) Exclusive Provider Organi	zation (EPO	)	MB MC	Medicare Part B Medicaid
	15	Indemnity Insurance			TV	Title V
	16	Health Maintenance Organ Medicare Risk	nization (HM	(O)	OF	Other Federal Program
	AM	Automobile Medical			VA	Veteran Administration Plan
	BL	Blue Cross/Blue Shield			WC	Workers Compensation Health Claim
D 0110 /011 01 0	СН	CHAMPUS			ZZ	Charity, Indigent or Unknown
DSHS/THCIC	TITAL	~	- Page 1	1 —		DSHS Document # E25-14164
www.dshs.texas.gov/	THCI	$\mathcal{C}$	- 6			Last Updated: September, 2018

		Commercial Insurance Disability Insurance				Invalid		
<b>Beginning Position:</b>	51		Data S	ource	Claim			
Length:	2		Type:	our cc.	Alphanu	meric		
Field 20:		NDARY_PAYMENT			1			
<b>Description:</b>		ndicating the expected		ary sourc	ce of payr	nent.		
Coding Scheme:	Same as	s field FIRST_PAYM	MENT_S	RC				
<b>Beginning Position:</b>	53		Data S	ource:	Claim			
Length:	2		Type:		Alphanu	meric		
Field 21:		OF_BILL						
Description:		es specific information					rst di	git = type of facility.
Cadina Sahama		digit = type of care. Type of Facility		g1t = seq1 ligit–Type o		ne ciaim.	3rd	ligit–Sequence of claim
Coding Scheme:		spital	1		including N	/ledicare	0	Non-payment/Zero claim
				Part A	_			
		illed nursing me health	2 3	-	Medicare P	art B only	1 2	Admit through discharge claim Interim–first claim
		ligious non-medical health		Outpatien Outpatien	n 1t Other, Me	dicare	3	Interim—continuing claim
	care	e–Hospital		Part B on	ly			
		ligious non-medical health e–Extended care	5	Intermedi	iate Care–Le	evel I	4	Interim-last claim
		e-Extended care	6	Intermedi	iate Care–Le	evel II	5	Late charge(s) only claim
	7 Cli		7		e inpatient –		6	Adjustment of prior claim (Not
	0 0	. 1 6 - 114	0	G : 1	1		7	used by Medicare)
	8 Spe	ecial facility	8	Swing be	d		7 8	Replacement of prior claim Void/cancel of prior claim
<b>Beginning Position:</b>	55		Data S	ource:	Claim		O	void/cancer of prior claim
Length:	3		Type:		Alphanu	meric		
Field 22:		ITION_CODE_1						
		escribing a condition	relating	to the cla	aim.			
Coding Scheme:		Military service related	alatad		83 84			tions 39 weeks or greater
		Condition is employment re						ate Kidney Injury (AKI) ification of Hospice Terminal
	03 F	Patient covered by insurance	ce not refle	ected here	85	Illness		-
	04 I	nformation only bill.			86	Additiona Medical J		nodialysis Treatment with
	05 I	Lien has been filed			A0			rnal partnership program
		ESRD patient in first 18 mg	onths of en	ntitlement	A1	EPSDT/C	HAP	
	Т	covered by EGHP Freatment of non-terminal	condition	for hospice				
	07 p	patient		•	A2	Physically	hand	icapped children's program
		Beneficiary would not prove concerning other insurance			A3	Special Fe	ederal	Funding
		Neither patient or spouse is			A4	Family pla	anning	
		Patient and/or spouse is em	ployed bu	t no EGHP	A5	Disability		
	e T	exists Disabled beneficiary but no	LGHP co	overage		•		
	11 e	exists	20111 00	, verage	A6	Vaccines/	Medic	care 100% payment
		Patient is homeless			A9	Second or		•
		Maiden name retained			AA	-	•	med due to rape
		Child retains mother's name			AB			med due to incest med due to serious fatal genetic
	20 E	Beneficiary requested billing	ng		AC	defect, de	formit	y, or abnormality
	21 E	Billing for denial notice			AD	physical c	onditi	
	22 F	Patient on multiple drug reg	gimen		AE	mother tha	at is no	med due to physical health of ot life endangering
	23 I	Home care giver available			AF	emotional	/psych	med due to nological health of mother
	24 I	Home IV patient also receive	ving HHA	services	AG	Abortion j reasons	perior	med due to social or economic
	25 F	Patient is non-US resident			AH	Elective a	bortio	n
	26	VA eligible patient chooses a Medicare certified facility		e services i	n AI	Sterilization	on	

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27	Patient referred to a sole community hospital for a diagnostic laboratory test	AJ	Payer responsible for co-payment
28	Patient and/or spouse's EGHP is secondary to Medicare	AK	Air ambulance required
29	Disabled beneficiary and/or family member's LGHP is secondary to Medicare	AL	Specialized treatment/bed unavailable
30	Non-research services provided to patients enrolled in a qualified clinical trial	AM	Non-emergency medically necessary stretcher transport required
31	Patient is student (full time - day)	AN	Pre-admission screening not required
	Patient is student (cooperative/work study	В0	Medicare coordinated care demonstration claim
32	program)	ъυ	
33	Patient is student (full time - night)	B1	Beneficiary is ineligible for demonstration program
34	Patient is student (part-time)	B4	Admission unrelated to discharge on same day
36	General care patient in a special unit	BP	Gulf Oil Spill of 2010
37	Ward accommodation at patient request	C1	Approved as billed
38	Semi-private room not available	C2	Automatic approval as billed based on focused review
39	Private room medically necessary	C3	Partial approval
40	Same day transfer	C4	Admission/services denied
41	Partial hospitalization	C5	Post payment review applicable
42	Continuing care not related to inpatient admission	C6	Admission Preauthorization
43	Continuing care not provided within prescribed postdischarge window	C7	Extended Authorization
44	Inpatient admission changed to outpatient	D0	Changes to Service Dates
45	Ambiguous Gender Category	D1	Changes to Charges
46	Non-availability statement on file	D3	Second or Subsequent Interim PPS Bill
47	Transfer from another Home Health Agency	D4	Change in clinical codes (ICD) for diagnosis and/or procedure codes.
48	Psychiatric residential treatment centers for children and adolescents (RTCs)	D5	Cancel to correct Insured's ID or Provider ID
49	Product replacement within product lifecycle	D6	Cancel Only to Repay a Duplicate or OIG Overpayment
50	Product Replacement for Known Recall of a Product	D7	Change to Make Medicare the Secondary Payer
51	Attestation of Unrelated Outpatient Nondiagnostic Services	D8	Change to Make Medicare the Primary Payer
52	Out of Hospice Service Area	D9	Any Other Change
53	Initial placement of a medical device provided as part of a clinical trial or a free sample	DR	Disaster related
54	No Skilled Home Health Visits in Billing Period. Policy Exception Documented at the Home Health Agency	E0	Changes in Patient Status
55	SNF bed not available	G0	Distinct Medical Visit
56	Medical appropriateness	НО	Delayed Filing, Statement of Intent Submitted
57	SNF readmission	H2	Discharge by a Hospice Provider for Cause
58	Terminated Medicare+Choice organization enrollee	НЗ	Reoccurrence of GI Bleed Comorbid Category
59	Non-primary ESRD facility	H4	Reoccurrence of Pneumonia Comorbid Category
60	Day outlier	H5	Reoccurrence of Pericarditis Comorbid Category
61	Cost outlier	P1	Do not Resuscitate Order (DNR)
66	Provider does not wish cost outlier payment	P7	Direct Inpatient Admission from Emergency Room
67	Beneficiary elects not to use life time reserve (LTR) days	R1	Request for reopening Reason Code - Mathematical or Computational Mistake
68	Beneficiary elects to use life time reserve (LTR)	R2	Request for reopening Reason Code -Inaccurate
69	days  IME/DGME/N&AH Payment Only	R3	Data Entry Request for reopening Reason Code -
70	Self-administered anemia management drug	R4	Misapplication of a Fee Schedule Request for reopening Reason Code - Computer
	•		Errors Request for reopening Reason Code - Incorrectly
71	Full care in unit	R5	Identified Duplicate Claim

					Request for reopening Reason Code - Other	
	72	Self care in unit		R6	Clerical Errors or Minor Errors and Omissions not Specified in R1-R5 above	
	73	Self care training		R7	Request for reopening Reason Code - Corrections other than clerical errors	
	74	Home		R8	Request for reopening Reason Code - New and Material Evidence	
	75	Home - 100% reimburseme	ent	R9	Request for reopening Reason Code - Faulty Evidence	
	76	Back-up in facility dialysis		WO	United Mine Workers of America (UMWA) Demonstration Indicator	
	77	Provider accepts or is oblig contractual arrangement or payment by a primary paye	law to accept	W2	Duplicate of Original Bill	
	78	New coverage not impleme		W3	Level I Appeal	
	79	CORF services provided of	ffsite	W4	Level II Appeal	
	80	Home dialysis - nursing fac	cility	W5	Level III Appeal	
	81	C-section/Inductions <39 V Necessity				
	82	C-section/Inductions <39 V				
<b>Beginning Position:</b>	58		Data Source:	Claim		
Length:	2		Type:	Alphanu	ımeric	
Field 23:		NDITION_CODE_2				
~ ~ .		describing a condition		im.		
Coding Scheme:		e as Field CONDITION		G1 :		
<b>Beginning Position:</b>	60		Data Source:	Claim		
Length:	2	IDITION CODE A	Type:	Alphanu	imeric	
Field 24:		NDITION_CODE_3	1			
		e describing a condition		um.		
Coding Scheme:		e as Field CONDITION		Claim		
Beginning Position:	62 2		Data Source:		umorio.	
Length: Field 25:		DITION_CODE_4	Type:	Alphanu	imeric	
rielu 25.		describing a condition	relating to the cla	nim		
<b>Coding Scheme:</b>		e as Field CONDITION	-	11111.		
Beginning Position:	64	as ricia combittor	Data Source:	Claim		
Length:	2		Type:	Alphanu	imeric	
Field 26:		NDITION_CODE_5	турс.	тириши		
1 1clu 20.		describing a condition	relating to the cla	nim.		
<b>Coding Scheme:</b>		e as Field CONDITION				
<b>Beginning Position:</b>	66		Data Source:	Claim		
Length:	2		Type:	Alphanu	ımeric	
Field 27:	CON	NDITION_CODE_6	<u> </u>			
		describing a condition	relating to the cla	im.		
<b>Coding Scheme:</b>	Same	e as Field CONDITION	_CODE_1.			
<b>Beginning Position:</b>	68		Data Source:	Claim		
Length:	2		Type:	Alphanu	imeric	
Field 28:	CON	NDITION_CODE_7				
	Code	describing a condition	relating to the cla	im.		
Coding Scheme:	Same	e as Field CONDITION	_CODE_1.			
<b>Beginning Position:</b>	70		Data Source:	Claim		
Length:	2		Type:	Alphanu	ımeric	
Field 29:		NDITION_CODE_8				
		e describing a condition		im.		
<b>Coding Scheme:</b>		e as Field CONDITION				
<b>Beginning Position:</b>	72		Data Source:	Claim		
Length:	2		Type:	Alphanu	ımeric	
Field 30:	PAT	_REASON_FOR_VIS	IT			

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			th, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		
Beginning Position:	74	Data Source:	Claim
Length: Field 31:	7 PRINC_DIAG_CODE	Туре:	Alphanumeric
rieia 31;		e for the principal	diagnosis, including the 4th, 5th, 6th and 7th digits
	if applicable. Decimal is in		
<b>Beginning Position:</b>	81	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 32:	OTH_DIAG_CODE_1		
			th, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		GI I
Beginning Position:	88	Data Source:	Claim
Length: Field 33:	7 OTH_DIAG_CODE_2	Type:	Alphanumeric
rieid 33:		a including the At	th, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		in, 5th, 6th and 7th digits if applicable. Decimal is
<b>Beginning Position:</b>	95	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 34:	OTH_DIAG_CODE_3		*
	ICD-10-CM diagnosis code	e, including the 4t	th, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		
<b>Beginning Position:</b>	102	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 35:	OTH_DIAG_CODE_4	. 1 11 4.	1.64.64. 174.11.11.11.11.11.11.11.11.11.11.11.11.11
	implied following the third		th, 5th, 6th and 7th digits if applicable. Decimal is
<b>Beginning Position:</b>	109	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 36:	OTH_DIAG_CODE_5	1 y pc.	
		e, including the 4t	th, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third	character.	
<b>Beginning Position:</b>	116	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 37:	OTH_DIAG_CODE_6		the fishe (she and 7she distants and inches Designation
	implied following the third		th, 5th, 6th and 7th digits if applicable. Decimal is
<b>Beginning Position:</b>	123	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 38:	OTH_DIAG_CODE_7	- <b>J P</b> • •	<u>r</u>
		e, including the 4t	th, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		
<b>Beginning Position:</b>	130	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 39:	OTH_DIAG_CODE_8	a including the At	h 5th 6th and 7th digits if applicable Desimalis
	implied following the third		th, 5th, 6th and 7th digits if applicable. Decimal is
<b>Beginning Position:</b>	137	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 40:	OTH_DIAG_CODE_9	2,000	
		e, including the 4t	ch, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		
<b>Beginning Position:</b>	144	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 41:	OTH_DIAG_CODE_10		
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			h, 5th, 6th and 7th digits if applicable. Decimal is
Daginning Dagitians	implied following the third		Claim
Beginning Position: Length:	151 7	Data Source:	Claim Alphanumeric
Field 42:	OTH_DIAG_CODE_11	Type:	Alphanumene
riciu 42.		including the 4t	h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		ii, sui, our und 7 ii digits ii applicasie. Beeimai is
<b>Beginning Position:</b>	158	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 43:	OTH_DIAG_CODE_12	V 2	•
	ICD-10-CM diagnosis code	, including the 4t	h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		
<b>Beginning Position:</b>	165	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 44:	OTH_DIAG_CODE_13		
			h, 5th, 6th and 7th digits if applicable. Decimal is
D !! D !4!	implied following the third		Cl.:
Beginning Position:	172 7	Data Source:	Claim
Length: Field 45:	OTH_DIAG_CODE_14	Type:	Alphanumeric
rieiu 45.		including the At	h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		ii, 5tii, 6tii and 7tii digits ii applicable. Decimai is
<b>Beginning Position:</b>	179	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 46:	OTH_DIAG_CODE_15	J P	1
		, including the 4t	h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		
<b>Beginning Position:</b>	186	<b>Data Source:</b>	Claim
Length:	7	Type:	Alphanumeric
Field 47:	OTH_DIAG_CODE_16		
			h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		~. ·
Beginning Position:	193	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 48:	OTH_DIAG_CODE_17	including the At	h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		ii, 5tii, 6tii and 7tii digits ii applicable. Deciliai is
<b>Beginning Position:</b>	200	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 49:	OTH DIAG CODE 18		
		, including the 4t	h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		
<b>Beginning Position:</b>	207	<b>Data Source:</b>	Claim
Length:	7	Type:	Alphanumeric
Field 50:	OTH_DIAG_CODE_19		
			h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		~
<b>Beginning Position:</b>	214	Data Source:	Claim
Length:	7	Туре:	Alphanumeric
Field 51:	OTH_DIAG_CODE_20	including the 4	h 5th 6th and 7th digita if applicable Designal's
	implied following the third		h, 5th, 6th and 7th digits if applicable. Decimal is
<b>Beginning Position:</b>	221	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 52:	OTH_DIAG_CODE_21	-JPC.	
	5 111_2 110_00DL_#I		
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			h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		~ .
<b>Beginning Position:</b>	228	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 53:	OTH_DIAG_CODE_22		
			h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		~ .
<b>Beginning Position:</b>	235	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 54:	OTH_DIAG_CODE_23	. 1 1: .1 4.	1 64 64 174 11 11 11 11 11 11 11
			h, 5th, 6th and 7th digits if applicable. Decimal is
D ' ' D ''	implied following the third		CI.
<b>Beginning Position:</b>	242	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 55:	OTH_DIAG_CODE_24		
			h, 5th, 6th and 7th digits if applicable. Decimal is
	implied following the third		
<b>Beginning Position:</b>	249	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 56:	RELATED_CAUSE_COI		
a 11 a 1		panying cause of	an illness, injury or an accident.
Coding Scheme:	AA Auto accident		
	AB Abuse		
	AP Another party responsible		
	EM Employment		
	OA Other accident	<b>5</b> 0	
<b>Beginning Position:</b>	256	Data Source:	Claim
Length:	DELATED GALIGE GOL	Type:	Alphanumeric
Field 57:	RELATED_CAUSE_COI		:11 ini id
C - 1 C - 1			an illness, injury or an accident.
Coding Scheme:	Same as Field RELATED_0		Claim
Beginning Position:	258 2	Data Source:	
Length: Field 58:		Type:	Alphanumeric
rieia 58:	RELATED_CAUSE_COI		an illness, injury or an accident.
Cadina Cahama	Same as Field RELATED_0		
Coding Scheme: Beginning Position:	260	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 59:	E_CODE_1	турс.	Alphanumeric
riela 59.		including the At	h, 5th, 6th and 7th digits if applicable, of the
			nal is implied following the third character.
<b>Beginning Position:</b>	262	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 60:	E CODE 2	турс.	Miphanumene
Ticia oo.		including the 4t	h, 5th, 6th and 7th digits if applicable, of an
			nal is implied following the third character.
<b>Beginning Position:</b>	269	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 61:	E_CODE_3	-J P***	r
		, including the 4t	h, 5th, 6th and 7th digits if applicable, of an
	9		nal is implied following the third character.
<b>Beginning Position:</b>	276	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 62:	E_CODE_4	J I · ·	<b>.</b>
v <b>-</b>			

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			h, 5th, 6th and 7th digits if applicable, of an
D !! D !4!			nal is implied following the third character.  Claim
Beginning Position:	283 7	Data Source:	
Length: Field 63:	E_CODE_5	Type:	Alphanumeric
riela 05:		including the At	h, 5th, 6th and 7th digits if applicable, of an
			nal is implied following the third character.
<b>Beginning Position:</b>	290	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 64:	E_CODE_6	-J P	
		, including the 4th	h, 5th, 6th and 7th digits if applicable, of an
			nal is implied following the third character.
<b>Beginning Position:</b>	297	<b>Data Source:</b>	Claim
Length:	7	Type:	Alphanumeric
Field 65:	E_CODE_7		
			h, 5th, 6th and 7th digits if applicable, of an
			nal is implied following the third character.
<b>Beginning Position:</b>	304	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 66:	E_CODE_8		. 51 - 61 - 151 - 151 - 151 - 15
			h, 5th, 6th and 7th digits if applicable, of an
Daginning Dagitians	311		nal is implied following the third character.  Claim
Beginning Position: Length:	7	Data Source: Type:	
Field 67:	E_CODE_9	Type:	Alphanumeric
riciu 07.		including the 4t	h, 5th, 6th and 7th digits if applicable, of an
			nal is implied following the third character.
<b>Beginning Position:</b>	318	Data Source:	Claim
Length:	7	Type:	Alphanumeric
Field 68:	E_CODE_10	V 1	
		, including the 4th	h, 5th, 6th and 7th digits if applicable, of an
	additional external cause of	morbidity. Decir	nal is implied following the third character.
<b>Beginning Position:</b>	325	<b>Data Source:</b>	Claim
Length:	7	Type:	Alphanumeric
Field 69:	PROC_CODE_1		
			the highest charge performed during the period
D 1 1 D 1//	covered by the bill. HCPCS		Cl. :
Beginning Position:	332	Data Source:	Claim
Length:	5 PROC_CODE_2	Type:	Alphanumeric
Field 70:		rocedure with the	next highest charge performed during the period
	covered by the bill. HCPCS		hext highest charge performed during the period
<b>Beginning Position:</b>	337	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 71:	PROC_CODE_3	-J P	
		rocedure with the	next highest charge performed during the period
	covered by the bill. HCPCS		
<b>Beginning Position:</b>	342	<b>Data Source:</b>	Claim
Length:	5	Type:	Alphanumeric
Field 72:	PROC_CODE_4		
			next highest charge performed during the period
	covered by the bill. HCPCS		
<b>Beginning Position:</b>	347	Data Source:	Claim
Length:	5 PROG. GODE. <b>5</b>	Type:	Alphanumeric
Field 73:	PROC_CODE_5		
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			e next highest charge performed during the period
Paginning Pagitians	covered by the bill. HCPCS 352		Claim
Beginning Position:	5	Data Source:	
Length:		Type:	Alphanumeric
Field 74:	PROC_CODE_6		
			e next highest charge performed during the period
D	covered by the bill. HCPCS		Claim
Beginning Position:	357	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 75:	PROC_CODE_7		
			e next highest charge performed during the period
Doginaina Dogitions	covered by the bill. HCPCS	Data Source:	Claim
Beginning Position:	362 5		
Length:		Type:	Alphanumeric
Field 76:	PROC_CODE_8	ma andrima rivith the	most highest shound morformed dyning the maried
			e next highest charge performed during the period
Danimuina Danisian	covered by the bill. HCPCS		Claim
Beginning Position:	367	Data Source:	
Length:	DDOC CODE A	Type:	Alphanumeric
Field 77:	PROC_CODE_9		
			e next highest charge performed during the period
Doginaina Dogitions	covered by the bill. HCPCS		Claim
Beginning Position:	372 5	Data Source:	Claim
Length:		Type:	Alphanumeric
Field 78:	PROC_CODE_10		
			e next highest charge performed during the period
D	covered by the bill. HCPCS		Clair.
Beginning Position:	377	Data Source:	Claim
Length:	5 PROG. CODE 11	Type:	Alphanumeric
Field 79:	PROC_CODE_11		
			e next highest charge performed during the period
Doginaina Dogitions	covered by the bill. HCPCS 382	Data Source:	Claim
Beginning Position:	5		
Length: Field 80:	PROC_CODE_12	Type:	Alphanumeric
rieiu ov:		maadura uith the	e next highest charge performed during the period
	covered by the bill. HCPCS		e next nighest charge performed during the period
Doginaina Dogitions	387	Data Source:	Claim
Beginning Position:	5		Alphanumeric
Length: Field 81:		Type:	Aiphanumeric
riciu o1:	PROC_CODE_13	rocedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		t next nighest enarge performed during the period
<b>Beginning Position:</b>	392	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 82:	PROC_CODE_14	туре.	Aiphanumeric
riciu 02.		rocedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		t next nighest charge performed during the period
<b>Beginning Position:</b>	397	Data Source:	Claim
Length:	5		Alphanumeric
Field 83:	PROC_CODE_15	Type:	Aiphanumeric
riciu os:		rocedure with the	e next highest charge performed during the period
	covered by the bill. HCPCS		The Art mignest charge performed during the period
<b>Beginning Position:</b>	402	Data Source:	Claim
Length:	5	Type:	Alphanumeric
Field 84:	PROC_CODE_16	Type.	1 apagininerie
riciu 04.	I ROC_CODE_10		
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			e next highest charge performed during the period		
<b>Beginning Position:</b>	covered by the bill. HCPCS 407	Data Source:	Claim		
Length:	5	Type:	Alphanumeric		
Field 85:	PROC_CODE_17	турс.	ruphanameric		
ricia os.		procedure with the	e next highest charge performed during the period		
	covered by the bill. HCPCS		t nome ingress change personate during the person		
<b>Beginning Position:</b>	412	Data Source:	Claim		
Length:	5	Type:	Alphanumeric		
Field 86:	PROC_CODE_18				
			e next highest charge performed during the period		
	covered by the bill. HCPCS				
<b>Beginning Position:</b>	417	Data Source:	Claim		
Length:	5	Type:	Alphanumeric		
Field 87:	PROC_CODE_19				
			e next highest charge performed during the period		
	covered by the bill. HCPCS		GI I		
<b>Beginning Position:</b>	422	Data Source:	Claim		
Length:	5 PD 0.0 CODE 20	Type:	Alphanumeric		
Field 88:	PROC_CODE_20				
	covered by the bill. HCPCS		e next highest charge performed during the period		
<b>Beginning Position:</b>	427	Data Source:	Claim		
Length:	5	Type:	Alphanumeric		
Field 89:	PROC_CODE_21	Type.	Aiphanumeric		
riciu 07.		rocedure with the	e next highest charge performed during the period		
	covered by the bill. HCPCS		the next inglest charge performed during the period		
<b>Beginning Position:</b>	432	Data Source:	Claim		
Length:	5	Type:	Alphanumeric		
Field 90:	PROC_CODE_22	JI	1		
		rocedure with the	e next highest charge performed during the period		
	covered by the bill. HCPCS				
<b>Beginning Position:</b>	437	Data Source:	Claim		
Length:	5	Type:	Alphanumeric		
Field 91:	PROC_CODE_23				
	Code for surgical or other procedure with the next highest charge performed during the period				
	covered by the bill. HCPCS				
<b>Beginning Position:</b>	442	Data Source:	Claim		
Length:	5	Type:	Alphanumeric		
Field 92:	PROC_CODE_24	1 1.1.1			
			e next highest charge performed during the period		
Doginalna Dogiđiona	covered by the bill. HCPCS		Claim		
Beginning Position:	447	Data Source:	Claim		
Length: Field 93:	5 PROC_CODE_25	Type:	Alphanumeric		
rieiu 93.		procedure with the	e next highest charge performed during the period		
	covered by the bill. HCPCS		t next nighest charge performed during the period		
<b>Beginning Position:</b>	452	Data Source:	Claim		
Length:	5	Type:	Alphanumeric		
Field 94:	OTHER_AMOUNT	1 јре.			
210100 7 10		Other Charge Am	ount. Calculated using MEDPAR algorithm. Sum		
			ner than 0100-0219, revenue center 0002-0099,		
			X-070X, 076X-078X, 090X-095X, 099X.		
<b>Beginning Position:</b>	457	Data Source:	Calculated		
Length:	12	Type:	Numeric		
			DOMO D		
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Field 95:	PHARM_AMOUNT			
ricia /5.	Ancillary Service Charge, Pharmacy Charge Amount. Calculated using MEDPAR algorithm.			
			es other than 0100-0219, revenue center 026X,	
	063X.		55 50101 0100 5215, 10 (5100 501001 52011,	
<b>Beginning Position:</b>	469	Data Source:	Calculated	
Length:	12	Type:	Numeric	
Field 96:	MEDSURG_AMOUNT	1 <i>j</i> pc.	Trainerre	
riciu 70.		Medical/Surgical	Supply Charge Amount. Calculated using	
			ated with revenue codes other than 0100-0219,	
	revenue center 027X, 062X		ated with revenue codes other than 0100 0217,	
<b>Beginning Position:</b>	481	Data Source:	Calculated	
Length:	12	Type:	Numeric	
Field 97:	DME AMOUNT	турс.	Tumene	
riciu 77.	<u> </u>	Durable Medical I	Equipment Charge Amount. Calculated using	
			ated with revenue codes other than 0100-0219,	
	revenue centers 0290-0292,		ated with revenue codes other than 0100-0219,	
<b>Beginning Position:</b>	493	Data Source:	Calculated	
Length:	12	Type:	Numeric	
Field 98:	USED_DME_AMOUNT	турс.	rumene	
riciu 70.		Isad Durahla Ma	dical Equipment Charge Amount. Calculated using	
			ated with revenue codes other than 0100-0219,	
	revenue center 0293.	of charges associa	ated with revenue codes other than 0100-0219,	
<b>Beginning Position:</b>	505	Data Source:	Calculated	
0 0	12		Numeric	
Length: Field 99:		Type:	Numeric	
rieia 99:	PT_AMOUNT	): 1 Th	Channa Amanust Calandata duning MEDDAD	
			Charge Amount. Calculated using MEDPAR	
		issociated with re	evenue codes other than 0100-0219, revenue center	
D	042X.	D-4- C	C-11-t1	
Beginning Position:	517	Data Source:	Calculated	
Length:	12	Type:	Numeric	
T2 11400				
Field 100:	OT_AMOUNT	) ti 1 Th	Channe Amount Calculated using MEDDAD	
Field 100:	Ancillary Service Charge, C		rapy Charge Amount. Calculated using MEDPAR	
Field 100:	Ancillary Service Charge, Calgorithm. Sum of charges a		rapy Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center	
	Ancillary Service Charge, Calgorithm. Sum of charges a 043X.	associated with re	evenue codes other than 0100-0219, revenue center	
Beginning Position:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X.	associated with re  Data Source:	evenue codes other than 0100-0219, revenue center  Calculated	
Beginning Position: Length:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529	associated with re	evenue codes other than 0100-0219, revenue center	
Beginning Position:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12 SPEECH_AMOUNT	Data Source: Type:	evenue codes other than 0100-0219, revenue center  Calculated  Numeric	
Beginning Position: Length:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT Ancillary Service Charge, S	Data Source: Type: Speech Pathology	Calculated Numeric  Charge Amount. Calculated using MEDPAR	
Beginning Position: Length:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT Ancillary Service Charge, Salgorithm. Sum of charges a	Data Source: Type: Speech Pathology	evenue codes other than 0100-0219, revenue center  Calculated  Numeric	
Beginning Position: Length: Field 101:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT Ancillary Service Charge, Salgorithm. Sum of charges a 044X, 047X.	Data Source: Type: Speech Pathology associated with re	Calculated Numeric  Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center	
Beginning Position: Length: Field 101:  Beginning Position:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT  Ancillary Service Charge, Salgorithm. Sum of charges a 044X, 047X. 541	Data Source: Type: Speech Pathology associated with re Data Source:	Calculated Numeric  Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Calculated Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Calculated	
Beginning Position: Length: Field 101:  Beginning Position: Length:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT Ancillary Service Charge, Salgorithm. Sum of charges a 044X, 047X. 541 12	Data Source: Type: Speech Pathology associated with re	Calculated Numeric  Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center	
Beginning Position: Length: Field 101:  Beginning Position:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT  Ancillary Service Charge, Salgorithm. Sum of charges a 044X, 047X. 541 12  IT_AMOUNT	Data Source: Type: Speech Pathology associated with re Data Source: Type:	Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Calculated  Numeric	
Beginning Position: Length: Field 101:  Beginning Position: Length:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT Ancillary Service Charge, Salgorithm. Sum of charges a 044X, 047X. 541 12  IT_AMOUNT Ancillary Service Charge, I	Data Source: Type: Speech Pathology associated with re Data Source: Type: nhalation Therap	Calculated Numeric  Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Calculated Numeric  Calculated Numeric  Calculated Numeric  y Charge Amount. Calculated using MEDPAR	
Beginning Position: Length: Field 101:  Beginning Position: Length:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT Ancillary Service Charge, Salgorithm. Sum of charges a 044X, 047X. 541 12  IT_AMOUNT Ancillary Service Charge, It algorithm. Sum of charges a algorithm. Sum of charges a salgorithm.	Data Source: Type: Speech Pathology associated with re Data Source: Type: nhalation Therap	Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Calculated  Numeric	
Beginning Position: Length: Field 101:  Beginning Position: Length: Field 102:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT Ancillary Service Charge, Salgorithm. Sum of charges a 044X, 047X. 541 12  IT_AMOUNT Ancillary Service Charge, It algorithm. Sum of charges a 041X, 046X.	Data Source: Type: Speech Pathology associated with re Data Source: Type: nhalation Therapy associated with re	Calculated Numeric  Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Calculated Numeric  Calculated Numeric  y Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  y Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center	
Beginning Position: Length: Field 101:  Beginning Position: Length: Field 102:  Beginning Position:	Ancillary Service Charge, Calgorithm. Sum of charges a 043X. 529 12  SPEECH_AMOUNT Ancillary Service Charge, Salgorithm. Sum of charges a 044X, 047X. 541 12  IT_AMOUNT Ancillary Service Charge, It algorithm. Sum of charges a 041X, 046X. 553	Data Source: Type: Speech Pathology associated with re Data Source: Type: Inhalation Therap associated with re Data Source: Data Source:	Calculated Numeric  Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Calculated Numeric  Calculated Numeric  y Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center  Calculated Calculated Calculated Calculated Calculated Calculated	
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			nd processing related to the patient's stay. of charges associated with revenue codes other
	than 0100-0219, revenue co		of charges associated with revenue codes offici
<b>Beginning Position:</b>	577	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 105:	OR_AMOUNT	<u> </u>	
	Ancillary Service Charge,	Operating Room (	Charge amount. Calculated using MEDPAR
	algorithm. Sum of charges	associated with re	venue codes other than 0100-0219, revenue center
	036X, 071X-072X.		
<b>Beginning Position:</b>	589	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 106:	LITH_AMOUNT	T. 1 . 1	A CLASS ACTOR A SI
			e Amount. Calculated using MEDPAR algorithm.
Daginning Dagitians	601	Data Source:	es other than 0100-0219, revenue center 079X.  Calculated
Beginning Position: Length:	12	Type:	Numeric
Field 107:	CARD_AMOUNT	туре.	Numeric
ricia 107.		Cardiology Charg	e Amount. Calculated using MEDPAR algorithm.
			es other than 0100-0219, revenue center 048X,
	073X.		,
<b>Beginning Position:</b>	613	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 108:	ANES_AMOUNT		
			e Amount. Calculated using MEDPAR algorithm.
			es other than 0100-0219, revenue center 037X.
<b>Beginning Position:</b>	625	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 109:	LAB_AMOUNT	T. d	A Colo lata la circa MEDDAD al colo la
			e Amount. Calculated using MEDPAR algorithm. es other than 0100-0219, revenue center 030X-
	031X, 074X-075X.	with revenue code	es other than 0100-0219, revenue center 030X-
<b>Beginning Position:</b>	637	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 110:	RAD AMOUNT	_ <i>y</i> <b>P</b> • •	
	<del>_</del>	Radiology Charge	Amount. Calculated using MEDPAR algorithm.
		with revenue code	es other than 0100-0219, revenue center 028X,
	032X-035X, 040X.		
<b>Beginning Position:</b>	649	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 111:	MRI_AMOUNT	MDI Classica Associa	Colo local disconfiguration of the Color of
			unt. Calculated using MEDPAR algorithm. Sum of than 0100-0219, revenue center 061X.
<b>Beginning Position:</b>	661	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 112:	OP_AMOUNT	Турст	
11010 1120		Outpatient Service	es Charge Amount. Calculated using MEDPAR
			evenue codes other than 0100-0219, revenue center
	049X-050X.		
<b>Beginning Position:</b>	673	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 113:	ER_AMOUNT		
			Charge Amount. Calculated using MEDPAR
		associated with re	evenue codes other than 0100-0219, revenue center
Daginning Dagitias	045X.	Data Carres	Coloulated
<b>Beginning Position:</b>	685	Data Source:	Calculated
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Length:	12	Type:	Numeric		
Field 114:	AMBULANCE AMOUN				
	Ancillary Service Charge, Ambulance Charge Amount. Calculated using MEDPAR algorithm.				
			es other than 0100-0219, revenue center 054X.		
<b>Beginning Position:</b>	697	Data Source:	Calculated		
Length:	12	Type:	Numeric		
Field 115:	PRO_FEE_AMOUNT	турс.	rumene		
riciu 113.		Professional Fee (	Charge Amount. Calculated using MEDPAR		
			evenue codes other than 0100-0219, revenue center		
	096X-098X.	issociated with re	venue codes other than 0100-021), revenue center		
<b>Beginning Position:</b>	709	Data Source:	Calculated		
Length:	12	Type:	Numeric		
Field 116:	ORGAN AMOUNT	турс.	Numeric		
rieia 110:	<u> </u>	Dran Agguisition	Charge Amount Calculated using MEDDAD		
			Charge Amount. Calculated using MEDPAR evenue codes other than 0100-0219, revenue center		
	-	associated with re	evenue codes other than 0100-0219, revenue center		
Doniumiu a Donitiou	081X, 089X.	Data Carres	Calandatad		
Beginning Position:	721	Data Source:	Calculated		
Length:	12	Type:	Numeric		
Field 117:	ESRD_AMOUNT	3 1 C			
			Dialysis Charge Amount. Calculated using		
			ated with revenue codes other than 0100-0219,		
	revenue center 080X, 082X				
<b>Beginning Position:</b>	733	Data Source:	Calculated		
Length:	12	Type:	Numeric		
Field 118:	CLINIC_AMOUNT				
			e Amount. Calculated using MEDPAR algorithm.		
	_		es other than 0100-0219, revenue center 051X.		
<b>Beginning Position:</b>	745	Data Source:	Calculated		
Length:	12	Type:	Numeric		
Field 119:	TOTAL_CHARGES				
			d accommodation charges, ancillary charges, non-		
	covered ancillary charges. F				
<b>Beginning Position:</b>	757	Data Source:	Claim		
Length:	12	Type:	Numeric		
Field 120:	TOTAL_NON_COV_CH				
			s, non-covered ancillary charges.		
<b>Beginning Position:</b>	769	Data Source:	Claim		
Length:	12	Type:	Numeric		
Field 121:	TOTAL_CHARGES_AN				
	Sum of covered and non-co	•	e .		
<b>Beginning Position:</b>	781	Data Source:	Claim		
Length:	12	Type:	Numeric		
<b>Field 122:</b>	TOTAL_NON_COV_CH	ARGES_ANCIL	1		
	Sum of non-covered ancilla	ry charges.			
<b>Beginning Position:</b>	793	<b>Data Source:</b>	Claim		
Length:	12	Type:	Numeric		
Field 123:	PHYSICIAN1_INDEX_N	UMBER			
	Unique identifier assigned t	to the licensed ph	ysician reported as the Operating Physician, if		
	reported in the 837 Institution	onal Guide forma	t, or Rendering Physician 1, if reported in the 837		
			idividual licensed to practice medicine under the		
			racticioner other than a physician who provides a		
			the outpatient's surgical or radiological		
			ist, chiropractor, dentist, nurse practitioner, nurse		
	midwive or podiatrist, author				
	r, www.		, r		

Suppressed when the number of physicians reported for a facility or the number of physicians **Suppression:** reported for CCS PROC CODE 1 for the facility is less than five. 999999998 Cell size less than 5 **Coding Scheme:** 999999999 Temporary license or license number could not be matched **Beginning Position:** 805 Data Source: Assigned Length: Alphanumeric 10 Type: Field 124: PHYSICIAN2\_INDEX\_NUMBER 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 midwives 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. 999999998 Cell size less than 5 **Coding Scheme:** 999999999 Temporary license or license number could not be matched **Beginning Position:** 815 **Data Source:** Assigned Alphanumeric Length: 10 Type: **Field 125:** INPUT\_FORMAT Format in which the outpatient data file was submitted by the facility 0 837 Professional **Coding Scheme:** 1 837 Institutional **Beginning Position:** 825 Data Source: Assigned Length: Alphanumeric Type: **Field 126:** SOURCE OF ADMISSION **Description:** Code indicating source of the admission. Non-Healthcare Facility Point of Origin (Beginning July 1, 2010) **Coding Scheme:** 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 6 Transfer from another health care facility Court/Law Enforcement 8 Information not available 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 Ε Transfer from Ambulatory Surgery Center Transfer from a Hospice Facility F Invalid If Type of Admission=4 (Newborn) Born inside this hospital 5 6 Born outside this hospital **Beginning Position:** 826 **Data Source:** Claim Alphanumeric Length: Type: Field 127: PAT STATUS **Description:** Code indicating patient status as of the ending date of service for the period of care reported Discharged to home or self-care (routine discharge) **Coding Scheme:** 02 Discharged/transferred to a short term general hospital for inpatient care 03 Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation of skilled 04Discharged/transferred to a facility that provides custodial or supportive care 05 Discharged/transferred to a Designated Cancer Center or Children's Hospital (effective 10-1-2007) 06 Discharged/transferred to home under care of an organized home health service organization in anticipation of covered skilled care 07 Left against medical advice 09 Admitted as inpatient to this hospital 20 Expired 2.1 Discharged/transferred to Court/Law Enforcement 30 Still patient 40 Expired at home

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Expired in a medical facility

- 42 Expired, place unknown
- 43 Discharged/transferred to federal government operated health facility
- 50 Hospice-home
- 51 Hospice-medical facility (Certified) providing hospice level of care
- 61 Discharged/transferred within this institution to Medicare-approved swing bed
- 62 Discharged/transferred to inpatient rehabilitation facility
- 63 Discharged/transferred to Medicare-certified long term care hospital
- 64 Discharged/transferred to Medicaid-certified nursing facility under Medicaid but not certified under Medicare
- 65 Discharged/transferred to psychiatric hospital or psychiatric distinct part of a hospital
- 66 Discharged/transferred to Critical Access Hospital (CAH)
- 69 Discharged/Transferred to a designated disaster alternate care (effective 10-1-2013)
- 70 Discharge/transfer to another type of health care institution not defined elsewhere in the code list
- 81 Discharged to Home or Self Care with a Planned Acute. Care Hospital Inpatient Readmission (effective 10-1-2013)
- 82 Discharged/Transferred to a Short Term General Hospital for Inpatient Care with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 83 Discharged/Transferred to a Skilled Nursing Facility (SNF) with Medicare Certification with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 84 Discharged/Transferred to a Facility that Provides Custodial or Supportive Care with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 85 Discharged/transferred to a Designated Cancer Center or Children's Hospital with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 86 Discharged/Transferred to Home under Care of Organized Home Health Service Organization with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 87 Discharged/Transferred to Court/Law Enforcement with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 88 Discharged/Transferred to a Federal Health Care Facility with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 89 Discharged/Transferred to a Hospital-based Medicare Approved Swing Bed with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 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)
- 91 Discharged/Transferred to a Medicare Certified Long Term Care Hospital (LTCH) with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 92 Discharged Transferred to a Nursing Facility Certified Under Medicaid but not Certified Under Medicare with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 93 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)
- 94 Discharged/Transferred to a Critical Access Hospital (CAH) with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 95 Discharged/Transferred to Another Type of Health Care Institution not Defined Elsewhere in this Code List with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
  Invalid

Beginning Position:827Data Source:ClaimLength:2Type:Alphanumeric

Field 128: PROVIDER NAME

**Description:** Name provided by the facility.

**Suppression:** Facilities reporting fewer than 50 events (Provider ID equals '999999') are assigned the name

'Low Volume Facility'. If a facility reported fewer than 5 events for a particular gender,

including 'unknown', Provider Name is blank.

**Beginning Position:** 829 **Data Source:** Provider **Length:** 55 **Type:** Alphanumeric

Field 129: EMERGENCY\_DEPT\_FLAG

**Description:** Indicator of emergency department visit.

Coding Scheme:

Y visit was emergency related
N Visit was not emergency related

Beginning Position:884Data Source:AssignedLength:1Type:Alphanumeric

# **CLASSIFICATION DATA FILE**

	CLASSIF.	ICATION L	AIA FILE
Field 1:	RECORD_ID		
<b>Description:</b>			per assigned to identify the record. First available 1st
	quarter 2002. Does NOT m		D_ID in THCIC Research Data Files (RDF's).
<b>Beginning Position:</b>	1	Data Source:	Assigned
Length:	12	Type:	Alphanumeric
Field 2:	CCS_PRIN_DIAG_COD		
			sification of PRIN_DIAG_CODE into clinically
D ' ' D ''	meaningful diagnosis categoria		A
<b>Beginning Position:</b>	13	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 3:	CCS_OTH_DIAG_CODE		sification of OTH_DIAG_CODE_1 into clinically
	meaningful diagnosis categor		sincation of OTT_DIAG_CODE_1 into chineary
<b>Beginning Position:</b>	17	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 4:	CCS_OTH_DIAG_CODE		Aphanameric
riciu 4.			sification of OTH_DIAG_CODE_2 into clinically
	meaningful diagnosis catego		sineadon of OTTI_DITIO_CODE_2 into enineany
<b>Beginning Position:</b>	21	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 5:	CCS OTH DIAG CODE		
11010-01			sification of OTH_DIAG_CODE_3 into clinically
	meaningful diagnosis catego		,,
<b>Beginning Position:</b>	25	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 6:	CCS_OTH_DIAG_CODE		•
	Clinical Classifications Soft	tware (CCS) class	sification of OTH_DIAG_CODE_4 into clinically
	meaningful diagnosis catego		·
<b>Beginning Position:</b>	29	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 7:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_5 into clinically
	meaningful diagnosis category	•	
<b>Beginning Position:</b>	33	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 8:	CCS_OTH_DIAG_CODE		
		, ,	sification of OTH_DIAG_CODE_6 into clinically
5 1 1 5 1d	meaningful diagnosis catego	•	
<b>Beginning Position:</b>	37	Data Source:	Assigned
Length:	GCC OTH DIAC CODE	Type:	Alphanumeric
Field 9:	CCS_OTH_DIAG_CODE		sification of OTH_DIAG_CODE_7 into clinically
	meaningful diagnosis categor		sincation of OTH_DIAG_CODE_/ into clinically
Daginning Dagitians	41	Data Source:	Assigned
Beginning Position: Length:	4	Type:	Alphanumeric
Field 10:	CCS_OTH_DIAG_CODE	· ·	Alphanumeric
riciu iv.			sification of OTH_DIAG_CODE_8 into clinically
	meaningful diagnosis categor		sineation of OTT_DIAG_CODE_6 into chineary
<b>Beginning Position:</b>	45	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 11:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_9 into clinically
	meaningful diagnosis catego		
	2	•	
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Beginning Position: Length:	49 4	Data Source: Type:	Assigned Alphanumeric
Field 12:	CCS OTH DIAG CODE	V A	
			sification of OTH_DIAG_CODE_10 into clinically
	meaningful diagnosis catego		·
<b>Beginning Position:</b>	53	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 13:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_11 into clinically
	meaningful diagnosis catego		
<b>Beginning Position:</b>	57	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 14:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_12 into clinically
	meaningful diagnosis categor	•	
<b>Beginning Position:</b>	61	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 15:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_13 into clinically
	meaningful diagnosis categor		
<b>Beginning Position:</b>	65	<b>Data Source:</b>	Assigned
Length:	4	Type:	Alphanumeric
Field 16:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_14 into clinically
	meaningful diagnosis catego		
<b>Beginning Position:</b>	69	<b>Data Source:</b>	Assigned
Length:	4	Type:	Alphanumeric
Field 17:	CCS_OTH_DIAG_CODE		
	Clinical Classifications Soft	tware (CCS) class	sification of OTH_DIAG_CODE_15 into clinically
	meaningful diagnosis catego	ory.	
<b>Beginning Position:</b>	73	<b>Data Source:</b>	Assigned
Length:	4	Type:	Alphanumeric
Field 18:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_16 into clinically
	meaningful diagnosis catego	•	
<b>Beginning Position:</b>	77	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 19:	CCS_OTH_DIAG_CODE		
	Clinical Classifications Soft	tware (CCS) class	sification of OTH_DIAG_CODE_17 into clinically
	meaningful diagnosis categor		
<b>Beginning Position:</b>	81	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 20:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_18 into clinically
	meaningful diagnosis categor		
<b>Beginning Position:</b>	85	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 21:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_19 into clinically
	meaningful diagnosis categories	•	
<b>Beginning Position:</b>	89	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 22:	CCS_OTH_DIAG_CODE		
			sification of OTH_DIAG_CODE_20 into clinically
	meaningful diagnosis categories	ory.	
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Beginning Position: Length:	93 4	Data Source: Type:	Assigned Alphanumeric
Field 23:	CCS_OTH_DIAG_CODE		Aiphanumenc
Field 23:		ware (CCS) class	sification of OTH_DIAG_CODE_21 into clinically
Beginning Position:	97	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 24:	CCS_OTH_DIAG_CODE		Alphanumeric
riciu 24:		ware (CCS) class	sification of OTH_DIAG_CODE_22 into clinically
<b>Beginning Position:</b>	101	Data Source:	Assigned
Length:	4		Alphanumeric
Field 25:	CCS_OTH_DIAG_CODE	Type:	Aiphanumenc
rieid 23.		ware (CCS) class	sification of OTH_DIAG_CODE_23 into clinically
<b>Beginning Position:</b>	105	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 26:	CCS OTH DIAG CODE		•
		ware (CCS) class	sification of OTH_DIAG_CODE_24 into clinically
<b>Beginning Position:</b>	109	Data Source:	Assigned
Length:	4	Type:	Alphanumeric
Field 27:	CCS PROC CODE 1	- <b>J P</b> • •	I ···
			Services and Procedures classification of procedure category.
<b>Beginning Position:</b>	113	<b>Data Source:</b>	Assigned
Length:	3	Type:	Alphanumeric
Field 28:	CCS_PROC_CODE_2	<u> </u>	•
			Services and Procedures classification of procedure category.
<b>Beginning Position:</b>	116	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 29:	CCS_PROC_CODE_3	<b>7 I</b>	1
		ware (CCS) for S	Services and Procedures classification of
	PROC_CODE_3 into clinic		
<b>Beginning Position:</b>	119	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 30:	CCS_PROC_CODE_4	<i>J</i> 1.	1
			Services and Procedures classification of procedure category.
<b>Beginning Position:</b>	122	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 31:	CCS_PROC_CODE_5		
	PROC_CODE_5 into clinic		
<b>Beginning Position:</b>	125	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 32:	CCS_PROC_CODE_6		
			Services and Procedures classification of
	PROC_CODE_6 into clinic	ally meaningful p	procedure category.
<b>Beginning Position:</b>	128	<b>Data Source:</b>	Assigned
Length:	3	Type:	Alphanumeric
Field 33:	CCS_PROC_CODE_7		
			Services and Procedures classification of procedure category.
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Beginning Position: Length:	131 3	Data Source: Type:	Assigned Alphanumeric
Field 34:	CCS_PROC_CODE_8	Type.	7 ii pilaiteinerie
11014 0 11		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_8 into clini		
<b>Beginning Position:</b>	134	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 35:	CCS_PROC_CODE_9	-JP00	
11014 001		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_9 into clini		
<b>Beginning Position:</b>	137	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 36:	CCS_PROC_CODE_10		<b>.</b>
2 1010 0 0 0		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_10 into clir		
<b>Beginning Position:</b>	140	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 37:	CCS_PROC_CODE_11	-JP-0	
11014 071		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_11 into clir		
<b>Beginning Position:</b>	143	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 38:	CCS_PROC_CODE_12	-JP-0	
11010 001		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_12 into clir		
<b>Beginning Position:</b>	146	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 39:	CCS_PROC_CODE_13	турс.	7 ii pilaiteinerie
riciu 57.		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_13 into clir		
<b>Beginning Position:</b>	149	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 40:	CCS PROC CODE 14	турс.	7 ii pilaiteinerie
riciu 40.		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_14 into clir		
<b>Beginning Position:</b>	152	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 41:	CCS_PROC_CODE_15	Type.	7 ii priumomene
riciu 41.		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_15 into clir		
<b>Beginning Position:</b>	155	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 42:	CCS_PROC_CODE_16	турс.	
1 iciu 42.		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_16 into clir		
<b>Beginning Position:</b>	158	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 43:	CCS PROC CODE 17	Type.	7 ii pilaiteinerie
I IVIU TU		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_17 into clir		
<b>Beginning Position:</b>	161	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 44:	CCS_PROC_CODE_18	- jpc.	1 iipiimiiuiiloito
I IVIU TT		ftware (CCS) for S	Services and Procedures classification of
	PROC_CODE_18 into clir		
	1100_00DL_10 III0 CIII	mouninglui	. protestic entegory.
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Beginning Position: Length:	164 3	Data Source: Type:	Assigned Alphanumeric			
Field 45:	CCS_PROC_CODE_19	туре.	Alphanumenc			
riciu 43.		tware (CCS) for 9	Services and Procedures classification of			
	PROC_CODE_19 into clini					
<b>Beginning Position:</b>	167	Data Source:	Assigned			
Length:	3	Type:	Alphanumeric			
Field 46:	CCS_PROC_CODE_20	турс.	ruphanumerie			
riciu 40.		tware (CCS) for 9	Services and Procedures classification of			
	PROC_CODE_20 into clini					
<b>Beginning Position:</b>	170 170	Data Source:	Assigned			
Length:	3	Type:	Alphanumeric			
Field 47:	CCS_PROC_CODE_21	турс.	1 iipitaitaitette			
riciu 47.		Clinical Classifications Software (CCS) for Services and Procedures classification of				
	PROC_CODE_21 into clini					
<b>Beginning Position:</b>	173	Data Source:	Assigned			
Length:	3	Type:	Alphanumeric			
Field 48:	CCS_PROC_CODE_22	Type.	Tiphalaneric			
1 iciu 40.		tware (CCS) for 9	Services and Procedures classification of			
	PROC_CODE_22 into clini					
<b>Beginning Position:</b>	176	Data Source:	Assigned			
Length:	3	Type:	Alphanumeric			
Field 49:	CCS_PROC_CODE_23	Type.	1 iipiidiidiieite			
riciu 47.		tware (CCS) for S	Services and Procedures classification of			
	PROC_CODE_23 into clini					
<b>Beginning Position:</b>	179	Data Source:	Assigned			
Length:	3	Type:	Alphanumeric			
Field 50:	CCS_PROC_CODE_24	турс.	1 iipitaitaitette			
ricia so.		tware (CCS) for S	Services and Procedures classification of			
	PROC_CODE_24 into clini					
<b>Beginning Position:</b>	182	Data Source:	Assigned			
Length:	3	Type:	Alphanumeric			
Field 51:	CCS_PROC_CODE_25	Type.	Tiphananerie			
Ticia ci.		tware (CCS) for S	Services and Procedures classification of			
	PROC_CODE_25 into clini	` /				
<b>Beginning Position:</b>	185	Data Source:	Assigned			
Length:	3	Type:	Alphanumeric			
Field 52:	EAPG_GRP_VER	-J <b>P</b>	ı			
		ent Group Version	n Number, as assigned by 3M EAPG Grouper			
<b>Beginning Position:</b>	188					
Length:	12	Type:	Alphanumeric			
Field 53:	APC_GRP_VER	<b>71</b>	1			
		ification (APC) V	Version Number as assigned by 3M APC Grouper.			
	Not available 4Q09.	` /				
<b>Beginning Position:</b>	200	<b>Data Source:</b>	Assigned			
Length:	12	Type:	Alphanumeric			
Field 54:	CRG_STATUS_1	V 1	•			
		status code as as	signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.			
<b>Beginning Position:</b>	212	Data Source:	Assigned			
Length:	1	Type:	Alphanumeric			
Field 55:	CRG_STATUS_2	V A	•			
<del></del>		status code as as	signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.			
<b>Beginning Position:</b>	213	Data Source:	Assigned			
Length:	1	Type:	Alphanumeric			
Field 56:	CRG_STATUS_3	V A	•			
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	Clinical Risk Group (CRG)	status code as as	signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	214	<b>Data Source:</b>	Assigned
Length:	1	Type:	Alphanumeric
Field 57:	CRG_STATUS_4		
	Clinical Risk Group (CRG)	status code as as	signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	215	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 58:	CRG_STATUS_5	JI	1
		status code as as	signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	216	<b>Data Source:</b>	Assigned
Length:	1	Type:	Alphanumeric
Field 59:	CRG_STATUS_6	- J P 0 0	
11014 051		status code as as	signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	217	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 60:	CRG_STATUS_7	Type.	ruphanumeric
riciu ov.		etatue codo ae ae	signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	218	Data Source:	Assigned Assigned
Length:	1 CDC CTLATIC O	Type:	Alphanumeric
Field 61:	CRG_STATUS_8	1	' 11 2MIM CDC C N '111 4000
	•		signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	219	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 62:	CRG_STATUS_9		
			signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	220	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 63:	CRG_STATUS_10		
	Clinical Risk Group (CRG)	status code as as	signed by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	221	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 64:	CRG_CODE_1	• •	•
		code as assigned	l by 3M™ CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	222	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 65:	CRG_CODE_2	JI	1
		code as assigned	l by 3M™ CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	227	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 66:	CRG_CODE_3	турс.	7 ii pilaitamerie
riciu oo.		code as assigned	l by 3M™ CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	232	Data Source:	Assigned
	5		
Length:		Type:	Alphanumeric
Field 67:	CRG_CODE_4		11 2MIM CDC Common Not a 21-11-4000
D	<u> </u>	_	by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	237	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 68:	CRG_CODE_5		
	<u> </u>	_	l by 3M™ CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	242	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 69:	CRG_CODE_6		
	Clinical Risk Group (CRG)	code as assigned	l by 3M™ CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	247	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
		· •	•
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Field 70:	CRG_CODE_7		
	Clinical Risk Group (CRG)	code as assigned	by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	252	<b>Data Source:</b>	Assigned
Length:	5	Type:	Alphanumeric
Field 71:	CRG_CODE_8		
	Clinical Risk Group (CRG)	code as assigned	by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	257	<b>Data Source:</b>	Assigned
Length:	5	Type:	Alphanumeric
Field 72:	CRG_CODE_9	<i>- - - - - - - - - -</i>	*
		code as assigned	by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
<b>Beginning Position:</b>	262	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 73:	CRG_CODE_10	- <b>J F</b>	<u> </u>
11010 701		code as assigned	by 3M <sup>™</sup> CRG Grouper. Not available 4Q09.
Beginning Position:	267	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 74:	CRG SEVERITY 1	Type.	Alphanumene
riciu /4:		savarity and as	assigned by 3M™ CRG Grouper. Not available
		severity code as	assigned by 51vi CKG Grouper. Not available
Daginning Dagidia	4Q09. 272	Doto Carres	Assigned
Beginning Position:		Data Source:	Assigned
Length:	ODG GEVERVEN A	Type:	Alphanumeric
Field 75:	CRG_SEVERITY_2	•. •	11 ONTEM CINC C
		severity code as	assigned by 3M <sup>™</sup> CRG Grouper. Not available
	4Q09.		
<b>Beginning Position:</b>	273	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 76:	CRG_SEVERITY_3		
		severity code as	assigned by 3M <sup>™</sup> CRG Grouper. Not available
	4Q09.		
<b>Beginning Position:</b>	274	<b>Data Source:</b>	Assigned
Length:	1	Type:	Alphanumeric
Field 77:	CRG_SEVERITY_4		
	Clinical Risk Group (CRG)	severity code as	assigned by 3M <sup>™</sup> CRG Grouper. Not available
	_	-	
	4Q09.		
Beginning Position:	4Q09. 275	Data Source:	Assigned
Length:	275 1	Data Source: Type:	Assigned Alphanumeric
Length:	275 1 CRG_SEVERITY_5	Type:	Alphanumeric
Beginning Position: Length: Field 78:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG)	Type:	
Length: Field 78:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09.	Type: severity code as	Alphanumeric assigned by 3M <sup>™</sup> CRG Grouper. Not available
Length: Field 78: Beginning Position:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276	Type: severity code as  Data Source:	Alphanumeric  assigned by 3M <sup>™</sup> CRG Grouper. Not available  Assigned
Length: Field 78: Beginning Position: Length:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1	Type: severity code as	Alphanumeric assigned by 3M <sup>™</sup> CRG Grouper. Not available
Length: Field 78: Beginning Position: Length:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6	Type: severity code as  Data Source: Type:	Alphanumeric  assigned by 3M <sup>™</sup> CRG Grouper. Not available  Assigned Alphanumeric
Length: Field 78: Beginning Position: Length:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6 Clinical Risk Group (CRG)	Type: severity code as  Data Source: Type:	Alphanumeric  assigned by 3M <sup>™</sup> CRG Grouper. Not available  Assigned
Length: Field 78: Beginning Position: Length: Field 79:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09.	Type: severity code as Data Source: Type: severity code as	Alphanumeric  assigned by 3M <sup>™</sup> CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M <sup>™</sup> CRG Grouper. Not available
Length: Field 78: Beginning Position: Length: Field 79: Beginning Position:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09. 277	Type: severity code as Data Source: Type: severity code as Data Source:	Alphanumeric  assigned by 3M <sup>™</sup> CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M <sup>™</sup> CRG Grouper. Not available  Assigned
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Length: Field 78: Beginning Position: Length: Field 79: Beginning Position: Length:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09. 277 1 CRG_SEVERITY_7	Type: severity code as Data Source: Type: severity code as Data Source: Type:	Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric
Length: Field 78: Beginning Position: Length: Field 79: Beginning Position: Length:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09. 277 1 CRG_SEVERITY_7 Clinical Risk Group (CRG)	Type: severity code as Data Source: Type: severity code as Data Source: Type:	Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned
Length: Field 78: Beginning Position: Length: Field 79: Beginning Position: Length: Field 80:	275 1  CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1  CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09. 277 1  CRG_SEVERITY_7 Clinical Risk Group (CRG) 4Q09.	Type: severity code as Data Source: Type: severity code as Data Source: Type: severity code as	Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available
Length: Field 78: Beginning Position: Length: Field 79: Beginning Position: Length: Field 80: Beginning Position:	275 1  CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1  CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09. 277 1  CRG_SEVERITY_7 Clinical Risk Group (CRG) 4Q09. 278	Type: severity code as Data Source: Type: severity code as Data Source: Type: severity code as Data Source:	Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Assigned by 3M™ CRG Grouper. Not available
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Length: Field 78: Beginning Position: Length: Field 79: Beginning Position: Length: Field 80: Beginning Position: Length:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09. 277 1 CRG_SEVERITY_7 Clinical Risk Group (CRG) 4Q09. 278 1 CRG_SEVERITY_8 Clinical Risk Group (CRG)	Type: severity code as Data Source: Type: severity code as Data Source: Type: severity code as Data Source: Type:	Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Assigned by 3M™ CRG Grouper. Not available
Length: Field 78: Beginning Position: Length: Field 79: Beginning Position: Length: Field 80: Beginning Position: Length: Field 81:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09. 277 1 CRG_SEVERITY_7 Clinical Risk Group (CRG) 4Q09. 278 1 CRG_SEVERITY_8 Clinical Risk Group (CRG) 4Q09.	Type: severity code as Data Source: Type: severity code as Data Source: Type: severity code as Data Source: Type: severity code as	Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric
Length: Field 78: Beginning Position: Length: Field 79: Beginning Position: Length: Field 80: Beginning Position: Length: Field 81:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09. 277 1 CRG_SEVERITY_7 Clinical Risk Group (CRG) 4Q09. 278 1 CRG_SEVERITY_8 Clinical Risk Group (CRG)	Type: severity code as Data Source: Type: severity code as Data Source: Type: severity code as Data Source: Type:	Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric
Length:	275 1 CRG_SEVERITY_5 Clinical Risk Group (CRG) 4Q09. 276 1 CRG_SEVERITY_6 Clinical Risk Group (CRG) 4Q09. 277 1 CRG_SEVERITY_7 Clinical Risk Group (CRG) 4Q09. 278 1 CRG_SEVERITY_8 Clinical Risk Group (CRG) 4Q09.	Type: severity code as Data Source: Type: severity code as Data Source: Type: severity code as Data Source: Type: severity code as	Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric  assigned by 3M™ CRG Grouper. Not available  Assigned Alphanumeric

Length:	1	Type:	Alphanumeric		
Field 82:	CRG_SEVERITY_9				
	Clinical Risk Group (CRG) severity code as assigned by 3M™ CRG Grouper. Not available				
	4Q09.				
<b>Beginning Position:</b>	280	Data Source:	Assigned		
Length:	1	Type:	Alphanumeric		
Field 83:	CRG_SEVERITY_10				
	Clinical Risk Group (CRG) severity code as assigned by 3M <sup>™</sup> CRG Grouper. Not available				
	4Q09.				
<b>Beginning Position:</b>	281	Data Source:	Assigned		
Length:	1	Type:	Alphanumeric		

# **CHARGES DATA FILE**

Field 1:	RECO	ORD_ID			
<b>Description:</b>	Record Identification Number. Unique number assigned to identify the record. First available			d to identify the record. First available	
•		arter 2002. Does NOT match the RECOF			
<b>Beginning Position:</b>	1	Data Source:	Assigne	· · · · · · · · · · · · · · · · · · ·	
Length:	12	Type:	Alphan		
Field 2:	REVENUE_CODE				
Description:	Code corresponding to each specific accommodation, ancillary service or billing calculation				
<b></b>		d to the services being billed.	,	8	
<b>Coding Scheme:</b>	0100	All-inclusive room charges plus ancillary	0527	Freestanding Clinic - Visiting Nurse Services(s) to a Member's Home when in a Home Health Shortage Area	
	0101	All-inclusive room charges	0528	Freestanding Clinic – Visit by RHC/FQHC Practitioner to Other non RHC/FQHC Site (e.g. Scene of Accident)	
	0110	Room charges for private rooms - general	0529	Freestanding Clinic - other	
	0111	Room charges for private rooms - medical/surgical/GYN	0530	Osteopathic service - general	
	0112	Room charges for private rooms - obstetrics	0531	Osteopathic service - therapy	
	0113	Room charges for private rooms - pediatric	0539	Osteopathic service - other	
	0114 0115	Room charges for private rooms - psychiatric	0540 0541	Ambulance service - general	
	0115	Room charges for private rooms - hospice Room charges for private rooms - detoxification	0541	Ambulance service - supplies Ambulance service - medical transport	
	0117	Room charges for private rooms - oncology	0543	Ambulance service - heart mobile	
	0118	Room charges for private rooms - rehabilitation	0544	Ambulance service - oxygen	
	0119	Room charges for private rooms - other	0545	Ambulance service - air ambulance	
	0120	Room charges for semi-private rooms - general	0546	Ambulance service - neonatal	
	0121	Room charges for semi-private rooms - medical/surgical/GYN	0547	Ambulance service - pharmacy	
	0122	Room charges for semi-private rooms - obstetrics	0548	Ambulance service - telephone transmission EKG	
	0123	Room charges for semi-private rooms - pediatric	0549	Ambulance service - other	
	0124 0125	Room charges for semi-private rooms - psychiatric Room charges for semi-private rooms - hospice	0550 0551	Skilled nursing - general Skilled nursing - visit charge	
	0123	Room charges for semi-private rooms -	0551	Skilled nursing - visit charge Skilled nursing - hourly charge	
	0120	detoxification  Room charges for semi-private rooms -	0559	Skilled nursing - other	
	0127	oncology Room charges for semi-private rooms -	0560	Medical social services - general	
	0129	rehabilitation Room charges for semi-private rooms - other	0561	Medical social services - visit charge	
	0130	Room charges for semi-private - 3/4 beds -	0562	Medical social services - hourly charge	
	0131	rooms - general Room charges for semi-private - 3/4 beds -	0569	Medical social services - other	
	0132	rooms - medical/surgical/GYN Room charges for semi-private - 3/4 beds -	0570	Home health aide - general	
	0133	rooms - obstetrics Room charges for semi-private - 3/4 beds - rooms - pediatric	0571	Home health aide - visit charge	
	0134	Room charges for semi-private - 3/4 beds - rooms - psychiatric	0572	Home health aide - hourly charge	
	0135	Room charges for semi-private - 3/4 beds - rooms - hospice	0579	Home health aide - other	
	0136	Room charges for semi-private - 3/4 beds - rooms - detoxification	0580	Other visits (home health) - general	
	0137	Room charges for semi-private - 3/4 beds - rooms - oncology	0581	Other visits (home health) - visit charge	
	0138	Room charges for semi-private - 3/4 beds - rooms - rehabilitation	0582	Other visits (home health) - hourly charge	
	0139	Room charges for semi-private - 3/4 beds - rooms - other	0583	Other visits (home health) - assessment	
	0140	Room charges for private (deluxe) rooms - general	0589	Other visits (home health) - other	

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0141	Room charges for private (deluxe) rooms - medical/surgical/GYN	0590	Units of service (home health) - general
0142	Room charges for private (deluxe) rooms - obstetrics	0600	Oxygen (home health) - general
0143	Room charges for private (deluxe) rooms - pediatric	0601	Oxygen (home health) - stat/equip/supply or contents
0144	Room charges for private (deluxe) rooms - psychiatric	0602	Oxygen (home health) - stat/equip/supply under 1 liter per minute
0145	Room charges for private (deluxe) rooms - hospice	0603	Oxygen (home health) - stat/equip/supply over 4 liters per minute
0146	Room charges for private (deluxe) rooms - detoxification	0604	Oxygen (home health) - portable add-in
0147	Room charges for private (deluxe) rooms - oncology	0609	Oxygen (home health) - other
0148	Room charges for private (deluxe) rooms - rehabilitation	0610	Magnetic Resonance Technology (MRT) - MRI - general
0149	Room charges for private (deluxe) rooms - other	0611	Magnetic Resonance Technology (MRT) - MRI - brain (including brain stem)
0150	Room charges for ward rooms - general	0612	Magnetic Resonance Technology (MRT) - MRI - spinal cord (including spine)
0151	Room charges for ward rooms - medical/surgical/GYN	0614	Magnetic Resonance Technology (MRT) - MRI - other
0152	Room charges for ward rooms - obstetrics	0615	Magnetic Resonance Technology (MRT) - MRA – head and neck
0153	Room charges for ward rooms - pediatric	0616	Magnetic Resonance Technology (MRT) - MRA – lower extremities
0154	Room charges for ward rooms - psychiatric	0618	Magnetic Resonance Technology (MRT) - MRA – other
0155	Room charges for ward rooms - hospice	0619	Magnetic Resonance Technology (MRT) - Other MRT
0156	Room charges for ward rooms - detoxification	0621	Medical/surgical supplies - incident to radiology
	2		6 11
0157	Room charges for ward rooms - oncology	0622	Medical/surgical supplies - incident to other diagnostic services
		0623	Medical/surgical supplies - surgical dressings
0158	Room charges for ward rooms - rehabilitation	0624	Medical/surgical supplies - FDA investigational devices
0159	Room charges for ward rooms - other	0631	Drugs requiring specific identification - single source
0160	Room charges for other rooms - general	0632	Drugs requiring specific identification - multiple source
0164	Room charges for other rooms – Sterile Environment	0633	Drugs requiring specific identification - restrictive prescription
0167	Room charges for other rooms – self care	0634	Drugs requiring specific identification - EPO, less than 10,000 units
0169	Room charges for other rooms - other	0635	Drugs requiring specific identification - EPO, 10,000 or more units
0170	Room charges for nursery - general	0636	Drugs requiring specific identification - requiring detailed coding
0171	Room charges for nursery - newborn level I	0637	Drugs requiring specific identification - self- administrable
0172	Room charges for nursery - newborn level II	0640	Home IV therapy services - general
0173	Room charges for nursery - newborn level III	0641	Home IV therapy services – non-routine nursing, central line
0174	Room charges for nursery - newborn level IV	0642	Home IV therapy services - IV site care, central line
0179	Room charges for nursery - other	0643	Home IV therapy services - IV start/change, peripheral line
0180	Room charges for LOA - general	0644	Home IV therapy services – non-routine nursing, peripheral line
0182	Room charges for LOA - patient convenience- charges billable	0645	Home IV therapy services - training patient/caregiver, central line
0183	Room charges for LOA - therapeutic leave	0646	Home IV therapy services - training, disabled patient, central line
0185	Room charges for LOA – nursing home (for hospitalization)	0647	Home IV therapy services - training, patient/caregiver, peripheral
0189	Room charges for LOA - other	0648	Home IV therapy services - training, disabled patient, peripheral
0190	Room charges for subacute care - general	0649	Home IV therapy services - other

0191	Room charges for subacute care - Level I (skilled care)	0650	Hospice services - general
0192	Room charges for subacute care - Level II (comprehensive care)	0651	Hospice services - routine home care
0193	Room charges for subacute care - Level III (complex care)	0652	Hospice services - continuous home care
0194	Room charges for subacute care - Level IV (intensive care)	0655	Hospice services - inpatient respite care
0199	Room charges for subacute care - other	0656	Hospice services - general inpatient care (non-respite)
0200	Room charges for intensive care - general	0657	Hospice services - physician services
0201	Room charges for intensive care - surgical	0658	Hospice services - room and board - nursing facility
0202	Room charges for intensive care - medical	0659	Hospice services - other
0203	Room charges for intensive care - pediatric	0660	Respite care - general
0204	Room charges for intensive care - psychiatric	0661	Respite care - hourly charge/skilled nursing
0206	Room charges for intensive care - intermediate intensive care unit (ICU)	0662	Respite care - hourly charge/aide/homemaker/companion
0207	Room charges for intensive care - burn care	0663	Respite care - daily charge
0208	Room charges for intensive care - trauma	0669	Respite care - other
0209	Room charges for intensive care - other	0670	Outpatient special residence - general
0210	Room charges for coronary care - general	0671	Outpatient special residence - hospital based
0211	Room charges for coronary care - myocardial infarction	0672	Outpatient special residence - contracted
0212	Room charges for coronary care - pulmonary care	0679	Outpatient special residence - other
0213	Room charges for coronary care - heart transplant	0681	Trauma response - level I
0214	Room charges for coronary care - intermediate coronary care unit (CCU)	0682	Trauma response - level II
0219	Room charges for coronary care - other	0683	Trauma response - level III
0220	Special charges - general	0684	Trauma response - level IV
0221	Special charges - admission charge	0689	Trauma response - other
0222	Special charges - technical support charge	0690	Pre-hospice/Palliative Care Services - general
0223	Special charges - UR service charge	0691	Pre-hospice/Palliative Care Services – visit charge
0224	Special charges - late discharge, medically necessary	0692	Pre-hospice/Palliative Care Services – hourly charge
0229	Special charges - other	0693	Pre-hospice/Palliative Care Services - evaluation
0230	Incremental nursing care - general	0694	Pre-hospice/Palliative Care Services – consultation and education
0231	Incremental nursing care - nursery	0695	Pre-hospice/Palliative Care Services – inpatient care
0232	Incremental nursing care - OB	0696	Pre-hospice/Palliative Care Services – physician services
0233	Incremental nursing care - ICU (includes transitional care)	0699	Pre-hospice/Palliative Care Services - other
0234	Incremental nursing care - CCU (includes transitional care)	0700	Cast Room services - general
0235	Incremental nursing care - hospice	0710	Recovery Room services - general
0239	Incremental nursing care - other	0720	Labor/Delivery Room services - general
0240	All-inclusive ancillary - general	0721	Labor/Delivery Room services - labor
0241	All-inclusive ancillary - basic	0722	Labor/Delivery Room services - delivery
0242	All-inclusive ancillary - comprehensive	0723	Labor/Delivery Room services - circumcision
0243	All-inclusive ancillary - specialty	0724	Labor/Delivery Room services - birthing center
0249	All-inclusive ancillary - other	0729	Labor/Delivery Room services - other
0250	Pharmacy - general	0730	EKG/ECG services - general
0251	Pharmacy - generic drugs	0731	EKG/ECG services - Holter monitor
0252	Pharmacy – non-generic drugs	0732	EKG/ECG services - telemetry
0253	Pharmacy - take-home drugs	0739	EKG/ECG services - other
0054	Pharmacy - drugs incident to other diagnostic	0740	EEG services - general
0254	services		C

0256	Pharmacy - experimental drugs	0760	Treatment or observation room services -
0257	Pharmacy - nonprescription	0761	general Specialty Room - Treatment/ Observation Room - Treatment Room
0258	Pharmacy - IV solutions	0762	Specialty Room - Treatment/ Observation Room - Observation Room
0259	Pharmacy - other	0769	Treatment or observation room services - other
0260	IV Therapy - general	0770	Preventive care services - general
0261	IV Therapy - infusion pump	0771	Preventive care services - vaccine administration
0262	IV Therapy - pharmacy services	0780	Telemedicine services - general
0263	IV Therapy - drug/supply delivery	0790	Extra-corporeal shockwave therapy - general
0264	IV Therapy - supplies	0800	Inpatient renal dialysis services - general
0269	IV Therapy - other	0801	Inpatient renal dialysis services - hemodialysis
0270	Medical surgical supplies and devices - general	0802	Inpatient renal dialysis services - peritoneal (non-CAPD)
0271	Medical surgical supplies and devices - nonsterile	0803	Inpatient renal dialysis services - continuous ambulatory peritoneal dialysis (CAPD)
0272	Medical surgical supplies and devices - sterile	0804	Inpatient renal dialysis services - continuous cycling peritoneal dialysis (CAPD)
0273	Medical surgical supplies and devices - take- home	0809	Inpatient renal dialysis services - other
0274	Medical surgical supplies and devices - prosthetic/orthotic	0810	Acquisition of body components- general
0275	Medical surgical supplies and devices - pacemaker	0811	Acquisition of body components - living donor
0276	Medical surgical supplies and devices - intraocular lens (IOL)	0812	Acquisition of body components - cadaver donor
0277	Medical surgical supplies and devices - oxygen - take-home	0813	Acquisition of body components - unknown donor
0278	Medical surgical supplies and devices - other implants	0814	Acquisition of body components - unsuccessful organ search-donor bank charges
0279	Medical surgical supplies and devices - other	0815	Acquisition of body components – stem cells- allogeneic
0280	Oncology - general	0819	Acquisition of body components - other donor
0289	Oncology - other	0820	Hemodialysis - outpatient or home - general
0290	DME - general	0821	Hemodialysis - outpatient or home - composite or other rate
0291	DME - rental	0822	Hemodialysis - outpatient or home – home supplies
0292 0293	DME - purchase of new  DME - purchase of used	0823 0824	Hemodialysis - outpatient or home – home equipment Hemodialysis - outpatient or home –
0293	DME - supplies/drugs for DME effectiveness	0825	maintenance 100%  Hemodialysis - outpatient or home - support
0294	DME - other equipment	0826	services Hemodialysis - outpatient or home - shorter
0300	Laboratory - general	0829	duration (effective 7/1/17) Hemodialysis - outpatient or home - other
0301	Laboratory - chemistry	0830	Peritoneal dialysis - outpatient or home -
0301	Laboratory - themistry  Laboratory - immunology	0831	general Peritoneal dialysis - outpatient or home -
0303	Laboratory - renal patient (home)	0832	composite or other rate Peritoneal dialysis - outpatient or home – home
0304	Laboratory – non-routine dialysis	0833	supplies Peritoneal dialysis - outpatient or home – home
0305	Laboratory - hematology	0834	equipment Peritoneal dialysis - outpatient or home –
0306	Laboratory - bacteriology and microbiology	0835	maintenance 100% Peritoneal dialysis - outpatient or home -
0307	Laboratory - urology	0839	support services Peritoneal dialysis - outpatient or home - other
0309	Laboratory - other	0840	CAPD - outpatient or home - general
0310	Laboratory pathological - general	0841	CAPD - outpatient or home - composite or other
0311	Laboratory pathological - cytology	0842	rate CAPD - outpatient or home – home supplies

 0312	Laboratory pathological - histology	0843	CAPD - outpatient or home – home equipment
0314	Laboratory pathological - biopsy	0844	CAPD - outpatient or home - maintenance
0210	Laboratory mathological -41	0045	100%
0319	Laboratory pathological - other	0845	CAPD - outpatient or home - support services
0320	Radiology - diagnostic - general	0849	CAPD - outpatient or home - other
0321	Radiology - diagnostic - angiocardiography	0850	CCPD - outpatient or home - general
0322	Radiology - diagnostic - arthrography	0851	CCPD - outpatient or home - composite or other rate
0323	Radiology - diagnostic - arteriography	0852	CCPD - outpatient or home - home supplies
0324	Radiology - diagnostic - chest x-ray	0853	CCPD - outpatient or home - home equipment
0329	Radiology - diagnostic - other	0854	CCPD - outpatient or home - maintenance 100%
0330	Radiology - therapeutic and/or chemotherapy	0855	CCPD - outpatient or home - support services
	administration - general		1
0331	Radiology - therapeutic and/or chemotherapy	0859	CCPD - outpatient or home - other
0332	administration - chemotherapy - injected Radiology - therapeutic and/or chemotherapy	0860	Magnetoencephalography (MEG) - General
0332	administration - chemotherapy - oral	0000	Magnetoeneephanography (MEG) General
0333	Radiology - therapeutic and/or chemotherapy	0861	Magnetoencephalography (MEG) - MEG
0225	administration - radiation therapy	0000	M: 11 1:1 :
0335	Radiology - therapeutic and/or chemotherapy administration - chemotherapy - IV	0880	Miscellaneous dialysis - general
0339	Radiology - therapeutic and/or chemotherapy	0881	Miscellaneous dialysis - ultrafiltration
	administration - other		<b>V</b>
0340	Nuclear medicine - general	0882	Miscellaneous dialysis - home aide visit
0341	Nuclear medicine - diagnostic procedures	0889	Miscellaneous dialysis - other
0342	Nuclear medicine - therapeutic procedures	0900	Behavior health treatments/services - general
0343	Nuclear medicine - diagnostic	0901	Behavior health treatments/services -
0344	radiopharmaceuticals Nuclear medicine - therapeutic	0902	electroshock Behavior health treatments/services - milieu
0344	radiopharmaceuticals	0902	therapy
0349	Nuclear medicine - other	0903	Behavioral health treatments/services - play
0250	CTD 1	0004	therapy
0350	CT scan - general	0904	Behavior health treatments/services - activity therapy
0351	CT scan - head	0905	Behavior health treatments/services - intensive
			outpatient services - psychiatric
0352	CT scan - body	0906	Behavior health treatments/services - intensive
0359	CT scan - other	0907	outpatient services - chemical dependency Behavior health treatments/services -
0337	C1 scan - outer	0,07	community behavioral health program
0360	Operating room services - general	0911	Behavior health treatment/services -
00.44		0010	rehabilitation
0361	Operating room services - minor surgery	0912	Behavior health treatment/services - partial hospitalization - less intensive
0362	Operating room services - organ transplant	0913	Behavior health treatment/services - partial
	other than kidney		hospitalization - intensive
0367	Operating room services - kidney transplant	0914	Behavior health treatment/services - individual
0369	Operating room services - other	0915	therapy Behavior health treatment/services - group
0307	operating room services - other	0713	therapy
0370	Anesthesia - general	0916	Behavior health treatment/services - family
0271	Association in the control of the co	0017	therapy
0371	Anesthesia - incident to radiology	0917	Behavior health treatment/services - biofeedback
0372	Anesthesia - incident to other diagnostic	0918	Behavior health treatment/services - testing
- <del>-</del>	services	-	
0374	Anesthesia - acupuncture	0919	Behavior health treatment/services - other
0379	Anesthesia - other	0920	Other diagnostic services - general
0380	Blood - general	0921	Other diagnostic services - peripheral vascular
0381	Blood - packed red cells	0922	Other diagnostic services - electromyogram
0382	Blood - whole blood	0922	Other diagnostic services - electromyogram  Other diagnostic services - pap smear
0382	Blood - plasma	0923	Other diagnostic services - pap shear Other diagnostic services - allergy test
0384	Blood - platelets	0925	Other diagnostic services - anergy test  Other diagnostic services - pregnancy test
0385	Blood - leukocytes	0923	Other diagnostic services - pregnancy test  Other diagnostic services - other
0303	Diood - icukocytes	0747	Onici diagnostic services - onici

0386	Blood - other components	0931	Medical rehabilitation day program - half day
0387	Blood - other derivatives (cryoprecipitate)	0932	Medical rehabilitation day program - full day
0389	Blood - other	0940	Other therapeutic services - general
0390	Blood and blood component administration, storage and processing - general	0941	Other therapeutic services - recreational therapy
0391	Blood and blood component administration, storage and processing - administration	0942	Other therapeutic services - education/training
0392	Blood and blood component administration, storage and processing – processing and storage	0943	Other therapeutic services - cardiac rehabilitation
0399	Blood and blood component administration, storage and processing - other	0944	Other therapeutic services - drug rehabilitation
0400	Other imaging services - general	0945	Other therapeutic services - alcohol rehabilitation
0401	Other imaging services - diagnostic mammography	0946	Other therapeutic services - complex medical equipment - routine
0402	Other imaging services - ultrasound	0947	Other therapeutic services - complex medical equipment - ancillary
0403	Other imaging services - screening mammography	0948	Other therapeutic services – pulmonary rehabilitation
0404	Other imaging services - PET	0949	Other therapeutic services - other
0409	Other imaging services - other	0951	Other therapeutic services – athletic training
0410	Respiratory services - general	0952	Other therapeutic services - kinesiotherapy
0412	Respiratory services - inhalation	0953	Other therapeutic services – chemical
0413	Respiratory services - hyperbaric oxygen	0960	dependency (drug and alcohol) Professional fees - general
0419	therapy Respiratory services - other	0961	Professional fees - psychiatric
0419	Physical therapy - general	0962	Professional fees - ophthalmology
0420	Physical therapy - visit charge	0963	Professional fees - anesthesiologist (MD)
0421	Physical therapy - visit charge  Physical therapy - hourly charge	0964	Professional fees - anesthetist (CRNA)
0423	Physical therapy - group rate	0969	Professional fees - other
0424	Physical therapy - evaluation or reevaluation	0971	Professional fees - laboratory
0429	Physical therapy - other	0972	Professional fees - radiology - diagnostic
0430	Occupational therapy - general	0973	Professional fees - radiology - therapeutic
0431	Occupational therapy - visit charge	0974	Professional fees - radiology - nuclear medicine
0432	Occupational therapy - hourly charge	0975	Professional fees - operating room
0433	Occupational therapy - group rate	0976	Professional fees - respiratory therapy
0434	Occupational therapy - evaluation or reevaluation	0977	Professional fees - physical therapy
0439	Occupational therapy - other	0978	Professional fees - occupational therapy
0440	Speech-language pathology - general	0979	Professional fees - speech therapy
0441	Speech-language pathology - visit charge	0981	Professional fees - emergency room
0442	Speech-language pathology - hourly charge	0982	Professional fees - outpatient services
0443	Speech-language pathology - group rate	0983	Professional fees - clinic
0444	Speech-language pathology - evaluation or reevaluation	0984	Professional fees - medical social services
0449	Speech-language pathology - other	0985	Professional fees - EKG
0450	Emergency room - general	0986	Professional fees - EEG
0451	Emergency room - EMTALA emergency medical screening services	0987	Professional fees - hospital visit
0452	Emergency room - beyond EMTALA screening	0988	Professional fees - consultation
0456	Emergency room - urgent care	0989	Professional fees - private duty nurse
0459	Emergency room - other	0990	Patient convenience items - general
0460	Pulmonary function - general	0991	Patient convenience items - cafeteria/guest tray
0469	Pulmonary function - other	0992	Patient convenience items - private linen service
0470	Audiology - general	0993	Patient convenience items - telephone/telegraph
0471	Audiology - diagnostic	0994	Patient convenience items - TV/radio
0472	Audiology - treatment	0995	Patient convenience items - nonpatient room rentals
0479	Audiology - other	0996	Patient convenience items - late discharge charge
0480	Cardiology - general	0997	Patient convenience items - admission kits

ГНСІС	Page 40 —		Last Updated: September, 2018
	•		DSHS Document # E25-14164
	or Other Qualified Health Care Professional on		
25	Care Professional during a Postoperative Period Significant, Separately Identifiable Evaluation	E1	Upper left eyelid
24	Unrelated Evaluation and Management Service by the Same Physician or Other Qualified Health	P6	A declared brain-dead patient whose organs are being removed for donor purposes
23	Unusual Anesthesia	P5	A moribund patient who is not expected to survive without the operation
22	Increased procedural services	P4	A patient with severe systemic disease that is a constant threat to life
5	Type:	Alphar	numeric
Level 19	Data Source:	Claim	
See ht	tp://www.cms.hhs.gov/HCPCSReleaseC	odeSets	ANHCPCS/list.asp for complete list of
		CPCS) c	code applicable to ancillary services or
		anaa,	and anniliable to a till
2	Type:	Alphan	numeric
17	Data Source:	Claim	
		tive nun	nber used in
HCPO			
4	Type:		numeric
13	Data Source:	Claim	
0526	Practitioner to a Member in a SNF (not Covered Part A Stay) or NF or ICF MR or Other Residential Facility Freestanding Clinic - urgent care		
0525	Stay at SNF Freestanding Clinic - Visit by RHC/FQHC		
0524	Freestanding Clinic - Visit by RHC/FQHC	3109	Adult foster care - other
	RHC/FQHC Practitioner		Adult foster care - daily
	RHC/FQHC		Adult day care, social - daily
			Adult day care, social - houry  Adult day care, medical and social - daily
			Adult day care, medical and social - hourly Adult day care, social - hourly
	7 1		Adult day care medical and social hourly
0516	Clinic - urgent care	2106	Alternative therapy services - hypnosis
0515	Clinic - pediatric	2105	Alternative therapy services - biofeedback
0514	Clinic - OB/GYN	2104	Alternative therapy services - reflexology
0513	Clinic - psychiatric	2103	Alternative therapy services - massage
0512	Clinic - dental	2102	Alternative therapy services - acupressure
	_		Alternative therapy services - acupuncture
	•		Behavior health accommodations - group hom Alternative therapy services - general
0500	Outpatient services - general	1004	Behavior health accommodations - halfway house
0499	Ambulatory surgical care - other	1003	Behavior health accommodations - supervised living
0490	Ambulatory surgical care - general	1002	Behavior health accommodations - residential treatment - chemical dependency
0489	Cardiology - other	1001	Behavior health accommodations - residential treatment - psychiatric
0483	Cardiology - echocardiology	1000	Behavior health accommodations - general
0482	Cardiology - stress test	0999	Patient convenience items - other
	0489 0490 0499 0500 0509 0510 0511 0512 0513 0514 0515 0516 0517 0519 0520 0521 0522 10523 0524 13 4 HCPC Code HCPC 17 2 HCPA accom See ht Level 19 5 MOD Identi 22 23 24	0483 Cardiology - echocardiology 0489 Cardiology - other  0490 Ambulatory surgical care - general 0499 Ambulatory surgical care - other 0500 Outpatient services - general 0509 Outpatient services - other 0510 Clinic - general 0511 Clinic - dental 0512 Clinic - dental 0513 Clinic - psychiatric 0514 Clinic - pediatric 0515 Clinic - pediatric 0516 Clinic - tamily practice 0517 Clinic - family practice 0519 Clinic - other 0520 Freestanding Clinic - Clinic Visit by Member to RHC/FQHC 0522 Freestanding Clinic - Home Visit by RHC/FQHC Practitioner 0523 Freestanding Clinic - Wisit by RHC/FQHC 0524 Freestanding Clinic - Visit by RHC/FQHC 0525 Freestanding Clinic - Visit by RHC/FQHC 0526 Freestanding Clinic - Visit by RHC/FQHC 0527 Freestanding Clinic - Visit by RHC/FQHC 0528 Freestanding Clinic - Visit by RHC/FQHC 0529 Freestanding Clinic - Visit by RHC/FQHC 0520 Freestanding Clinic - Visit by RHC/FQHC 0521 Freestanding Clinic - Visit by RHC/FQHC 0522 Freestanding Clinic - Visit by RHC/FQHC 0523 Freestanding Clinic - Visit by RHC/FQHC 0524 Freestanding Clinic - Visit by RHC/FQHC 0525 Freestanding Clinic - Visit by RHC/FQHC 0526 Freestanding Clinic - Ungent care 0527 Type: 0528 HCPCS_QUALIFIER 0529 Code identifying the type/source of the descrip HCPCS_PROCEDURE_CODE 0529 Type: 0520 HCPCS_PROCEDURE_CODE 0520 HCPCS_PROCEDURE_CODE 0521 Type: 0522 Type: 0523 Unusual Anesthesia 053 Unusual Anesthesia 054 Unrelated Evaluation and Management Service 055 Type: 056 MODIFIER_1 057 Identifies special circumstances related to the part of the procedure of Other Service 057 Significant, Separately Identifiable Evaluation 058 and Management Service by the Same Physician or Other Qualified Health Care Professional on on the Same Physician or Other Other Service	0483

	26	D. C 1.C	F2	T 1.C 1'1
	26	Professional Component  Multiple Outputient Hospital E/M Engagement on	E2	Lower left eyelid
	27	Multiple Outpatient Hospital E/M Encounters on the Same Date	E3	Upper right eyelid
	32	Mandated Services	E4	Lower right eyelid
	33	Preventive Service	F1	Left hand, second digit
	47	Anesthesia by Surgeon	F2	Left hand, third digit
	50	Bilateral Procedure	F3	Left hand, fourth digit
	51	Multiple Procedures	F4	Left hand, fifth digit
	52	Reduced Services	F5	Right hand, thumb
	53	Discontinued Procedure	F6	Right hand, second digit
	54	Surgical Care Only	F7	Right hand, third digit
	55	Postoperative Management Only	F8	Right hand, fourth digit
	56	Preoperative Management Only	F9	Right hand, fifth digit
	57	Decision for Surgery	FA	Left hand, thumb
	58	Staged or Related Procedure or Service by the Same Physician or Other Qualified Health Care Professional During the Postoperative Period	GG	Performance and payment of a screening mammography and diagnostic mammography on same patient, same day.
	59	Distinct Procedural Service	GH	Diagnostic mammogram converted from screening mammogram on same day
	62	Two Surgeons	LC	Left circumflex coronary artery
	63	Procedure Performed on Infants less than 4kg	LD	Left anterior descending coronary artery
	66	Surgical Team	LM	Left main coronary artery
	73	Discontinued Outpatient Hospital/Ambulatory	LT	Left side of the body procedure
		Surgery Center (ASC) Procedure prior to the Administration of Anesthesia	21	zen side si die sody procedure
	74	Discontinued Outpatient Hospital/Ambulatory Surgery Center (ASC) Procedure after Administration of Anesthesia	QM	Ambulance service provided under arrangement by a provider of services
	76	Repeat Procedure by Same Physician or Other Qualified Health Care Professional	QN	Ambulance service furnished directly by a provider of services
	77	Repeat Procedure by Another Physician or Other Qualified Health Care Professional	RC	Right coronary artery
	78	Unplanned Return to the Operating/Procedure Room by the Same Physician or Other Qualified Health Care Professional Following Initial Procedure for a Related Procedure During the Postoperative Period	RI	Ramus intermedius coronary artery
	79	Unrelated Procedure or Service by the Same Physician or Other Qualified Health Care Professional During the Postoperative Period	RT	Right side of the body procedure
	80	Assistant Surgeon	T1	Left foot, second digit
	81	Minimum Assistant Surgeon	T2	Left foot, third digit
	82	Repeat procedure by same physician	T3	Left foot, fourth digit
	90	Reference (Outside) Laboratory	T4	
		•		Left foot, fifth digit
	91	Repeat Clinical Diagnostic Laboratory Test	T5	Right foot, great toe
	92	Alternative Laboratory Platform Testing	T6	Right foot, second digit
	95	Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications System	T7	Right foot, third digit
	99	Multiple Modifiers	Т8	Right foot, fourth digit
	1P	Performance Measure Exclusion Modifier due to Medical Reasons	Т9	Right foot, fifth digit
	2P	Performance Measure Exclusion Modifier due to Patient Reasons	TA	Left foot, great toe
	3P	Performance Measure Exclusion Modifier due to System Reasons	XE	Separate Encounter
	8P	Performance Measure Reporting Modifier- Action not performed, reason not otherwise specified	XS	Separate Structure
	P1	A normal healthy patient	XP	Separate Practitioner
	P2	A patient with mild systemic disease	XU	Unusual Non-Overlapping Service
	P3	A patient with severe systemic disease	-	11 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Roginning Desition	24	*	Claim	
Beginning Position:	24	Data Source:		umorio
Length:		Type:	Alphan	uniti ic

Field 6:	MODIFIER_2		
<b>Description:</b>			ne performance of the service.
Coding Scheme:	Same as Field MODIFIER		
<b>Beginning Position:</b>	26	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 7:	MODIFIER_3		
<b>Description:</b>	Identifies special circumsta	ances related to th	ne performance of the service.
Coding Scheme:	Same as Field MODIFIER	_1	
<b>Beginning Position:</b>	28	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 8:	MODIFIER_4		•
<b>Description:</b>		ances related to th	ne performance of the service.
Coding Scheme:	Same as Field MODIFIER		•
<b>Beginning Position:</b>	30	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 9:	UNIT_MEASUREMENT		1
Description:	Code specifying the units i		s being expressed.
Coding Scheme:	DA Days		2 8 <del>1</del>
coung senomer	F2 International unit		
	UN Unit	<b>-</b>	GI .
<b>Beginning Position:</b>	32	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 10:	UNITS_OF_SERVICE		
Description:	Numeric value of quantity		~. ·
<b>Beginning Position:</b>	34	Data Source:	Claim
Length:	7	Type:	Numeric
Field 11:	UNIT_RATE		
Description:	Rate per unit		
<b>Beginning Position:</b>	41	Data Source:	Claim
Length:	12	Type:	Numeric
Field 12:	CHRGS_LINE_ITEM		
Description:	Total amount of the charge		A . 1
<b>Beginning Position:</b>	53	Data Source:	Assigned
Length:	14	Type:	Numeric
Field 13:	CHRGS_NON_COV	C.1 1	
Description:	Total non-covered amount		
<b>Beginning Position:</b>	67	Data Source:	Assigned
Length:	14 FINAL EAPG CATEGO	Type:	Numeric
Field 14:		_	G) category code, as assigned by 3M <sup>™</sup> EAPG
	Grouper. Not available 4Q		3) category code, as assigned by 5M EAPG
Danimuina Danisiana			Assigned
Beginning Position:	81	Data Source:	Assigned
Length:	EINAL EADO EVIDE O	Type:	Alphanumeric
Field 15:	FINAL_EAPG_TYPE_C		G) type code, as assigned by 3M <sup>™</sup> EAPG Grouper.
	•	ieni Group (EAFC	b) type code, as assigned by 5M = EAFO Glouper.
Daginning Dagitians	Not available 4Q09.	Data Courses	Assigned
Beginning Position:	83 2	Data Source:	Alphanymaria
Length:		Type:	Alphanumeric
Field 16:	FINAL_EAPG	ry Dationt Chaum	(TADC) as assigned by 2MTM EADC Crowner Not
		y Fatient Gloup (	(EAPG), as assigned by 3M™ EAPG Grouper. Not
Daginning Dagitians	available 4Q09. 85	Data Courses	Assigned
Beginning Position:	5	Data Source:	Assigned Alphanumeric
Length:		Type:	Alphanumenc
Field 17:	APC_PROCEDURE_CO		procedure code as assigned by 3M <sup>™</sup> APC
	Grouper. Not available 4Q		procedure code as assigned by 51v1 APC
D 0770 /	Grouper, thou available 4Q	υ <i>)</i> .	<b>5</b> .000 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
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<b>Beginning Position:</b>	90	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 18:	APC_PX_STATUS_IND	_CODE	
	Ambulatory Payment Clas	sification (APC)	procedure status indicator as assigned by 3M™
	APC Grouper. Not availab	le 4Q09.	
<b>Beginning Position:</b>	95	<b>Data Source:</b>	Assigned
Length:	2	Type:	Alphanumeric
Field 19:	APC_WEIGHT		
	Ambulatory Payment Clas available 4Q09.	sification (APC)	weighting as assigned by 3M <sup>™</sup> APC Grouper. Not
<b>Beginning Position:</b>	97	<b>Data Source:</b>	Assigned
Length:	9	Type:	Alphanumeric

# **FACILITY TYPE INDICATOR FILE**

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

Field 1:	THCIC_ID		
Description:	Provider ID. Unique identif	-	
<b>Beginning Position:</b>	1	Data Source:	Assigned
Length:	6	Type:	Alphanumeric
Field 2	PROVIDER_NAME		
<b>Description:</b>	Hospital name provided by		
<b>Beginning Position:</b>	7	Data Source:	Provider
Length:	55	Type:	Alphanumeric
Field 3:	FAC_TEACHING_IND		
<b>Description:</b>	Teaching facility indicator.		
Coding Scheme:	A Member, Council of Teaching F X Other teaching facility	Iospitals	
<b>Beginning Position:</b>	62	<b>Data Source:</b>	Provider
Length:	1	Type:	Alphanumeric
Field 4:	FAC_PSYCH_IND		
<b>Description:</b>	Psychiatric facility indicator	r.	
<b>Beginning Position:</b>	63	<b>Data Source:</b>	Provider
Length:	1	Type:	Alphanumeric
Field 5:	FAC_REHAB_IND		
<b>Description:</b>	Rehabilitation facility indic	ator.	
Beginning Position:	64	<b>Data Source:</b>	Provider
Length:	1	Type:	Alphanumeric
Field 6:	FAC_ACUTE_CARE_IN		•
<b>Description:</b>	Acute care facility indicator	:	
<b>Beginning Position:</b>	65	<b>Data Source:</b>	Provider
Length:	1	Type:	Alphanumeric
Field 7:	FAC_SNF_IND	* *	•
<b>Description:</b>	Skilled nursing facility indi-	cator.	
<b>Beginning Position:</b>	66	<b>Data Source:</b>	Provider
Length:	1	Type:	Alphanumeric
Field 8:	FAC_LONG_TERM_AC	IND	
<b>Description:</b>	Long term acute care facilit		
<b>Beginning Position:</b>	67	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 9:	FAC_OTHER_LTC_IND		-
<b>Description:</b>	Other long term care facility	y indicator.	
<b>Beginning Position:</b>	68	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 10:	FAC_PEDS_IND		
<b>Description:</b>	Pediatric facility Indicator.		
<b>Coding Scheme:</b>			and Related Institutions (NACHRI)
<b>Beginning Position:</b>	69	<b>Data Source:</b>	Provider
Length:	1	Type:	Alphanumeric
Field 11:	FAC_CARDIOVASCULA		•
Description:	Cardiovascular facility indi		
Beginning Position:	70	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 12:	FAC_CHIROPRACTIC_		•
Description:	Chiropractic care facility in		
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<b>Beginning Position:</b>	71	Data Source:	Provider
Length: Field 13:	FAC_ENDOSCOPY_IND	Type:	Alphanumeric
Description:	Endoscopy facility indicator		
Beginning Position:	72	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 14:	FAC_FOOT_IND	Type:	Aiphanumenc
Description:	Foot care facility indicator.		
-	73	Data Source:	Provider
Beginning Position: Length:	1	Type:	Alphanumeric
Field 15:	FAC_GASTROENTERO		Alphanumenc
Description:	Gastroenterology facility in		
Beginning Position:	74	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 16:	FAC_GENERAL_IND	турс.	Alphanumere
Description:	General care facility indicat	or	
Beginning Position:	75	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 17:	FAC_NEUROLOGICAL	V I	Alphanumere
Description:	Neurological care facility in		
Beginning Position:	76	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 18:	FAC_OB_GYN_IND	турс.	Alphanumere
Description:	Obstetrics and gynecology	facility indicator	
Beginning Position:	77	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 19:	FAC_OPTHAMOLOGY_		Alphanumere
Description:	Opthamology facility indica		
Beginning Position:	78	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 20:	FAC_ORAL_IND	турс.	Alphanumere
Description:	Oral health care facility ind	icator	
Beginning Position:	79	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 21:	FAC ORTHOPEDIC IN		7 II priditatione
Description:	Orthopedic care facility ind		
Beginning Position:	80	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 22:	FAC_OTOLARYNGOLO		
Description:	Otolaryngology facility indi		
Beginning Position:	81	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 23:	FAC_PAIN_MNGMT_I	- V I	•
Description:	Pain management facility in		
<b>Beginning Position:</b>	82	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 24:	FAC PLASTIC IND	V 1	<u> </u>
<b>Description:</b>	Plastic surgery facility indic	cator.	
Beginning Position:	83	<b>Data Source:</b>	Provider
Length:	1	Type:	Alphanumeric
Field 25:	FAC_THORACIC_IND	<u> </u>	•
<b>Description:</b>	Thoracic care facility Indica	ator.	
<b>Beginning Position:</b>	84	<b>Data Source:</b>	Provider
Length:	1	Type:	Alphanumeric
Field 26:	FAC_UROLOGY_IND	• =	-
	_ <del>_</del>		DOTTO D
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<b>Description:</b>	Urology care facility indica	tor.	
<b>Beginning Position:</b>	85	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 27:	FAC_OTHER_IND		
<b>Description:</b>	Other facility indicator.		
<b>Beginning Position:</b>	86	Data Source:	Provider
Length:	1	Type:	Alphanumeric
Field 11:	POA_PROVIDER_INDIC	CATOR	
	Indicator identifying whether	er facility is requir	ed to submit Diagnosis Present on Admission
	(POA) codes. 25 TAC §42	1.9(e) identifies th	e following facility types as exempt from
	reporting POA to the depart	ment: Critical Aco	ess Hospitals, Inpatient Rehabilitation Hospitals,
	Inpatient Psychiatric Hospit	als, Cancer Hospi	tals, Children's or Pediatric Hospitals and Long
	Term Care Hospitals.		
Coding Scheme:		ns that would be exem	pted from reporting POA for those patients)
-	R Required		
	X Exempt ` Invalid		
<b>Beginning Position:</b>	87	Data Source:	Assigned
Length:	1	Type:	Alphanumeric
Field 122:	CERT_STATUS	<b>71</b>	
		licate the certifica	tion of data and submission of comments by the
	facility. First available 3 <sup>rd</sup> q		·
<b>Coding Scheme:</b>	1 Certified, without com		
<b>8</b>	2 Certified, with commer		
	3 Certified, with commer		ed by deadline
	4 Facility elected not to c	•	
	<ul><li>Facility closed, data no</li><li>Facility out of compliant</li></ul>		
			or man-made disaster (Starting 4Q2016)
<b>Beginning Position:</b>	88	Data Source:	Assigned
0 0	00	Data Source.	1100151104
Length:	1	Type:	Alphanumeric



# Texas Department of State Health Services

# TEXAS OUTPATIENT SURGICAL AND RADIOLOGICAL PROCEDURE

# Public Use Data File DATA FIELDS

#### **BASE DATA FILE**

Number	Field Name	Position	Length	Field Type
1	SERVICE_QUARTER	1	6	Alphanumeric
2	RECORD_ID- Does NOT match the THCIC RECORD_ID in Research Data Files (RDF's)	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
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

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Number	Field Name	Position	Length	Field Type
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
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

Number	Field Name	Position	Length	Field Type
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
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

Number	Field Name	Position	Length	Field Type
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
128	PROVIDER_NAME	829	55	Alphanumeric
129	EMERGENCY_DEPT_FLAG	884	1	Alphanumeric
	Record_Length		884	

#### **CLASSIFICATION DATA FILE**

1         RECORD_ID - Does NOT match the THCIC RECORD_ID in Research Data Files (RDF's)         1         12         Alphant           2         CCS_PRINC_DIAG_CODE         13         4         Alphant           3         CCS_OTH_DIAG_CODE_1         17         4         Alphant           4         CCS_OTH_DIAG_CODE_2         21         4         Alphant           5         CCS_OTH_DIAG_CODE_3         25         4         Alphant           6         CCS_OTH_DIAG_CODE_4         29         4         Alphant           7         CCS_OTH_DIAG_CODE_5         33         4         Alphant           8         CCS_OTH_DIAG_CODE_5         37         4         Alphant           9         CCS_OTH_DIAG_CODE_6         37         4         Alphant           10         CCS_OTH_DIAG_CODE_7         41         4         Alphant           11         CCS_OTH_DIAG_CODE_8         45         4         Alphant           12         CCS_OTH_DIAG_CODE_10         53         4         Alphant           13         CCS_OTH_DIAG_CODE_11         57         4         Alphant           14         CCS_OTH_DIAG_CODE_12         61         4         Alphant           15	umeric umeric umeric umeric umeric umeric umeric umeric umeric umeric
3         CCS_OTH_DIAG_CODE_1         17         4         Alphant           4         CCS_OTH_DIAG_CODE_2         21         4         Alphant           5         CCS_OTH_DIAG_CODE_3         25         4         Alphant           6         CCS_OTH_DIAG_CODE_4         29         4         Alphant           7         CCS_OTH_DIAG_CODE_5         33         4         Alphant           8         CCS_OTH_DIAG_CODE_6         37         4         Alphant           9         CCS_OTH_DIAG_CODE_7         41         4         Alphant           10         CCS_OTH_DIAG_CODE_8         45         4         Alphant           11         CCS_OTH_DIAG_CODE_9         49         4         Alphant           12         CCS_OTH_DIAG_CODE_10         53         4         Alphant           13         CCS_OTH_DIAG_CODE_11         57         4         Alphant           14         CCS_OTH_DIAG_CODE_12         61         4         Alphant           15         CCS_OTH_DIAG_CODE_13         65         4         Alphant           16         CCS_OTH_DIAG_CODE_14         69         4         Alphant           17         CCS_OTH_DIAG_CODE_15         73	umeric umeric umeric umeric umeric umeric umeric umeric umeric umeric
4 CCS_OTH_DIAG_CODE_2 21 4 Alphant 5 CCS_OTH_DIAG_CODE_3 25 4 Alphant 6 CCS_OTH_DIAG_CODE_4 29 4 Alphant 7 CCS_OTH_DIAG_CODE_5 33 4 Alphant 8 CCS_OTH_DIAG_CODE_6 37 4 Alphant 9 CCS_OTH_DIAG_CODE_7 41 4 Alphant 10 CCS_OTH_DIAG_CODE_8 45 4 Alphant 11 CCS_OTH_DIAG_CODE_9 49 4 Alphant 12 CCS_OTH_DIAG_CODE_9 49 4 Alphant 13 CCS_OTH_DIAG_CODE_10 53 4 Alphant 14 CCS_OTH_DIAG_CODE_11 57 4 Alphant 15 CCS_OTH_DIAG_CODE_12 61 4 Alphant 16 CCS_OTH_DIAG_CODE_13 65 4 Alphant 17 CCS_OTH_DIAG_CODE_14 69 4 Alphant 18 CCS_OTH_DIAG_CODE_15 73 4 Alphant 19 CCS_OTH_DIAG_CODE_15 73 4 Alphant 19 CCS_OTH_DIAG_CODE_16 77 4 Alphant 19 CCS_OTH_DIAG_CODE_16 77 4 Alphant 20 CCS_OTH_DIAG_CODE_17 81 4 Alphant 21 CCS_OTH_DIAG_CODE_18 85 4 Alphant 22 CCS_OTH_DIAG_CODE_19 89 4 Alphant 24 CCS_OTH_DIAG_CODE_20 93 4 Alphant 25 CCS_OTH_DIAG_CODE_21 97 4 Alphant 26 CCS_OTH_DIAG_CODE_21 97 4 Alphant 27 CCS_OTH_DIAG_CODE_21 97 4 Alphant 28 CCS_OTH_DIAG_CODE_21 97 4 Alphant 29 CCS_OTH_DIAG_CODE_21 97 4 Alphant 20 CCS_OTH_DIAG_CODE_21 97 4 Alphant 20 CCS_OTH_DIAG_CODE_21 97 4 Alphant 21 CCS_OTH_DIAG_CODE_21 97 4 Alphant 22 CCS_OTH_DIAG_CODE_21 97 4 Alphant 23 CCS_OTH_DIAG_CODE_21 97 4 Alphant 24 CCS_OTH_DIAG_CODE_21 101 4 Alphant	umeric umeric umeric umeric umeric umeric umeric umeric
5         CCS_OTH_DIAG_CODE_3         25         4         Alphant           6         CCS_OTH_DIAG_CODE_4         29         4         Alphant           7         CCS_OTH_DIAG_CODE_5         33         4         Alphant           8         CCS_OTH_DIAG_CODE_6         37         4         Alphant           9         CCS_OTH_DIAG_CODE_7         41         4         Alphant           10         CCS_OTH_DIAG_CODE_8         45         4         Alphant           11         CCS_OTH_DIAG_CODE_9         49         4         Alphant           12         CCS_OTH_DIAG_CODE_10         53         4         Alphant           13         CCS_OTH_DIAG_CODE_11         57         4         Alphant           14         CCS_OTH_DIAG_CODE_12         61         4         Alphant           15         CCS_OTH_DIAG_CODE_13         65         4         Alphant           16         CCS_OTH_DIAG_CODE_14         69         4         Alphant           17         CCS_OTH_DIAG_CODE_15         73         4         Alphant           19         CCS_OTH_DIAG_CODE_16         77         4         Alphant           20         CCS_OTH_DIAG_CODE_18         85<	umeric umeric umeric umeric umeric umeric umeric
6         CCS_OTH_DIAG_CODE_4         29         4         Alphant           7         CCS_OTH_DIAG_CODE_5         33         4         Alphant           8         CCS_OTH_DIAG_CODE_6         37         4         Alphant           9         CCS_OTH_DIAG_CODE_7         41         4         Alphant           10         CCS_OTH_DIAG_CODE_8         45         4         Alphant           11         CCS_OTH_DIAG_CODE_9         49         4         Alphant           12         CCS_OTH_DIAG_CODE_10         53         4         Alphant           13         CCS_OTH_DIAG_CODE_11         57         4         Alphant           14         CCS_OTH_DIAG_CODE_12         61         4         Alphant           15         CCS_OTH_DIAG_CODE_13         65         4         Alphant           16         CCS_OTH_DIAG_CODE_14         69         4         Alphant           17         CCS_OTH_DIAG_CODE_15         73         4         Alphant           19         CCS_OTH_DIAG_CODE_16         77         4         Alphant           20         CCS_OTH_DIAG_CODE_18         85         4         Alphant           21         CCS_OTH_DIAG_CODE_20         9	umeric umeric umeric umeric umeric umeric
7         CCS_OTH_DIAG_CODE_5         33         4         Alphant           8         CCS_OTH_DIAG_CODE_6         37         4         Alphant           9         CCS_OTH_DIAG_CODE_7         41         4         Alphant           10         CCS_OTH_DIAG_CODE_8         45         4         Alphant           11         CCS_OTH_DIAG_CODE_9         49         4         Alphant           12         CCS_OTH_DIAG_CODE_10         53         4         Alphant           13         CCS_OTH_DIAG_CODE_11         57         4         Alphant           14         CCS_OTH_DIAG_CODE_12         61         4         Alphant           15         CCS_OTH_DIAG_CODE_13         65         4         Alphant           16         CCS_OTH_DIAG_CODE_14         69         4         Alphant           17         CCS_OTH_DIAG_CODE_15         73         4         Alphant           18         CCS_OTH_DIAG_CODE_16         77         4         Alphant           20         CCS_OTH_DIAG_CODE_18         85         4         Alphant           21         CCS_OTH_DIAG_CODE_19         89         4         Alphant           22         CCS_OTH_DIAG_CODE_20 <td< td=""><td>umeric umeric umeric umeric umeric</td></td<>	umeric umeric umeric umeric umeric
8         CCS_OTH_DIAG_CODE_6         37         4         Alphant           9         CCS_OTH_DIAG_CODE_7         41         4         Alphant           10         CCS_OTH_DIAG_CODE_8         45         4         Alphant           11         CCS_OTH_DIAG_CODE_9         49         4         Alphant           12         CCS_OTH_DIAG_CODE_10         53         4         Alphant           13         CCS_OTH_DIAG_CODE_11         57         4         Alphant           14         CCS_OTH_DIAG_CODE_12         61         4         Alphant           15         CCS_OTH_DIAG_CODE_13         65         4         Alphant           16         CCS_OTH_DIAG_CODE_14         69         4         Alphant           17         CCS_OTH_DIAG_CODE_15         73         4         Alphant           18         CCS_OTH_DIAG_CODE_16         77         4         Alphant           20         CCS_OTH_DIAG_CODE_17         81         4         Alphant           21         CCS_OTH_DIAG_CODE_18         85         4         Alphant           21         CCS_OTH_DIAG_CODE_20         93         4         Alphant           22         CCS_OTH_DIAG_CODE_21         <	umeric umeric umeric umeric
9 CCS_OTH_DIAG_CODE_7	umeric umeric umeric
10       CCS_OTH_DIAG_CODE_8       45       4       Alphant         11       CCS_OTH_DIAG_CODE_9       49       4       Alphant         12       CCS_OTH_DIAG_CODE_10       53       4       Alphant         13       CCS_OTH_DIAG_CODE_11       57       4       Alphant         14       CCS_OTH_DIAG_CODE_12       61       4       Alphant         15       CCS_OTH_DIAG_CODE_13       65       4       Alphant         16       CCS_OTH_DIAG_CODE_14       69       4       Alphant         17       CCS_OTH_DIAG_CODE_15       73       4       Alphant         18       CCS_OTH_DIAG_CODE_16       77       4       Alphant         19       CCS_OTH_DIAG_CODE_17       81       4       Alphant         20       CCS_OTH_DIAG_CODE_18       85       4       Alphant         21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric umeric
11       CCS_OTH_DIAG_CODE_9       49       4       Alphant         12       CCS_OTH_DIAG_CODE_10       53       4       Alphant         13       CCS_OTH_DIAG_CODE_11       57       4       Alphant         14       CCS_OTH_DIAG_CODE_12       61       4       Alphant         15       CCS_OTH_DIAG_CODE_13       65       4       Alphant         16       CCS_OTH_DIAG_CODE_14       69       4       Alphant         17       CCS_OTH_DIAG_CODE_15       73       4       Alphant         18       CCS_OTH_DIAG_CODE_16       77       4       Alphant         19       CCS_OTH_DIAG_CODE_17       81       4       Alphant         20       CCS_OTH_DIAG_CODE_18       85       4       Alphant         21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric
12       CCS_OTH_DIAG_CODE_10       53       4       Alphant         13       CCS_OTH_DIAG_CODE_11       57       4       Alphant         14       CCS_OTH_DIAG_CODE_12       61       4       Alphant         15       CCS_OTH_DIAG_CODE_13       65       4       Alphant         16       CCS_OTH_DIAG_CODE_14       69       4       Alphant         17       CCS_OTH_DIAG_CODE_15       73       4       Alphant         18       CCS_OTH_DIAG_CODE_16       77       4       Alphant         19       CCS_OTH_DIAG_CODE_17       81       4       Alphant         20       CCS_OTH_DIAG_CODE_18       85       4       Alphant         21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	
13         CCS_OTH_DIAG_CODE_11         57         4         Alphant           14         CCS_OTH_DIAG_CODE_12         61         4         Alphant           15         CCS_OTH_DIAG_CODE_13         65         4         Alphant           16         CCS_OTH_DIAG_CODE_14         69         4         Alphant           17         CCS_OTH_DIAG_CODE_15         73         4         Alphant           18         CCS_OTH_DIAG_CODE_16         77         4         Alphant           19         CCS_OTH_DIAG_CODE_17         81         4         Alphant           20         CCS_OTH_DIAG_CODE_18         85         4         Alphant           21         CCS_OTH_DIAG_CODE_19         89         4         Alphant           22         CCS_OTH_DIAG_CODE_20         93         4         Alphant           23         CCS_OTH_DIAG_CODE_21         97         4         Alphant           24         CCS_OTH_DIAG_CODE_22         101         4         Alphant	
14       CCS_OTH_DIAG_CODE_12       61       4       Alphant         15       CCS_OTH_DIAG_CODE_13       65       4       Alphant         16       CCS_OTH_DIAG_CODE_14       69       4       Alphant         17       CCS_OTH_DIAG_CODE_15       73       4       Alphant         18       CCS_OTH_DIAG_CODE_16       77       4       Alphant         19       CCS_OTH_DIAG_CODE_17       81       4       Alphant         20       CCS_OTH_DIAG_CODE_18       85       4       Alphant         21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric
15       CCS_OTH_DIAG_CODE_13       65       4       Alphant         16       CCS_OTH_DIAG_CODE_14       69       4       Alphant         17       CCS_OTH_DIAG_CODE_15       73       4       Alphant         18       CCS_OTH_DIAG_CODE_16       77       4       Alphant         19       CCS_OTH_DIAG_CODE_17       81       4       Alphant         20       CCS_OTH_DIAG_CODE_18       85       4       Alphant         21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric
16       CCS_OTH_DIAG_CODE_14       69       4       Alphant         17       CCS_OTH_DIAG_CODE_15       73       4       Alphant         18       CCS_OTH_DIAG_CODE_16       77       4       Alphant         19       CCS_OTH_DIAG_CODE_17       81       4       Alphant         20       CCS_OTH_DIAG_CODE_18       85       4       Alphant         21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric
17       CCS_OTH_DIAG_CODE_15       73       4       Alphant         18       CCS_OTH_DIAG_CODE_16       77       4       Alphant         19       CCS_OTH_DIAG_CODE_17       81       4       Alphant         20       CCS_OTH_DIAG_CODE_18       85       4       Alphant         21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric
18         CCS_OTH_DIAG_CODE_16         77         4         Alphant           19         CCS_OTH_DIAG_CODE_17         81         4         Alphant           20         CCS_OTH_DIAG_CODE_18         85         4         Alphant           21         CCS_OTH_DIAG_CODE_19         89         4         Alphant           22         CCS_OTH_DIAG_CODE_20         93         4         Alphant           23         CCS_OTH_DIAG_CODE_21         97         4         Alphant           24         CCS_OTH_DIAG_CODE_22         101         4         Alphant	umeric
19       CCS_OTH_DIAG_CODE_17       81       4       Alphant         20       CCS_OTH_DIAG_CODE_18       85       4       Alphant         21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric
20       CCS_OTH_DIAG_CODE_18       85       4       Alphant         21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric
21       CCS_OTH_DIAG_CODE_19       89       4       Alphant         22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric
22       CCS_OTH_DIAG_CODE_20       93       4       Alphant         23       CCS_OTH_DIAG_CODE_21       97       4       Alphant         24       CCS_OTH_DIAG_CODE_22       101       4       Alphant	umeric
23         CCS_OTH_DIAG_CODE_21         97         4         Alphant           24         CCS_OTH_DIAG_CODE_22         101         4         Alphant	umeric
24 CCS_OTH_DIAG_CODE_22 101 4 Alphant	umeric
	umeric
25 CCS_OTH_DIAG_CODE_23 105 4 Alphant	umeric
	umeric
26 CCS_OTH_DIAG_CODE_24 109 4 Alphant	umeric
27 CCS_PROC_CODE_1 113 3 Alphant	umeric
28 CCS_PROC_CODE_2 116 3 Alphant	umeric
29 CCS_PROC_CODE_3 119 3 Alphant	umeric
30 CCS_PROC_CODE_4 122 3 Alphant	umeric
31 CCS_PROC_CODE_5 125 3 Alphant	ımaric
32 CCS_PROC_CODE_6 128 3 Alphant	unicic
33 CCS_PROC_CODE_7 131 3 Alphant	
34 CCS_PROC_CODE_8 134 3 Alphant	umeric
35 CCS_PROC_CODE_9 137 3 Alphani	umeric umeric

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Last Updated: September, 2018

Number	Field Name	Position	Length	Field Type
36	CCS_PROC_CODE_10	140	3	Alphanumeric
37	CCS_PROC_CODE_11	143	3	Alphanumeric
38	CCS_PROC_CODE_12	146	3	Alphanumeric
39	CCS_PROC_CODE_13	149	3	Alphanumeric
40	CCS_PROC_CODE_14	152	3	Alphanumeric
41	CCS_PROC_CODE_15	155	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

Number	Field Name	Position	Length	Field Type
76	CRG_SEVERITY_3	274	1	Alphanumeric
77	CRG_SEVERITY_4	275	1	Alphanumeric
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	

# **CHARGES DATA FILE**

Number	Field Name	Position	Length	Field Type
1	RECORD_ID - Does NOT match the THCIC RECORD_ID in Research Data Files (RDF's)	1	12	Alphanumeric
2	REVENUE_CODE	13	4	Alphanumeric
3	HCPCS_QUALIFIER	17	2	Alphanumeric
4	HCPCS_PROCEDURE_CODE	19	5	Alphanumeric
5	MODIFIER_1	24	2	Alphanumeric
6	MODIFIER_2	26	2	Alphanumeric
7	MODIFIER_3	28	2	Alphanumeric
8	MODIFIER_4	30	2	Alphanumeric
9	UNIT_MEASUREMENT_CODE	32	2	Alphanumeric
10	UNITS_OF_SERVICE	34	7	Numeric
11	UNIT_RATE	41	12	Numeric
12	CHRGS_LINE_ITEM	53	14	Numeric
13	CHRGS_NON_COV	67	14	Numeric
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 DATA FILE**

Number	Field Name	Position	Length	Field Type
1	THCIC_ID	1	6	Alphanumeric
2	PROVIDER_NAME	7	55	Alphanumeric
3	FAC_TEACHING_IND	62	1	Alphanumeric
4	FAC_PSYCH_IND	63	1	Alphanumeric
5	FAC_REHAB_IND	64	1	Alphanumeric
6	FAC_ACUTE_CARE_IND	65	1	Alphanumeric
7	FAC_SNF_IND	66	1	Alphanumeric
8	FAC_LONG_TERM_AC_IND	67	1	Alphanumeric
9	FAC_OTHER_LTC_IND	68	1	Alphanumeric
10	FAC_PEDS_IND	69	1	Alphanumeric
11	FAC_CARDIOVASCULAR_IND	70	1	Alphanumeric
12	FAC_CHIROPRACTIC_IND	71	1	Alphanumeric
13	FAC_ENDOSCOPY_IND	72	1	Alphanumeric
14	FAC_FOOT_IND	73	1	Alphanumeric
15	FAC_GASTROENTEROLOGY_IND	74	1	Alphanumeric
16	FAC_GENERAL_IND	75	1	Alphanumeric
17	FAC_NEUROLOGICAL_IND	76	1	Alphanumeric
18	FAC_OB_GYN_IND	77	1	Alphanumeric
19	FAC_OPTHAMOLOGY_IND	78	1	Alphanumeric
20	FAC_ORAL_IND	79	1	Alphanumeric
21	FAC_ORTHOPEDIC_IND	80	1	Alphanumeric
22	FAC_OTOLARYRGOLOGY_IND	81	1	Alphanumeric
23	FAC_PAIN_MNGMT_IND	82	1	Alphanumeric
24	FAC_PLASTIC_IND	83	1	Alphanumeric
25	FAC_THORACIC_IND	84	1	Alphanumeric
26	FAC_UROLOGY_IND	85	1	Alphanumeric
27	FAC_OTHER_IND	86	1	Alphanumeric
28	POA_PROVIDER_INDICATOR	87	1	Alphanumeric
29	CERT_STATUS	88	1	Alphanumeric
	Record_Length		88	