Research Data Dictionary
for
Texas Outpatient Surgical and Radiological Procedure Data

2010- 2015Q3

DATA DICTIONARY

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

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

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

BASE DATA FILE

Field 1:	**SERVICE_QUARTER**			***Available in PUDF***	
Description:	Quarter during which service occurred. Year and quarter of service. *yyyyQn*.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 2:	**RECORD_ID**			***Available in PUDF***	
Description:	Record Identification Number. Unique number assigned to identify the record.				
Length:	12	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 3:	**PAT_UNIQUE_INDEX**				
Description:	Unique identifier assigned to the patient by DSHS.				
Length:	10	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 4:	**THCIC_ID**			***Available in PUDF, with suppression***	
Description:	Provider ID. Unique identifier assigned to the provider by DSHS.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 5:	**SPEC_UNIT_1**			***Available in PUDF***	
Description:	Specialty Units in which most days during stay occurred based on number of days by Type of Bill or Revenue Code. In order by number of days in the unit.				

Coding Scheme:				
C	Coronary Care Unit	P	Pediatric Unit
D	Detoxification Unit	Y	Psychiatric Unit
I	Intensive Care Unit	R	Rehabilitation Unit
H	Hospice Unit	U	Sub-acute Care Unit
N	Nursery	S	Skilled Nursing Unit
B	Obstetric Unit	Blank	Acute Care
O	Oncology Unit		

Length:	1	**Type:**	Alphanumeric	**Data Source:**	Calculated

Field 6:	**SPEC_UNIT_2**				
Description:	Specialty Unit in which 2nd most days during stay occurred based on number of days by Type of Bill or Revenue Code.				
Coding Scheme:	Same as field 5				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Calculated
Field 7:	**SPEC_UNIT_3**				
Description:	Specialty Unit in which 3rd most days during stay occurred based on number of days by Type of Bill or Revenue Code.				
Coding Scheme:	Same as field 5				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Calculated
Field 8:	**SPEC_UNIT_4**				
Description:	Specialty Unit in which 4th most days during stay occurred based on number of days by Type of Bill or Revenue Code.				
Coding Scheme:	Same as field 5				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Calculated
Field 9:	**SPEC_UNIT_5**				
Description:	Specialty Unit in which 5th most days during stay occurred based on number of days by Type of Bill or Revenue Code.				
Coding Scheme:	Same as field 5				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Calculated
Field 10:	**ENCOUNTER_INDICATOR**				
Description:	Indicates the number of claims used to create the encounter				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Calculated
Field 11:	**EIN**				
Description:	Employer Identification Number or Tax ID				
Length:	10	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 12:	**PROVIDER_NAME**				***Available in PUDF, with suppression***
Description:	Hospital name provided by the hospital.				
Length:	55	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 13:	**PROVIDER_ADDR**				
Description:	Hospital address provided by the hospital.				
Length:	50	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 14:	**PROVIDER_CITY**				
Description:	Hospital city provided by the hospital.				
Length:	20	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 15:	**PROVIDER_STATE**				
Description:	Hospital state provided by the hospital.				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 16:	**PROVIDER_ZIP**				
Description:	Hospital ZIP code provided by the hospital.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 17:	**SEX_CODE**				***Available in PUDF, with suppression***
Description:	Gender of the patient as recorded at date of admission or start of care.				
Coding Scheme:	M Male F Female U Unknown ` Invalid				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 18:	**BIRTH_DATE**				
Description:	Birth date of the patient as recorded at date of admission or start of care.				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim

Field 19: **PAT_AGE_GROUP** ***Available in PUDF***

Description: Code indicating age group of patient in days or years on date of discharge.
Coding Scheme:

00	1-28 days	10	35-39	20	85-89
01	29-365 days	11	40-44	21	90+
02	1-4 years	12	45-49		*HIV and drug/alcohol use patients:*
03	5-9	13	50-54	22	0-17
04	10-14	14	55-59	23	18-44
05	15-17	15	60-64	24	45-64
06	18-19	16	65-69	25	65-74
07	20-24	17	70-74	26	75+
08	25-29	18	75-79	`	Invalid
09	30-34	19	80-84		

Length: 2 **Type: Alphanumeric** **Data Source: Assigned**

Field 20: **PAT_AGE_YEARS**
Description: Age of patient in years on date of discharge.
Length: 3 **Type:** Alphanumeric **Data Source:** Claim

Field 21: **PAT_AGE_DAYS**
Description: Age of patient in days on date of discharge.
Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 22: **PAT_ADDR_CENSUS_BLOCK_GROUP**
Description: Census block group of patient street address.
Note: LCODE (Location code) which quantifies the level of accuracy of the geocoding process will be provided along with Pat_Addr_Census_Block_Group (See page 59 for details).
Length: 12 **Type:** Numeric **Data Source:** Calculated

Field 23: **PAT_ADDR_CENSUS_BLOCK**
Description: Census block of patient street address.
Note: LCODE (Location code) which quantifies the level of accuracy of the geocoding process will be provided along with Pat_Addr_Census_Block_Group (See page 59 for details).
Length: 3 **Type:** Numeric **Data Source:** Calculated

Field 24: **PAT_CITY**
Description: Patient address city as provided by the patient.
Length: 30 **Type:** Alphanumeric **Data Source:** Provider

Field 25: **PAT_COUNTY** ***Available in PUDF, with suppression***
Description: FIPS code of patient's county.
Coding scheme:

001	Anderson	129	Donley	257	Kaufman	385	Real
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	Atascosa	141	El Paso	269	King	397	Rockwall
015	Austin	143	Erath	271	Kinney	399	Runnels
017	Bailey	145	Falls	273	Kleberg	401	Rusk
019	Bandera	147	Fannin	275	Knox	403	Sabine
021	Bastrop	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	Briscoe	173	Glasscock	301	Loving	429	Stephens
047	Brooks	175	Goliad	303	Lubbock	431	Sterling
049	Brown	177	Gonzales	305	Lynn	433	Stonewall
051	Burleson	179	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	Cherokee	201	Harris	329	Midland	457	Tyler
075	Childress	203	Harrison	331	Milam	459	Upshur
077	Clay	205	Hartley	333	Mills	461	Upton
079	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	489	Willacy
107	Crosby	235	Irion	363	Palo Pinto	491	Williamson
109	Culberson	237	Jack	365	Panola	493	Wilson
111	Dallam	239	Jackson	367	Parker	495	Winkler
113	Dallas	241	Jasper	369	Parmer	497	Wise
115	Dawson	243	Jeff Davis	371	Pecos	499	Wood
117	Deaf Smith	245	Jefferson	373	Polk	501	Yoakum
119	Delta	247	Jim Hogg	375	Potter	503	Young
121	Denton	249	Jim Wells	377	Presidio	505	Zapata
123	Dewitt	251	Johnson	379	Rains	507	Zavala
125	Dickens	253	Jones	381	Randall		
127	Dimmit	255	Karnes	383	Reagan	*	Invalid

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned, based on patient ZIP code

Field 26: **PAT_STATE** ***Available in PUDF***

Description: State of the patient's mailing address in Texas and contiguous states. Standard 2-character Postal Service abbreviation.

Coding Scheme:

AR	Arkansas
LA	Louisiana
NM	New Mexico
OK	Oklahoma
TX	Texas
ZZ	All other states and American Territories
FC	Foreign country
XX	Foreign country

Length: 2 **Type:** Alphanumeric **Data Source:** Provider

Field 27: **PAT_ZIP** ***Available in PUDF, with suppression***

Description: Patient address ZIP code as provided by the patient.

Length: 9 **Type:** Alphanumeric **Data Source:** Provider

Field 28: **PAT_COUNTRY** ***Available in PUDF, with suppression***

Description: Country of patient's residential address. List maintained by the International Organization for Standardization (ISO).

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

Length: 2 **Type:** Alphanumeric **Data Source:** Provider

Field 29: **PUBLIC_HEALTH_REGION**

Description: Public Health Region of patient's address.

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

2 Archer, Baylor, Brown, Callahan, Clay, Coleman, Comanche, Cottle, Eastland, Fisher, Foard, Hardeman, Haskell, Jack, Jones, Kent, Knox, Mitchell, Montague, Nolan, Runnels, Scurry, Shackleford, Stephens,

Stonewall, Taylor, Throckmorton, Wichita, Wilbarger, Young counties
3 Collin, Cooke, Dallas, Denton, Ellis, Erath, Fannin, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell, Tarrant, Wise counties
4 Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood counties
5 Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler counties
6 Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Harris, Liberty, Matagorda, Montgomery, Walker, Waller, Wharton counties
7 Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hays, Hill, Lampasas, Lee, Leon, Limestone, Llano, McLennan, Madison, Milam, Mills, Robertson, San Saba, Travis, Washington, Williamson counties
8 Atascosa, Bandera, Bexar, Calhoun, Comal, DeWitt, Dimmit, Edwards, Frio, Gillespie, Goliad, Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr, Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala counties
9 Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble, Loving, McCulloch, Martin, Mason, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward, Winkler counties
10 Brewster, Culberson, El Paso, Hudspeth, Jeff Davis, Presidio counties
11 Aransas, Bee, Brooks, Cameron, Duval, Hidalgo, Jim Hogg, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio, Starr, Webb, Willacy, Zapata counties
` Invalid

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 30: **LENGTH_OF_SERVICE** ***Available in PUDF***

Description: Length of service in days *equals* Statement From Date through Statement Thru Date. The minimum length of service is 1day. The maximum is 30 days.

Length: 4 **Type:** Alphanumeric **Data Source:** Calculated

Field 31: **STMT_PERIOD_FROM**

Description: Beginning service date of the period reflected on the statement. Entered as YYYYMMDD.

Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 32: **STMT_PERIOD_THRU**

Description: Ending service date of the period reflected on the statement. Entered as YYYYMMDD.

Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 33: **RACE** ***Available in PUDF, with suppression***

Description: Code indicating the patient's race.

Coding Scheme:
1 American Indian/Eskimo/Aleut
2 Asian or Pacific Islander
3 Black
4 White
5 Other
` Invalid

Length: 1 **Type:** Alphanumeric **Data Source:** Claim

Field 34: **ETHNICITY** ***Available in PUDF, with suppression***

Description: Code indicating the Hispanic origin of the patient.

Coding Scheme:
1 Hispanic Origin
2 Not of Hispanic Origin
` Invalid

Length: 1 **Type:** Alphanumeric **Data Source:** Claim

Field 35: **FIRST_PAYMENT_SRC** ***Available in PUDF***

Description: Code indicating the expected primary source of payment.

Coding Scheme:

09	Selfpay (Removed from 5010 format, use "ZZ" beginning 2Q2012 data)	HM	Health Maintenance Organization
10	Central Certification	LI	Liability
11	Other Non-federal Programs	LM	Liability Medical
12	Preferred Provider Organization (PPO)	MA	Medicare Part A
13	Point of Service (POS)	MB	Medicare Part B
14	Exclusive Provider Organization (EPO)	MC	Medicaid
15	Indemnity Insurance	TV	Title V
16	Health Maintenance Organization (HMO) Medicare Risk	OF	Other Federal Program
AM	Automobile Medical	VA	Veteran Administration Plan
BL	Blue Cross/Blue Shield	WC	Workers Compensation Health Claim
CH	CHAMPUS	ZZ	Charity, Indigent or Unknown

CI	Commercial Insurance	`	Invalid
DS	Disability Insurance		

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 36: **FIRST_PAYER_ID**
Description: National Plan Identifier (when implemented by federal government).
Length: 10 **Type:** Alphanumeric **Data Source:** Claim

Field 37: **FIRST_PAYER_NAME**
Description: Name of primary source of payment.
Length: 35 **Type:** Alphanumeric **Data Source:** Claim

Field 38: **SECONDARY_PAYMENT_SRC** ***Available in PUDF***
Description: Code indicating the expected secondary source of payment.
Coding Scheme: Same as FIRST_PAYMENT_SRC
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 39: **SECONDARY_PAYER_ID**
Description: National Plan Identifier (when implemented by federal government).
Length: 10 **Type:** Alphanumeric **Data Source:** Claim

Field 40: **SECONDARY_PAYER_NAME**
Description: Name of primary source of payment.
Length: 35 **Type:** Alphanumeric **Data Source:** Claim

Field 41: **TYPE_OF_BILL**
Description: Provides specific information about the claim data submitted. First digit = type of facility. Second digit = type of care. Third digit = sequence of the claim.
Coding Scheme:

1st digit–Type of Facility		*2nd digit–Type of Care*		*3rd digit–Sequence of claim*	
1	Hospital	1	Inpatient, including Medicare Part A	0	Non-payment/Zero claim
2	Skilled nursing	2	Inpatient, Medicare Part B only	1	Admit through discharge claim
3	Home health	3	Outpatient	2	Interim–first claim
4	Religious non-medical health care–Hospital	4	Outpatient Other, Medicare Part B only	3	Interim–continuing claim
5	Religious non-medical health care–Extended care	5	Intermediate Care–Level I	4	Interim–last claim
6	Intermediate care	6	Intermediate Care–Level II	5	Late charge(s) only claim
7	Clinic	7	Sub-acute inpatient – Level III	6	Adjustment of prior claim (Not used by Medicare)
8	Special facility	8	Swing bed	7	Replacement of prior claim
				8	Void/cancel of prior claim

Length: 3 **Type:** Alphanumeric **Data Source:** Claim

Field 42: **OCCUR_CODE_1**
Description: Code describing a significant event relating to the claim.
Coding Scheme:

1	Auto accident	39	Date discharged on a continuous course if IV therapy
2	No Fault Insurance Involved - Including Auto Accident/Other	40	Scheduled date of admission
3	Accident/ Tort Liability	41	Date of first test of pre-admission testing
4	Accident/ Employment Related	42	Date of discharge (hospice only)
5	Other accident	43	Scheduled date of canceled surgery
6	Crime Victim	44	Date treatment started - OT
9	Start of Infertility Treatment Cycle	45	Date treatment started - ST
10	Last Menstrual Period	46	Date treatment started - Cardiac rehabilitation
11	Onset of Symptoms/ Illness	47	Date cost outlier status begins
12	Date of Onset for a Chronically Dependent Individual	A1	Birthdate - Insured A
16	Date of Last Therapy	A2	Effective Date - Insured A Policy
17	Date Outpatient OT Plan Established or Last Reviewed	A3	Payer A benefits exhausted
18	Date of Retirement - Patient/Beneficiary	A4	Split Bill Date
19	Date of Retirement - Spouse	B1	Birthdate - Insured B
20	Date Guarantee of Payment Began	B2	Effective date - Insured B Policy
21	Date UR Notice Received	B3	Payer B benefits exhausted
22	Date Active Care Ended	C1	Birthdate - Insured C

24	Date Insurance Denied	C2	Effective date - Insured C Policy
25	Date Benefits Terminated by Primary Payer	C3	Payer C benefits exhausted
26	Date SNF Bed Became Available	E1	Birthdate - Insured D
27	Date Home Health Plan Established or Last Reviewed	E2	Effective date - Insured D Policy
28	Date Comprehensive Outpatient Rehabilitation Plan Established or Last Reviewed	E3	Payer D benefits exhausted
29	Date Outpatient PT Plan established or last reviewed	F1	Birthdate - Insured E
30	Date Outpatient ST Plan established or last reviewed	F2	Effective date - Insured E Policy
31	Date beneficiary notified of intent to bill (accommodations)	F3	Payer E benefits exhausted
32	Date beneficiary notified of intent to bill (procedures or treatments)	G1	Birthdate - Insured F
37	Date of inpatient hospital discharge for non-covered transplant patients	G2	Effective date - Insured F Policy
38	Date treatment started for home IV therapy	G3	Payer F benefits exhausted

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 43: **OCCUR_DATE_1**
Description: Date of occurrence, as *YYYYMMDD*.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 44: **OCCUR_DAY_1**
Description: Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.
Length: 4 **Type:** Alphanumeric **Data Source:** Claim

Field 45: **OCCUR_CODE_2**
Description: Code describing a significant event relating to the claim.
Coding Scheme: Same as OCCUR_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 46: **OCCUR_DATE_2**
Description: Date of occurrence, as *YYYYMMDD*.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 47: **OCCUR_DAY_2**
Description: Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.
Length: 4 **Type:** Alphanumeric **Data Source:** Claim

Field 48: **OCCUR_CODE_3**
Description: Code describing a significant event relating to the claim.
Coding Scheme: Same as OCCUR_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 49: **OCCUR_DATE_3**
Description: Date of occurrence, as *YYYYMMDD*.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 50: **OCCUR_DAY_3**
Description: Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.
Length: 4 **Type:** Alphanumeric **Data Source:** Claim

Field 51: **OCCUR_CODE_4**
Description: Code describing a significant event relating to the claim.
Coding Scheme: Same as OCCUR_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 52: **OCCUR_DATE_4**
Description: Date of occurrence, as *YYYYMMDD*.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 53: **OCCUR_DAY_4**
Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.
Length: 4 **Type:** Alphanumeric **Data Source:** Claim

Field 54: **OCCUR_CODE_5**
Description: Code describing a significant event relating to the claim.

Coding Scheme:	Same as OCCUR_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 55:	**OCCUR_DATE_5**				
Description:	Date of occurrence, as *YYYYMMDD*.				
Length:	8	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 56:	**OCCUR_DAY_5**				
Description:	Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.				
Length:	4	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 57:	**OCCUR_CODE_6**				
Description:	Code describing a significant event relating to the claim.				
Coding Scheme:	Same as OCCUR_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 58:	**OCCUR_DATE_6**				
Description:	Date of occurrence, as *YYYYMMDD*.				
Length:	8	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 59:	**OCCUR_DAY_6**				
Description:	Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.				
Length:	4	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 60:	**OCCUR_CODE_7**				
Description:	Code describing a significant event relating to the claim.				
Coding Scheme:	Same as OCCUR_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 61:	**OCCUR_DATE_7**				
Description:	Date of occurrence, as *YYYYMMDD*.				
Length:	8	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 62:	**OCCUR_DAY_7**				
Description:	Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.				
Length:	4	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 63:	**OCCUR_CODE_8**				
Description:	Code describing a significant event relating to the claim.				
Coding Scheme:	Same as OCCUR_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 64:	**OCCUR_DATE_8**				
Description:	Date of occurrence, as *YYYYMMDD*.				
Length:	8	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 65:	**OCCUR_DAY_8**				
Description:	Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.				
Length:	4	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 66:	**OCCUR_CODE_9**				
Description:	Code describing a significant event relating to the claim.				
Coding Scheme:	Same as OCCUR_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 67:	**OCCUR_DATE_9**				
Description:	Date of occurrence, as *YYYYMMDD*.				
Length:	8	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 68:	**OCCUR_DAY_9**				
Description:	Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.				
Length:	4	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 69:	**OCCUR_CODE_10**				
Description:	Code describing a significant event relating to the claim.				
Coding Scheme:	Same as OCCUR_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 70:	**OCCUR_DATE_10**				
Description:	Date of occurrence, as *YYYYMMDD*.				

Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 71: **OCCUR_DAY_10**
Description: Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.
Length: 4 **Type:** Alphanumeric **Data Source:** Claim

Field 72: **OCCUR_CODE_11**
Description: Code describing a significant event relating to the claim.
Coding Scheme: Same as OCCUR_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 73: **OCCUR_DATE_11**
Description: Date of occurrence, as *YYYYMMDD*.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 74: **OCCUR_DAY_11**
Description: Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.
Length: 4 **Type:** Alphanumeric **Data Source:** Claim

Field 75: **OCCUR_CODE_12**
Description: Code describing a significant event relating to the claim.
Coding Scheme: Same as OCCUR_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 76: **OCCUR_DATE_12**
Description: Date of occurrence, as *YYYYMMDD*.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 77: **OCCUR_DAY_12**
Description: Occurrence Day *equals* Occurrence Date *minus* STMT_PERIOD_FROM date.
Length: 4 **Type:** Alphanumeric **Data Source:** Claim

Field 78: **OCCUR_SPAN_CODE_1**
Description: Code describing a significant event relating to the claim that may affect payer processing.
Coding Scheme:

70	Qualifying stay dates (for SNF use only)	78	SNF prior stay dates
71	Prior stay dates	79	Payer use codes
72	First/Last Visit	M0	PRO/UR approved stay dates
73	Benefit eligibility period	M1	Provider liability - no utilization
74	Noncovered level of care/Leave of absence	M2	Inpatient respite dates
75	SNF level of care	M3	ICF level of care
76	Patient Liability Period	M4	Residential level of care
77	Provider Liability - Utilization Charged		

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 79: **OCCUR_SPAN_FROM_DATE_1**
Description: Occurrence Span From *equals* Beginning Date of Event *minus* STMT_PERIOD_FROM Date.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 80: **OCCUR_SPAN_THRU_DATE_1**
Description: Occurrence Span Thru *equals* Ending Date of Event *minus* STMT_PERIOD_FROM Date.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 81: **OCCUR_SPAN_CODE_2**
Description: Code describing a significant event relating to the claim that may affect payer processing.
Coding Scheme: Same as OCCUR_SPAN_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 82: **OCCUR_SPAN_FROM_DATE_2**
Description: Occurrence Span From *equals* Beginning Date of Event *minus* STMT_PERIOD_FROM Date.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 83: **OCCUR_SPAN_THRU_DATE_2**
Description: Occurrence Span Thru *equals* Ending Date of Event *minus* STMT_PERIOD_FROM Date.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 84: **OCCUR_SPAN_CODE_3**
Description: Code describing a significant event relating to the claim that may affect payer processing.
Coding Scheme: Same as OCCUR_SPAN_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 85: **OCCUR_SPAN_FROM_DATE_3**

Description: Occurrence Span From *equals* Beginning Date of Event *minus* STMT_PERIOD_FROM Date.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 86: **OCCUR_SPAN_THRU_DATE_3**
Description: Occurrence Span Thru *equals* Ending Date of Event *minus* STMT_PERIOD_FROM Date.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 87: **OCCUR_SPAN_CODE_4**
Description: Code describing a significant event relating to the claim that may affect payer processing.
Coding Scheme: Same as OCCUR_SPAN_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 88: **OCCUR_SPAN_FROM_DATE_4**
Description: Occurrence Span From *equals* Beginning Date of Event *minus* STMT_PERIOD_FROM Date.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 89: **OCCUR_SPAN_THRU_DATE_4**
Description: Occurrence Span Thru *equals* Ending Date of Event *minus* STMT_PERIOD_FROM Date.
Length: 8 **Type:** Alphanumeric **Data Source:** Claim

Field 90: **CONDITION_CODE_1** ***Available in PUDF***
Description: Code describing a condition relating to the claim.
Coding Scheme:

1	Military service related	76	Back-up in facility dialysis
2	Condition is employment related	77	Provider accepts or is obligated/required due to a contractual arrangement or law to accept payment by a primary payer as payment
3	Patient covered by insurance not reflected here	78	New coverage not implemented by HMO
4	Information only bill.	79	CORF services provided offsite
5	Lien has been filed	80	Home dialysis - nursing facility
		82	Gestation <39 weeks, elective C-section or induction (effective 10-1-2013)
		83	Gestation >=39 weeks (effective 10-1-2013)
6	ESRD patient in first 18 months of entitlement covered by EGHP	A0	CHAMPUS external partnership program
7	Treatment of non-terminal condition for hospice patient	A1	EPSDT/CHAP
8	Beneficiary would not provide information concerning other insurance coverage	A2	Physically handicapped children's program
9	Neither patient or spouse is employed	A3	Special Federal Funding
10	Patient and/or spouse is employed but no EGHP exists	A4	Family planning
11	Disabled beneficiary but no LGHP coverage exists	A5	Disability
17	Patient is homeless	A6	Vaccines/Medicare 100% payment
18	Maiden name retained	A7	Induced abortion - danger to life
19	Child retains mother's name	A8	Induced abortion - victim rape/incest
20	Beneficiary requested billing	A9	Second opinion surgery
21	Billing for denial notice	AA	Abortion performed due to rape
22	Patient on multiple drug regimen	AB	Abortion performed due to incest
23	Home care giver available	AC	Abortion performed due to serious fatal genetic defect, deformity, or abnormality
24	Home IV patient also receiving HHA services	AD	Abortion performed due to life endangering physical condition caused by, arising from or exacerbated by the pregnancy itself
25	Patient is non-US resident	AE	Abortion performed due to physical health of mother that is not life endangering
26	VA eligible patient chooses to receive services in a Medicare certified facility	AF	Abortion performed due to emotional/psychological health of mother
27	Patient referred to a sole community hospital for a diagnostic laboratory test	AG	Abortion performed due to social or economic reasons
28	Patient and/or spouse's EGHP is secondary to Medicare	AH	Elective abortion
29	Disabled beneficiary and/or family member's LGHP is secondary to Medicare	AI	Sterilization
30	Non-research services provided to patients enrolled in a qualified clinical trial	AJ	Payer responsible for co-payment
31	Patient is student (full time - day)	AJ	Payer responsible for co-payment

32	Patient is student (cooperative/work study program)	AK	Air ambulance required
33	Patient is student (full time - night)	AL	Specialized treatment/bed unavailable
34	Patient is student (part-time)	AM	Non-emergency medically necessary stretcher transport required
36	General care patient in a special unit	AN	Pre-admission screening not required
37	Ward accommodation at patient request	B0	Medicare coordinated care demonstration claim
38	Semi-private room not available	B1	Beneficiary is ineligible for demonstration program
39	Private room medically necessary	B2	Critical access hospital ambulance attestation
40	Same day transfer	B3	Pregnancy indicator
41	Partial hospitalization	B4	Admission unrelated to discharge on same day
42	Continuing care not related to inpatient admission	C1	Approved as billed
43	Continuing care not provided within prescribed post discharge window	C2	Automatic approval as billed based on focused review
44	Inpatient admission changed to outpatient	C3	Partial approval
45	Reserved	C4	Admission/services denied
46	Non-availability statement on file	C5	Post payment review applicable
47	Reserved for CHAMPUS	C6	Admission Preauthorization
48	Psychiatric residential treatment centers for children and adolescents (RTCs)	C7	Extended Authorization
49	Product replacement within product lifecycle	D0	Changes to Service Dates
55	SNF bed not available	D1	Changes to Charges
56	Medical appropriateness	D2	Changes in Revenue Codes/HCPCS/HIPPS rate code
57	SNF readmission	D3	Second or Subsequent Interim PPS Bill
58	Terminated Medicare+Choice organization enrollee	D4	Change in ICD-9-CM diagnosis and/or procedure codes.
59	Non-primary ESRD facility	D5	Cancel to correct HICN or Provider ID
60	Day outlier	D6	Cancel Only to Repay a Duplicate or OIG Overpayment
61	Cost outlier	D7	Change to Make Medicare the Secondary Payer
66	Provider does not wish cost outlier payment	D8	Change to Make Medicare the Primary Payer
67	Beneficiary elects not to use life time reserve (LTR) days	D9	Any Other Change
68	Beneficiary elects to use life time reserve (LTR) days	DR	Katrina disaster related
69	IME/DGME/N&AH Payment Only	E0	Changes in Patient Status
70	Self-administered anemia management drug	G0	Distinct Medical Visit
71	Full care in unit	H0	Delayed Filing, Statement of Intent Submitted
72	Self-care in unit	M0	All inclusive rate for outpatient services
73	Self-care training	M1	Roster billed influenza virus vaccine or pneumococcal pneumonia vaccine (PPV)
74	Home	M2	HHA payment significantly exceeds total charges
75	Home - 100% reimbursement	P1	Do not Resuscitate Order (DNR)
		WO	United Mine Workers of America (UMWA) Demonstration Indicator

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 91: **CONDITION_CODE_2** ***Available in PUDF***

Description: Code describing a condition relating to the claim.

Coding Scheme: Same as CONDITION_CODE_1

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 92: **CONDITION_CODE_3** ***Available in PUDF***

Description: Code describing a condition relating to the claim.

Coding Scheme: Same as CONDITION_CODE_1

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 93: **CONDITION_CODE_4** ***Available in PUDF***

Description: Code describing a condition relating to the claim.

Coding Scheme: Same as CONDITION_CODE_1

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 94: **CONDITION_CODE_5** ***Available in PUDF***

Description: Code describing a condition relating to the claim.

Coding Scheme: Same as CONDITION_CODE_1

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 95: **CONDITION_CODE_6** ***Available in PUDF***

Description: Code describing a condition relating to the claim.

Coding Scheme: Same as CONDITION_CODE_1

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 96: **CONDITION_CODE_7** ***Available in PUDF***

Description: Code describing a condition relating to the claim.

Coding Scheme: Same as CONDITION_CODE_1

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 97: **CONDITION_CODE_8** ***Available in PUDF***

Description: Code describing a condition relating to the claim.

Coding Scheme: Same as CONDITION_CODE_1

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 98: **VALUE_CODE_1**

Description: Code describing information that may affect payer processing.

Coding Scheme:

1	Most common semi-private rate	66	Medicaid spenddown amount
2	Hospital has no semi-private rooms	67	Peritoneal dialysis
4	Inpatient professional component charges which are combined billed	68	EPO-drug
5	Professional component included in charges and also billed separately to carrier	69	State charity care percentage
6	Medicare blood deductible	72	Flat rate surgery charge
8	Medicare life time reserve amount in the first calendar year	73	Drug deductible
9	Medicare coinsurance amount in the first calendar year	74	Drug coinsurance
10	Medicare lifetime reserve amount in the second calendar year	77	New technology add-on payment
11	Medicare coinsurance amount in the second calendar year	A0	Special zip code reporting
12	Working aged beneficiary/spouse with employer group health plan	A1	Deductible payer A
13	ESRD beneficiary in a Medicare coordination period with an employer group health plan	A2	Coinsurance payer A
14	No fault, including auto/other	A3	Estimated responsibility payer A
15	Worker's compensation	A4	Covered self-administrable drugs - emergency
16	Public health service (PHS) or other federal agency	A5	Covered self-administrable drugs - administrable in form and situation furnished to patient
21	Catastrophic	A6	Covered self-administrable drugs - diagnostic study and other
22	Surplus	A7	Co-payment payer A
23	Recurring monthly income	A8	Patient weight
24	Medicaid Rate Code	A9	Patient height
25	Offset to the patient - payment amount - prescription drugs	AA	Regulatory surcharges, assessments, allowances or health care related taxes - payer A
26	Offset to the patient - payment amount - hearing and ear services	AB	Other assessments or allowances (e.g., medical education) - payer A
27	Offset to the patient - payment amount - vision and eye services	B1	Deductible payer B
28	Offset to the patient - payment amount - dental services	B2	Coinsurance payer B
29	Offset to the patient - payment amount - chiropractic services	B3	Estimated responsibility payer B
30	Preadmission testing	B7	Co-payment payer B
31	Patient Liability Amount	BA	Regulatory surcharges, assessments, allowances or health care related taxes - payer B

32	Multiple patient ambulance transport	BB	Other assessments or allowances (e.g., medical education) - payer B
33	Offset to the patient - payment amount - podiatric services	C1	Deductible payer C
34	Offset to the patient - payment amount - other medical services	C2	Coinsurance payer C
35	Offset to the patient - payment amount - health insurance premiums	C3	Estimated responsibility payer C
37	Pints of blood furnished	C7	Co-payment payer C
38	Blood deductible pints	CA	Regulatory surcharges, assessments, allowances or health care related taxes - payer C
39	Pints of blood replaced	CB	Other assessments or allowances (e.g., medical education) - payer C
40	New coverage not implemented by HMO	D3	Patient estimated responsibility
41	Black lung	E1	Deductible Payer D
42	VA	E2	Coinsurance Payer D
43	Disabled beneficiary under age 65 with LGHP	E3	Coinsurance Payer D
44	Amount provider agreed to accept from primary payer when this amount is less than charges but higher than payment received	E7	Co-payment payer D
45	Accident hour	EA	Regulatory surcharges, assessments, allowances or health care related taxes - payer D
46	Number of grace days	EB	Other assessments or allowances (e.g. medical education) - payer D
47	Any liability insurance	F1	Deductible Payer E
48	Hemoglobin reading	F2	Coinsurance Payer E
49	Hematocrit reading	F3	Coinsurance Payer E
50	PT visits	F7	Co-payment payer E
51	OT visits	FA	Regulatory surcharges, assessments, allowances or health care related taxes - payer E
52	ST visits	FB	Other assessments or allowances (e.g. medical education) - payer E
53	Cardiac rehab visits	G1	Deductible Payer F
54	Newborn birth weight in grams	G1	Deductible Payer F
55	Eligibility threshold for charity care	G2	Coinsurance Payer F
56	Skilled nurse - home visit hours	G3	Coinsurance Payer F
57	Home health aide - home visit hours	G7	Co-payment payer F
58	Arterial blood gas	GA	Regulatory surcharges, assessments, allowances or health care related taxes - payer F
59	Oxygen saturation	GB	Other assessments or allowances (e.g. medical education) - payer F
60	HHA branch MSA	P1	Do not resuscitate order (DNR)
61	Location where service is furnished (HHA and hospice)		

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 99: **VALUE_AMOUNT_1**
Description: Amount (in cents) that may be affected.
Length: 9 **Type:** Alphanumeric **Data Source:** Claim

Field 100: **VALUE_CODE_2**
Description: Code describing information that may affect payer processing.
Coding Scheme: Same as VALUE_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 101: **VALUE_AMOUNT_2**
Description: Amount (in cents) that may be affected.
Length: 9 **Type:** Alphanumeric **Data Source:** Claim

Field 102: **VALUE_CODE_3**
Description: Code describing information that may affect payer processing.
Coding Scheme: Same as VALUE_CODE_1
Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 103: **VALUE_AMOUNT_3**

Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 104:	**VALUE_CODE_4**				
Description:	Code describing information that may affect payer processing.				
Coding Scheme:	Same as VALUE_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 105:	**VALUE_AMOUNT_4**				
Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 106:	**VALUE_CODE_5**				
Description:	Code describing information that may affect payer processing.				
Coding Scheme:	Same as VALUE_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 107:	**VALUE_AMOUNT_5**				
Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 108:	**VALUE_CODE_6**				
Description:	Code describing information that may affect payer processing.				
Coding Scheme:	Same as VALUE_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 109:	**VALUE_AMOUNT_6**				
Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 110:	**VALUE_CODE_7**				
Description:	Code describing information that may affect payer processing.				
Coding Scheme:	Same as VALUE_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 111:	**VALUE_AMOUNT_7**				
Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 112:	**VALUE_CODE_8**				
Description:	Code describing information that may affect payer processing.				
Coding Scheme:	Same as VALUE_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 113:	**VALUE_AMOUNT_8**				
Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 114:	**VALUE_CODE_9**				
Description:	Code describing information that may affect payer processing.				
Coding Scheme:	Same as VALUE_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 115:	**VALUE_AMOUNT_9**				
Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 116:	**VALUE_CODE_10**				
Description:	Code describing information that may affect payer processing.				
Coding Scheme:	Same as VALUE_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 117:	**VALUE_AMOUNT_10**				
Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 118:	**VALUE_CODE_11**				
Description:	Code describing information that may affect payer processing.				
Coding Scheme:	Same as VALUE_CODE_1				

Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 119:	**VALUE_AMOUNT_11**				
Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 120:	**VALUE_CODE_12**				
Description:	Code describing information that may affect payer processing.				
Coding Scheme:	Same as VALUE_CODE_1				
Length:	2	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 121:	**VALUE_AMOUNT_12**				
Description:	Amount (in cents) that may be affected.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 122:	**PAT_REASON_FOR_VISIT**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 123:	**PRINC_DIAG_CODE**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code for the principal diagnosis, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 124:	**OTH_DIAG_CODE_1**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 125:	**OTH_DIAG_CODE_2**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 126:	**OTH_DIAG_CODE_3**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 127:	**OTH_DIAG_CODE_4**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 128:	**OTH_DIAG_CODE_5**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 129:	**OTH_DIAG_CODE_6**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 130:	**OTH_DIAG_CODE_7**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 131:	**OTH_DIAG_CODE_8**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 132:	**OTH_DIAG_CODE_9**				***Available in PUDF***
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable. Decimal is implied following the third character.				

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 133: **OTH_DIAG_CODE_10** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 134: **OTH_DIAG_CODE_11** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 135: **OTH_DIAG_CODE_12** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 136: **OTH_DIAG_CODE_13** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 137: **OTH_DIAG_CODE_14** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 138: **OTH_DIAG_CODE_15** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 139: **OTH_DIAG_CODE_16** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 140: **OTH_DIAG_CODE_17** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 141: **OTH_DIAG_CODE_18** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 142: **OTH_DIAG_CODE_19** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 143: **OTH_DIAG_CODE_20** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 144: **OTH_DIAG_CODE_21** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 145: **OTH_DIAG_CODE_22** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 146: **OTH_DIAG_CODE_23** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 147: **OTH_DIAG_CODE_24** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 148: **RELATED_CAUSE_CODE_1** ***Available in PUDF***

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

Coding Scheme:
AA Auto accident
AB Abuse
AP Another party responsible
EM Employment
OA Other accident

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 149: **RELATED_CAUSE_CODE_2** ***Available in PUDF***

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

Coding Scheme: Same as RELATED_CAUSE_CODE_1

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 150: **RELATED_CAUSE_CODE_3** ***Available in PUDF***

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

Coding Scheme: Same as RELATED_CAUSE_CODE_1

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 151: **E_CODE_1** ***Available in PUDF***

Description: ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable, of the primary external cause of injury. A decimal is implied following the third character.

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 152: **E_CODE_2** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 153: **E_CODE_3** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 154: **E_CODE_4** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 155: **E_CODE_5** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 156: **E_CODE_6** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 157: **E_CODE_7** ***Available in PUDF***

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

Length: 6 **Type:** Alphanumeric **Data Source:** Claim

Field 158: **E_CODE_8** ***Available in PUDF***

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

Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 159:	**E_CODE_9**			***Available in PUDF***	
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 160:	**E_CODE_10**			***Available in PUDF***	
Description:	ICD-9-CM diagnosis code, including the 4th and 5th digits if applicable, of an additional external cause of injury. Decimal is implied following the third character.				
Length:	6	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 161:	**PROC_CODE_1**			***Available in PUDF***	
Description:	Code for the surgical or other procedure with the highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 162:	**PROC_CODE_2**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 163:	**PROC_CODE_3**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 164:	**PROC_CODE_4**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 165:	**PROC_CODE_5**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 166:	**PROC_CODE_6**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 167:	**PROC_CODE_7**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 168:	**PROC_CODE_8**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 169:	**PROC_CODE_9**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 170:	**PROC_CODE_10**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 171:	**PROC_CODE_11**			***Available in PUDF***	
Description:	Code for surgical or other procedure with the next highest charge performed during the period covered by the bill. HCPCS or CPT code.				
Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 172:	**PROC_CODE_12**			***Available in PUDF***	

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 173: **PROC_CODE_13** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 174: **PROC_CODE_14** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 175: **PROC_CODE_15** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 176: **PROC_CODE_16** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 177: **PROC_CODE_17** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 178: **PROC_CODE_18** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 179: **PROC_CODE_19** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 180: **PROC_CODE_20** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 181: **PROC_CODE_21** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 182: **PROC_CODE_22** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 183: **PROC_CODE_23** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 184: **PROC_CODE_24** ***Available in PUDF***

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

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 185: **PROC_CODE_25** ***Available in PUDF***

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

Length:	5	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 186:	**OTHER_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Other Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 002-099, 22X-24X, 52X-53X, 55X-60X, 64X-70X, 76X-78X, 90X-95X, 99X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 187:	**PHARM_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Pharmacy Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 26X, 63X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 188:	**MEDSURG_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Medical/Surgical Supply Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 27X, 62X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 189:	**DME_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Durable Medical Equipment Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue centers 290-292, 294-299.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 190:	**USED_DME_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Used Durable Medical Equipment Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 293.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 191:	**PT_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Physical Therapy Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 42X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 192:	**OT_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Occupational Therapy Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 42X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 193:	**SPEECH_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Speech Pathology Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 44X, 47X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 194:	**IT_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Inhalation Therapy Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 41X, 46X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 195:	**BLOOD_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 38X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 196:	**BLOOD_ADMIN_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 39X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated

Field 197:	**OR_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Operating Room Charge amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 36X, 71X-72X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 198:	**LITH_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Lithotripsy Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 79X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 199:	**CARD_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Cardiology Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 48X, 73X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 200:	**ANES_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Anesthesia Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 37X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 201:	**LAB_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Laboratory Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 30X-31X, 74X-75X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 202:	**RAD_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Radiology Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 28X, 32X-35X, 40X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 203:	**MRI_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, MRI Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 61X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 204:	**OP_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Outpatient Services Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 49X-50X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 205:	**ER_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Emergency Room Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 45X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 206:	**AMBULANCE_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Ambulance Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 54X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 207:	**PRO_FEE_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Professional Fee Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 96X-98X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated

Field 208:	**ORGAN_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Organ Acquisition Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 81X, 89X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 209:	**ESRD_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, End Stage Renal Dialysis Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 80X, 82X-88X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 210:	**CLINIC_AMOUNT**			***Available in PUDF***	
Description:	Ancillary Service Charge, Clinic Visit Charge Amount. Calculated using MEDPAR algorithm. Sum (in cents) of charges associated with revenue codes other than 0100-0219, revenue center 51X.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 211:	**CLAIM_TOTAL_CHARGES**			***Available in PUDF***	
Description:	Sum (in cents) of accommodation charges, non-covered accommodation charges, ancillary charges, non-covered ancillary charges.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 212:	**CLAIM_NON_COV_CHARGES**			***Available in PUDF***	
Description:	Sum (in cents) of non-covered accommodation charges, non-covered ancillary charges.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 213:	**CLAIM_CHARGES_ANCIL**			***Available in PUDF***	
Description:	Sum (in cents) of covered and non-covered ancillary charges.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 214:	**CLAIM_NON_COV_CHARGES_ANCIL**			***Available in PUDF***	
Description:	Sum (in cents) of non-covered ancillary charges.				
Length:	12	**Type:**	Numeric	**Data Source:**	Calculated
Field 215:	**PHYSICIAN_1_INDEX_NUMBER**			***Available in PUDF, with suppression***	
Description:	Uniform identifier assigned to the licensed physician reported as the Operating Physician, if reported in the 837 Institutional Guide format, or Rendering Physician 1, if reported in the 837 Professional Guide format. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include a health practitioner other than a physician who provides a diagnostic or therapeutic procedure related to the outpatient's surgical or radiological procedure, including a technician, psychologist, chiropractor, dentist, nurse practitioner, nurse midwife or podiatrist, authorized by the facility to treat patients.				
Length:	10	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 216:	**PHYSICIAN_2_INDEX_NUMBER**			***Available in PUDF, with suppression***	
Description:	Uniform identifier assigned to the licensed physician reported as the other provider, if reported in the 837 Institutional Guide format, or the Rendering Physician 2, if reported in the 837 Professional Guide format. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include a health practitioner other than a physician who provides a diagnostic or therapeutic procedure related to the outpatient's surgical or radiological procedure, including a technician, psychologist, chiropractor, dentist, nurse practitioner, nurse midwife or podiatrist, authorized by the facility to treat patients.				
Length:	10	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 217:	**CERT_STATUS**				
Description:	Assignment of a code to indicate the certification of data and submission of comments by the hospital. First available 3rd quarter 1999.				

1 Certified, without comment
2 Certified, with comment
3 Certified, with comment, comment not received by deadline
4 Hospital elected not to certify
5 Hospital closed, data not certified
6 Hospital out of compliance, did not certify data

Length:	1	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 218:	**PROCESS_DATE**				
Description:	Date record was processed and certified.				
Length:	8	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 219:	**WARNING_802_INDC**				
Description:	Warning 802- Claims for this encounter include more than one non-payment admission-thru-discharge claim.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 220:	**WARNING_803_INDC**				
Description:	Warning 803- Claims for this encounter include more than one admission-thru-discharge claim.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 221:	**WARNING_817_INDC**				
Description:	Warning 817- Claims for this encounter contain different codes for patient ethnicity.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 222:	**WARNING_818_INDC**				
Description:	Warning 818- Claims for this encounter contain different values for patient race.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 223:	**WARNING_819_INDC**				
Description:	Warning 819- Claims for this encounter contain different codes for patient gender.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 224:	**WARNING_820_INDC**				
Description:	Warning 820- The claims for this encounter contain different patient birth dates.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 225:	**WARNING_821_INDC**				
Description:	Warning 821- Claims for this encounter have different patient first names.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 226:	**WARNING_824_INDC**				
Description:	Warning 824- The claims for the encounter have different claim filing indicator codes for the subscriber.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 227:	**WARNING_816_INDC**				
Description:	Warning 816- Claims for this encounter have different patient SSNs.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim
Field 228:	**INST_PROF_INDICATOR (INPUT_FORMAT)** ***Available in PUDF***				
Description:	Format in which the outpatient data file was submitted by the facility.				
Coding Scheme:	0 837 Professional 1 837 Institutional				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 229:	**INBOUND_INDICATOR**				
Description:	The type of submission for entry into the THCIC system. For files submitted in 2004 or before, the INBOUND_INDICATOR value may contain a "U" for UB04 formatted file. If the claim came from an 837 4010 format submitted file, the INBOUND_INDICATOR will contain an "8". If the claim was entered via WebClaim, the INBOUND_INDICATOR will contain a blank. If the claim came from an 837 5010 format submitted file, the INBOUND_INDICATOR will contain a "5".				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Claim

CLASSIFICATION DATA FILE

Field 1:	**RECORD_ID**			***Available in PUDF***
Description:	Record Identification Number. Unique number assigned to identify the record.			
Length:	12	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 2:	**CCS_ PRIN_DIAG_CODE**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of PRIN_DIAG_CODE into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 3:	**CCS_ OTH_DIAG_CODE_1**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_1 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 4:	**CCS_ OTH_DIAG_CODE_2**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_2 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 5:	**CCS_ OTH_DIAG_CODE_3**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_3 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 6:	**CCS_ OTH_DIAG_CODE_4**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_4 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 7:	**CCS_ OTH_DIAG_CODE_5**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_5 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 8:	**CCS_ OTH_DIAG_CODE_6**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_6 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 9:	**CCS_ OTH_DIAG_CODE_7**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_7 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 10:	**CCS_ OTH_DIAG_CODE_8**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_8 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 11:	**CCS_ OTH_DIAG_CODE_9**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_9 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 12:	**CCS_ OTH_DIAG_CODE_10**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_10 into clinically meaningful diagnosis category.			
Length:	4	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 13:	**CCS_ OTH_DIAG_CODE_11**			***Available in PUDF***
Description:	Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_11 into clinically meaningful diagnosis category.			

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 14: **CCS_ OTH_DIAG_CODE_12** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_12 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 15: **CCS_ OTH_DIAG_CODE_13** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_13 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 16: **CCS_ OTH_DIAG_CODE_14** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_14 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 17: **CCS_ OTH_DIAG_CODE_15** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_15 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 18: **CCS_ OTH_DIAG_CODE_16** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_16 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 19: **CCS_ OTH_DIAG_CODE_17** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_17 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 20: **CCS_ OTH_DIAG_CODE_18** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_18 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 21: **CCS_ OTH_DIAG_CODE_19** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_19 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 22: **CCS_ OTH_DIAG_CODE_20** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_20 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 23: **CCS_ OTH_DIAG_CODE_21** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_21 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 24: **CCS_ OTH_DIAG_CODE_22** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_22 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 25: **CCS_ OTH_DIAG_CODE_23** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_23 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 26: **CCS_ OTH_DIAG_CODE_24** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) classification of OTH_DIAG_CODE_24 into clinically meaningful diagnosis category.

Length: 4 **Type:** Alphanumeric **Data Source:** Assigned

Field 27: **CCS_ PROC_CODE_1** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_1 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 28: **CCS_ PROC_CODE_2** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_2 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 29: **CCS_ PROC_CODE_3** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_3 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 30: **CCS_ PROC_CODE_4** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_4 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 31: **CCS_ PROC_CODE_5** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_5 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 32: **CCS_ PROC_CODE_6** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_6 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 33: **CCS_ PROC_CODE_7** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_7 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 34: **CCS_ PROC_CODE_8** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_8 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 35: **CCS_ PROC_CODE_9** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_9 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 36: **CCS_ PROC_CODE_10** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_10 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 37: **CCS_ PROC_CODE_11** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_11 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 38: **CCS_ PROC_CODE_12** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_12 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 39: **CCS_ PROC_CODE_13** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_13 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 40: **CCS_ PROC_CODE_14** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_14 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 41: **CCS_ PROC_CODE_15** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_15 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 42: **CCS_ PROC_CODE_16** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_16 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 43: **CCS_ PROC_CODE_17** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_17 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 44: **CCS_ PROC_CODE_18** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_18 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 45: **CCS_ PROC_CODE_19** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_19 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 46: **CCS_ PROC_CODE_20** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_20 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 47: **CCS_ PROC_CODE_21** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_21 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 48: **CCS_ PROC_CODE_22** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_22 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 49: **CCS_ PROC_CODE_23** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_23 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 50: **CCS_ PROC_CODE_24** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_24 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 51: **CCS_PROC_CODE_25** ***Available in PUDF***

Description: Clinical Classifications Software (CCS) for Services and Procedures classification of PROC_CODE_25 into clinically meaningful procedure category.

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned

Field 52: **FINAL_EAPG_CATEGORY_CODE_1** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 53: **FINAL_EAPG_CATEGORY_CODE_2** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 54: **FINAL_EAPG_CATEGORY_CODE_3** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Beginning Position: 192 **Data Source:** Assigned

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 55: **FINAL_EAPG_CATEGORY_CODE_4** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 56: **FINAL_EAPG_CATEGORY_CODE_5** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 57: **FINAL_EAPG_CATEGORY_CODE_6** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 58: **FINAL_EAPG_CATEGORY_CODE_7** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 59: **FINAL_EAPG_CATEGORY_CODE_8** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 60: **FINAL_EAPG_CATEGORY_CODE_9** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 61: **FINAL_EAPG_CATEGORY_CODE_10** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) category code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Beginning Position: 206 **Data Source:** Assigned

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 62: **FINAL_EAPG_TYPE_CODE_1** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 63: **FINAL_EAPG_TYPE_CODE_2** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 64: **FINAL_EAPG_TYPE_CODE_3** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 65: **FINAL_EAPG_TYPE_CODE_4** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 66: **FINAL_EAPG_TYPE_CODE_5** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 67: **FINAL_EAPG_TYPE_CODE_6** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 68: **FINAL_EAPG_TYPE_CODE_7** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 69: **FINAL_EAPG_TYPE_CODE_8** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 70: **FINAL_EAPG_TYPE_CODE_9** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 71: **FINAL_EAPG_TYPE_CODE_10** ***Available in PUDF***

Description: Enhanced Ambulatory Patient Group (EAPG) type code, as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 72: **FINAL_EAPG_1** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 73: **FINAL_EAPG_2** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 74: **FINAL_EAPG_3** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 75: **FINAL_EAPG_4** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 76: **FINAL_EAPG_5** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 77: **FINAL_EAPG_6** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 78: **FINAL_EAPG_7** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 79: **FINAL_EAPG_8** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 80: **FINAL_EAPG_9** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 81: **FINAL_EAPG_10** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 82: **ADJUSTED_EAPG_WEIGHT_1** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 83: **ADJUSTED_EAPG_WEIGHT_2** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 84: **ADJUSTED_EAPG_WEIGHT_3** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 85: **ADJUSTED_EAPG_WEIGHT_4** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 86: **ADJUSTED_EAPG_WEIGHT_5** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 87: **ADJUSTED_EAPG_WEIGHT_6** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 88: **ADJUSTED_EAPG_WEIGHT_7** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 89: **ADJUSTED_EAPG_WEIGHT_8** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 90: **ADJUSTED_EAPG_WEIGHT_9** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 91: **ADJUSTED_EAPG_WEIGHT_10** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 92: **EAPG_GRP_VER** ***Available in PUDF***

Description: Final Enhanced Ambulatory Patient Group (EAPG), as assigned by 3M EAPG Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 93: **CRG_STATUS_1** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 94: **CRG_STATUS_2** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 95: **CRG_STATUS_3** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 96: **CRG_STATUS_4** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 97: **CRG_STATUS_5** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 98: **CRG_STATUS_6** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 99: **CRG_STATUS_7** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 100: **CRG_STATUS_8** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 101: **CRG_STATUS_9** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 102: **CRG_STATUS_10** ***Available in PUDF***

Description: Clinical Risk Group (CRG) status code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 103: **CRG_CODE_1** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 104: **CRG_CODE_2** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 105: **CRG_CODE_3** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 106: **CRG_CODE_4** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 107: **CRG_CODE_5** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 108: **CRG_CODE_6** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 109: **CRG_CODE_7** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 110: **CRG_CODE_8** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 111: **CRG_CODE_9** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 112: **CRG_CODE_10** ***Available in PUDF***

Description: Clinical Risk Group (CRG) code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 113: **CRG_SEVERITY_1** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 114: **CRG_SEVERITY_2** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 115: **CRG_SEVERITY_3** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 116: **CRG_SEVERITY_4** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 117: **CRG_SEVERITY_5** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 118: **CRG_SEVERITY_6** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 119: **CRG_SEVERITY_7** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 120: **CRG_SEVERITY_8** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 121: **CRG_SEVERITY_9** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 122: **CRG_SEVERITY_10** ***Available in PUDF***

Description: Clinical Risk Group (CRG) severity code as assigned by 3M CRG Grouper, version 26. Not available 4Q09.

Length: 1 **Type:** Alphanumeric **Data Source:** Assigned

Field 123: **APC_PROCEDURE_CODE_1** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 124: **APC_PROCEDURE_CODE_2** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 125: **APC_PROCEDURE_CODE_3** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 126: **APC_PROCEDURE_CODE_4** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 127: **APC_PROCEDURE_CODE_5** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 128: **APC_PROCEDURE_CODE_6** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 129: **APC_PROCEDURE_CODE_7** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 130: **APC_PROCEDURE_CODE_8** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 131: **APC_PROCEDURE_CODE_9** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 132: **APC_PROCEDURE_CODE_10** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure code as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 5 **Type:** Alphanumeric **Data Source:** Assigned

Field 133: **APC_PX_STATUS_IND_CODE_1** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 134: **APC_PX_STATUS_IND_CODE_2** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 135: **APC_PX_STATUS_IND_CODE_3** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 136: **APC_PX_STATUS_IND_CODE_4** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 137: **APC_PX_STATUS_IND_CODE_5** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 138: **APC_PX_STATUS_IND_CODE_6** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 139: **APC_PX_STATUS_IND_CODE_7** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 140: **APC_PX_STATUS_IND_CODE_8** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 141: **APC_PX_STATUS_IND_CODE_9** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 142: **APC_PX_STATUS_IND_CODE_10** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) procedure status indicator as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 2 **Type:** Alphanumeric **Data Source:** Assigned

Field 143: **APC_WEIGHT_1** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 9 **Type:** Alphanumeric **Data Source:** Assigned

Field 144: **APC_WEIGHT_2** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 9 **Type:** Alphanumeric **Data Source:** Assigned

Field 145: **APC_WEIGHT_3** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 9 **Type:** Alphanumeric **Data Source:** Assigned

Field 146: **APC_WEIGHT_4** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 9 **Type:** Alphanumeric **Data Source:** Assigned

Field 147: **APC_WEIGHT_5** ***Available in PUDF***

Description: Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.

Length: 9 **Type:** Alphanumeric **Data Source:** Assigned

Field 148: **APC_WEIGHT_6** ***Available in PUDF***

Description:	Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 149:	**APC_WEIGHT_7**			***Available in PUDF***	
Description:	Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 150:	**APC_WEIGHT_8**			***Available in PUDF***	
Description:	Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 151:	**APC_WEIGHT_9**			***Available in PUDF***	
Description:	Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 152:	**APC_WEIGHT_10**			***Available in PUDF***	
Description:	Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 153:	**APC_GRP_VER**			***Available in PUDF***	
Description:	Ambulatory Payment Classification (APC) weighting as assigned by 3M APC Grouper, version 26. Not available 4Q09.				
Length:	9	**Type:**	Alphanumeric	**Data Source:**	Assigned

CHARGES DATA FILE

Field 1:	**RECORD_ID**			***Available in PUDF***	
Description:	Record Identification Number. Unique number assigned to identify the record.				
Length:	12	**Type:**	Alphanumeric	**Data Source:**	Assigned
Field 2:	**REVENUE_CODE**			***Available in PUDF***	
Description:	Code corresponding to each specific accommodation, ancillary service or billing calculation related to the services being billed.				

Coding Scheme:

100	All-inclusive room charges plus ancillary	516	Clinic - urgent care
101	All-inclusive room charges	517	Clinic - family practice
110	Room charges for private rooms - general	519	Clinic - other
111	Room charges for private rooms - medical/surgical/GYN	520	Freestanding Clinic - general
112	Room charges for private rooms - obstetrics	521	Freestanding Clinic - Clinic Visit by Member to RHC/FQHC
113	Room charges for private rooms - pediatric	522	Freestanding Clinic - Home Visit by RHC/FQHC Practitioner
114	Room charges for private rooms - psychiatric	523	Freestanding Clinic - family practice
115	Room charges for private rooms - hospice	524	Freestanding Clinic - Visit by RHC/FQHC Practitioner to a Member in a Covered Part A Stay at SNF
116	Room charges for private rooms - detoxification	525	Freestanding Clinic - Visit by RHC/FQHC Practitioner to a Member in a SNF (not Covered Part A Stay) or NF or ICF MR or Other Residential Facility
117	Room charges for private rooms - oncology	526	Freestanding Clinic - urgent care
118	Room charges for private rooms - rehabilitation	527	Freestanding Clinic - Visiting Nurse Services(s) to a Member's Home when in a Home Health Shortage Area

119	Room charges for private rooms - other	528	Freestanding Clinic – Visit by RHC/FQHC Practitioner to Other non RHC/FQHC Site (e.g. Scene of Accident)
120	Room charges for semi-private rooms - general	529	Freestanding Clinic - other
121	Room charges for semi-private rooms - medical/surgical/GYN	530	Osteopathic service - general
122	Room charges for semi-private rooms - obstetrics	531	Osteopathic service - therapy
123	Room charges for semi-private rooms - pediatric	539	Osteopathic service - other
124	Room charges for semi-private rooms - psychiatric	540	Ambulance service - general
125	Room charges for semi-private rooms - hospice	541	Ambulance service - supplies
126	Room charges for semi-private rooms - detoxification	542	Ambulance service - medical transport
127	Room charges for semi-private rooms - oncology	543	Ambulance service - heart mobile
128	Room charges for semi-private rooms - rehabilitation	544	Ambulance service - oxygen
129	Room charges for semi-private rooms - other	545	Ambulance service - air ambulance
130	Room charges for semi-private - 3/4 beds - rooms - general	546	Ambulance service - neonatal
131	Room charges for semi-private - 3/4 beds - rooms - medical/surgical/GYN	547	Ambulance service - pharmacy
132	Room charges for semi-private - 3/4 beds - rooms - obstetrics	548	Ambulance service - telephone transmission EKG
133	Room charges for semi-private - 3/4 beds - rooms - pediatric	549	Ambulance service - other
134	Room charges for semi-private - 3/4 beds - rooms - psychiatric	550	Skilled nursing - general
135	Room charges for semi-private - 3/4 beds - rooms - hospice	551	Skilled nursing - visit charge
136	Room charges for semi-private - 3/4 beds - rooms - detoxification	552	Skilled nursing - hourly charge
137	Room charges for semi-private - 3/4 beds - rooms - oncology	559	Skilled nursing - other
138	Room charges for semi-private - 3/4 beds - rooms - rehabilitation	560	Medical social services - general
139	Room charges for semi-private - 3/4 beds - rooms - other	561	Medical social services - visit charge
140	Room charges for private (deluxe) rooms - general	562	Medical social services - hourly charge
141	Room charges for private (deluxe) rooms - medical/surgical/GYN	569	Medical social services - other
142	Room charges for private (deluxe) rooms - obstetrics	570	Home health aide - general
143	Room charges for private (deluxe) rooms - pediatric	571	Home health aide - visit charge
144	Room charges for private (deluxe) rooms - psychiatric	572	Home health aide - hourly charge
145	Room charges for private (deluxe) rooms - hospice	579	Home health aide - other
146	Room charges for private (deluxe) rooms - detoxification	580	Other visits (home health) - general
147	Room charges for private (deluxe) rooms - oncology	581	Other visits (home health) - visit charge
148	Room charges for private (deluxe) rooms - rehabilitation	582	Other visits (home health) - hourly charge
149	Room charges for private (deluxe) rooms - other	583	Other visits (home health) - assessment
150	Room charges for ward rooms - general	589	Other visits (home health) - other
151	Room charges for ward rooms - medical/surgical/GYN	590	Units of service (home health) - general
152	Room charges for ward rooms - obstetrics	599	Units of service (home health) - other
153	Room charges for ward rooms - pediatric	600	Oxygen (home health) - general
154	Room charges for ward rooms - psychiatric	601	Oxygen (home health) - stat/equip/supply or contents

155	Room charges for ward rooms - hospice	602	Oxygen (home health) - stat/equip/supply under 1 liter per minute
156	Room charges for ward rooms - detoxification	603	Oxygen (home health) - stat/equip/supply over 4 liters per minute
157	Room charges for ward rooms - oncology	604	Oxygen (home health) - portable add-in
158	Room charges for ward rooms - rehabilitation	610	MRI - general
159	Room charges for ward rooms - other	611	MRI - brain (including brain stem)
160	Room charges for other rooms - general	612	MRI - spinal cord (including spine)
161	Room charges for other rooms - medical/surgical/GYN	619	MRI - other
162	Room charges for other rooms - obstetrics	621	Medical/surgical supplies - incident to radiology
163	Room charges for other rooms - pediatric	622	Medical/surgical supplies - incident to other diagnostic services
164	Room charges for other rooms - psychiatric	623	Medical/surgical supplies - surgical dressings
165	Room charges for other rooms - hospice	624	Medical/surgical supplies - FDA investigational devices
166	Room charges for other rooms - detoxification	630	Drugs requiring specific identification - general
167	Room charges for other rooms - oncology	631	Drugs requiring specific identification - single source
168	Room charges for other rooms - rehabilitation	632	Drugs requiring specific identification - multiple source
169	Room charges for other rooms - other	633	Drugs requiring specific identification - restrictive prescription
170	Room charges for nursery - general	634	Drugs requiring specific identification - EPO, less than 10,000 units
171	Room charges for nursery - newborn level I	635	Drugs requiring specific identification - EPO, 10,000 or more units
172	Room charges for nursery - newborn level II	636	Drugs requiring specific identification - requiring detailed coding
173	Room charges for nursery - newborn level III	637	Drugs requiring specific identification - self-administrable not requiring detailed coding
174	Room charges for nursery - newborn level IV	640	Home IV therapy services - general
179	Room charges for nursery - other	641	Home IV therapy services - nonroutine nursing, central line
180	Room charges for LOA - general	642	Home IV therapy services - IV site care, central line
182	Room charges for LOA - patient convenience-charges billable	643	Home IV therapy services - IV start/change, peripheral line
183	Room charges for LOA - therapeutic leave	644	Home IV therapy services - nonroutine nursing, peripheral line
184	Room charges for LOA - ICF mentally retarded - any reason	645	Home IV therapy services - training patient/caregiver, central line
185	Room charges for LOA - hospitalization	646	Home IV therapy services - training, disabled patient, central line
189	Room charges for LOA - other	647	Home IV therapy services - training, patient/caregiver, peripheral
190	Room charges for subacute care - general	648	Home IV therapy services - training, disabled patient, peripheral
191	Room charges for subacute care - Level I (skilled care)	649	Home IV therapy services - other
192	Room charges for subacute care - Level II (comprehensive care)	650	Hospice services - general
193	Room charges for subacute care - Level III (complex care)	651	Hospice services - routine home care
194	Room charges for subacute care - Level IV (intensive care)	652	Hospice services - continuous home care
199	Room charges for subacute care - other	655	Hospice services - inpatient respite care
200	Room charges for intensive care - general	656	Hospice services - general inpatient care (nonrespite)
201	Room charges for intensive care - surgical	657	Hospice services - physician services
202	Room charges for intensive care - medical	658	Hospice services - room and board - nursing facility
203	Room charges for intensive care - pediatric	659	Hospice services - other
204	Room charges for intensive care - psychiatric	660	Respite care - general

206	Room charges for intensive care - intermediate intensive care unit (ICU)	661	Respite care - hourly charge/skilled nursing
207	Room charges for intensive care - burn care	662	Respite care - hourly charge/aide/homemaker/companion
208	Room charges for intensive care - trauma	663	Respite care - daily charge
209	Room charges for intensive care - other	669	Respite care - other
210	Room charges for coronary care - general	670	Outpatient special residence - general
211	Room charges for coronary care - myocardial infarction	671	Outpatient special residence - hospital based
212	Room charges for coronary care - pulmonary care	672	Outpatient special residence - contracted
213	Room charges for coronary care - heart transplant	679	Outpatient special residence - other
214	Room charges for coronary care - intermediate coronary care unit (CCU)	681	Trauma response - level I
219	Room charges for coronary care - other	682	Trauma response - level II
220	Special charges - general	683	Trauma response - level III
221	Special charges - admission charge	684	Trauma response - level IV
222	Special charges - technical support charge	689	Trauma response - other
223	Special charges - UR service charge	700	Cast Room services - general
224	Special charges - late discharge, medically necessary	709	Cast Room services - other
229	Special charges - other	710	Recovery Room services - general
230	Incremental nursing care - general	719	Recovery Room services - other
231	Incremental nursing care - nursery	720	Labor/Delivery Room services - general
232	Incremental nursing care - OB	721	Labor/Delivery Room services - labor
233	Incremental nursing care - ICU (includes transitional care)	722	Labor/Delivery Room services - delivery
234	Incremental nursing care - CCU (includes transitional care)	723	Labor/Delivery Room services - circumcision
235	Incremental nursing care - hospice	724	Labor/Delivery Room services - birthing center
239	Incremental nursing care - other	729	Labor/Delivery Room services - other
240	All-inclusive ancillary - general	730	EKG/ECG services - general
249	All-inclusive ancillary - other	731	EKG/ECG services - halter monitor
250	Pharmacy - general	732	EKG/ECG services - telemetry
251	Pharmacy - generic drugs	739	EKG/ECG services - other
252	Pharmacy - nongeneric drugs	740	EEG services - general
253	Pharmacy - take-home drugs	749	EEG services - other
254	Pharmacy - drugs incident to other diagnostic services	750	Gastrointestinal services - general
255	Pharmacy - drugs incident to radiology	759	Gastrointestinal services - other
256	Pharmacy - experimental drugs	760	Treatment or observation room services - general
257	Pharmacy - nonprescription	761	Specialty Room - Treatment/ Observation Room - Treatment Room
258	Pharmacy - IV solutions	762	Specialty Room - Treatment/ Observation Room - Observation Room
259	Pharmacy - other		
260	IV Therapy - general	769	Treatment or observation room services - other
261	IV Therapy - infusion pump	770	Preventive care services - general
262	IV Therapy - pharmacy services	771	Preventive care services - vaccine administration
263	IV Therapy - drug/supply delivery	779	Preventive care services - other
264	IV Therapy - supplies	780	Telemedicine services - general
269	IV Therapy - other	789	Telemedicine services - other
270	Medical surgical supplies and devices - general	790	Lithotripsy services - general
271	Medical surgical supplies and devices - nonsterile	790	Extra-corporeal shockwave therapy - general
272	Medical surgical supplies and devices - sterile	799	Extra-corporeal shockwave therapy - other
273	Medical surgical supplies and devices - take-home	799	Lithotripsy services - other

274	Medical surgical supplies and devices - prosthetic/orthotic	800	Inpatient renal dialysis services - general
275	Medical surgical supplies and devices - pacemaker	801	Inpatient renal dialysis services - hemodialysis
276	Medical surgical supplies and devices - intraocular lens (IOL)	802	Inpatient renal dialysis services - peritoneal (non-CAPD)
277	Medical surgical supplies and devices - oxygen - take-home	803	Inpatient renal dialysis services - continuous ambulatory peritoneal dialysis (CAPD)
278	Medical surgical supplies and devices - other implants	804	Inpatient renal dialysis services - continuous cycling peritoneal dialysis (CAPD)
279	Medical surgical supplies and devices - other	809	Inpatient renal dialysis services - other
280	Oncology - general	810	Organ acquisition - general
289	Oncology - other	811	Organ acquisition - living donor
290	DME - general	812	Organ acquisition - cadaver donor
291	DME - rental	813	Organ acquisition - unknown donor
292	DME - purchase of new	814	Organ acquisition - unsuccessful organ search-donor bank charges
293	DME - purchase of used	819	Organ acquisition - other donor
294	DME - supplies/drugs for DME effectiveness	820	Hemodialysis - outpatient or home - general
299	DME - other equipment	821	Hemodialysis - outpatient or home - composite or other rate
300	Laboratory - general	825	Hemodialysis - outpatient or home - support services
301	Laboratory - chemistry	829	Hemodialysis - outpatient or home - other
302	Laboratory - immunology	830	Peritoneal dialysis - outpatient or home - general
303	Laboratory - renal patient (home)	831	Peritoneal dialysis - outpatient or home - composite or other rate
304	Laboratory - nonroutine dialysis	835	Peritoneal dialysis - outpatient or home - support services
305	Laboratory - hemotology	839	Peritoneal dialysis - outpatient or home - other
306	Laboratory - bacteriology and microbiology	840	CAPD - outpatient or home - general
307	Laboratory - urology	841	CAPD - outpatient or home - composite or other rate
309	Laboratory - other	845	CAPD - outpatient or home - support services
310	Laboratory pathological - general	849	CAPD - outpatient or home - other
311	Laboratory pathological - cytology	850	CCPD - outpatient or home - general
312	Laboratory pathological - histology	851	CCPD - outpatient or home - composite or other rate
313	Laboratory pathological - biopsy	855	CCPD - outpatient or home - support services
319	Laboratory pathological - other	859	CCPD - outpatient or home - other
320	Radiology - diagnostic - general	880	Miscellaneous dialysis - general
321	Radiology - diagnostic - angiocardiography	881	Miscellaneous dialysis - ultrafiltration
322	Radiology - diagnostic - arthrography	882	Miscellaneous dialysis - home aide visit
323	Radiology - diagnostic - arteriography	889	Miscellaneous dialysis - other
324	Radiology - diagnostic - chest x-ray	900	Behavior health treatments/services - general
329	Radiology - diagnostic - other	901	Behavior health treatments/services - electroshock
330	Radiology - therapeutic and/or chemotherapy administration - general	902	Behavior health treatments/services - milieu therapy
331	Radiology - therapeutic and/or chemotherapy administration - chemotherapy - injected	903	Behavioral health treatments/services - play therapy
332	Radiology - therapeutic and/or chemotherapy administration - chemotherapy - oral	904	Behavior health treatments/services - activity therapy
333	Radiology - therapeutic and/or chemotherapy administration - radiation therapy	905	Behavior health treatments/services - intensive outpatient services - psychiatric
335	Radiology - therapeutic and/or chemotherapy administration - chemotherapy - IV	906	Behavior health treatments/services - intensive outpatient services - chemical dependency
339	Radiology - therapeutic and/or chemotherapy administration - other	907	Behavior health treatments/services - community behavioral health program
340	Nuclear medicine - general	909	Behavior health treatments - other
341	Nuclear medicine - diagnostic procedures	910	Reserved

342	Nuclear medicine - therapeutic procedures	911	Behavior health treatment/services - rehabilitation
343	Nuclear medicine - diagnostic radiopharmaceuticals	912	Behavior health treatment/services - partial hospitalization - less intensive
344	Nuclear medicine - therapeutic radiopharmaceuticals	913	Behavior health treatment/services - partial hospitalization - intensive
349	Nuclear medicine - other	914	Behavior health treatment/services - individual therapy
350	CT scan - general	915	Behavior health treatment/services - group therapy
351	CT scan - head	916	Behavior health treatment/services - family therapy
352	CT scan - body	917	Behavior health treatment/services - biofeedback
359	CT scan - other	918	Behavior health treatment/services - testing
360	Operating room services - general	919	Behavior health treatment/services - other
361	Operating room services - minor surgery	920	Other diagnostic services - general
362	Operating room services - organ transplant other than kidney	921	Other diagnostic services - peripheral vascular lab
367	Operating room services - kidney transplant	922	Other diagnostic services - electromyelogram
369	Operating room services - other	923	Other diagnostic services - pap smear
370	Anesthesia - general	924	Other diagnostic services - allergy test
371	Anesthesia - incident to radiology	925	Other diagnostic services - pregnancy test
372	Anesthesia - incident to other diagnostic services	929	Other diagnostic services - other
374	Anesthesia - acupuncture	931	Medical rehabilitation day program - half day
379	Anesthesia - other	932	Medical rehabilitation day program - full day
380	Blood - general	940	Other therapeutic services - general
381	Blood - packed red cells	941	Other therapeutic services - recreational therapy
382	Blood - whole blood	942	Other therapeutic services - education/training
383	Blood - plasma	943	Other therapeutic services - cardiac rehabilitation
384	Blood - platelets	944	Other therapeutic services - drug rehabilitation
385	Blood - leukocytes	945	Other therapeutic services - alcohol rehabilitation
386	Blood - other components	946	Other therapeutic services - complex medical equipment - routine
387	Blood - other derivatives (cryoprecipitates)	947	Other therapeutic services - complex medical equipment - ancillary
389	Blood - other	949	Other therapeutic services - other
390	Blood and blood component administration, storage and processing - general	960	Professional fees - general
391	Blood and blood component administration, storage and processing - administration	961	Professional fees - psychiatric
399	Blood and blood component administration, storage and processing - other	962	Professional fees - ophthalmology
400	Other imaging services - general	963	Professional fees - anesthesiologist (MD)
401	Other imaging services - diagnostic mammography	964	Professional fees - anesthetist (CRNA)
402	Other imaging services - ultrasound	969	Professional fees - other
403	Other imaging services - screening mammography	970	Professional fees - general
404	Other imaging services - PET	971	Professional fees - laboratory
409	Other imaging services - other	972	Professional fees - radiology - diagnostic
410	Respiratory services - general	973	Professional fees - radiology - therapeutic
412	Respiratory services - inhalation	974	Professional fees - radiology - nuclear medicine
413	Respiratory services - hyperbaric oxygen therapy	975	Professional fees - operating room
419	Respiratory services - other	976	Professional fees - respiratory therapy
420	Physical therapy - general	977	Professional fees - physical therapy
421	Physical therapy - visit charge	978	Professional fees - occupational therapy
422	Physical therapy - hourly charge	979	Professional fees - speech therapy

423	Physical therapy - group rate	980	Professional fees - general
424	Physical therapy - evaluation or reevaluation	981	Professional fees - emergency room
429	Physical therapy - other	982	Professional fees - outpatient services
430	Occupational therapy - general	983	Professional fees - clinic
431	Occupational therapy - visit charge	984	Professional fees - medical social services
432	Occupational therapy - hourly charge	985	Professional fees - EKG
433	Occupational therapy - group rate	986	Professional fees - EEG
434	Occupational therapy - evaluation or reevaluation	987	Professional fees - hospital visit
439	Occupational therapy - other	988	Professional fees - consultation
440	Speech-language pathology - general	989	Professional fees - private duty nurse
441	Speech-language pathology - visit charge	990	Patient convenience items - general
442	Speech-language pathology - hourly charge	991	Patient convenience items - cafeteria/guest tray
443	Speech-language pathology - group rate	992	Patient convenience items - private linen service
444	Speech-language pathology - evaluation or reevaluation	993	Patient convenience items - telephone/telegraph
449	Speech-language pathology - other	994	Patient convenience items - TV/radio
450	Emergency room - general	995	Patient convenience items - nonpatient room rentals
451	Emergency room - EMTALA emergency medical screening services	996	Patient convenience items - late discharge charge
452	Emergency room - beyond EMTALA screening	997	Patient convenience items - admission kits
456	Emergency room - urgent care	998	Patient convenience items - beauty shop/barber
459	Emergency room - other	999	Patient convenience items - other
460	Pulmonary function - general	1000	Behavior health accommodations - general
469	Pulmonary function - other	1001	Behavior health accommodations - residential treatment - psychiatric
470	Audiology - general	1002	Behavior health accommodations - residential treatment - chemical dependency
471	Audiology - diagnostic	1003	Behavior health accommodations - supervised living
472	Audiology - treatment	1004	Behavior health accommodations - halfway house
479	Audiology - other	1005	Behavior health accommodations - group home
480	Cardiology - general	2100	Alternative therapy services - general
481	Cardiology - cardiac cath lab	2101	Alternative therapy services - acupuncture
482	Cardiology - stress test	2102	Alternative therapy services - acupressure
483	Cardiology - echocardiology	2103	Alternative therapy services - massage
489	Cardiology - other	2104	Alternative therapy services - reflexology
490	Ambulatory surgical care - general	2105	Alternative therapy services - biofeedback
499	Ambulatory surgical care - other	2106	Alternative therapy services - hypnosis
500	Outpatient services - general	2109	Alternative therapy services - other
509	Outpatient services - other	3101	Adult day care, medical and social - hourly
510	Clinic - general	3102	Adult day care, social - hourly
511	Clinic - chronic pain	3103	Adult day care, medical and social - daily
512	Clinic - dental	3104	Adult day care, social - daily
513	Clinic - psychiatric	3105	Adult foster care - daily
514	Clinic - OB/GYN	3109	Adult foster care - other
515	Clinic - pediatric		

Length: 4 **Type:** Alphanumeric **Data Source:** Claim

Field 3: **HCPCS_QUALIFIER** ***Available in PUDF***

Description: Code identifying the type/source of the descriptive number used in HCPCS Procedure Code.

Length: 2 **Type:** Alphanumeric **Data Source:** Claim

Field 4 **HCPCS_PROCEDURE_CODE** ***Available in PUDF***

Description: HCFA Common Procedure Coding System (HCPCS) code applicable to ancillary services or accommodations.

Coding Scheme: See *http://www.cms.hhs.gov/HCPCSReleaseCodeSets/ANHCPCS/list.asp* for complete list of Level II HCPCS codes.

Length: 5 **Type:** Alphanumeric **Data Source:** Claim

Field 5: **MODIFIER_1** ***Available in PUDF***

Description: Identifies special circumstances related to the performance of the service

Coding Scheme:

0	No assessment completed	F2	Left hand, third digit
1	Medicare 5 day assessment (full)	F3	Left hand, fourth digit
2	Medicare 30 day assessment (full)	F4	Left hand, fifth digit
3	Medicare 60 day assessment (full)	F5	Right hand, thumb
4	Medicare 90 day assessment (full)	F6	Right hand, second digit
7	Medicare 14 day assessment (comprehensive or full)	F7	Right hand, third digit
8	Other Medicare required assessment (OMRA)	F8	Right hand, fourth digit
11	Admission assessment - Medicare 5 day assessment (comprehensive)	F9	Right hand, fifth digit
25	Significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure o	FA	Left hand, thumb
31	SCSA or OMRA/Medicare 5 day assessment (replacement)	G1	Most recent URR of less than 60%
32	SCSA or OMRA/Medicare 30 day assessment (replacement)	G2	Most recent URR of 60% to 64%
33	SCSA or OMRA/Medicare 60 day assessment (replacement)	G3	Most recent URR of 65% to 69.9%
34	SCSA or OMRA/Medicare 90 day assessment (replacement)	G4	Most recent URR of 70% to 74.9%
37	SCSA or OMRA/Medicare 14 day assessment (replacement)	G5	Most recent URR of 75% or greater
38	Significant change in status assessment (SCSA)	GN	Service delivered personally by a speech-language pathologist or under an outpatient speech-language pathology plan of care.
41	Significant correction of prior full assessment/Medicare 5 day assessment	GO	Service delivered personally by an occupational therapist or under an outpatient occupational therapy plan of care.
42	Significant correction of prior full assessment/Medicare 30 day assessment	GP	Service delivered personally by a physical therapist or under an outpatient physical therapy plan of care.
43	Significant correction of prior full assessment/Medicare 60 day assessment	LC	Left circumflex coronary artery
44	Significant correction of prior full assessment/Medicare 90 day assessment	LD	Left anterior descending coronary artery
47	Significant correction of prior full assessment/Medicare 14 day assessment	LT	Left side of the body procedure
48	Significant correction of prior full assessment/OMRA or SCSA	QM	Ambulance service provided under arrangement by a provider of services
50	Bilateral procedure	QN	Ambulance service furnished directly by a provider of services
52	Reduced services	QP	Documentation exists showing that the laboratory test(s) was ordered individually, or as CPT-recognized panel other than profile
53	Discontinued procedure	RC	Right coronary artery
54	Quarterly review assessment - Medicare 90 assessment (full)	RT	Right side of the body procedure
58	Staged or related procedure or service by the same physician during the postoperative period	T1	Left foot, second digit
59	Distinct procedural service	T2	Left foot, third digit
76	Repeat procedure by same physician	T3	Left foot, fourth digit
77	Repeat procedure by another physician	T4	Left foot, fifth digit
78	Return to the operating room for a related procedure during the postoperative period	T5	Right foot, great toe
79	Unrelated procedure of service by the same physician during the postoperative period	T6	Right foot, second digit
E1	Upper left eyelid	T7	Right foot, third digit
E2	Lower left eyelid	T8	Right foot, fourth digit
E3	Upper right eyelid	T9	Right foot, fifth digit

	E4	Lower right eyelid	TA	Left foot, great toe	
	F1	Left hand, second digit			
Length:	2	**Type:** Alphanumeric	**Data Source:**	Claim	
Field 6:	**MODIFIER_2**			***Available in PUDF***	
Description:	Identifies special circumstances related to the performance of the service.				
Coding Scheme:	Same as MODIFIER_1				
Length:	2	**Type:** Alphanumeric	**Data Source:**	Claim	
Field 7:	**MODIFIER_3**			***Available in PUDF***	
Description:	Identifies special circumstances related to the performance of the service.				
Coding Scheme:	Same as MODIFIER_1				
Length:	2	**Type:** Alphanumeric	**Data Source:**	Claim	
Field 8:	**MODIFIER_4**			***Available in PUDF***	
Description:	Identifies special circumstances related to the performance of the service.				
Coding Scheme:	Same as MODIFIER_1				
Length:	2	**Type:** Alphanumeric	**Data Source:**	Claim	
Field 9:	**UNIT_MEASUREMENT_CODE**			***Available in PUDF***	
Description:	Code specifying the units in which a value is being expressed.				
Coding Scheme:	DA Days F2 International unit UN Unit				
Length:	2	**Type:** Alphanumeric	**Data Source:**	Claim	
Field 10:	**UNITS_OF_SERVICE**			***Available in PUDF***	
Description:	Numeric value of quantity				
Length:	7	**Type:** Numeric	**Data Source:**	Claim	
Field 11:	**UNIT_RATE**			***Available in PUDF***	
Description:	Rate per unit				
Length:	12	**Type:** Numeric	**Data Source:**	Claim	
Field 12:	**CHRGS_LINE_ITEM**			***Available in PUDF***	
Description:	Total amount of the charge				
Length:	14	**Type:** Numeric	**Data Source:**	Assigned	
Field 13:	**CHRGS_NON_COV**			***Available in PUDF***	
Description:	Total non-covered amount of the charge				
Length:	14	**Type:** Numeric	**Data Source:**	Assigned	
Field 14:	**PROCEDURE_DATE**				
Description:	Date the procedure began on generally is the same as “Statement_period_from” date.				
Length:	8	**Type:** Alphanumeric	**Data Source:**	Claim	
Field 15:	**PROCEDURE_DATE_THRU**				
Description:	Date the procedure finished on, generally is the same as the “Statement_period_thru” date.				
Length:	8	**Type:** Alphanumeric	**Data Source:**	Claim	
Field 16:	**SERVICE_FACILITY_CODE**				
Description:	Facility Type code – Institutional and Professional have different codes.				
Length:	2	**Type:** Alphanumeric	**Data Source:**	Claim	

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**			***Available in PUDF***
Description:	Provider ID. Unique identifier assigned to the provider by DSHS.			
Length:	6	**Type:** Alphanumeric	**Data Source:**	Assigned
Field 2	**PROVIDER_NAME**			***Available in PUDF***

Description: Hospital name provided by the hospital.
Length: 55 **Type:** Alphanumeric **Data Source:** Provider

Field 3: **FAC_TEACHING_IND** ***Available in PUDF***
Description: Teaching facility indicator.
Coding Scheme: A Member, Council of Teaching Hospitals
X Other teaching facility
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 4: **FAC_PSYCH_IND** ***Available in PUDF***
Description: Psychiatric facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 5: **FAC_REHAB_IND** ***Available in PUDF***
Description: Rehabilitation facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 6: **FAC_ACUTE_CARE_IND** ***Available in PUDF***
Description: Acute care facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 7: **FAC_SNF_IND** ***Available in PUDF***
Description: Skilled nursing facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 8: **FAC_LONG_TERM_AC_IND** ***Available in PUDF***
Description: Long term acute care facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 9: **FAC_OTHER_LTC_IND** ***Available in PUDF***
Description: Other long term care facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 10: **FAC_PEDS_IND** ***Available in PUDF***
Description: Pediatric facility Indicator.
Coding Scheme: C Member, National Association of Children's Hospitals and Related Institutions (NACHRI)
X Facilities that also treat children
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 11: **FAC_CARDIOVASCULAR_IND** ***Available in PUDF***
Description: Cardiovascular facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 12: **FAC_CHIROPRACTIC_IND** ***Available in PUDF***
Description: Chiropractic care facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 13: **FAC_ENDOSCOPY_IND** ***Available in PUDF***
Description: Endoscopy facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 14: **FAC_FOOT_IND** ***Available in PUDF***
Description: Foot care facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 15: **FAC_GASTROENTEROLOGY_IND** ***Available in PUDF***
Description: Gastroenterology facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 16: **FAC_GENERAL_IND** ***Available in PUDF***
Description: General care facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 17: **FAC_NEUROLOGICAL_IND** ***Available in PUDF***
Description: Neurological care facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 18: **FAC_OB_GYN_IND** ***Available in PUDF***
Description: Obstetrics and gynecology facility indicator.
Length: 1 **Type:** Alphanumeric **Data Source:** Provider

Field 19:	**FAC_OPTHAMOLOGY_IND**				***Available in PUDF***
Description:	Ophthalmology facility indicator.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 20:	**FAC_ORAL_IND**				***Available in PUDF***
Description:	Oral health care facility indicator.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 21:	**FAC_ORTHOPEDIC_IND**				***Available in PUDF***
Description:	Orthopedic care facility indicator.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 22:	**FAC_OTOLARYNGOLOGY_IND**				***Available in PUDF***
Description:	Otolaryngology facility indicator.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 23:	**FAC_ PAIN_MNGMT _IND**				***Available in PUDF***
Description:	Pain management facility indicator.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 24:	**FAC_PLASTIC_IND**				***Available in PUDF***
Description:	Plastic surgery facility indicator.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 25:	**FAC_THORACIC_IND**				***Available in PUDF***
Description:	Thoracic care facility Indicator.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 26:	**FAC_UROLOGY_IND**				***Available in PUDF***
Description:	Urology care facility indicator.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Provider
Field 27:	**FAC_OTHER_IND**				***Available in PUDF***
Description:	Other facility indicator.				
Length:	1	**Type:**	Alphanumeric	**Data Source:**	Provider

Field 28: **PROVIDER_COUNTY**

FIPS code of provider's county.

Coding scheme:

001	Anderson	129	Donley	257	Kaufman	385	Real
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	Atascosa	141	El Paso	269	King	397	Rockwall
015	Austin	143	Erath	271	Kinney	399	Runnels
017	Bailey	145	Falls	273	Kleberg	401	Rusk
019	Bandera	147	Fannin	275	Knox	403	Sabine
021	Bastrop	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	Briscoe	173	Glasscock	301	Loving	429	Stephens
047	Brooks	175	Goliad	303	Lubbock	431	Sterling
049	Brown	177	Gonzales	305	Lynn	433	Stonewall
051	Burleson	179	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	Cherokee	201	Harris	329	Midland	457	Tyler
075	Childress	203	Harrison	331	Milam	459	Upshur
077	Clay	205	Hartley	333	Mills	461	Upton
079	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	489	Willacy
107	Crosby	235	Irion	363	Palo Pinto	491	Williamson
109	Culberson	237	Jack	365	Panola	493	Wilson
111	Dallam	239	Jackson	367	Parker	495	Winkler
113	Dallas	241	Jasper	369	Parmer	497	Wise
115	Dawson	243	Jeff Davis	371	Pecos	499	Wood
117	Deaf Smith	245	Jefferson	373	Polk	501	Yoakum
119	Delta	247	Jim Hogg	375	Potter	503	Young
121	Denton	249	Jim Wells	377	Presidio	505	Zapata
123	Dewitt	251	Johnson	379	Rains	507	Zavala
125	Dickens	253	Jones	381	Randall		
127	Dimmit	255	Karnes	383	Reagan	‘	Invalid

Length: 3 **Type:** Alphanumeric **Data Source:** Assigned, based on provider ZIP code

Outpatient Research BASE DATA FILE, 2010-present

Field #	Field Name	OP RDF	OP PUDF
1	SERVICE_QUARTER	Yes	Yes
2	RECORD_ID	Yes	Yes
3	PAT_UNIQUE_INDEX	Yes	No
4	THCIC_ID	Yes	Yes, with suppression
5	SPEC_UNIT_1	Yes	Yes
6	SPEC_UNIT_2	Yes	No

7	SPEC_UNIT_3	Yes	No
8	SPEC_UNIT_4	Yes	No
9	SPEC_UNIT_5	Yes	No
10	ENCOUNTER_INDICATOR	Yes	No
11	EIN	Yes	No
12	PROVIDER_NAME	Yes	Yes, with suppression
13	PROVIDER_ADDR	Yes	No
14	PROVIDER_CITY	Yes	No
15	PROVIDER_STATE	Yes	No
16	PROVIDER_ZIP	Yes	No
17	SEX_CODE	Yes	Yes, with suppression
18	BIRTH_DATE	Yes	Yes
19	PAT_AGE_GROUP	Yes	Yes, with suppression
20	PAT_AGE_YEARS	Yes	No
21	PAT_AGE_DAYS	Yes	No
22	PAT_ADDR_CENSUS_BLOCK_GROUP	Yes	No
23	PAT_ADDR_CENSUS_BLOCK	Yes	No
24	PAT_CITY	Yes	No
25	PAT_COUNTY	Yes	Yes
26	PAT_STATE	Yes	Yes, with suppression
27	PAT_ZIP	Yes	Yes, with suppression
28	PAT_COUNTRY	Yes	Yes, with suppression
29	PUBLIC_HEALTH_REGION	Yes	Yes
30	LENGTH_OF_SERVICE	Yes	Yes
31	STMT_PERIOD_FROM	Yes	No
32	STMT_PERIOD_THRU	Yes	No
33	RACE	Yes	Yes, with suppression
34	ETHNICITY	Yes	Yes, with suppression
35	FIRST_PAYMENT_SRC	Yes	Yes
36	FIRST_PAYER_ID	Yes	No
37	FIRST_PAYER_NAME	Yes	No
38	SECONDARY_PAYMENT_SRC	Yes	Yes
39	SECONDARY_PAYER_ID	Yes	No
40	SECONDARY_PAYER_NAME	Yes	No
41	TYPE_OF_BILL	Yes	Yes
42	OCCUR_CODE_1	Yes	No
43	OCCUR_DATE_1	Yes	No

44	OCCUR_DAY_1	Yes	No
45	OCCUR_CODE_2	Yes	No
46	OCCUR_DATE_2	Yes	No
47	OCCUR_DAY_2	Yes	No
48	OCCUR_CODE_3	Yes	No
49	OCCUR_DATE_3	Yes	No
50	OCCUR_DAY_3	Yes	No
51	OCCUR_CODE_4	Yes	No
52	OCCUR_DATE_4	Yes	No
53	OCCUR_DAY_4	Yes	No
54	OCCUR_CODE_5	Yes	No
55	OCCUR_DATE_5	Yes	No
56	OCCUR_DAY_5	Yes	No
57	OCCUR_CODE_6	Yes	No
58	OCCUR_DATE_6	Yes	No
59	OCCUR_DAY_6	Yes	No
60	OCCUR_CODE_7	Yes	No
61	OCCUR_DATE_7	Yes	No
62	OCCUR_DAY_7	Yes	No
63	OCCUR_CODE_8	Yes	No
64	OCCUR_DATE_8	Yes	No
65	OCCUR_DAY_8	Yes	No
66	OCCUR_CODE_9	Yes	No
67	OCCUR_DATE_9	Yes	No
68	OCCUR_DAY_9	Yes	No
69	OCCUR_CODE_10	Yes	No
70	OCCUR_DATE_10	Yes	No
71	OCCUR_DAY_10	Yes	No
72	OCCUR_CODE_11	Yes	No
73	OCCUR_DATE_11	Yes	No
74	OCCUR_DAY_11	Yes	No
75	OCCUR_CODE_12	Yes	No
76	OCCUR_DATE_12	Yes	No
77	OCCUR_DAY_12	Yes	No
78	OCCUR_SPAN_CODE_1	Yes	No
79	OCCUR_SPAN_FROM_DATE_1	Yes	No
80	OCCUR_SPAN_THRU_DATE_1	Yes	No

81	OCCUR_SPAN_CODE_2	Yes	No
82	OCCUR_SPAN_FROM_DATE_2	Yes	No
83	OCCUR_SPAN_THRU_DATE_2	Yes	No
84	OCCUR_SPAN_CODE_3	Yes	No
85	OCCUR_SPAN_FROM_DATE_3	Yes	No
86	OCCUR_SPAN_THRU_DATE_3	Yes	No
87	OCCUR_SPAN_CODE_4	Yes	No
88	OCCUR_SPAN_FROM_DATE_4	Yes	No
89	OCCUR_SPAN_THRU_DATE_4	Yes	No
90	CONDITION_CODE_1	Yes	Yes
91	CONDITION_CODE_2	Yes	Yes
92	CONDITION_CODE_3	Yes	Yes
93	CONDITION_CODE_4	Yes	Yes
94	CONDITION_CODE_5	Yes	Yes
95	CONDITION_CODE_6	Yes	Yes
96	CONDITION_CODE_7	Yes	Yes
97	CONDITION_CODE_8	Yes	Yes
98	VALUE_CODE_1	Yes	No
99	VALUE_AMOUNT_1	Yes	No
100	VALUE_CODE_2	Yes	No
101	VALUE_AMOUNT_2	Yes	No
102	VALUE_CODE_3	Yes	No
103	VALUE_AMOUNT_3	Yes	No
104	VALUE_CODE_4	Yes	No
105	VALUE_AMOUNT_4	Yes	No
106	VALUE_CODE_5	Yes	No
107	VALUE_AMOUNT_5	Yes	No
108	VALUE_CODE_6	Yes	No
109	VALUE_AMOUNT_6	Yes	No
110	VALUE_CODE_7	Yes	No
111	VALUE_AMOUNT_7	Yes	No
112	VALUE_CODE_8	Yes	No
113	VALUE_AMOUNT_8	Yes	No
114	VALUE_CODE_9	Yes	No
115	VALUE_AMOUNT_9	Yes	No
116	VALUE_CODE_10	Yes	No
117	VALUE_AMOUNT_10	Yes	No

118	VALUE_CODE_11	Yes	No
119	VALUE_AMOUNT_11	Yes	No
120	VALUE_CODE_12	Yes	No
121	VALUE_AMOUNT_12	Yes	No
122	PAT_REASON_FOR_VISIT	Yes	Yes
123	PRINC_DIAG_CODE	Yes	Yes
124	OTH_DIAG_CODE_1	Yes	Yes
125	OTH_DIAG_CODE_2	Yes	Yes
126	OTH_DIAG_CODE_3	Yes	Yes
127	OTH_DIAG_CODE_4	Yes	Yes
128	OTH_DIAG_CODE_5	Yes	Yes
129	OTH_DIAG_CODE_6	Yes	Yes
130	OTH_DIAG_CODE_7	Yes	Yes
131	OTH_DIAG_CODE_8	Yes	Yes
132	OTH_DIAG_CODE_9	Yes	Yes
133	OTH_DIAG_CODE_10	Yes	Yes
134	OTH_DIAG_CODE_11	Yes	Yes
135	OTH_DIAG_CODE_12	Yes	Yes
136	OTH_DIAG_CODE_13	Yes	Yes
137	OTH_DIAG_CODE_14	Yes	Yes
138	OTH_DIAG_CODE_15	Yes	Yes
139	OTH_DIAG_CODE_16	Yes	Yes
140	OTH_DIAG_CODE_17	Yes	Yes
141	OTH_DIAG_CODE_18	Yes	Yes
142	OTH_DIAG_CODE_19	Yes	Yes
143	OTH_DIAG_CODE_20	Yes	Yes
144	OTH_DIAG_CODE_21	Yes	Yes
145	OTH_DIAG_CODE_22	Yes	Yes
146	OTH_DIAG_CODE_23	Yes	Yes
147	OTH_DIAG_CODE_24	Yes	Yes
148	RELATED_CAUSE_CODE_1	Yes	Yes
149	RELATED_CAUSE_CODE_2	Yes	Yes
150	RELATED_CAUSE_CODE_3	Yes	Yes
151	E_CODE_1	Yes	Yes
152	E_CODE_2	Yes	Yes
153	E_CODE_3	Yes	Yes
154	E_CODE_4	Yes	Yes

155	E_CODE_5	Yes	Yes
156	E_CODE_6	Yes	Yes
157	E_CODE_7	Yes	Yes
158	E_CODE_8	Yes	Yes
159	E_CODE_9	Yes	Yes
160	E_CODE_10	Yes	Yes
161	PROC_CODE_1	Yes	Yes
162	PROC_CODE_2	Yes	Yes
163	PROC_CODE_3	Yes	Yes
164	PROC_CODE_4	Yes	Yes
165	PROC_CODE_5	Yes	Yes
166	PROC_CODE_6	Yes	Yes
167	PROC_CODE_7	Yes	Yes
168	PROC_CODE_8	Yes	Yes
169	PROC_CODE_9	Yes	Yes
170	PROC_CODE_10	Yes	Yes
171	PROC_CODE_11	Yes	Yes
172	PROC_CODE_12	Yes	Yes
173	PROC_CODE_13	Yes	Yes
174	PROC_CODE_14	Yes	Yes
175	PROC_CODE_15	Yes	Yes
176	PROC_CODE_16	Yes	Yes
177	PROC_CODE_17	Yes	Yes
178	PROC_CODE_18	Yes	Yes
179	PROC_CODE_19	Yes	Yes
180	PROC_CODE_20	Yes	Yes
181	PROC_CODE_21	Yes	Yes
182	PROC_CODE_22	Yes	Yes
183	PROC_CODE_23	Yes	Yes
184	PROC_CODE_24	Yes	Yes
185	PROC_CODE_25	Yes	Yes
186	OTHER_AMOUNT	Yes	Yes
187	PHARM_AMOUNT	Yes	Yes
188	MEDSURG_AMOUNT	Yes	Yes
189	DME_AMOUNT	Yes	Yes
190	USED_DME_AMOUNT	Yes	Yes
191	PT_AMOUNT	Yes	Yes

192	OT_AMOUNT	Yes	Yes
193	SPEECH_AMOUNT	Yes	Yes
194	IT_AMOUNT	Yes	Yes
195	BLOOD_AMOUNT	Yes	Yes
196	BLOOD_ADM_AMOUNT	Yes	Yes
197	OR_AMOUNT	Yes	Yes
198	LITH_AMOUNT	Yes	Yes
199	CARD_AMOUNT	Yes	Yes
200	ANES_AMOUNT	Yes	Yes
201	LAB_AMOUNT	Yes	Yes
202	RAD_AMOUNT	Yes	Yes
203	MRI_AMOUNT	Yes	Yes
204	OP_AMOUNT	Yes	Yes
205	ER_AMOUNT	Yes	Yes
206	AMBULANCE_AMOUNT	Yes	Yes
207	PRO_FEE_AMOUNT	Yes	Yes
208	ORGAN_AMOUNT	Yes	Yes
209	ESRD_AMOUNT	Yes	Yes
210	CLINIC_AMOUNT	Yes	Yes
211	CLAIM_TOTAL_CHARGES	Yes	Yes
212	CLAIM_NON_COV_CHARGES	Yes	Yes
213	CLAIM_CHARGES_ANCIL	Yes	Yes
214	CLAIM_NON_COV_CHARGES_ANCIL	Yes	Yes
215	PHYSICIAN_1_INDEX_NUMBER	Yes	Yes, with suppression
216	PHYSICIAN_2_INDEX_NUMBER	Yes	Yes, with suppression
217	CERTIFICATION_STATUS	Yes	No
218	PROCESS_DATE	Yes	No
219	WARNING_802_INDC	Yes	No
220	WARNING_803_INDC	Yes	No
221	WARNING_817_INDC	Yes	No
222	WARNING_818_INDC	Yes	No
223	WARNING_819_INDC	Yes	No
224	WARNING_820_INDC	Yes	No
225	WARNING_821_INDC	Yes	No
226	WARNING_824_INDC	Yes	No
227	WARNING_816_INDC	Yes	No
228	INST_PROF_INDICATOR (INPUT_FORMAT)	Yes	Yes

229	INBOUND_INDICATOR	Yes	No

CLASSIFICATION DATA FILE

Field #	Field Name	OP RDF	OP PUDF
1	RECORD_ID	Yes	Yes
2	CCS_PRINC_DIAG_CODE	Yes	Yes
3	CCS_OTH_DIAG_CODE_1	Yes	Yes
4	CCS_OTH_DIAG_CODE_2	Yes	Yes
5	CCS_OTH_DIAG_CODE_3	Yes	Yes
6	CCS_OTH_DIAG_CODE_4	Yes	Yes
7	CCS_OTH_DIAG_CODE_5	Yes	Yes
8	CCS_OTH_DIAG_CODE_6	Yes	Yes
9	CCS_OTH_DIAG_CODE_7	Yes	Yes
10	CCS_OTH_DIAG_CODE_8	Yes	Yes
11	CCS_OTH_DIAG_CODE_9	Yes	Yes
12	CCS_OTH_DIAG_CODE_10	Yes	Yes
13	CCS_OTH_DIAG_CODE_11	Yes	Yes
14	CCS_OTH_DIAG_CODE_12	Yes	Yes
15	CCS_OTH_DIAG_CODE_13	Yes	Yes
16	CCS_OTH_DIAG_CODE_14	Yes	Yes
17	CCS_OTH_DIAG_CODE_15	Yes	Yes
18	CCS_OTH_DIAG_CODE_16	Yes	Yes
19	CCS_OTH_DIAG_CODE_17	Yes	Yes
20	CCS_OTH_DIAG_CODE_18	Yes	Yes
21	CCS_OTH_DIAG_CODE_19	Yes	Yes
22	CCS_OTH_DIAG_CODE_20	Yes	Yes
23	CCS_OTH_DIAG_CODE_21	Yes	Yes
24	CCS_OTH_DIAG_CODE_22	Yes	Yes
25	CCS_OTH_DIAG_CODE_23	Yes	Yes
26	CCS_OTH_DIAG_CODE_24	Yes	Yes
27	CCS_PROC_CODE_1	Yes	Yes
28	CCS_PROC_CODE_2	Yes	Yes
29	CCS_PROC_CODE_3	Yes	Yes
30	CCS_PROC_CODE_4	Yes	Yes
31	CCS_PROC_CODE_5	Yes	Yes
32	CCS_PROC_CODE_6	Yes	Yes
33	CCS_PROC_CODE_7	Yes	Yes

34	CCS_PROC_CODE_8	Yes	Yes
35	CCS_PROC_CODE_9	Yes	Yes
36	CCS_PROC_CODE_10	Yes	Yes
37	CCS_PROC_CODE_11	Yes	Yes
38	CCS_PROC_CODE_12	Yes	Yes
39	CCS_PROC_CODE_13	Yes	Yes
40	CCS_PROC_CODE_14	Yes	Yes
41	CCS_PROC_CODE_15	Yes	Yes
42	CCS_PROC_CODE_16	Yes	Yes
43	CCS_PROC_CODE_17	Yes	Yes
44	CCS_PROC_CODE_18	Yes	Yes
45	CCS_PROC_CODE_19	Yes	Yes
46	CCS_PROC_CODE_20	Yes	Yes
47	CCS_PROC_CODE_21	Yes	Yes
48	CCS_PROC_CODE_22	Yes	Yes
49	CCS_PROC_CODE_23	Yes	Yes
50	CCS_PROC_CODE_24	Yes	Yes
51	CCS_PROC_CODE_25	Yes	Yes
52	FINAL_EAPG_CATEGORY_CODE_1	Yes	Yes
53	FINAL_EAPG_CATEGORY_CODE_2	Yes	Yes
54	FINAL_EAPG_CATEGORY_CODE_3	Yes	Yes
55	FINAL_EAPG_CATEGORY_CODE_4	Yes	Yes
56	FINAL_EAPG_CATEGORY_CODE_5	Yes	Yes
57	FINAL_EAPG_CATEGORY_CODE_6	Yes	Yes
58	FINAL_EAPG_CATEGORY_CODE_7	Yes	Yes
59	FINAL_EAPG_CATEGORY_CODE_8	Yes	Yes
60	FINAL_EAPG_CATEGORY_CODE_9	Yes	Yes
61	FINAL_EAPG_CATEGORY_CODE_10	Yes	Yes
62	FINAL_EAPG_TYPE_CODE_1	Yes	Yes
63	FINAL_EAPG_TYPE_CODE_2	Yes	Yes
64	FINAL_EAPG_TYPE_CODE_3	Yes	Yes
65	FINAL_EAPG_TYPE_CODE_4	Yes	Yes
66	FINAL_EAPG_TYPE_CODE_5	Yes	Yes
67	FINAL_EAPG_TYPE_CODE_6	Yes	Yes
68	FINAL_EAPG_TYPE_CODE_7	Yes	Yes
69	FINAL_EAPG_TYPE_CODE_8	Yes	Yes
70	FINAL_EAPG_TYPE_CODE_9	Yes	Yes

71	FINAL_EAPG_TYPE_CODE_10	Yes	Yes
72	FINAL_EAPG_1	Yes	Yes
73	FINAL_EAPG_2	Yes	Yes
74	FINAL_EAPG_3	Yes	Yes
75	FINAL_EAPG_4	Yes	Yes
76	FINAL_EAPG_5	Yes	Yes
77	FINAL_EAPG_6	Yes	Yes
78	FINAL_EAPG_7	Yes	Yes
79	FINAL_EAPG_8	Yes	Yes
80	FINAL_EAPG_9	Yes	Yes
81	FINAL_EAPG_10	Yes	Yes
82	ADJUSTED_EAPG_WEIGHT_1	Yes	No
83	ADJUSTED_EAPG_WEIGHT_2	Yes	No
84	ADJUSTED_EAPG_WEIGHT_3	Yes	No
85	ADJUSTED_EAPG_WEIGHT_4	Yes	No
86	ADJUSTED_EAPG_WEIGHT_5	Yes	No
87	ADJUSTED_EAPG_WEIGHT_6	Yes	No
88	ADJUSTED_EAPG_WEIGHT_7	Yes	No
89	ADJUSTED_EAPG_WEIGHT_8	Yes	No
90	ADJUSTED_EAPG_WEIGHT_9	Yes	No
91	ADJUSTED_EAPG_WEIGHT_10	Yes	No
92	EAPG_GRP_VER	Yes	No
93	CRG_STATUS_1	Yes	Yes
94	CRG_STATUS_2	Yes	Yes
95	CRG_STATUS_3	Yes	Yes
96	CRG_STATUS_4	Yes	Yes
97	CRG_STATUS_5	Yes	Yes
98	CRG_STATUS_6	Yes	Yes
99	CRG_STATUS_7	Yes	Yes
100	CRG_STATUS_8	Yes	Yes
101	CRG_STATUS_9	Yes	Yes
102	CRG_STATUS_10	Yes	Yes
103	CRG_CODE_1	Yes	Yes
104	CRG_CODE_2	Yes	Yes
105	CRG_CODE_3	Yes	Yes
106	CRG_CODE_4	Yes	Yes
107	CRG_CODE_5	Yes	Yes

108	CRG_CODE_6	Yes	Yes
109	CRG_CODE_7	Yes	Yes
110	CRG_CODE_8	Yes	Yes
111	CRG_CODE_9	Yes	Yes
112	CRG_CODE_10	Yes	Yes
113	CRG_SEVERITY_1	Yes	Yes
114	CRG_SEVERITY_2	Yes	Yes
115	CRG_SEVERITY_3	Yes	Yes
116	CRG_SEVERITY_4	Yes	Yes
117	CRG_SEVERITY_5	Yes	Yes
118	CRG_SEVERITY_6	Yes	Yes
119	CRG_SEVERITY_7	Yes	Yes
120	CRG_SEVERITY_8	Yes	Yes
121	CRG_SEVERITY_9	Yes	Yes
122	CRG_SEVERITY_10	Yes	Yes
123	APC_PROCEDURE_CODE_1	Yes	Yes
124	APC_PROCEDURE_CODE_2	Yes	Yes
125	APC_PROCEDURE_CODE_3	Yes	Yes
126	APC_PROCEDURE_CODE_4	Yes	Yes
127	APC_PROCEDURE_CODE_5	Yes	Yes
128	APC_PROCEDURE_CODE_6	Yes	Yes
129	APC_PROCEDURE_CODE_7	Yes	Yes
130	APC_PROCEDURE_CODE_8	Yes	Yes
131	APC_PROCEDURE_CODE_9	Yes	Yes
132	APC_PROCEDURE_CODE_10	Yes	Yes
133	APC_PX_STATUS_IND_CODE_1	Yes	Yes
134	APC_PX_STATUS_IND_CODE_2	Yes	Yes
135	APC_PX_STATUS_IND_CODE_3	Yes	Yes
136	APC_PX_STATUS_IND_CODE_4	Yes	Yes
137	APC_PX_STATUS_IND_CODE_5	Yes	Yes
138	APC_PX_STATUS_IND_CODE_6	Yes	Yes
139	APC_PX_STATUS_IND_CODE_7	Yes	Yes
140	APC_PX_STATUS_IND_CODE_8	Yes	Yes
141	APC_PX_STATUS_IND_CODE_9	Yes	Yes
142	APC_PX_STATUS_IND_CODE_10	Yes	Yes
143	APC_WEIGHT_1	Yes	Yes
144	APC_WEIGHT_2	Yes	Yes

145	APC_WEIGHT_3	Yes	Yes
146	APC_WEIGHT_4	Yes	Yes
147	APC_WEIGHT_5	Yes	Yes
148	APC_WEIGHT_6	Yes	Yes
149	APC_WEIGHT_7	Yes	Yes
150	APC_WEIGHT_8	Yes	Yes
151	APC_WEIGHT_9	Yes	Yes
152	APC_WEIGHT_10	Yes	Yes
153	APC_GRP_VER	Yes	No

CHARGES FILE

Field #	Field Name	OP RDF	OP PUDF
1	RECORD_ID	Yes	Yes
2	REVENUE_CODE	Yes	Yes
3	HCPCS_QUALIFIER	Yes	Yes
4	HCPCS_PROCEDURE_CODE	Yes	Yes
5	MODIFIER_1	Yes	Yes
6	MODIFIER_2	Yes	Yes
7	MODIFIER_3	Yes	Yes
8	MODIFIER_4	Yes	Yes
9	UNIT_MEASUREMENT_CODE	Yes	Yes
10	UNITS_OF_SERVICE	Yes	Yes
11	UNIT_RATE	Yes	Yes
12	CHRGS_LINE_ITEM	Yes	Yes
13	CHRGS_NON_COV	Yes	Yes
14	PROCEDURE_DATE	Yes	No
15	PROCEDURE_DATE_THRU	Yes	No
16	SERVICE_FACILITY_CODE	Yes	No

FACILITY TYPE FILE

Field #	Field Name	OP RDF	OP PUDF
1	THCIC_ID	Yes	Yes
2	PROVIDER_NAME	Yes	Yes
3	FAC_TEACHING_IND	Yes	Yes
4	FAC_PSYCH_IND	Yes	Yes
5	FAC_REHAB_IND	Yes	Yes
6	FAC_ACUTE_CARE_IND	Yes	Yes

7	FAC_SNF_IND	Yes	Yes
8	FAC_LONG_TERM_AC_IND	Yes	Yes
9	FAC_OTHER_LTC_IND	Yes	Yes
10	FAC_PEDS_IND	Yes	Yes
11	FAC_CARDIOVASCULAR_IND	Yes	Yes
12	FAC_CHIROPRACTIC_IND	Yes	Yes
13	FAC_ENDOSCOPY_IND	Yes	Yes
14	FAC_FOOT_IND	Yes	Yes
15	FAC_GASTROENTEROLOGY_IND	Yes	Yes
16	FAC_GENERAL_IND	Yes	Yes
17	FAC_NEUROLOGICAL_IND	Yes	Yes
18	FAC_OB-GYN_IND	Yes	Yes
19	FAC_OPTHAMOLOGY_IND	Yes	Yes
20	FAC_ORAL_IND	Yes	Yes
21	FAC_ORTHOPEDIC_IND	Yes	Yes
22	FAC_OTOLARYNGOLOGY_IND	Yes	Yes
23	FAC_PAIN MNGMT_IND	Yes	Yes
24	FAC_PLASTIC_IND	Yes	Yes
25	FAC_THORACIC_IND	Yes	Yes
26	FAC_UROLOGY_IND	Yes	Yes
27	FAC_OTHER_IND	Yes	Yes
28	PROVIDER_COUNTY	Yes	Yes

Note about LCODE:
The “Census Block” and “Census Block Group” coding are geographic identifiers derived from a process called Geocoding. Geocoding is the process of assigning a geographic coordinate to a record for a given physical address. LCODE (Location code) quantifies the level of accuracy of the geocoding process.
LCODE classification:

- “A” code indicates that the record is accurate to the address level.
- “Z” code indicates the record is accurate to at least the ZIP code level.
    - “ZB” code indicates the record is accurate to the Census Block Group level.
    - “ZT” code indicates the record is accurate to at least the Census Tract level.
    - “ZC” code indicates the record is accurate to the ZIP code level.
- An “E” code indicates an error in geocoding and no value is provided.

The Block Group should be a 12-digit numerical value. If the LCODE is “ZT” or “ZC” a record should not have a value for Block Group. The LCODE will be included any time a data request includes Pat_Addr_Census_Block or Pat_Addr_Census_Block_Group.