

Texas Department of State Health Services

Center for Health Statistics Texas Health Care Information Collection

TEXAS HOSPITAL INPATIENT DISCHARGE PUBLIC USE DATA FILE (PUDF)

USER MANUAL

2024

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BACKGROUND

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

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

PUBLIC USE DATA FILE (PUDF)

Sections 108.011(a) and 108.012 of the THSC require DSHS to provide public use data for computer-to-computer access. It also permits DSHS to charge the data requestor a fee for using the Public Use Data File (PUDF). The PUDF contains patient-level information for inpatient hospital stays. These data are extracted from DSHS's Hospital Discharge Database (HDD).

The PUDF Base Data File is split into two (2) Base Data files. Base Data #1 File contains the required data elements. Base Data #2 File contains most of the situationally required data elements and some calculated fields. The Record ID allows for linking the files together. The providers/submitters have, by law, until the next quarter (following the discharge) to submit their data. This means that the PUDF data is a snapshot in time and each quarter may contain some discharges dated in the previous quarter (i.e. for calendar year data be sure to check the first quarter of the following year also).

The Facility Type Indicator File is also included. This contains 12 variables including the THCIC ID and facility name and variables indicating whether the

facility is a teaching facility or pediatric hospital or other specialty facility. The file also includes POA provider indicator and certification status.

A Facility Reporting Status document is included which provides information about whether the facilities reported or if they reported low numbers and their identification was masked in the data, reported no discharges or if they closed, were out of compliance and if they submitted any comments about their data.

Additionally, the submitter Comments File is included. This contains any comments that were included by the submitter when the respective data was submitted and certified from a given facility.

The 2024 PUDF is available in five fixed length format text files, Base Data #1, Base Data #2, Charges Data, Groupers Data, and Facility Type Data files. The files are also available in tab-delimited format. The size of the files is as follows:

First quarter, 708* hospitals:

Base Data #1	820,346 records	157 variables	Fixed field format	609 MB	Tab-delimited	305 MB
Base Data #2	820,346 records	99 variables	Fixed field format	509 MB	Tab-delimited	212 MB
Charges	15,982,731 records	13 variables	Fixed field format	1,250 MB	Tab-delimited	760 MB
Grouper Data	820,346 records	21 variables	Fixed field format	52 MB	Tab-delimited	67 MB
Facility Type Data	708 records	13 variables	Fixed field format	53 KB	Tab-delimited	42 KB

^{*} Final number of reporting hospitals, calculated as the result of the original number of reporting hospitals minus the number of hospital(s) with ALL claims submitted wrong due to wrong type of bills.

The data must be imported into a software package. No software is included with the PUDF. The data file has been tested with several software packages, including Microsoft Access, 2010 Microsoft Excel (one quarter), SAS, and SPSS.

The PUDF, beginning with data collected for 2004, is formatted to accommodate additional data elements available with the collection of data from hospitals using the THCIC 837 format. The following data elements, other than the grouper file, are available in the PUDF beginning with data for 2004 or are not comparable to data collected in years prior to 2004; the grouper file becomes available for 2022 data and beyond:

BASE DATA #1 FILE (Separated Base File 2011)					
FAC_LONG_TERM_AC_IND	Added 2004. Moved to Facility Type Indicator File in 2011				
PAT_COUNTRY	Added 2004				
FIRST_PAYMENT_SRC	Replaces PAYMENT_SOURCE_1 and SOURCE_PAYMENT_CODE_1				
SECOND_PAYMENT_SRC	Replaces PAYMENT_SOURCE_2 and SOURCE_PAYMENT_CODE_2				
REVENUE_CODE_23	No longer available				
TOTAL_CHARGES	Replaces TOTAL_CHARGES_23				
TOTAL_CHARGES_ACCOMM	Replaces CLAIM_CHARGES_ACCOMM				
TOTAL_NON_COV_CHARGES_ACCOMM	Replaces CLAIM_NON_COV_CHARGES_ACCOMM				
TOTAL_CHARGES_ANCIL	Replaces CLAIM_CHARGES_ANCIL				
TOTAL_NON_COV_CHARGES_ANCIL	Replaces CLAIM_NON_COV_CHARGES_ANCIL				
EXTERNAL_CAUSE_OF_INJURY_1	Replaces EXTNAL_CAUSE_OF_INJURY				

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EXTERNAL_CAUSE_OF_INJURY_2 to	Added 2004
EXTERNAL_CAUSE_OF_INJURY_10	
OTH_DIAG_CODE_9 to OTH_DIAG_CODE_25	Added 2004
OTH_SURG_PROC_CODE_6 to	Added 2004
OTH_SURG_PROC_CODE_25	
OTH_SURG_PROC_DAY_6 to	Added 2004
OTH_SURG_PROC_DAY_25	
OTH_ICD9_CODE_6 to OTH_ICD9_CODE_25	Added 2004
MS_MDC name changed from CMS_MDC	Added 2004; no longer available in Base Data #1—renamed as
(2011)	FROZEN_MS_MDC and moved to Grouper File in 2022
INBOUND_INDICATOR	Available 2004 only
POA_PRINC_DIAG _CODE	Added 2011
POA OTH DIAG CODE 1 to	
POA_OTH_DIAG_CODE_24	Added 2011
POA_E_CODE_1 to POA_ E_CODE_10	Added 2011
	Added 2011; no longer available in Base Data #1—renamed as
	FROZEN_MS_GRP_ERROR_CODE and moved to Grouper File in
MS GROUPER ERROR CODE	2022
HO_GROOFER_ ERROR _GODE	Added 2011; no longer available in Base Data #1—renamed as
	FROZEN APR GRP ERROR CODE and moved to Grouper File in
APR GROUPER ERROR CODE	2022
PRINC ICD9 CODE	No longer available
OTH ICD9 CODE 1- OTH ICD9 CODE 24	No longer available No longer available
EMERGENCY_DEPT_FLAG	Added 2017
	calculated charge amounts and situational data elements to
this file	calculated charge amounts and situational data elements to
CONDITION_CODE_1 to CONDITION_CODE_8	Added 2004
	Added 2004 Added 2004
OCCUR_CODE_1 to OCCUR_CODE_12	
OCCUR_DAY_1 to OCCUR_DAY_12	Added 2004
OCCUR_SPAN_CODE_1 to	Added 2004
OCCUR_SPAN_CODE_4	A L L L 2004
OCCUR_SPAN_FROM_1 to	Added 2004
OCCUR_SPAN_FROM_4	A L L L 1000 4
OCCUR_SPAN_THRU_1 to	Added 2004
OCCUR_SPAN_THRU_4	A L L L 2004
VALUE_CODE_1 to VALUE_CODE_12	Added 2004
VALUE_AMOUNT_1 to VALUE_AMOUNT_12	Added 2004
CHARGES FILE	A L L 12004
REVENUE_CODE	Added 2004
HCPCS_QUALIFIER	Added 2004
HCPCS_PROCEDURE_CODE	Added 2004
MODIFIER_1 TO MODIFIER_4	Added 2004
UNIT_MEASUREMENT_CODE	Added 2004
UNITS_OF_SERVICE	Added 2004
UNIT_RATE	Added 2004
CHRGS_LINE_ITEM	Added 2004
CHRGS_NON_COV	Added 2004
FACILITY TYPE INDICATOR FILE (added 2	011) Moved facility information data elements to this file
POA_PROVIDER_INDICATOR	Moved from Base Data #1 file to Facility Type Indicator File in 2015
CERT_STATUS	Moved from Base Data #1 file to Facility Type Indicator File in 2015
GROUPER FILE (added 2022)	
	Replaces MS_DRG; moved from Base Data #1 file to Grouper File
FROZEN_MS_DRG	in 2022
	Replaces MS_MDC; moved from Base Data #1 file to Grouper File
FROZEN_MS_MDC	in 2022
	Replaces MS_GROUPER_VERSION_NBR; moved from Base Data #1
FROZEN_ MS _GRP_VER	file to Grouper File in 2022
	Replaces MS_GROUPER_ERROR_CODE; moved from Base Data #1
FROZEN MS GRP ERROR CODE	file to Grouper File in 2022
TROZEN_ NO _GRI _ERROR_CODE	Replaces APR_DRG; moved from Base Data #1 file to Grouper File
FROZEN APR DRG	in 2022
FROZEN_APR_DRG	Replaces RISK_MORTALITY; moved from Base Data #1 file to
FROZEN RISK MORTALITY	Grouper File in 2022
I NOZEN_NION MELITI	•
	Replaces ILLNESS_SEVERITY; moved from Base Data #1 file to
FROZEN ILLNESS SEVERITY	Grouper File in 2022

FROZEN_APR_MDC	Replaces APR_MDC; moved from Base Data #1 file to Grouper File in 2022
FROZEN_APR_GRP_VER	Replaces APR_GROUPER_VERSION_NBR; moved from Base Data #1 file to Grouper File in 2022
	Replaces APR_GROUPER_ERROR_CODE; moved from Base Data #1
FROZEN_APR_GRP_ERROR_CODE	file to Grouper File in 2022
MS _DRG	Dynamic; added 2022
MS _MDC	Dynamic; added 2022
MS _GRP_VER	Dynamic; added 2022
MS _GRP_ERROR_CODE	Dynamic; added 2022
APR_DRG	Dynamic; added 2022
RISK_MORTALITY	Dynamic; added 2022
ILLNESS_SEVERITY	Dynamic; added 2022
APR_MDC	Dynamic; added 2022
APR_GRP_VER	Dynamic; added 2022
APR_GRP_ERROR_CODE	Dynamic; added 2022

DATA PROCESSING AND QUALITY

Beginning with data submitted for 2004 discharges hospitals required to submit discharged inpatient claims data, moved from the submission of data in the uniform bill (electronic UB-92) format to the THCIC 837 format. The data are validated through a process of automated auditing and verification. Each individual hospital is responsible for the accuracy and completeness of its data. Even so, each record is subjected by DSHS to a series of audits that check for consistency and conformity with the definitions stated in the data specification manual. Records failing an audit check are returned to the hospital for correction and resubmission. Following the correction process, DSHS uses valid claims data to build files of "encounters" where one encounter contains the final discharge and all related interim claims information for a patient. Then, each submitting hospital has an opportunity to review, to make additional corrections, and to certify the encounter data with or without comments. Finally, DSHS builds a final encounter file that includes all corrections submitted by the hospitals. DSHS staff checks and adjusts for missing values and invalid codes in this file before the PUDF is generated. Users are advised to examine every data element to be used for missing values and invalid codes and to read accompanying notes, comments, and other descriptive text.

Beginning with fourth (4th) quarter 2015 data ICD-10-CM diagnostic codes and ICD-10-PCS procedure codes were mandated by the Federal Government. The increased length of the codes required a change in the data file formats. Some data fields (for example, "POA_Provider_ Indicator" and Cert_Status") are moved to the "Facility Type Indicator" file.

PATIENT/PHYSICIAN CONFIDENTIALITY

The legislative intent behind the creation of the Hospital Discharge Database (HDD) was that the data and resulting information be used for the benefit of the public. This is specified in Section 108.013 of the Texas Health and Safety Code

(THSC). Section 108.013(c) also stipulates that DSHS may not release, and a person or entity may not gain access to any data that could reasonably be expected to reveal the identity of a patient or physician. Any effort to determine the identity of any person violates the Section 108.013 and may incur penalties as stated in Sections 108.014 and 108.0141. In addition, under Section 108.013(e) and (f), patient and/or physician information in the HDD cannot be used for discovery, subpoena, or other means of legal compulsion or in any civil, administrative, or criminal proceeding. Pursuant to the THSC, DSHS excludes all direct personal and demographic identifiers (e.g., name, address, social security number, patient identifiers, admission and discharge dates) that might lead to the identification of a specific patient from the PUDF.

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

- The last two digits of the patient's ZIP code are suppressed if there are fewer than thirty patients included in the ZIP code.
- The ZIP code is changed to '88888' for patients from states other than Texas and the adjacent states.
- The entire ZIP code and gender code are suppressed if the ICD-10-CM or ICD-10-PCS codes indicates alcohol or drug use or an HIV diagnosis.
- The entire ZIP code and provider name are suppressed if a hospital has fewer than five discharges of a particular gender, including 'unknown'. The provider ID is changed to '999998'.
- The entire ZIP code is suppressed if a hospital has fewer than fifty discharges in a quarter and the provider ID is changed to '999999'.
- The country code is suppressed if the country field has fewer than five discharges for that quarter.
- The county code is suppressed if a county has fewer than five discharges for that quarter.
- Age is represented by 22 age group codes for the general patient population and 5 age group codes for the HIV and alcohol and drug use patient populations.
- Race is changed to 'Other' and ethnicity is suppressed if a hospital has fewer than ten discharges of a race.

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

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

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

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

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

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

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

RESTRICTIONS ON DATA USE

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

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

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DSHS. The data are protected by United States copyright laws and international treaty provisions.

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

- The licensee will not release nor permit others to release the individual patient records or any part of them to any person who is not a staff member of the organization that has acquired the data, except with the written approval of DSHS;
- The licensee will not attempt to link nor permit others to attempt to link the hospital stay records of patients in this data set with personally identifiable records from any other source, including any THCIC research data files;
- The licensee will not release nor permit others to release any information that identifies persons, directly or indirectly;
- The licensee will not attempt to use nor permit others to use the data to learn the identity of any physician;
- The licensee will not permit others to copy, sell, rent, license, lease, loan, or otherwise grant access to the data covered by the Data Use Agreement to any other person or entity, unless approved in writing by DSHS;
- The licensee agrees to read the User Manual and to be cognizant of the limitations of the data;
- The licensee will use the following citation in any publication of information from this file:
- Texas Hospital Inpatient Discharge Public Use Data File, [quarter and year of data]. Texas Department of State Health Services, Center for Health Statistics, Austin, Texas. [date of publication];
- The licensee will indemnify, defend, and hold the DSHS, its members, employees, and the Department's contract vendors harmless from any and all claims and losses accruing to any person as a result of violation of this agreement; and
- The licensee will make no statement nor permit others to make statements indicating or suggesting that interpretations drawn from these data are those of DSHS.

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

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Agreement, the PUDF user has been informed that the potential for both civil and criminal penalties exists.

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

DATA LIMITATIONS

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

- Section 108.009(h), THSC requires that a uniform submission format be used for reporting purposes. Before 2004 data were collected in the UB-92 format. Data for 2004 were collected in both UB-92 electronic format and THCIC 837 format. Because these are billing forms, the data collected are administrative data and not clinical data. Beginning with 2005 all data are collected from the THCIC 837 format.
- Records with Major Diagnositic Category (MDC) codes of 15 (newborns and other neonates with conditions originating in the perinatal period), 20 (alcohol/drug induced organic mental disorders), or 22 (burns) and Patient Status codes of 62 (discharged/transferred to inpatient rehabilitation), 71 (discharged/transferred to other outpatient service), or 72 (discharged/transferred to institution outpatient service) contain an APR-DRG of 956 (ungroupable). These Patient Status codes were not valid when version 15 of the 3M APR-DRG Grouper was developed. A valid Patient Status code is required for these MDC codes for APR-DRG assignment and Risk of Mortality and Severity of Illness scoring. Patient status codes 71 and 72 are no longer valid as of October 2003. After October 2003 records with MDC codes of 15, 20, or 22 and Patient Status code of 62 contain an APR-DRG of 956.
- Hospital charges data are available after third (3rd) guarter 2000. Earlier data were not reported correctly by some hospitals.
- Secondary source of payment data are available after third (3rd) guarter 2000. Earlier data were not reported correctly by some hospitals.
- Gender is suppressed for patients with an ICD-10-CM code that indicates drug or alcohol use or an HIV diagnosis.
- The last two digits of the ZIP code are suppressed if there are fewer than thirty patients included in the zip code. All of the ZIP code is suppressed for patients with an ICD-10-CM code that indicates drug or alcohol use or an HIV diagnosis or if a hospital has fewer than five discharges of a particular gender, including 'unknown'. ZIP code is changed to '88888' for patients from a state other than Texas and not from an adjacent state. If ZIP is '88888' the state abbreviation is changed to 'ZZ'. ZIP code is suppressed if a hospital has fewer than five patients of a particular gender, including 'unknown'.

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- Admission Source as reported by hospitals is suppressed, as recommended by the Council, when the Admission Type is 'newborn'. Data users can use ICD-10-CM codes to correctly identify the clinical status of newborns.
- Uniform identification numbers for physicians are available after first (1st)
 quarter 2000 except when the number of physicians represented in a DRG
 for a hospital is less than the minimum cell size of five.
- The data are a snapshot in time. Hospitals must submit data no later than 60 days after the close of a calendar quarter. Depending on hospitals' collection and billing cycles, not all discharges may have been billed or reported. This can affect the accuracy of source of payment data, particularly self-pay and charity that may later qualify for Medicaid or other payment sources.
- Beginning with data for 2004 discharges, up to 25 diagnosis codes, up to 25 procedure codes, and up to 10 E-codes can be submitted. For earlier years the number of diagnosis codes collected per patient is limited to 9 and the number of procedure codes to 6. Because of these limitations, sicker patients and the hospitals that treat them may not be accurately represented in the data. This may also result in total volume and percentage calculations for diagnoses and procedures not being complete.
- Race and ethnicity data are required by law and rule to submit for each patient, generally not collected by hospitals and may be subjectively captured.
- Inaccuracies in the data and incompleteness of the data are addressed in the hospitals' comments if submitted by the facilities.
- County of residence is not collected by hospitals. County Federal Information Processing Standard (FIPS) codes are assigned by DSHS based on patient ZIP code.
- DSHS assigns the Risk of Mortality and Severity of Illness scores using methodology designed by 3M. These scores may be affected by the number of diagnoses and procedure codes collected by DSHS or by the facility's information system and may be understated.
- Comparability of length of stay (LOS) across hospitals is affected by factors such as case-mix and severity complexity, payer-mix, market areas and hospital ownership, affiliation or teaching status. Any analysis of LOS at the hospital level should consider the above factors.
- Length of stay is limited to 999 days prior to 2004 discharges.
- Any analysis of mortality should note that the data reflect only patients who died in the hospital and not those who died after discharge from the hospital.
- Conditions present at time of admission cannot be distinguished from those occurring during hospitalization prior to 2011 discharges. Diagnosis present on admission indicator codes (POA) were required for all hospitals, except Critical Access Hospitals, Inpatient Rehabilitation Hospitals, Inpatient Psychiatric Hospitals, Cancer Hospitals, Children's or Pediatric

- Hospitals, and Long-Term Care Hospitals. Some acute care hospitals that have special units similar to the hospitals exempted from reporting POA may not include POA codes for those patients.
- Updates to any PUDF CD's are available through the THCIC website, http://www.dshs.texas.gov/thcic/, which should be checked periodically as notifications of an update will not be sent.
- DSHS collects data from all hospitals in the state not specifically exempted by statute prior to January 1, 2015, services. Some hospitals maybe exempted for certain situations (for example, natural or other disasters or other unusual conditions) for limited time periods. This hospital mix should be considered when drawing conclusions about the data or making comparisons with other data.
- Any conclusions drawn from the data are subject to errors caused by the inability of the hospital to communicate complete data due to form constraints, subjectivity in the assignment of codes, system mapping, and clerical error. The data are submitted by hospitals as their best effort to meet statutory requirements.

HOSPITAL COMMENTS

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

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

CITATION

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

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

REVISION

Field 2: DISCHARGE: Additional information regarding the breakdown of months into quarters added

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Texas Department of State Health Services

Texas Hospital Inpatient Discharge Public Use Data File

DATA DICTIONARY

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

Note a change: Any code provided by a hospital that has been determined to be invalid has been assigned the value `. Any data element that is blank should be interpreted as 'missing', no data provided, unless otherwise noted.

BASE DATA #1 FILE

Field 1:	RECORD_ID					
Description:	Record Identification Number. Unique number assigned to identify the record. First available					
	1st quarter 2002. Does NOT match the RECORD_ID in THCIC Research Data Files (RDF's).					
Beginning Position:	1 Data Source: Assigned					
Length:	12 Type: Alphanumeric					
Field 2:	DISCHARGE					
Description:	Discharge Quarter. Year and quarter of discharge. yyyyQn.					
	1st Quarter (YYYYQ1): 1st January-31st March of that corresponding year					
	2nd Quarter (YYYYQ2): 1st April – 30th June of that corresponding year					
	3rd Quarter (YYYYQ3): 1st July- 30th September of that corresponding year					
	4th Quarter (YYYYQ4); 1st October-31st December of that corresponding year					
	* Late submissions by facilities of the previous quarter can appear.					

n n	12	D 4 G	A . 1	
Beginning Position:	13	Data Source:	Assigned	
Length:	6 THOIC ID	Type:	Alphanumeric	
Field 3:	THCIC_ID Drawider ID Unique identifi	ion assismed to the	marridan br. DCIIC	
Description:	Provider ID. Unique identifi			moviden ID '000000' If
Suppression:	Hospitals with fewer than 50 a hospital has fewer than 5 of			
	is '999998'.	discharges of a par	ilcular gender, including	inknown, Provider ID
Beginning Position:	19	Data Source:	Assigned	
Length:	6	Type:	Alphanumeric	
Field 4:	TYPE_OF_ADMISSION	турс.	Aiphanumene	
Description:	Code indicating the type of	admission		
Coding Scheme:	1 Emergency	admission		
couning sememe.	2 Urgent			
	3 Elective 4 Newborn			
	5 Trauma			
	9 Information not availab	le		
	` Invalid	-	~. ·	
Beginning Position:	25	Data Source:	Claim	
Length:	1	Type:	Alphanumeric	
Field 5:	SOURCE_OF_ADMISSION			
Description:	Code indicating source of the			
Coding Scheme:	 Non-Healthcare Facility Clinic or Physician's On 		inning July 1, 2010)	
	4 Transfer from a hospital			
			ediate care facility or assisted liv	ing facility
	6 Transfer from another h	•		
	8 Court/Law Enforcemen 9 Information not availab			
			al to another Distinct Unit of the	Same Hospital Resulting in a
	Separate Claim to the P	ayer		1
	E Transfer from Ambulate			
	F Transfer from a Hospice Invalid	e Facility		
	If Type of Admission=4 (Newborn	1)		
	5 Born inside this hospita	1		
	6 Born outside this hospit		~. ·	
Beginning Position:	26	Data Source:	Claim	
Length:	CONT. C. LINITE 1	Type:	Alphanumeric	
Field 6:	SPEC_UNIT_1	. 1 1	11 1 1	C 1 1 TD C
Description:	Specialty Units in which mo	ost days during sta	y occurred based on number	er of days by Type of
Cadina Sahama	Bill or Revenue Code.	oronary Care Unit	P	Pediatric Unit
Coding Scheme:		etoxification Unit	Y	Psychiatric Unit
	I In	tensive Care Unit	R	Rehabilitation Unit
		ospice Unit	U	Sub-acute Care Unit
		ursery bstetric Unit	S Blank	Skilled Nursing Unit Acute Care
		ncology Unit	Diank	Acute Care
Beginning Position:	27	Data Source:	Calculated	
Length:	1	Type:	Alphanumeric	
Field 7:	SPEC_UNIT_2	• •	•	
Description:	Specialty Units in which 2 nd	l most days during	stay occurred based on nu	mber of days by Type
	of Bill or Revenue Code.			
Coding Scheme:	Same as field SPEC_UNIT_	_1		
Beginning Position:	28	Data Source:	Calculated	
Length:	1	Type:	Alphanumeric	
Field 8:	SPEC_UNIT_3			
Description:	Specialty Units in which 3 rd	most days during	stay occurred based on nur	mber of days by Type
	of Bill or Revenue Code.			

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DSHS Document # E25-14163 Last Updated: December, 2024 **Coding Scheme:** Same as field SPEC_UNIT_1

Beginning Position:29Data Source:CalculatedLength:1Type:Alphanumeric

Field 9: SPEC UNIT 4

Description: Specialty Units in which 4th most days during stay occurred based on number of days by Type

of Bill or Revenue Code.

Coding Scheme: Same as field SPEC_UNIT_1

Beginning Position:30Data Source:CalculatedLength:1Type:Alphanumeric

Field 10: SPEC UNIT 5

Description: Specialty Units 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 SPEC_UNIT_1

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

Field 11: PAT STATE

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

Postal Service abbreviation.

Coding Scheme: AR Arkansas

LA Louisiana NM New Mexico OK Oklahoma TX Texas

ZZ All other states and American Territories

FC Foreign country XX Foreign country

Beginning Position:32Data Source:ClaimLength:2Type:Alphanumeric

Field 12: PAT ZIP

Description: Patient's five-digit ZIP code.

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

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

gender, including 'unknown', the ZIP Code is blank.

Beginning Position:34Data Source:ClaimLength:5Type:Alphanumeric

Field 13: PAT COUNTRY

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

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

(back quote).

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

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

Beginning Position: 39 Data Source: Claim

Length: Alphanumeric Type: Field 14: PAT COUNTY **Description:** FIPS code of patient's county. Anderson 001 129 Donley 257 Kaufman 385 Real **Coding scheme:** 003 Andrews 131 Duval 259 Kendall 387 Red River 005 Angelina 133 Eastland 261 Kenedy 389 Reeves 007 Aransas 135 263 391 Refugio Ector Kent 009 Archer 137 Edwards 265 Kerr Roberts 011 Armstrong 139 Kimble 395 Ellis 267 Robertson 013 Atascosa 141 El Paso 269 King 397 Rockwall 015 Austin 143 Erath Kinney Runnels 017 Bailey Falls Kleberg Rusk

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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
			TD + CI +				

Beginning Position: Length:

3 Type:
PUBLIC_HEALTH_REGION

41

Field 15: Description: Coding Scheme:

Public Health Region of patient's address.

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

Data Source: Assigned; based on patient ZIP code

Alphanumeric

- 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

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- Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Harris, Liberty, Matagorda, Montgomery, 6 Walker, Waller, Wharton counties
- Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Caldwell, Coryell, Falls, Fayette, Freestone, Grimes, 7 Hamilton, Hays, Hill, Lampasas, Lee, Leon, Limestone, Llano, McLennan, Madison, Milam, Mills, Robertson, San Saba, Travis, Washington, Williamson counties
- Atascosa, Bandera, Bexar, Calhoun, Comal, DeWitt, Dimmit, Edwards, Frio, Gillespie, Goliad, Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr, Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala counties
- Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble, 9 Loving, McCulloch, Martin, Mason, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward, Winkler counties
- 10 Brewster, Culberson, El Paso, Hudspeth, Jeff Davis, Presidio counties
- Aransas, Bee, Brooks, Cameron, Duval, Hidalgo, Jim Hogg, Jim Wells, Kenedy, Kleberg, Live Oak, 11 McMullen, Nueces, Refugio, San Patricio, Starr, Webb, Willacy, Zapata counties Invalid

Beginning Position:

44

Data Source: Assigned Type: Alphanumeric

Length: Field 16:

PAT STATUS

Description: Coding Scheme:

Code indicating patient status as of the ending date of service for the period of care reported

- Discharged to home or self-care (routine discharge)
- Discharged/transferred to a short-term general hospital for inpatient care
- Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation of skilled 03
- 04 Discharged/transferred to a facility that provides custodial or supportive care
- 05 Discharged/transferred to a Designated Cancer Center or Children's Hospital (effective 10-1-2007)
- 06 Discharged/transferred to home under care of an organized home health service organization in anticipation of covered skilled care
- 07 Left against medical advice
- 09 Admitted as inpatient to this hospital
- Expired 20
- 21 Discharged/transferred to Court/Law Enforcement
- 30 Still patient
- 40 Expired at home
- 41 Expired in a medical facility
- 42 Expired, place unknown
- 43 Discharged/transferred to federal government operated health facility
- 50 Hospice-home
- 51 Hospice-medical facility (Certified) providing hospice level of care
- 61 Discharged/transferred within this institution to Medicare-approved swing bed
- Discharged/transferred to inpatient rehabilitation facility 62
- Discharged/transferred to Medicare-certified long term care hospital 63
- Discharged/transferred to Medicaid-certified nursing facility under Medicaid but not certified under Medicare 64
- Discharged/transferred to psychiatric hospital or psychiatric distinct part of a hospital 65
- Discharged/transferred to Critical Access Hospital (CAH) 66
- Discharged/Transferred to a designated disaster alternate care (effective 10-1-2013) 69
- 70 Discharge/transfer to another type of health care institution not defined elsewhere in the code list
- Discharged to Home or Self Care with a Planned Acute. Care Hospital Inpatient Readmission (effective 10-1-81
- Discharged/Transferred to a Short Term General Hospital for Inpatient Care with a Planned Acute Care 82 Hospital Inpatient Readmission (effective 10-1-2013)
- Discharged/Transferred to a Skilled Nursing Facility (SNF) with Medicare Certification with a Planned Acute 83 Care Hospital Inpatient Readmission (effective 10-1-2013)
- Discharged/Transferred to a Facility that Provides Custodial or Supportive Care with a Planned Acute Care 84 Hospital Inpatient Readmission (effective 10-1-2013)
- Discharged/transferred to a Designated Cancer Center or Children's Hospital with a Planned Acute Care 85 Hospital Inpatient Readmission (effective 10-1-2013)
- 86 Discharged/Transferred to Home under Care of Organized Home Health Service Organization with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 87 Discharged/Transferred to Court/Law Enforcement with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- Discharged/Transferred to a Federal Health Care Facility with a Planned Acute Care Hospital Inpatient 88 Readmission (effective 10-1-2013)
- Discharged/Transferred to a Hospital-based Medicare Approved Swing Bed with a Planned Acute Care 89 Hospital Inpatient Readmission (effective 10-1-2013)
- Discharged/Transferred to an Inpatient Rehabilitation Facility (IRF) including Rehabilitation Distinct Part 90 Units of a Hospital with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)
- 91 Discharged/Transferred to a Medicare Certified Long Term Care Hospital (LTCH) with a Planned Acute Care Hospital Inpatient Readmission (effective 10-1-2013)

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	a Planned Acute Care Hos	spital Inpatient Readn	ertified Under Medicaid but not Certified Under Medicare with nission (effective 10-1-2013) al or Psychiatric Distinct Part Unit of a Hospital with a Planned				
	Acute Care Hospital Inpatient Readmission (effective 10-1-2013) 94 Discharged/Transferred to a Critical Access Hospital (CAH) with a Planned Acute Care Hospital Inpatient						
	Readmission (effective 10)-1-2013)	alth Care Institution not Defined Elsewhere in this Code List				
	with a Planned Acute Care ` Invalid	e Hospital Inpatient R	Readmission (effective 10-1-2013)				
Beginning Position:	46	Data Source:	Claim				
Length:	2	Type:	Alphanumeric				
Field 17:	SEX_CODE	• •					
Description:	Gender of the patient as rec	orded at date of a	admission or start of care.				
Suppression:			ndicates drug or alcohol use or an HIV diagnosis. If				
Биррі Святон.			an HIV diagnosis (patients covered by 42 USC				
			der of the patient is reported as "U" (Unknown). If				
			icular gender, including unknown, Provider ID is				
			P Code are blank for those patients.				
Cadina Cahamar	M Male	ie and i attent Zii	Code are brank for those patients.				
Coding Scheme:	F Female						
	U Unknown						
	` Invalid						
Beginning Position:	48	Data Source:	Claim				
Length:	1	Type:	Alphanumeric				
Field 18:	RACE						
Description:	Code indicating the patient?	's race.					
Suppression:	If a hospital has fewer than	ten patients of or	ne race that race is changed to 'Other' (code equals 5).				
Coding Scheme:	 American Indian/Eskimo/ 	Aleut					
	2 Asian or Pacific Islander						
	3 Black 4 White						
	5 Other						
	Invalid						
Beginning Position:	49	Data Source:	Claim				
Length:	1	Type:	Alphanumeric				
Field 19:	ETHNICITY						
Description:	Code indicating the Hispan	ic origin of the pa	atient.				
Suppression:			ne race the ethnicity of patients of that race is				
••	suppressed (code is blank).	•	• •				
Coding Scheme:	1 Hispanic Origin						
8	2 Not of Hispanic Origin						
	` Invalid						
Beginning Position:	50	Data Saurca					
			Claim				
Length:	1	Type:	Claim Alphanumeric				
Field 20:	ADMIT_WEEKDAY	Type:	Alphanumeric				
Field 20: Description:	ADMIT_WEEKDAY Code indicating day of wee	Type:	Alphanumeric				
Field 20:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday	Type:	Alphanumeric sted 5 Friday				
Field 20: Description:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday	Type:	Alphanumeric tted 5 Friday 6 Saturday				
Field 20: Description:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday	Type:	Alphanumeric sted 5 Friday				
Field 20: Description: Coding Scheme:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday 4 Thursday	Type: k patient is admit	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid				
Field 20: Description: Coding Scheme: Beginning Position:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday	Type: k patient is admit Data Source:	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid Assigned				
Field 20: Description: Coding Scheme: Beginning Position: Length:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday 4 Thursday 51	Type: k patient is admit	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid				
Field 20: Description: Coding Scheme: Beginning Position: Length: Field 21:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday 4 Thursday 51 1 LENGTH_OF_STAY	Type: k patient is admit Data Source: Type:	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid Assigned Alphanumeric				
Field 20: Description: Coding Scheme: Beginning Position: Length:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday 4 Thursday 51 1 LENGTH_OF_STAY Length of stay in days equal	Type: k patient is admit Data Source: Type:	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday 1 Invalid Assigned Alphanumeric ers period through date minus Admission/start of				
Field 20: Description: Coding Scheme: Beginning Position: Length: Field 21: Description:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday 4 Thursday 51 1 LENGTH_OF_STAY Length of stay in days equal care date. The minimum len	Type: k patient is admit Data Source: Type: als Statement covering the of stay is 1 decembers.	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid Assigned Alphanumeric ers period through date minus Admission/start of lay. The maximum is 9999 days.				
Field 20: Description: Coding Scheme: Beginning Position: Length: Field 21: Description: Beginning Position:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday 4 Thursday 51 1 LENGTH_OF_STAY Length of stay in days equal care date. The minimum len 52	Type: ck patient is admit Data Source: Type: cls Statement coveringth of stay is 1 d Data Source:	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid Assigned Alphanumeric ers period through date <i>minus</i> Admission/start of lay. The maximum is 9999 days. Calculated				
Field 20: Description: Coding Scheme: Beginning Position: Length: Field 21: Description: Beginning Position: Length:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday 4 Thursday 51 1 LENGTH_OF_STAY Length of stay in days equal care date. The minimum len 52 4	Type: k patient is admit Data Source: Type: als Statement covering the of stay is 1 decembers.	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid Assigned Alphanumeric ers period through date minus Admission/start of lay. The maximum is 9999 days.				
Field 20: Description: Coding Scheme: Beginning Position: Length: Field 21: Description: Beginning Position: Length: Field 22:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday 4 Thursday 51 1 LENGTH_OF_STAY Length of stay in days equal care date. The minimum ler 52 4 PAT_AGE	Type: tk patient is admit Data Source: Type: tls Statement coveringth of stay is 1 d Data Source: Type:	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid Assigned Alphanumeric ers period through date minus Admission/start of lay. The maximum is 9999 days. Calculated Alphanumeric				
Field 20: Description: Coding Scheme: Beginning Position: Length: Field 21: Description: Beginning Position: Length: Field 22: Description:	ADMIT_WEEKDAY Code indicating day of wee 1	Type: Ik patient is admit Data Source: Type: Ils Statement cover one of stay is 1 decent of stay is 1 decent of stay is 1 decent one of stay is 1 d	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid Assigned Alphanumeric ers period through date minus Admission/start of lay. The maximum is 9999 days. Calculated Alphanumeric ars on date of discharge.				
Field 20: Description: Coding Scheme: Beginning Position: Length: Field 21: Description: Beginning Position: Length: Field 22:	ADMIT_WEEKDAY Code indicating day of wee 1 Monday 2 Tuesday 3 Wednesday 4 Thursday 51 1 LENGTH_OF_STAY Length of stay in days equal care date. The minimum ler 52 4 PAT_AGE	Type: tk patient is admit Data Source: Type: tls Statement coveringth of stay is 1 d Data Source: Type:	Alphanumeric tted 5 Friday 6 Saturday 7 Sunday Invalid Assigned Alphanumeric ers period through date minus Admission/start of lay. The maximum is 9999 days. Calculated Alphanumeric ars on date of discharge. 20 85-89				

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	02	1-4 years	12	45-49				V and drug/alcohol use patients:
	03	5-9	13	50-54			22	
	04	10-14	14	55-59			23	
	05	15-17	15	60-64			24	
	06	18-19	16	65-69			25	
	07 08	20-24 25-29	17 18	70-74 75-79			26	75+ Invalid
	09	30-34	19	80-84				mvanu
Beginning Position:	56	30 31	Data S		Assigned	l		
Length:	2		Type:		Alphanu	meric		
Field 23:	FIRS	ST_PAYMENT_SRC						
Description:		e indicating the expected						
Coding Scheme:	09	Self Pay (Removed from 50	010 forma	t, use "ZZ"	HM	Health Ma	aintena	ance Organization
	10	beginning 2Q2012 data) Central Certification			LI	Liability		
	11	Other Non-federal Program	ıs		LM	Liability I	Medic:	a1
	12	Preferred Provider Organiza		O)	MA	Medicare		
	13	Point of Service (POS)	(- /	MB	Medicare		
	14	Exclusive Provider Organiz	zation (EP	O)	MC	Medicaid		
	15	Indemnity Insurance			TV	Title V		
	16	Health Maintenance Organi	ızation (H	MO)	OF	Other Fed	eral P	rogram
	AM	Medicare Risk Automobile Medical			VA	Veteran A	dmini	stration Plan
	BL	Blue Cross/Blue Shield			WC			ensation Health Claim
	CH	CHAMPUS			ZZ	Charity, In	ndiger	t or Unknown
	CI	Commercial Insurance			**			Z, combined for 2004 & 2005
	DS	Disability Insurance			`	Invalid		
Beginning Position:	58		Data S	ource:	Claim			
Length:	2		Type:		Alphanu	meric		
Field 24:	SEC	ONDARY_PAYMENT						
Description:		e indicating the expected		arv sour	e of pavn	nent.		
Coding Scheme:		e as field FIRST_PAYM			1			
Beginning Position:	60	, as 11010 1 11to 1_11111	Data S		Claim			
Length:	2		Type:	our cc.	Alphanu	meric		
Field 25:		PE_OF_BILL	- <u> </u>		Tipiana	inerie		
Description:		cates the specific type of	bill					
Coding Scheme:		it–Type of Facility		ligit–Type o	of Care		3^{rd} a	ligit–Sequence of claim
couning peneme.		Hospital	1		including M	ledicare	0	Non-payment/Zero claim
	2 :	Skilled nursing	2		Medicare Pa	art B only	1	Admit through discharge claim
		Home health	3	Outpatien			2	Interim–first claim
		Religious non-medical health	4		t Other, Med	licare	3	Interim-continuing claim
		care-Hospital		Part B on	•			· ·
		Religious non-medical health care—Extended care	5	Intermedi	ate Care–Le	vel I	4	Interim-last claim
		Intermediate care	6	Intermedi	ate Care–Le	vel II	5	Late charge(s) only claim
		Clinic	7		inpatient –		6	Adjustment of prior claim (No
					*			used by Medicare)
		Special facility	8	Swing be	d		7	Replacement of prior claim
Reginning Position	8	Special facility		Č			7 8	Void/cancel of prior claim
Beginning Position:	8 :	Special facility	Data S	Č	Claim	meric		
Length:	8 5 62 3	. ,		Č		meric		
Length: Field 26:	8 62 3 TOT	TAL_CHARGES	Data S Type:	ource:	Claim Alphanu		8	Void/cancel of prior claim
Length:	8 3 62 3 TOT Sum	CAL_CHARGES of accommodation char	Data S Type:	ource:	Claim Alphanu l accomm	odation c	8	
Length: Field 26: Description:	8 3 62 3 TOT Sum cover	TAL_CHARGES	Data S Type:	ource: 1-covered TOTAL	Claim Alphanu l accomm	odation c	8	Void/cancel of prior claim
Length: Field 26: Description: Beginning Position:	8 5 62 3 TOT Sum cover 65	CAL_CHARGES of accommodation char	Data S Type: rges, non eplaces Data S	ource: 1-covered TOTAL	Claim Alphanu l accomm CHARGI Claim	odation c ES_23.	8	Void/cancel of prior claim
Length: Field 26: Description: Beginning Position: Length:	8 5 62 3 TOT Sum cover 65 12	TAL_CHARGES of accommodation char red ancillary charges. Re	Data S Type: rges, nor eplaces Data S Type:	ource: 1-covered TOTAL	Claim Alphanu l accomm	odation c ES_23.	8	Void/cancel of prior claim
Length: Field 26: Description: Beginning Position: Length: Field 27:	8 : 62 3 TOT Sum cover 65 12 TOT	TAL_CHARGES of accommodation char red ancillary charges. Re	Data S Type: rges, non eplaces Data S Type: ARGES	ource: n-covered TOTAL ource:	Claim Alphanu I accomm CHARGI Claim Numeric	odation c ES_23.	8 harge	Void/cancel of prior claim es, ancillary charges, non-
Length: Field 26: Description: Beginning Position: Length: Field 27: Description:	8 : 62 3 TOT Sum cover 65 12 TOT Sum	TAL_CHARGES of accommodation char red ancillary charges. Re	Data S Type: rges, nor eplaces Data S Type: ARGES nodation	ource: n-covered TOTAL ource:	Claim Alphanu l accomm CHARGI Claim Numeric , non-cove	odation c ES_23.	8 harge	Void/cancel of prior claim
Length: Field 26: Description: Beginning Position: Length: Field 27:	8 3 7 7 7 8 1 8 1 8 1 8 1 8 1 8 1 8 1 8 1 8	TAL_CHARGES of accommodation char red ancillary charges. Re	Data S Type: rges, non eplaces Data S Type: ARGES	ource: n-covered TOTAL ource:	Claim Alphanu I accomm CHARGI Claim Numeric	odation c ES_23.	8 harge	Void/cancel of prior claim es, ancillary charges, non-
Length: Field 26: Description: Beginning Position: Length: Field 27: Description:	8 : 62 3 TOT Sum cover 65 12 TOT Sum	TAL_CHARGES of accommodation char red ancillary charges. Re	Data S Type: rges, nor eplaces Data S Type: ARGES nodation	ource: n-covered TOTAL ource:	Claim Alphanu l accomm CHARGI Claim Numeric , non-cove	odation c ES_23.	8 harge	Void/cancel of prior claim es, ancillary charges, non-
Length: Field 26: Description: Beginning Position: Length: Field 27: Description: Beginning Position:	8 : 62 3 TOT Sum cover 65 12 TOT Sum 77 12	TAL_CHARGES of accommodation char red ancillary charges. Re	Data S Type: rges, nor eplaces Data S Type: ARGES nodation Data S Type:	ource: n-covered TOTAL ource:	Claim Alphanu l accomm CHARGI Claim Numeric , non-cove	odation c ES_23.	8 harge	Void/cancel of prior claim es, ancillary charges, non-
Length: Field 26: Description: Beginning Position: Length: Field 27: Description: Beginning Position: Length:	8 : 62 3 TOT Sum cover 65 12 TOT Sum 77 12	CAL_CHARGES of accommodation char red ancillary charges. Re CAL_NON_COV_CHA of non-covered accomm	Data S Type: rges, nor eplaces Data S Type: ARGES nodation Data S Type:	ource: n-covered TOTAL ource:	Claim Alphanu l accomm CHARGI Claim Numeric , non-cove	odation c ES_23.	8 harge	Void/cancel of prior claim es, ancillary charges, non-

Description: Sum of covered and non-covered accommodation charges. **Beginning Position:** 89 Data Source: Claim Length: 12 Type: Numeric Field 29: TOTAL NON COV CHARGES ACCOMM **Description:** Sum of non-covered accommodations charges. **Beginning Position:** 101 **Data Source:** Claim Length: 12 Type: Numeric Field 30: TOTAL_CHARGES_ANCIL **Description:** Sum of covered and non-covered ancillary charges. **Beginning Position: Data Source:** 113 Length: 12 Type: Numeric TOTAL NON COV CHARGES ANCIL Field 31: **Description:** Sum of non-covered ancillary charges. **Beginning Position:** 125 **Data Source:** Claim Length: 12 Type: Numeric Field 32: ADMITTING DIAGNOSIS **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position:** 137 **Data Source:** Claim Length: Alphanumeric Type: Field 33: PRINC DIAG CODE **Description:** ICD-10-CM diagnosis code for the principal diagnosis, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position:** 144 **Data Source:** Claim Length: Alphanumeric Type: Field 34: POA PRINC DIAG CODE Code identifying whether Principal Diagnosis code was present at the time the patient was **Description:** admitted to the hospital Y Yes **Coding Scheme:** N No U Unknown W Clinically Undetermined Space (1st & 2nd Qtr. 2012 only) Invalid **Beginning Position:** 151 **Data Source:** Claim Length: Alphanumeric Type: Field 35: OTH DIAG CODE 1 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position:** 152 **Data Source:** Claim Length: Type: Alphanumeric Field 36: POA_OTH_DIAG_CODE_1 **Description:** Code identifying whether Oth Diag Code 1 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA_PRINC_DIAG_CODE **Beginning Position:** 159 **Data Source:** Claim Length: Type: Alphanumeric **Field 37:** OTH DIAG CODE 2 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position:** 160 **Data Source:** Claim Type: Length: Alphanumeric Field 38: POA OTH DIAG CODE 2 **Description:** Code identifying whether Oth Diag Code 2 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Beginning Position:** 167 **Data Source:** Claim DSHS/THCIC DSHS Document # E25-14163 Page 19

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Length: Type: Alphanumeric OTH DIAG CODE 3 Field 39: **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Data Source: Beginning Position:** 168 Claim Length: 7 Type: Alphanumeric POA OTH DIAG CODE 3 Field 40: **Description:** Code identifying whether Oth_Diag_Code_3 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Beginning Position: Data Source:** 175 Claim Length: Type: Alphanumeric Field $\overline{41}$: OTH_DIAG_CODE_4 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position:** 176 **Data Source:** Claim Length: Alphanumeric Type: POA_OTH_DIAG_CODE_4 Field 42: Code identifying whether Oth Diag Code 4 code was present at the time the patient was **Description:** admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Data Source: Beginning Position:** 183 Claim Length: Type: Alphanumeric **Field 43:** OTH_DIAG_CODE_5 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position:** 184 **Data Source:** Claim Length: Alphanumeric Type: Field 44: POA OTH DIAG CODE 5 Code identifying whether Oth Diag Code 5 code was present at the time the patient was **Description:** admitted to the hospital Same as Field POA PRINC DIAG CODE **Coding Scheme: Beginning Position:** 191 **Data Source:** Claim Length: Type: Alphanumeric Field 45: OTH DIAG CODE 6 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position:** 192 **Data Source:** Claim Length: Alphanumeric Type: Field 46: POA OTH DIAG CODE 6 Code identifying whether Oth Diag Code 6 code was present at the time the patient was **Description:** admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Beginning Position:** 199 **Data Source:** Claim Length: Type: Alphanumeric **Field 47:** OTH_DIAG_CODE_7 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position:** 200 **Data Source:** Claim Type: Length: Alphanumeric Field 48: POA OTH DIAG CODE 7 Code identifying whether Oth_Diag_Code_7 code was present at the time the patient was **Description:** admitted to the hospital

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Data Source:

Claim

Same as Field POA_PRINC_DIAG_CODE

Coding Scheme:

Beginning Position:

Length:1Type:AlphanumericField 49:OTH_DIAG_CODE_8Description:ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is

implied following the third character.

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

Length: 7 **Type:** Alphanumeric

Field 50: POA OTH DIAG CODE 8

Description: Code identifying whether Oth_Diag_Code_8 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA_PRINC_DIAG_CODE

Beginning Position: 215 **Data Source:** Claim

Length: 1 Type: Alphanumeric

Field 51: OTH_DIAG_CODE_9

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

implied following the third character.

Beginning Position: 216 **Data Source:** Claim **Length:** 7 **Type:** Alphanumeric

Field 52: POA_OTH_DIAG_CODE_9

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

admitted to the hospital

Coding Scheme: Same as Field POA PRINC DIAG CODE

Beginning Position: 223 **Data Source:** Claim

Length: 1 Type: Alphanumeric

Field 53: OTH_DIAG_CODE_10

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

implied following the third character.

Beginning Position:224Data Source:ClaimLength:7Type:Alphanumeric

Field 54: POA OTH DIAG CODE 10

Description: Code identifying whether Oth Diag Code 10 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA PRINC DIAG CODE

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

Length: 1 Type: Alphanumeric

Field 55: OTH_DIAG_CODE_11

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

Claim

Alphanumeric

implied following the third character.

Beginning Position: 232 **Data Source:** Length: 7 **Type:**

Field 56: POA OTH DIAG CODE 11

Description: Code identifying whether Oth Diag Code 11 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA_PRINC_DIAG_CODE

Beginning Position:239Data Source:ClaimLength:1Type:Alphanumeric

Field 57: OTH_DIAG_CODE_12

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

implied following the third character.

Beginning Position: 240 Data Source: Claim

Length: 7 **Type:** Alphanumeric

Field 58: POA_OTH_DIAG_CODE_12

Description: Code identifying whether Oth_Diag_Code_12 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA_PRINC_DIAG_CODE

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

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 Length:
 1
 Type:
 Alphanumeric

 Field 59:
 OTH_DIAG_CODE_13

 Description:
 ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character.

Beginning Position: 248 Data Source: Claim

Length: 7 **Type:** Alphanumeric

Field 60: POA OTH DIAG CODE 13

Description: Code identifying whether Oth_Diag_Code_13 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA_PRINC_DIAG_CODE

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

Length: 1 Type: Alphanumeric

Field 61: OTH_DIAG_CODE_14

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

implied following the third character.

Beginning Position: 256 **Data Source:** Claim **Length:** 7 **Type:** Alphanumeric

Field 62: POA_OTH_DIAG_CODE_14

Description: Code identifying whether Oth Diag Code 14 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA PRINC DIAG CODE

Beginning Position: 263 **Data Source:** Claim

Length: 1 Type: Alphanumeric

Field 63: OTH_DIAG_CODE_15

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

implied following the third character.

Beginning Position:264Data Source:ClaimLength:7Type:Alphanumeric

Field 64: POA OTH DIAG CODE 15

Description: Code identifying whether Oth Diag Code 15 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA PRINC DIAG CODE

Beginning Position: 271 **Data Source:** Claim

Length: 1 Type: Alphanumeric

Field 65: OTH_DIAG_CODE_16

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

implied following the third character.

Beginning Position: 272 **Data Source:** Claim **Length:** 7 **Type:** Alphanumeric

Field 66: POA OTH DIAG CODE 16

Description: Code identifying whether Oth Diag Code 16 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA PRINC DIAG CODE

Beginning Position:279Data Source:ClaimLength:1Type:Alphanumeric

Field 67: OTH_DIAG_CODE_17

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

implied following the third character.

Beginning Position:280Data Source:ClaimLength:7Type:Alphanumeric

Field 68: POA OTH DIAG CODE 17

Description: Code identifying whether Oth_Diag_Code_17 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA_PRINC_DIAG_CODE

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

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Length: Type: Alphanumeric OTH DIAG CODE 18 Field 69:

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

implied following the third character.

Data Source: Beginning Position: 288 Claim

Length: 7 Type: Alphanumeric

Field 70: POA OTH DIAG CODE 18

Description: Code identifying whether Oth_Diag_Code_18 code was present at the time the patient was

admitted to the hospital

Coding Scheme: Same as Field POA PRINC DIAG CODE

Beginning Position: Data Source: 295 Claim

Length: Type: Alphanumeric

Field 71: OTH_DIAG_CODE_19

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

implied following the third character.

Beginning Position: 296 **Data Source:** Claim Length: Alphanumeric Type:

POA_OTH_DIAG_CODE_19 **Field 72:**

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

admitted to the hospital

Coding Scheme: Same as Field POA PRINC DIAG CODE

Data Source: Beginning Position: 303 Claim

Length: Type: Alphanumeric

Field 73: OTH_DIAG_CODE_20

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

implied following the third character.

Beginning Position: 304 **Data Source:** Claim Length: Alphanumeric Type:

Field 74: POA OTH DIAG CODE 20

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

admitted to the hospital

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

Beginning Position: 311 **Data Source:** Claim

Length: Type: Alphanumeric

Field 75: OTH DIAG CODE 21

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

Claim

implied following the third character.

Beginning Position: 312 **Data Source:** Length: Type:

Alphanumeric

Field 76: POA OTH DIAG CODE 21

Code identifying whether Oth Diag Code 21 code was present at the time the patient was **Description:**

admitted to the hospital

Coding Scheme: Same as Field POA PRINC DIAG CODE

Beginning Position: 319 **Data Source:** Claim

Length: Type: Alphanumeric

Field 77: OTH_DIAG_CODE_22

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

implied following the third character.

Beginning Position: 320 **Data Source:** Claim Length: Type: Alphanumeric

Field 78: POA OTH DIAG CODE 22

Code identifying whether Oth_Diag_Code_22 code was present at the time the patient was **Description:**

admitted to the hospital

Coding Scheme: Same as Field POA_PRINC_DIAG_CODE

Beginning Position: Data Source: Claim

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Length: Type: Alphanumeric OTH DIAG CODE 23 Field 79: **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Data Source: Beginning Position:** 328 Claim Length: 7 Type: Alphanumeric POA OTH DIAG CODE 23 Field 80: **Description:** Code identifying whether Oth_Diag_Code_23 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Beginning Position: Data Source:** 335 Claim Length: Type: Alphanumeric Field 81: OTH_DIAG_CODE_24 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable. Decimal is implied following the third character. **Beginning Position:** 336 **Data Source:** Claim Length: Alphanumeric Type: POA_OTH_DIAG_CODE_24 Field 82: Code identifying whether Oth Diag Code 24 code was present at the time the patient was **Description:** admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE Data Source: **Beginning Position:** 343 Claim Length: Type: Alphanumeric **Field 83:** E CODE 1 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of the primary external cause of morbidity. A decimal is implied following the third character. **Data Source: Beginning Position:** 344 Claim Length: Alphanumeric Type: Field 84: POA E CODE 1 **Description:** Code identifying whether E Code 1 code was present at the time the patient was admitted to the hospital Same as Field POA PRINC DIAG CODE **Coding Scheme: Beginning Position:** 351 **Data Source:** Claim Length: 1 Type: Alphanumeric Field 85: E CODE 2 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of morbidity. Decimal is implied following the third character. **Beginning Position:** 352 **Data Source:** Claim Length: Alphanumeric Type: Field 86: POA E CODE 2 **Description:** Code identifying whether E Code 2 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Beginning Position:** 359 **Data Source:** Claim Length: Type: Alphanumeric Field 87: E CODE 3 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of morbidity. Decimal is implied following the third character. Data Source: **Beginning Position:** 360 Claim Length: Type: Alphanumeric Field 88: POA E CODE 3 **Description:** Code identifying whether E_Code_3 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA_PRINC_DIAG_CODE

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Data Source:

Claim

Beginning Position:

Length: Type: Alphanumeric E CODE 4 Field 89: **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of morbidity. Decimal is implied following the third character. **Beginning Position: Data Source:** Claim Length: 7 Type: Alphanumeric POA E CODE 4 Field 90: **Description:** Code identifying whether E_Code_4 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Beginning Position: Data Source:** 375 Claim Length: Type: Alphanumeric Field 91: E_CODE_5 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of morbidity. Decimal is implied following the third character. **Beginning Position:** 376 **Data Source:** Claim Length: Alphanumeric Type: POA E CODE 5 Field 92: **Description:** Code identifying whether E Code 5 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Data Source: Beginning Position:** 383 Claim Length: Type: Alphanumeric Field 93: E_CODE_6 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of morbidity. Decimal is implied following the third character. **Data Source: Beginning Position:** 384 Claim Length: Alphanumeric Type: Field 94: POA E CODE 6 **Description:** Code identifying whether E Code 6 code was present at the time the patient was admitted to the hospital Same as Field POA PRINC DIAG CODE **Coding Scheme: Beginning Position: Data Source:** Claim Length: 1 Type: Alphanumeric Field 95: E CODE 7 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of morbidity. Decimal is implied following the third character. **Beginning Position:** 392 **Data Source:** Claim Length: Alphanumeric Type: Field 96: POA E CODE 7 Code identifying whether E Code 7 code was present at the time the patient was admitted to **Description:** the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Beginning Position:** 399 **Data Source:** Claim Length: Type: Alphanumeric Field 97: E CODE 8 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of morbidity. Decimal is implied following the third character. **Data Source: Beginning Position:** 400 Claim Length: Type: Alphanumeric Field 98: POA E CODE 8 **Description:** Code identifying whether E_Code_8 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA_PRINC_DIAG_CODE

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Data Source:

Claim

Beginning Position:

Length: Type: Alphanumeric E_CODE 9 Field 99: **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of morbidity. Decimal is implied following the third character. **Beginning Position: Data Source:** Claim Length: 7 Type: Alphanumeric POA E CODE 9 **Field 100: Description:** Code identifying whether E_Code_9 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Beginning Position: Data Source:** 415 Claim Length: Type: Alphanumeric **Field 101:** E_CODE_10 **Description:** ICD-10-CM diagnosis code, including the 4th, 5th, 6th and 7th digits if applicable, of an additional external cause of morbidity. Decimal is implied following the third character. **Beginning Position:** 416 **Data Source:** Claim Length: Type: Alphanumeric POA E CODE 10 **Field 102: Description:** Code identifying whether E Code 10 code was present at the time the patient was admitted to the hospital **Coding Scheme:** Same as Field POA PRINC DIAG CODE **Data Source: Beginning Position:** 423 Claim Length: Type: Alphanumeric PRINC_SURG_PROC_CODE **Field 103: Description:** Code for the principal surgical or other procedure performed during the period covered by the bill. ICD-10-PCS code. **Beginning Position:** 424 **Data Source:** Claim Length: Alphanumeric Type: PRINC SURG PROC DAY **Field 104:** Day of principal surgical or other procedure equals Principal Surgical Procedure Date minus **Description:** Admission/Start of Care Date. **Beginning Position:** 431 Data Source: Calculated Length: 4 Type: Alphanumeric **Field 105:** OTH SURG PROC CODE 1 **Description:** Code for surgical or other procedure other than the principal procedure performed during the period covered by the bill. ICD-10-PCS code. **Beginning Position: Data Source:** 435 Claim Length: Alphanumeric Type: OTH_SURG_PROC_DAY 1 **Field 106:** Day of other surgical or other procedure equals Other Surgical Procedure Date minus **Description:** Admission/Start of Care Date **Beginning Position:** 442 **Data Source:** Calculated Length: Type: Alphanumeric **Field 107:** OTH SURG PROC CODE 2 **Description:** Code for surgical or other procedure other than the principal procedure performed during the period covered by the bill. ICD-10-PCS code. **Data Source: Beginning Position:** 446 Claim Length: Type: Alphanumeric **Field 108:** OTH SURG PROC DAY 2 Day of other surgical or other procedure equals Other Surgical Procedure Date minus **Description:** Admission/Start of Care Date **Beginning Position:** 453 **Data Source:** Calculated Length: Alphanumeric Type: **Field 109:** OTH_SURG_PROC_CODE_3

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

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

Data Source: Beginning Position: 457 Claim

Length: Type: Alphanumeric 7

Field 110: OTH SURG PROC DAY 3

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

Admission/Start of Care Date

Beginning Position: 464 **Data Source:** Calculated Length: Type: Alphanumeric 4

Field 111: OTH SURG PROC CODE 4

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

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

Beginning Position: 468 **Data Source:** Claim Length: 7 Type: Alphanumeric

Field 112: OTH SURG PROC DAY 4

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

Admission/Start of Care Date

Beginning Position: Data Source: Calculated 475 Length: Type: Alphanumeric

Field 113: OTH SURG PROC CODE 5

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

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

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

Length: 7 Type: Alphanumeric

Field 114: OTH SURG PROC DAY 5

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

Admission/Start of Care Date

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

Field 115: OTH SURG PROC CODE 6

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

Claim

Alphanumeric

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

Beginning Position: 490 **Data Source:** Type: Length:

Field 116: OTH SURG PROC DAY 6

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

Admission/Start of Care Date

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

OTH SURG PROC CODE 7 **Field 117:**

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

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

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

Length: Type: Alphanumeric 7

Field 118: OTH SURG PROC DAY 7

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

Admission/Start of Care Date

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

OTH SURG PROC CODE 8 **Field 119:**

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

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

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

Field 120: OTH_SURG_PROC_DAY_8

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

Admission/Start of Care Date

Beginning Position: 519 **Data Source:** Calculated Length: Alphanumeric 4 Type:

Field 121: OTH SURG PROC CODE 9

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

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

Beginning Position: 523 **Data Source:** Claim

Length: Type: Alphanumeric

Field 122: OTH SURG PROC DAY 9

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

Admission/Start of Care Date.

Beginning Position: 530 **Data Source:** Calculated Length: 4 Alphanumeric Type:

Field 123: OTH SURG PROC CODE 10

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

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

Beginning Position: Data Source: Claim 534

Length: Type: Alphanumeric

Field 124: OTH SURG PROC DAY 10

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

Admission/Start of Care Date.

Beginning Position: 541 **Data Source:** Calculated Length: 4 Type: Alphanumeric

Field 125: OTH SURG PROC CODE 11

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

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

Beginning Position: Data Source: 545 Claim

Length: Type: Alphanumeric

Field 126: OTH SURG PROC DAY 11

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

Admission/Start of Care Date.

Beginning Position: 552 **Data Source:** Calculated Length: 4 Type: Alphanumeric

Field 127: OTH SURG PROC CODE 12

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

Claim

period covered by the bill. ICD-10-PCS code. 556 **Data Source:**

Length: Type:

Beginning Position:

Alphanumeric **Field 128:** OTH SURG PROC DAY 12

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

Admission/Start of Care Date.

Beginning Position: 563 **Data Source:** Calculated Length: 4 Type: Alphanumeric

Field 129: OTH SURG PROC CODE 13

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

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

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

Length: Type: Alphanumeric

Field 130: OTH SURG PROC DAY 13

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

Admission/Start of Care Date.

Beginning Position: 574 **Data Source:** Calculated Length: Alphanumeric Type:

Field 131: OTH SURG PROC CODE 14

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

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

Beginning Position: 578 **Data Source:** Claim

Length: Type: Alphanumeric

Field 132: OTH SURG PROC DAY 14

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

Admission/Start of Care Date.

Beginning Position: 585 **Data Source:** Calculated Length: Alphanumeric 4 Type:

Field 133: OTH SURG PROC CODE 15

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

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

Beginning Position: 589 **Data Source:** Claim

Length: Type: Alphanumeric

Field 134: OTH SURG PROC DAY 15

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

Admission/Start of Care Date.

Beginning Position: Data Source: Calculated 596 Length: Type: Alphanumeric

Field 135: OTH SURG PROC CODE 16

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

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

Beginning Position: 600 **Data Source:** Claim

Length: 7 Type: Alphanumeric

Field 136: OTH SURG PROC DAY 16

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

Admission/Start of Care Date.

Beginning Position: Data Source: 607 Calculated Length: Alphanumeric Type:

Field 137: OTH SURG PROC CODE 17

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

Data Source:

Claim

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

Length: Type: Alphanumeric

Field 138: OTH SURG PROC DAY 17

611

Beginning Position:

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

Admission/Start of Care Date.

Beginning Position: 618 **Data Source:** Calculated Length: Alphanumeric Type:

OTH SURG PROC CODE 18 **Field 139:**

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

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

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

Length: 7 Type: Alphanumeric

Field 140: OTH SURG PROC DAY 18

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

Admission/Start of Care Date.

Beginning Position: 629 **Data Source:** Calculated Length: Alphanumeric Type:

OTH SURG PROC CODE 19 **Field 141:**

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

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

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

Length: Alphanumeric Type:

Field 142: OTH_SURG_PROC_DAY_19

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

Admission/Start of Care Date.

Beginning Position: 640 **Data Source:** Calculated Length: Alphanumeric 4 Type:

Field 143: OTH SURG PROC CODE 20

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

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

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

Length: Type: Alphanumeric

Field 144: OTH SURG PROC DAY 20

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

Admission/Start of Care Date.

Beginning Position: 651 **Data Source:** Calculated Length: 4 Alphanumeric Type:

Field 145: OTH SURG PROC CODE 21

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

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

Beginning Position: Data Source: Claim 655

Length: Type: Alphanumeric

Field 146: OTH SURG PROC DAY 21

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

Admission/Start of Care Date.

Beginning Position: 662 **Data Source:** Calculated Length: 4 Type: Alphanumeric

Field 147: OTH SURG PROC CODE 22

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

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

Beginning Position: Data Source: 666 Claim

Type: Length: Alphanumeric

Field 148: OTH SURG PROC DAY 22

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

Admission/Start of Care Date.

Beginning Position: 673 **Data Source:** Calculated Length: 4 Type: Alphanumeric

Field 149: OTH SURG PROC CODE 23

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

period covered by the bill. ICD-10-PCS code. 677 **Data Source:** Claim

Length: Type:

Beginning Position:

Alphanumeric

Field 150: OTH SURG PROC DAY 23

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

Admission/Start of Care Date.

Beginning Position: 684 **Data Source:** Calculated Length: 4 Type: Alphanumeric

Field 151: OTH SURG PROC CODE 24

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

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

Beginning Position: 688 **Data Source:** Claim Length: Type: Alphanumeric

Field 152: OTH SURG PROC DAY 24

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

Admission/Start of Care Date.

Beginning Position: 695 **Data Source:** Calculated Length: Alphanumeric Type:

Field 153: ATTENDING_PHYSICIAN_UNIF_ID

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Description: Attending Physician Uniform Identifier. Unique identifier assigned to the licensed physician

> expected to certify medical necessity of services rendered, with primary responsibility for the patient's medical care and treatment. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include an individual other than a physician who admits patients to hospitals or who provides diagnostic or therapeutic procedures to inpatients, including psychologists, chiropractors, dentists, nurse practitioners, nurse midwives, and

podiatrists authorized by the hospital to admit or treat patients.

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

minimum cell size of five.

999999998 Cell size less than 5 **Coding Scheme:**

999999999 Temporary license or license number could not be matched

Beginning Position: 699 **Data Source:** Assigned Length: Alphanumeric 10 Type:

Field 154: OPERATING PHYSICIAN UNIF ID

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

> the operating physician or physician other than the attending physician. Physician is an individual licensed to practice medicine under the Medical Practice Act. Can include an individual other than a physician who admits patients to hospitals or who provides diagnostic or therapeutic procedures to inpatients, including psychologists, chiropractors, dentists, nurse practitioners, nurse midwives, and podiatrists authorized by the hospital to admit or treat

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

minimum cell size of five.

999999998 Cell size less than 5 **Coding Scheme:**

> 999999999 Temporary license or license number could not be matched

Beginning Position: 709 **Data Source:** Assigned Length: Type: Alphanumeric

Field 155: ENCOUNTER INDICATOR

Description: Indicates the number of claims used to create the encounter **Beginning Position: Data Source:** Calculated Length: Type: Alphanumeric

Field 156: PROVIDER NAME

Description: Hospital name provided by the hospital.

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

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

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

Beginning Position: 721 **Data Source:** Provider Length: Type: Alphanumeric

Field 157: EMERGENCY DEPT FLAG

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

visit was emergency related **Coding Scheme:** Y N Visit was not emergency related

Beginning Position: 776 **Data Source:**

Assigned Length: Type: Alphanumeric

BASE DATA #2 FILE

Field 1:	RECORD_ID		
Description:			per assigned to identify the record. First available ORD ID in THCIC Research Data Files (RDF's).
Beginning Position:	1	Data Source:	Assigned
Length:	12	Type:	Alphanumeric
Field 2:	PRIVATE_AMOUNT	V 1	
Description:		ivate Room Cha	rge Amount. Calculated using MEDPAR
<u>.</u>			evenue codes 0100-0219, revenue center 011X,
	014X		, , , , , , , , , , , , , , , , , , ,
Beginning Position:	13	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 3:	SEMI_PRIVATE_AMOU	NT	
Description:			n Charge Amount. Calculated using MEDPAR
•			evenue codes 0100-0219, revenue center 010X,
	012X-014X, 016X-019X		,
Beginning Position:	25	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 4:	WARD_AMOUNT		
Description:	Accommodation Charge, W	ard Charge Amo	ount. Calculated using MEDPAR algorithm. Sum of
-	charges associated with reve	enue codes 0100-	-0219, revenue center 015X.
Beginning Position:	37	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 5:	ICU_AMOUNT		
Description:	Accommodation Charge, In	tensive Care Uni	t Charge Amount. Calculated using MEDPAR
	algorithm. Sum of charges a	associated with re	evenue codes 0100-0219, revenue center 020X.
Beginning Position:	49	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 6:	CCU_AMOUNT		
Description:			it Charge Amount. Calculated using MEDPAR
	-		evenue codes 0100-0219, revenue center 021X.
Beginning Position:	61	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 7:	OTHER_AMOUNT		
Description:	•	_	ount. Calculated using MEDPAR algorithm. Sum
			ner than 0100-0219, revenue center 0002-0099,
D 1 1 D 11			X-070X, 076X-078X, 090X-095X, 099X.
Beginning Position:	73	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 8:	PHARM_AMOUNT	d	Amount Colorlated using MEDDAD also without
Description:			Amount. Calculated using MEDPAR algorithm.
		viui revenue code	es other than 0100-0219, revenue center 025X,
Beginning Position:	026X, and 063X. 85	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 9:	MEDSURG_AMOUNT	Type.	Numenc
		Modical/Surgical	Supply Charge Amount. Calculated using
Description:			Supply Charge Amount. Calculated using atted with revenue codes other than 0100-0219,
	revenue center 027X, 062X		area with revenue codes office than 0100-0219,
Beginning Position:	97	Data Source:	Calculated
Length:	12	Type:	Numeric
Field 10:	DME_AMOUNT	- jpc.	1 (MINOLIV
I KIU IV.	DIVID_INIOUITI		

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Description: Ancillary Service Charge, Durable Medical Equipment Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219. revenue centers 0290-0292, 0294-0299. **Beginning Position:** 109 **Data Source:** Calculated Length: 12 Type: Numeric Field 11: **USED DME AMOUNT Description:** Ancillary Service Charge, Used Durable Medical Equipment Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 0293. 121 **Beginning Position: Data Source:** Calculated Length: 12 Type: Numeric PT AMOUNT Field 12: **Description:** Ancillary Service Charge, Physical Therapy Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 042X. Calculated **Beginning Position:** 133 **Data Source:** Length: 12 Type: Numeric Field 13: OT AMOUNT **Description:** Ancillary Service Charge, Occupational Therapy Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 043X. 145 Calculated **Beginning Position: Data Source:** Length: 12 Type: Numeric Field 14: SPEECH AMOUNT **Description:** Ancillary Service Charge, Speech Pathology Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 044X, 047X. **Beginning Position:** 157 **Data Source:** Calculated Length: 12 Type: Numeric Field 15: IT AMOUNT **Description:** Ancillary Service Charge, Inhalation Therapy Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 041X, 046X.

Beginning Position:169Data Source:CalculatedLength:12Type:Numeric

Field 16: BLOOD AMOUNT

Description: Ancillary Service Charge for blood provided during the patient's stay. Calculated using

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

revenue center 038X.

Beginning Position:181Data Source:CalculatedLength:12Type:Numeric

Field 17: BLOOD_ADMIN_AMOUNT

Description: Ancillary Service Charge for blood storage and processing related to the patient's stay.

Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other

than 0100-0219, revenue center 039X.

Beginning Position:193Data Source:CalculatedLength:12Type:Numeric

Field 18: OR_AMOUNT

Description: Ancillary Service Charge, Operating Room Charge amount. Calculated using MEDPAR

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

036X, 071X-072X.

Beginning Position:205Data Source:CalculatedLength:12Type:Numeric

Field 19: LITH_AMOUNT

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Description:	Ancillary Service Charge, Lithotripsy Charge Amount. Calculated using MEDPAR algorithm.					
Description.	Sum of charges associated with revenue codes other than 0100-0219, revenue center 079X.					
Beginning Position:	217	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 20:	CARD_AMOUNT	7 1				
Description:	Ancillary Service Charge, Cardiology Charge Amount. Calculated using MEDPAR algorithm.					
L · · · ·	Sum of charges associated with revenue codes other than 0100-0219, revenue center 048X,					
	073X.					
Beginning Position:	229	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 21:	ANES_AMOUNT					
Description:	Ancillary Service Charge, Anesthesia Charge Amount. Calculated using MEDPAR algorithm.					
	Sum of charges associated v		es other than 0100-0219, revenue center 037X.			
Beginning Position:	241	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 22:	LAB_AMOUNT					
Description:	Ancillary Service Charge, Laboratory Charge Amount. Calculated using MEDPAR algorithm.					
	Sum of charges associated with revenue codes other than 0100-0219, revenue center 030X-					
	031X, 074X-075X.	_				
Beginning Position:	253	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 23:	RAD_AMOUNT					
Description:	Ancillary Service Charge, Radiology Charge Amount. Calculated using MEDPAR algorithm.					
	Sum of charges associated with revenue codes other than 0100-0219, revenue center 028X, 032X-035X, 040X.					
Beginning Position:	265	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 24:	MRI_AMOUNT					
Description:			ount. Calculated using MEDPAR algorithm. Sum of			
			than 0100-0219, revenue center 061X.			
Beginning Position:	277	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 25:	OP_AMOUNT					
Description:	Ancillary Service Charge, Outpatient Services Charge Amount. Calculated using MEDPAR					
	algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 049X-050X.					
Beginning Position:	289	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 26:	ER_AMOUNT	<u> </u>	Trainerie			
Description:	Ancillary Service Charge, Emergency Room Charge Amount. Calculated using MEDPAR					
L · · · ·	algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center					
	045X.					
Beginning Position:	301	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 27:	AMBULANCE_AMOUNT					
Description:	Ancillary Service Charge, Ambulance Charge Amount. Calculated using MEDPAR algorithm.					
	Sum of charges associated with revenue codes other than 0100-0219, revenue center 054X.					
Beginning Position:	313	Data Source:	Calculated			
Length:	12	Type:	Numeric			
Field 28:	PRO_FEE_AMOUNT					
Description:	Ancillary Service Charge, Professional Fee Charge Amount. Calculated using MEDPAR					
	algorithm. Sum of charges associated with revenue codes other than 0100-0219, revenue center 096X-098X.					
Beginning Position:	325	Data Source:	Calculated			
Length:	12	Type:	Numeric			
·						

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	070						
Field 29:	ORGAN_AMOUNT						
Description:		Ancillary Service Charge, Organ Acquisition Charge Amount. Calculated using MEDPAR					
			evenue co	odes other than 0100-0219, revenue center			
Daginning Dagitian.		X, 089X.	Calanta	44			
Beginning Position:	337 12	Data Source:	Calcula				
Length: Field 30:		Type: Numeric					
Description:	ESRD_AMOUNT Aprillary Service Change End Stone Benel Dickyoic Change Amount Colculated using						
Description.	Ancillary Service Charge, End Stage Renal Dialysis Charge Amount. Calculated using MEDPAR algorithm. Sum of charges associated with revenue codes other than 0100-0219,						
	revenue center 080X, 082X-085X, 088X						
Beginning Position:	349 Data Source: Calculated						
Length:	12	Type:	Numer				
Field 31:		CLINIC_AMOUNT					
Description:	Ancillary Service Charge, Clinic Visit Charge Amount. Calculated using MEDPAR algorithm.						
2 de di ipulono		of charges associated with revenue code					
Beginning Position:	361	· · · · · · · · · · · · · · · · · · ·					
Length:	12	Type:	Numer	ic			
Field 32:	OCC	CUR_CODE_1					
Description:	Code describing a significant event relating to the claim.						
Coding Scheme:	1	Auto accident	40	Scheduled date of admission			
	2	No Fault Insurance Involved - Including Auto Accident/Other	41	Date of first test of pre-admission testing			
	3	Accident/ Tort Liability	42	Date of discharge (hospice only)			
	4	Accident/ Employment Related	43	Scheduled date of canceled surgery			
	5	Other accident	44	Date treatment started - OT			
	6 9	Crime Victim Start of Infertility Treatment Cycle	45 46	Date treatment started - ST Date treatment started - Cardiac rehabilitation			
	10	Last Menstrual Period	47	Date cost outlier status begins			
	11	Onset of Symptoms/ Illness	A1	Birthdate - Insured A			
	12	Date of Onset for a Chronically Dependent	A2	Effective Date - Insured A Policy			
	16	Individual Date of Last Therapy	A3	Payer A benefits exhausted			
	17	Date Outpatient OT Plan Established or Last	A4	Split Bill Date			
	10	Reviewed	ъ.	P'dl. I IP			
	18	Date of Retirement - Patient/Beneficiary	B1	Birthdate - Insured B			
	19	Date of Retirement - Spouse	B2	Effective date - Insured B Policy			
	20 21	Date Guarantee of Payment Began Date UR Notice Received	B3 C1	Payer B benefits exhausted Birthdate - Insured C			
	22	Date Active Care Ended	C2	Effective date - Insured C Policy			
	24	Date Insurance Denied	C2	Payer C benefits exhausted			
	25	Date Benefits Terminated by Primary Payer	DR	Katrina disaster related			
	26	Date SNF Bed Became Available	E1	Birthdate - Insured D			
	27	Date Home Health Plan Established or Last	E2	Effective date - Insured D Policy			
		Reviewed		•			
	28	Date Comprehensive Outpatient Rehabilitation	E3	Payer D benefits exhausted			
	29	Plan Established or Last Reviewed Date Outpatient PT Plan established or last	F1	Birthdate - Insured E			
		reviewed					
	30	Date Outpatient ST Plan established or last	F2	Effective date - Insured E Policy			
	31	reviewed Date beneficiary notified of intent to bill	F3	Payer E benefits exhausted			
	51	(accommodations)		Tayor B concerns communica			
	32	Date beneficiary notified of intent to bill	G1	Birthdate - Insured F			
	37	(procedures or treatments) Date of inpatient hospital discharge for non-	G2	Effective date - Insured F Policy			
	31	covered transplant patients	U2	Effective date - historica F Folicy			
	38	Date treatment started for home IV therapy	G3	Payer F benefits exhausted			
	39	Date discharged on a continuous course if IV					
Doginaina Dogidia.	272	therapy Data Saureau	Clei				
Beginning Position:	373	Data Source:	Claim	umorio			
Length:	2	Type:	Alphan	umenc			
Field 33:	UCC	CUR_DAY_1					
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Description: Occurrence Day *equals* Occurrence Date *minus* Admission/Start of Care Date.

Beginning Position:375Data Source:CalculatedLength:4Type:Alphanumeric

Field 34: OCCUR_CODE_2

Description: Code describing a significant event relating to the claim.

Coding Scheme: Same as Field OCCUR CODE 1.

Beginning Position: 379 **Data Source:** Claim

Length: 2 **Type:** Alphanumeric

Field 35: OCCUR_DAY_2

Description: Occurrence Day *equals* Occurrence Date *minus* Admission/Start of Care Date.

Beginning Position:381Data Source:CalculatedLength:4Type:Alphanumeric

Field 36: OCCUR_CODE_3

Description: Code describing a significant event relating to the claim.

Coding Scheme: Same as Field OCCUR_CODE_1.

Beginning Position: 385 **Data Source:** Claim **Length:** 2 **Type:** Alphanumeric

Field 37: OCCUR_DAY_3

Description: Occurrence Day *equals* Occurrence Date *minus* Admission/Start of Care Date.

Beginning Position:387Data Source:CalculatedLength:4Type:Alphanumeric

Field 38: OCCUR CODE 4

Description: Code describing a significant event relating to the claim.

Coding Scheme: Same as Field OCCUR_CODE_1.

Beginning Position: 391 **Data Source:** Claim **Length:** 2 **Type:** Alphanumeric

Field 39: OCCUR_DAY_4

Description: Occurrence Day *equals* Occurrence Date *minus* Admission/Start of Care Date.

Beginning Position:393Data Source:CalculatedLength:4Type:Alphanumeric

Field 40: OCCUR_CODE_5

Description: Code describing a significant event relating to the claim.

Coding Scheme: Same as Field OCCUR_CODE_1.

Beginning Position:397Data Source:ClaimLength:2Type:Alphanumeric

Field 41: OCCUR_DAY_5

Description: Occurrence Day *equals* Occurrence Date *minus* Admission/Start of Care Date.

Beginning Position:399Data Source:CalculatedLength:4Type:Alphanumeric

Field 42: OCCUR_CODE_6

Description: Code describing a significant event relating to the claim.

Coding Scheme: Same as Field OCCUR CODE 1.

Beginning Position: 403 **Data Source:** Claim **Length:** 2 **Type:** Alphanumeric

Field 43: OCCUR_DAY_6

Description: Occurrence Day *equals* Occurrence Date *minus* Admission/Start of Care Date.

Beginning Position:405Data Source:CalculatedLength:4Type:Alphanumeric

Field 44: OCCUR_CODE_7

Description: Code describing a significant event relating to the claim.

Coding Scheme: Same as Field OCCUR_CODE_1.

Beginning Position:409Data Source:ClaimLength:2Type:Alphanumeric

Field 45: OCCUR DAY 7

Description: Occurrence Day *equals* Occurrence Date *minus* Admission/Start of Care Date.

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Daginning Dagitians	411	Data Source:	Coloulated
Beginning Position: Length:	411		Calculated Alphanumeric
Field 46:	OCCUR CODE 8	Type:	Aipiianumeric
		nt arrant nalatina t	to the eleim
Description:	Code describing a significant Same as Field OCCUR_CC		to the claim.
Coding Scheme:	-	_	Claim
Beginning Position:	415	Data Source:	Claim
Length:	OCCUP DAY 9	Type:	Alphanumeric
Field 47:	OCCUR_DAY_8		A during and Start of Comp. Date
Description:			nus Admission/Start of Care Date.
Beginning Position:	417	Data Source:	Calculated
Length: Field 48:	4	Type:	Alphanumeric
	OCCUR_CODE_9		
Description:	Code describing a significant		to the claim.
Coding Scheme:	Same as Field OCCUR_CC		Cl. in
Beginning Position:	421	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 49:	OCCUR_DAY_9	ъ.	A 1 /G
Description:			nus Admission/Start of Care Date.
Beginning Position:	423	Data Source:	Calculated
Length:	4 CCCUP COPE 10	Type:	Alphanumeric
Field 50:	OCCUR_CODE_10		
Description:	Code describing a significant		to the claim.
Coding Scheme:	Same as Field OCCUR_CC	_	CI.:
Beginning Position:	427	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 51:	OCCUR_DAY_10	ъ.	A 1 /G
Description:			nus Admission/Start of Care Date.
Beginning Position:	429	Data Source:	Calculated
Length:	4	Type:	Alphanumeric
Field 52:	OCCUR_CODE_11		to the eleine
Description:	Code describing a significant		to the claim.
Coding Scheme:	Same as Field OCCUR_CC	_	Claim
Beginning Position:	433	Data Source:	Claim Alphanumeric
Length: Field 53:	OCCUR_DAY_11	Type:	Aiphanumeric
Description:		ourranaa Data mir	nus Admission/Start of Care Date.
Beginning Position:	435	Data Source:	Calculated
Length:	433	Type:	Alphanumeric
Field 54:	OCCUR_CODE_12	Type.	Aiphanumeric
Description:	Code describing a significant	nt avant ralating t	to the claim
Coding Scheme:	Same as Field OCCUR_CC	_	to the claim.
Beginning Position:	439	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 55:	OCCUR_DAY_12	турс.	Alphanumeric
Description:		currence Date min	nus Admission/Start of Care Date.
Beginning Position:	441	Data Source:	Calculated
Length:	4	Type:	Alphanumeric
Field 56:	OCCUR_SPAN_CODE_1		7 Hiphanameric
Description:			to the claim that may affect payer processing.
Coding Scheme:	70 Qualifying stay dates (for		78 SNF prior stay dates
- varieties	71 Prior stay dates	• *	80 Prior Same SNF prior stay dates for Payment
	70 Einst/L - () '		Ban Purposes
	72 First/Last Visit73 Benefit eligibility period		Antepartum Days at Reduced Level of Care M0 QIO/UR approved stay dates
	74 Noncovered level of care/	Leave of absence	M1 Provider liability - no utilization
	75 SNF level of care		M2 Inpatient respite dates
	76 Patient Liability Period		M3 ICF level of care
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	77 Provider Liability - Utilization Charged	M4 Residential level of care
Beginning Position:	445 Data Source:	- "
Length:	2 Type:	Alphanumeric
Field 57:	OCCUR_SPAN_FROM_1	
Description:	Occurrence Span From equals Beginning D	Date of Event <i>minus</i> Admission/Start of Care Date.
Beginning Position:	447 Data Source:	Calculated
Length:	Type:	Alphanumeric
Field 58:	OCCUR_SPAN_THRU_1	•
Description:		of Event minus Admission/Start of Care Date.
Beginning Position:	453 Data Source:	
Length:	6 Type:	Alphanumeric
Field 59:	OCCUR_SPAN_CODE_2	
Description:		to the claim that may affect payer processing.
Coding Scheme:	Same as Field OCCUR_SPAN_CODE_1.	to the claim that may affect payer processing.
Beginning Position:	459 Data Source:	Claim
Length:		
	<i>V</i> 1	Alphanumeric
Field 60:	OCCUR_SPAN_FROM_2	Octo of Francisco Administrative (Comp.
Description:		Date of Event minus Admission/Start of Care Date.
Beginning Position:	461 Data Source:	
Length:	6 Type:	Alphanumeric
Field 61:	OCCUR_SPAN_THRU_2	
Description:		of Event minus Admission/Start of Care Date.
Beginning Position:	467 Data Source:	Calculated
Length:	6 Type:	Alphanumeric
Field 62:	OCCUR_SPAN_CODE_3	
Description:	Code describing a significant event relating	to the claim that may affect payer processing.
Coding Scheme:	Same as Field OCCUR_SPAN_CODE_1.	
Beginning Position:	473 Data Source:	Claim
Length:	2 Type:	Alphanumeric
Field 63:	OCCUR_SPAN_FROM_3	1
Description:		Date of Event <i>minus</i> Admission/Start of Care Date.
Beginning Position:	475 Data Source:	
Length:	6 Type:	Alphanumeric
Field 64:	OCCUR SPAN THRU 3	7 ii pii diidii erie
Description:		of Event minus Admission/Start of Care Date.
Beginning Position:	481 Data Source:	
Length:		Alphanumeric
	6 Type: OCCUR SPAN CODE 4	Alphanumeric
Field 65:		to the chain that many officers are a second as
Description:		to the claim that may affect payer processing.
Coding Scheme:	Same as Field OCCUR_SPAN_CODE_1.	
Beginning Position:	487 Data Source:	
Length:	2 Type:	Alphanumeric
Field 66:	OCCUR_SPAN_FROM_4	
Description:	Occurrence Span From equals Beginning D	Date of Event <i>minus</i> Admission/Start of Care Date.
Beginning Position:	489 Data Source:	Calculated
Length:	6 Type:	Alphanumeric
Field 67:	OCCUR_SPAN_THRU_4	
Description:	Occurrence Span Thru equals Ending Date	of Event minus Admission/Start of Care Date.
Beginning Position:	495 Data Source:	
Length:	6 Type:	Alphanumeric
Field 68:	CONDITION_CODE_1	.
Description:	Code describing a condition relating to the	claim.
Coding Scheme:	01 Military service related	A0 TRICARE external partnership program
component.	02 Condition is employment related	A1 EPSDT/CHAP
	O3 Patient covered by insurance not reflected her	
	04 Information only bill.	A3 Special Federal Funding
	05 Lien has been filed	A4 Family planning
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06	ESRD patient in first 18 months of entitlement covered by EGHP	A5	Disability
07	Treatment of non-terminal condition for hospice patient	A6	Vaccines/Medicare 100% payment
08	Beneficiary would not provide information concerning other insurance coverage	A9	Second opinion surgery
09	Neither patient or spouse is employed	AA	Abortion performed due to rape
10	Patient and/or spouse is employed but no EGHP exists	AB	Abortion performed due to incest
11	Disabled beneficiary but no LGHP coverage exists	AC	Abortion performed due to serious fatal genetic defect, deformity, or abnormality
17	Patient is homeless	AD	Abortion performed due to life endangering physical condition
18	Maiden name retained	AE	Abortion performed due to physical health of mother that is not life endangering
19	Child retains mother's name	AF	Abortion performed due to emotional/psychological health of mother
20	Beneficiary requested billing	AG	Abortion performed due to social or economic reasons
21	Billing for denial notice	AH	Elective abortion
22	Patient on multiple drug regimen	AI	Sterilization
23 24	Home care giver available Home IV patient also receiving HHA services	AJ	Payer responsible for co-payment
25	Patient is non-US resident	AK	Air ambulance required
	VA eligible patient chooses to receive services in		•
26	a Medicare certified facility	AL	Specialized treatment/bed unavailable
27	Patient referred to a sole community hospital for a diagnostic laboratory test	AM	Non-emergency medically necessary stretcher transport required
28	Patient and/or spouse's EGHP is secondary to Medicare	AN	Pre-admission screening not required
29	Disabled beneficiary and/or family member's LGHP is secondary to Medicare	В0	Medicare coordinated care demonstration claim
30	Non-research services provided to patients enrolled in a qualified clinical trial	B1	Beneficiary is ineligible for demonstration program
31	Patient is student (full time - day)	B4	Admission unrelated to discharge on same day
32	Patient is student (cooperative/work study program)	BP	Gulf Oil Spill of 2010
33	Patient is student (full time - night)	C1	Approved as billed
34	Patient is student (part-time)	C2	Automatic approval as billed based on focused review
36	General care patient in a special unit	C3	Partial approval
37	Ward accommodation at patient request	C4	Admission/services denied
38	Semi-private room not available	C5	Postpayment review applicable
39	Private room medically necessary	C6	Admission Preauthorization
40	Same day transfer	C7	Extended Authorization
41	Partial hospitalization	D0	Changes to Service Dates
42	Continuing care not related to inpatient admission	D1	Changes to Charges
43	Continuing care not provided within prescribed postdischarge window	D3	Second or Subsequent Interim PPS Bill
44	Inpatient admission changed to outpatient	D4	Change in clinical codes (ICD) for diagnosis and/or procedure codes.
45	Ambiguous Gender Category	D5	Cancel to correct Insured's ID or Provider ID
46	Non-availability statement on file	D6	Cancel Only to Repay a Duplicate or OIG Overpayment
47	Transfer from another Home Health Agency	D7	Change to Make Medicare the Secondary Payer
48	Psychiatric residential treatment centers for	D8	Change to Make Medicare the Primary Payer
49	children and adolescents (RTCs) Product replacement within product lifecycle	D9	Any Other Change
50	Product Replacement for Known Recall of a Product	DR	Disaster related
51	Attestation of Unrelated Outpatient Nondiagnostic Services	E0	Changes in Patient Status
52	Out of Hospice Service Area	G0	Distinct Medical Visit
53	Initial placement of a medical device provided as part of a clinical trial or a free sample	НО	Delayed Filing, Statement of Intent Submitted
	-		

	54	No Skilled Home Health V Policy Exception Documen		H2	Discharge by a Hospice Provider for Cause
	55	Health Agency SNF bed not available		НЗ	Reoccurrence of GI Bleed Comorbid Category
	56	Medical appropriateness		H4	Reoccurrence of Pneumonia Comorbid Category
	57	SNF readmission		H5	Reoccurrence of Pericarditis Comorbid Category
	58	Terminated Medicare+Cho enrollee	ice organization	P1	Do not Resuscitate Order (DNR)
	59	Non-primary ESRD facility	<i>y</i>	P7	Direct Inpatient Admission from Emergency Room
	60	Day outlier		R1	Request for reopening Reason Code - Mathematical or Computational Mistake
	61	Cost outlier		R2	Request for reopening Reason Code -Inaccurate Data Entry
	66	Provider does not wish cos	t outlier payment	R3	Request for reopening Reason Code - Misapplication of a Fee Schedule
	67	Beneficiary elects not to us (LTR) days	e life time reserve	R4	Request for reopening Reason Code - Computer Errors
	68	Beneficiary elects to use lift days	e time reserve (LTR)	R5	Request for reopening Reason Code - Incorrectly Identified Duplicate Claim
	69	IME/DGME/N&AH Paym	ent Only	R6	Request for reopening Reason Code - Other Clerical Errors or Minor Errors and Omissions not Specified in R1-R5 above
	70	Self-administered anemia r	nanagement drug	R7	Request for reopening Reason Code - Corrections other than clerical errors
	71	Full care in unit		R8	Request for reopening Reason Code - New and Material Evidence
	72	Self care in unit		R9	Request for reopening Reason Code - Faulty Evidence
	73	Self care training		WO	United Mine Workers of America (UMWA) Demonstration Indicator
	74	Home		W2	Duplicate of Original Bill
	75	Home - 100% reimburseme		W3	Level I Appeal
	76	Back-up in facility dialysis		W4	Level II Appeal
	77	Provider accepts or is oblig contractual arrangement or payment by a primary payer	law to accept or as payment	W5	Level III Appeal
	78	New coverage not impleme	•		
	79	CORF services provided of			
	80 81	Home dialysis - nursing factories C-section/Inductions <39 v Necessity			
	82	C-section/Inductions <39 v	veeks-Elective		
	83	C-section/Inductions 39 we	eks or greater		
	84	Dialysis for Acute Kidney			
	85	Delayed Recertification of Illness		.1	
Dodania - D. W	86 5 01	Additional Hemodialysis T Justification			
Beginning Position: Length:	501 2		Data Source: Type:	Claim Alphanu	meric
Field 69:		DITION CODE 2	Type.	Aiphanu	merie
Description:		describing a condition	relating to the cla	iim	
Coding Scheme:		as Field CONDITION			
Beginning Position:	503	us ricia corebrirore	Data Source:	Claim	
Length:	2		Type:	Alphanu	meric
Field 70:		DITION_CODE_3	J I · · ·	1	
Description:		describing a condition	relating to the cla	im.	
Coding Scheme:		as Field CONDITION			
Beginning Position:	505		Data Source:	Claim	
Length:	2		Type:	Alphanu	meric
Field 71:	CON	DITION_CODE_4			
Description:		describing a condition	relating to the cla	iim.	
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Coding Scheme:	Same	e as Field CONDITION	CODE 1.		
Beginning Position:	507		Data Source:	Claim	
Length:	2		Type:	Alphanu	imeric
Field 72:	CON	DITION_CODE_5		•	
Description:	Code	describing a condition	relating to the cla	aim.	
Coding Scheme:	Same	e as Field CONDITION	I_CODE_1.		
Beginning Position:	509		Data Source:	Claim	
Length:	2		Type:	Alphanu	ımeric
Field 73:		DITION_CODE_6			
Description:		describing a condition		aim.	
Coding Scheme:		e as Field CONDITION	_		
Beginning Position:	511		Data Source:	Claim	
Length:	2		Type:	Alphanu	imeric
Field 74:		DITION_CODE_7			
Description:		describing a condition		aim.	
Coding Scheme:		e as Field CONDITION	_		
Beginning Position:	513		Data Source:	Claim	
Length:	2		Type:	Alphanu	ımeric
Field 75:		DITION_CODE_8			
Description:		describing a condition		aim.	
Coding Scheme:		e as Field CONDITION		~	
Beginning Position:	515		Data Source:	Claim	
Length:	2	TIE CODE 1	Type:	Alphanu	imeric
Field 76:		UE_CODE_1	.1		
Description:		describing information			
Coding Scheme:	01 02	Most common semi-privat Hospital has no semi-priva		58 59	Arterial blood gas Oxygen saturation
	04	Inpatient professional com			HHA branch MSA
		are combined billed			
	05	Professional component in also billed separately to car		61	Place of Residence where service is furnished (HHA and hospice)
	06	Blood deductible	11161	66	Medicaid spend down amount
	08	Life time reserve amount is	n the first calendar	67	Peritoneal dialysis
	00	year	C . 1 1	60	EDO 1
	09 10	Coinsurance amount in the Lifetime reserve amount in	•	68 69	EPO-drug State charity care percentage
	10	year	the second carendar	0)	State charity care percentage
	11	Coinsurance amount in the			Covered Days
	12	Working aged beneficiary/ group health plan	spouse with employer	r 81	Non-covered Days
	13	ESRD beneficiary in a Me	dicare coordination	82	Co-insurance Days
		period with an employer gr	roup health plan		·
	14	No fault, including auto/of	her	83	Lifetime Reserve Days
	15	Worker's compensation		84	Shorter Duration Hemodialysis
	16	Public health service (PHS	6) or other federal	A0	Special zip code reporting
	21	agency Catastrophic		A1	Deductible payer A
	22	Surplus		A2	Coinsurance payer A
	23	Recurring monthly income	;	A3	Estimated responsibility payer A
	24	Medicaid Rate Code		A4	Covered self-administrable drugs - emergency
	25	Offset to the patient - payn	nent amount -	A5	Covered self-administrable drugs - administrable
		prescription drugs			in form and situation furnished to patient
	26	Offset to the patient - payn	nent amount - hearing	A6	Covered self-administrable drugs - diagnostic
	27	and ear services Offset to the patient - payn	nent amount - vision	A7	study and other Co-payment payer A
		and eye services	4	-1,	L-1
	28	Offset to the patient - payn	nent amount - dental	A8	Patient weight
	29	services Offset to the patient - payn	nent amount -	A9	Patient height
	2)	chiropractic services	nent amount -	АЭ	i attore noight
	30	Preadmission testing		AA	Regulatory surcharges, assessments, allowances
					or health care related taxes - payer A

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	31	Patient Liability Amount		AB	Other assessments or allowances (e.g., medical
	20	M 12 1 2 2 1 1		D.1	education) - payer A
	32	Multiple patient ambulance	•	B1	Deductible payer B
	33	Offset to the patient - payme services	ent amount - podiatri	c B2	Coinsurance payer B
	34	Offset to the patient - paymemedical services	ent amount - other	В3	Estimated responsibility payer B
	35	Offset to the patient - paymeinsurance premiums	ent amount - health	В7	Co-payment payer B
	37	Units of blood furnished		BA	Regulatory surcharges, assessments, allowances or health care related taxes - payer B
	38	Blood deductible units		BB	Other assessments or allowances (e.g., medical education) - payer B
	39	Units of blood replaced		C1	Deductible payer C
	40	New coverage not impleme	nted by HMO	C2	Coinsurance payer C
	41	Black lung		C3	Estimated responsibility payer C
	42	VA		C7	Co-payment payer C
	43	Disabled beneficiary under	age 65 with LGHP	CA	Regulatory surcharges, assessments, allowances or health care related taxes - payer C
	44	Amount provider agreed to payer when this amount is length higher than payment received	ess than charges but	СВ	Other assessments or allowances (e.g., medical education) - payer C
	45	Accident hour		D3	Patient estimated responsibility
	46	Number of grace days		D4	Clinical Trial Number Assigned by NLM/NIH
	47	Any liability insurance		D5	Last Kt/V Reading
	48	Hemoglobin reading		FC	Patient Paid Amount
	49	Hematocrit reading		FD	Credit Received from the Manufacturer for a
	50	Physical Therapy visits		G8	Medical Device Facility where Inpatient Hospice Service is
	51	Occupational Therapy visits	2	Y1	Delivered Part A Demonstration Payment
	52	Speech Therapy visits	,	Y2	Part B Demonstration Payment
	53	Cardiac rehab visits		Y3	Part B Coinsurance
	54	Newborn birth weight in gra	ame	Y4	Conventional Provider Payment
	55	Eligibility threshold for cha		Y5	Part B Deductible
	56	Skilled nurse - home visit h	-	13	Fait B Deductible
	57	Home health aide - home vi			
Doginaina Dogitions	517	Home health aide - nome vi		Claim	
Beginning Position: Length:	2		Data Source:	Alphanu	maria
Field 77:		UE_AMOUNT_1	Type:	Aipiiaiiu	illeric
		r amount that may be at	ffootod		
Description:		r amount mat may be a		Claim	
Beginning Position:	519 9		Data Source:	Claim	mania
Length:		HE CODE 1	Type:	Alphanu	meric
Field 78:		UE_CODE_2	.1		
Description:		describing information		payer pro	cessing.
Coding Scheme:		as Field Value_CODE		CI.	
Beginning Position:	528		Data Source:	Claim	
Length:	2		Type:	Alphanu	meric
Field 79:		UE_AMOUNT_2			
Description:		r amount that may be at			
Beginning Position:	530		Data Source:	Claim	
Length:	9		Type:	Alphanu	meric
Field 80:	T7 A T	UE CODE 3			
		describing information	that may affect	antior mea	cossina
Description:				Jayer pro	cessing.
Coding Scheme:		as Field Value_CODE		Claire	
Beginning Position:	539 2		Data Source:	Claim	maria
Length:		HE AMOUNT 2	Type:	Alphanu	HIGHC
Field 81:		UE_AMOUNT_3	ffootod		
Description:	Dolla	r amount that may be at	nected.		
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Beginning Position: 541 **Data Source:** Claim Length: 9 Type: Alphanumeric Field 82: VALUE CODE 4 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field Value_CODE_1. **Beginning Position:** 550 **Data Source:** Claim Length: Type: Alphanumeric Field 83: VALUE_AMOUNT_4 **Description:** Dollar amount that may be affected. **Beginning Position:** Data Source: 552 Claim Length: 9 Type: Alphanumeric VALUE CODE 5 Field 84: **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field Value CODE 1. **Beginning Position:** 561 **Data Source:** Claim Length: Type: Alphanumeric Field 85: VALUE AMOUNT 5 **Description:** Dollar amount that may be affected. **Beginning Position: Data Source:** 563 Claim Length: Type: Alphanumeric **Field 86:** VALUE CODE 6 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field Value CODE 1. **Beginning Position:** 572 **Data Source:** Claim Length: Type: Alphanumeric **Field 87:** VALUE AMOUNT 6 Dollar amount that may be affected. **Description: Beginning Position:** 574 **Data Source:** Claim Length: Type: Alphanumeric Field 88: VALUE CODE 7 Code describing information that may affect payer processing. **Description: Coding Scheme:** Same as Field Value CODE 1. **Beginning Position:** 583 **Data Source:** Claim Length: Type: Alphanumeric Field 89: VALUE AMOUNT 7 **Description:** Dollar amount that may be affected. **Beginning Position:** 585 **Data Source:** Claim Length: Type: Alphanumeric Field 90: VALUE CODE 8 Code describing information that may affect payer processing. **Description: Coding Scheme:** Same as Field Value CODE 1. **Data Source: Beginning Position:** 594 Claim Length: Type: Alphanumeric Field 91: VALUE_AMOUNT_8 **Description:** Dollar amount that may be affected. **Beginning Position: Data Source:** 596 Claim Length: 9 Type: Alphanumeric Field 92: VALUE CODE 9 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field Value_CODE_1. **Beginning Position:** 605 **Data Source:** Claim Length: Alphanumeric Type: Field $\overline{93}$: VALUE AMOUNT 9 **Description:** Dollar amount that may be affected.

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Beginning Position: 607 **Data Source:** Claim Length: 9 Type: Alphanumeric Field 94: VALUE CODE 10 Code describing information that may affect payer processing. **Description: Coding Scheme:** Same as Field Value_CODE_1. **Beginning Position: Data Source:** 616 Claim Length: Alphanumeric Type: Field 95: VALUE_AMOUNT_10 **Description:** Dollar amount that may be affected. **Beginning Position: Data Source:** 618 Claim Length: 9 Type: Alphanumeric VALUE CODE 11 Field 96: **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field Value CODE 1. **Beginning Position:** 627 **Data Source:** Claim Length: 2 Type: Alphanumeric **Field 97:** VALUE_AMOUNT_11 **Description:** Dollar amount that may be affected. **Beginning Position: Data Source:** 629 Claim Length: Type: Alphanumeric Field 98: VALUE_CODE_12 **Description:** Code describing information that may affect payer processing. **Coding Scheme:** Same as Field Value CODE 1. **Beginning Position:** 638 **Data Source:** Claim Length: Type: Alphanumeric Field 99: VALUE_AMOUNT_12 Dollar amount that may be affected. **Description: Beginning Position: Data Source:** 640 Claim Length: 9 Type: Alphanumeric

CHARGES DATA FILE

Field 1:	RECO	RECORD_ID					
Description:	Recor	Record Identification Number. Unique number assigned to identify the record. First available					
_	1st qua	1st quarter 2002. Does NOT match the RECORD ID in THCIC Research Data Files (RDF's).					
Beginning Position:	1	Data Source: Assigned					
Length:	12	Type:	Alphan	umeric			
Field 2:	REVI	ENUE_CODE	•				
Description:	Code	corresponding to each specific accommo	dation, a	ncillary service or billing calculation			
•		to the services being billed.	,	, c			
Coding Scheme:	0100	All-inclusive room charges plus ancillary	0527	Freestanding Clinic - Visiting Nurse Services(s) to a Member's Home when in a Home Health Shortage Area			
	0101	All-inclusive room charges	0528	Freestanding Clinic – Visit by RHC/FQHC Practitioner to Other non RHC/FQHC Site (e.g. Scene of Accident)			
	0110	Room charges for private rooms - general	0529	Freestanding Clinic - other			
	0111	Room charges for private rooms - medical/surgical/GYN	0530	Osteopathic service - general			
	0112	Room charges for private rooms - obstetrics	0531	Osteopathic service - therapy			
	0113	Room charges for private rooms - pediatric	0539	Osteopathic service - other			
	0114	Room charges for private rooms - psychiatric	0540	Ambulance service - general			
	0115 0116	Room charges for private rooms - hospice Room charges for private rooms - detoxification	0541 0542	Ambulance service - supplies Ambulance service - medical transport			
	0117	Room charges for private rooms - actorification	0543	Ambulance service - heart mobile			
	0118	Room charges for private rooms - rehabilitation	0544	Ambulance service - oxygen			
	0119	Room charges for private rooms - other	0545	Ambulance service - air ambulance			
	0120	Room charges for semi-private rooms - general	0546	Ambulance service - neonatal			
	0121	Room charges for semi-private rooms -	0547	Ambulance service - pharmacy			
	0122	medical/surgical/GYN Room charges for semi-private rooms -	0548	Ambulance service - telephone transmission			
	0123	obstetrics Room charges for semi-private rooms -	0549	EKG Ambulance service - other			
	0124	pediatric Room charges for semi-private rooms -	0550	Skilled nursing - general			
	0125	psychiatric Room charges for semi-private rooms - hospice	0551	Skilled nursing - visit charge			
	0126	Room charges for semi-private rooms - detoxification	0552	Skilled nursing - hourly charge			
	0127	Room charges for semi-private rooms - oncology	0559	Skilled nursing - other			
	0128	Room charges for semi-private rooms - rehabilitation	0560	Medical social services - general			
	0129	Room charges for semi-private rooms - other	0561	Medical social services - visit charge			
	0130	Room charges for semi-private - 3/4 beds - rooms - general	0562	Medical social services - hourly charge			
	0131	Room charges for semi-private - 3/4 beds - rooms - medical/surgical/GYN	0569	Medical social services - other			
	0132 Room charges for semi-private - 3/4 beds - 0570 F		Home health aide - general				
	0133	Room charges for semi-private - 3/4 beds - rooms - pediatric	0571	Home health aide - visit charge			
	0134	Room charges for semi-private - 3/4 beds - rooms - psychiatric	0572	Home health aide - hourly charge			
	0135	Room charges for semi-private - 3/4 beds - rooms - hospice	0579	Home health aide - other			
	0136	Room charges for semi-private - 3/4 beds - rooms - detoxification	0580	Other visits (home health) - general			
	0137	Room charges for semi-private - 3/4 beds - rooms - oncology	0581	Other visits (home health) - visit charge			
	0138	Room charges for semi-private - 3/4 beds - rooms - rehabilitation	0582	Other visits (home health) - hourly charge			
	0139	Room charges for semi-private - 3/4 beds - rooms - other	0583	Other visits (home health) - assessment			
	0140	Room charges for private (deluxe) rooms - general	0589	Other visits (home health) - other			

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01		Room charges for private (deluxe) rooms - medical/surgical/GYN	0590	Units of service (home health) - general
01	142	Room charges for private (deluxe) rooms -	0600	Oxygen (home health) - general
01	143	obstetrics Room charges for private (deluxe) rooms -	0601	Oxygen (home health) - stat/equip/supply or
01	144	pediatric Room charges for private (deluxe) rooms -	0602	contents Oxygen (home health) - stat/equip/supply under
		psychiatric		1 liter per minute
01		Room charges for private (deluxe) rooms - hospice	0603	Oxygen (home health) - stat/equip/supply over 4 liters per minute
01	146	Room charges for private (deluxe) rooms - detoxification	0604	Oxygen (home health) - portable add-in
01	147	Room charges for private (deluxe) rooms - oncology	0609	Oxygen (home health) - other
01	148	Room charges for private (deluxe) rooms - rehabilitation	0610	Magnetic Resonance Technology (MRT) - MRI - general
01	149	Room charges for private (deluxe) rooms - other	0611	Magnetic Resonance Technology (MRT) - MRI - brain (including brain stem)
01	150	Room charges for ward rooms - general	0612	Magnetic Resonance Technology (MRT) - MRI
01	151	Room charges for ward rooms -	0614	- spinal cord (including spine) Magnetic Resonance Technology (MRT) - MRI
01		medical/surgical/GYN Room charges for ward rooms - obstetrics	0615	- other Magnetic Resonance Technology (MRT) -
01	153	Room charges for ward rooms - pediatric	0616	MRA – head and neck Magnetic Resonance Technology (MRT) -
01	154	Room charges for ward rooms - psychiatric	0618	MRA – lower extremities Magnetic Resonance Technology (MRT) -
01	155	Room charges for ward rooms - hospice	0619	MRA – other Magnetic Resonance Technology (MRT) - Other MRT
01	156	Room charges for ward rooms - detoxification	0621	Medical/surgical supplies - incident to radiology
01	157	Room charges for ward rooms - oncology	0622	Medical/surgical supplies - incident to other diagnostic services
			0623	Medical/surgical supplies - surgical dressings
01	158	Room charges for ward rooms - rehabilitation	0624	Medical/surgical supplies - FDA investigational devices
01	159	Room charges for ward rooms - other	0631	Drugs requiring specific identification - single source
01	160	Room charges for other rooms - general	0632	Drugs requiring specific identification - multiple source
01	164	Room charges for other rooms – Sterile Environment	0633	Drugs requiring specific identification - restrictive prescription
01		Room charges for other rooms – self care	0634	Drugs requiring specific identification - EPO, less than 10,000 units
01	169	Room charges for other rooms - other	0635	Drugs requiring specific identification - EPO, 10,000 or more units
01	170	Room charges for nursery - general	0636	Drugs requiring specific identification - requiring detailed coding
01	171	Room charges for nursery - newborn level I	0637	Drugs requiring specific identification - self- administrable
01	172	Room charges for nursery - newborn level II	0640	Home IV therapy services - general
01	173	Room charges for nursery - newborn level III	0641	Home IV therapy services - nonroutine nursing, central line
01	174	Room charges for nursery - newborn level IV	0642	Home IV therapy services - IV site care, central line
01	179	Room charges for nursery - other	0643	Home IV therapy services - IV start/change, peripheral line
01	180	Room charges for LOA - general	0644	Home IV therapy services - nonroutine nursing, peripheral line
01	182	Room charges for LOA - patient convenience- charges billable	0645	Home IV therapy services - training patient/caregiver, central line
01	183	Room charges for LOA - therapeutic leave	0646	Home IV therapy services - training, disabled patient, central line
01		Room charges for LOA – nursing home (for hospitalization)	0647	Home IV therapy services - training, patient/caregiver, peripheral
01	189	hospitalization) Room charges for LOA - other	0648	Home IV therapy services - training, disabled
01	190	Room charges for subacute care - general	0649	patient, peripheral Home IV therapy services - other

0191	Room charges for subacute care - Level I (skilled care)	0650	Hospice services - general
0192	Room charges for subacute care - Level II	0651	Hospice services - routine home care
0193	(comprehensive care) Room charges for subacute care - Level III	0652	Hospice services - continuous home care
0194	(complex care) Room charges for subacute care - Level IV	0655	Hospice services - inpatient respite care
0199	(intensive care) Room charges for subacute care - other	0656	Hospice services - general inpatient care (nonrespite)
0200	Room charges for intensive care - general	0657	Hospice services - physician services
0201	Room charges for intensive care - surgical	0658	Hospice services - room and board - nursing facility
0202	Room charges for intensive care - medical	0659	Hospice services - other
0203	Room charges for intensive care - pediatric	0660	Respite care - general
0204	Room charges for intensive care - psychiatric	0661	Respite care - hourly charge/skilled nursing
0206	Room charges for intensive care - intermediate intensive care unit (ICU)	0662	Respite care - hourly charge/aide/homemaker/companion
0207	Room charges for intensive care - burn care	0663	Respite care - daily charge
0208	Room charges for intensive care - trauma	0669	Respite care - other
0209	Room charges for intensive care - other	0670	Outpatient special residence - general
0210	Room charges for coronary care - general	0671	Outpatient special residence - hospital based
0211	Room charges for coronary care - myocardial infarction	0672	Outpatient special residence - contracted
0212	Room charges for coronary care - pulmonary care	0679	Outpatient special residence - other
0213 0214	Room charges for coronary care - heart transplant Room charges for coronary care - intermediate	0681 0682	Trauma response - level I Trauma response - level II
0214	coronary care unit (CCU)		•
	Room charges for coronary care - other	0683	Trauma response - level III
0220	Special charges - general	0684	Trauma response - level IV
0221 0222	Special charges - admission charge Special charges - technical support charge	0689 0690	Trauma response - other
0222	Special charges - technical support charge Special charges - UR service charge	0691	Pre-hospice/Palliative Care Services - general Pre-hospice/Palliative Care Services – visit
			charge
0224	Special charges - late discharge, medically necessary	0692	Pre-hospice/Palliative Care Services – hourly charge
0229	Special charges - other	0693	Pre-hospice/Palliative Care Services - evaluation
0230	Incremental nursing care - general	0694	Pre-hospice/Palliative Care Services – consultation and education
0231	Incremental nursing care - nursery	0695	Pre-hospice/Palliative Care Services – inpatient care
0232	Incremental nursing care - OB	0696	Pre-hospice/Palliative Care Services – physician services
0233	Incremental nursing care - ICU (includes transitional care)	0699	Pre-hospice/Palliative Care Services - other
0234	Incremental nursing care - CCU (includes transitional care)	0700	Cast Room services - general
0235	Incremental nursing care - hospice	0710	Recovery Room services - general
0239	Incremental nursing care - other	0720	Labor/Delivery Room services - general
0240	All-inclusive ancillary - general	0721	Labor/Delivery Room services - labor
0241	All-inclusive ancillary - basic	0722	Labor/Delivery Room services - delivery
0242	All-inclusive ancillary - comprehensive	0723	Labor/Delivery Room services - circumcision
0243	All-inclusive ancillary - specialty	0724	Labor/Delivery Room services - birthing center
0249	All-inclusive ancillary - other	0729	Labor/Delivery Room services - other
0250	Pharmacy - general	0730	EKG/ECG services - general
0251	Pharmacy - generic drugs	0731	EKG/ECG services - holter monitor
0252	Pharmacy - nongeneric drugs	0732	EKG/ECG services - telemetry
0253	Pharmacy - take-home drugs	0739	EKG/ECG services - other
0254	Pharmacy - drugs incident to other diagnostic services	0740	EEG services - general
0255	Pharmacy - drugs incident to radiology	0750	Gastrointestinal services - general

0256	Pharmacy - experimental drugs	0760	Treatment or observation room services - general
0257	Pharmacy - nonprescription	0761	Specialty Room - Treatment/ Observation Room - Treatment Room
0258	Pharmacy - IV solutions	0762	Specialty Room - Treatment/ Observation Room - Observation Room
0259	Pharmacy - other	0769	Treatment or observation room services - other
0260	IV Therapy - general	0770	Preventive care services - general
0261	IV Therapy - infusion pump	0771	Preventive care services - vaccine administration
0262	IV Therapy - pharmacy services	0780	Telemedicine services - general
0263	IV Therapy - drug/supply delivery	0790	Extra-corporeal shockwave therapy - general
0264	IV Therapy - supplies	0800	Inpatient renal dialysis services - general
0269	IV Therapy - other	0801	Inpatient renal dialysis services - hemodialysis
0270	Medical surgical supplies and devices - general	0802	Inpatient renal dialysis services - peritoneal (non-CAPD)
0271	Medical surgical supplies and devices -	0803	Inpatient renal dialysis services - continuous ambulatory peritoneal dialysis (CAPD)
0272	Medical surgical supplies and devices - sterile	0804	Inpatient renal dialysis services - continuous cycling peritoneal dialysis (CAPD)
0273	Medical surgical supplies and devices - take- home	0809	Inpatient renal dialysis services - other
0274	Medical surgical supplies and devices - prosthetic/orthotic	0810	Acquisition of body components- general
0275	Medical surgical supplies and devices - pacemaker	0811	Acquisition of body components - living donor
0276	Medical surgical supplies and devices - intraocular lens (IOL)	0812	Acquisition of body components - cadaver donor
0277	Medical surgical supplies and devices - oxygen - take-home	0813	Acquisition of body components - unknown donor
0278	Medical surgical supplies and devices - other implants	0814	Acquisition of body components - unsuccessful organ search-donor bank charges
0279	Medical surgical supplies and devices - other	0815	Acquisition of body components – stem cells- allogeneic
0280	Oncology - general	0819	Acquisition of body components - other donor
0289	Oncology - other	0820	Hemodialysis - outpatient or home - general
0290	DME - general	0821	Hemodialysis - outpatient or home - composite or other rate
0291	DME - rental	0822	Hemodialysis - outpatient or home – home supplies
0292	DME - purchase of new	0823	Hemodialysis - outpatient or home – home equipment
0293	DME - purchase of used	0824	Hemodialysis - outpatient or home – maintenance 100%
0294	DME - supplies/drugs for DME effectiveness	0825	Hemodialysis - outpatient or home - support services
0299	DME - other equipment	0826	Hemodialysis - outpatient or home – shorter duration (effective 7/1/17)
0300	Laboratory - general	0829	Hemodialysis - outpatient or home - other
0301	Laboratory - chemistry	0830	Peritoneal dialysis - outpatient or home - general
0302	Laboratory - immunology	0831	Peritoneal dialysis - outpatient or home - composite or other rate
0303	Laboratory - renal patient (home)	0832	Peritoneal dialysis - outpatient or home – home supplies
0304	Laboratory - nonroutine dialysis	0833	Peritoneal dialysis - outpatient or home - home equipment
0305	Laboratory - hematology	0834	Peritoneal dialysis - outpatient or home – maintenance 100%
0306	Laboratory - bacteriology and microbiology	0835	Peritoneal dialysis - outpatient or home - support services
0307	Laboratory - urology	0839	Peritoneal dialysis - outpatient or home - other
0309	Laboratory - other	0840	CAPD - outpatient or home - general
0310	Laboratory pathological - general	0841	CAPD - outpatient or home - composite or other rate
0311	Laboratory pathological - cytology	0842	CAPD - outpatient or home - home supplies
0312	Laboratory pathological - histology	0843	CAPD - outpatient or home - home equipment

O314 Laboratory pathological - biopsy O320 CaPD - outpatient or home - maintenance 100% O321 Radiology - diagnostic - general O321 Radiology - diagnostic - and O322 Radiology - diagnostic - arbriography O322 Radiology - diagnostic - arbriography O323 Radiology - diagnostic - arbriography O324 Radiology - diagnostic - arbriography O325 Radiology - diagnostic - arbriography O326 Radiology - diagnostic - cher stray O327 Radiology - diagnostic - cher stray O329 Radiology - diagnostic - cher stray O329 Radiology - diagnostic - other O329 Radiology - therapeutic and/or chemotherapy administration - schemotherapy O329 Radiology - therapeutic and/or chemotherapy O329 Radiology - therapeutic and/or chemothe				
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nate 0323 Radiology - diagnostic - arteriography 0324 Radiology - diagnostic - chest x-ray 0325 Radiology - diagnostic - chest x-ray 0326 Radiology - diagnostic - chest x-ray 0327 Radiology - therapeutic and/or chemotherapy administration - general 0328 Radiology - therapeutic and/or chemotherapy administration - general 0329 Radiology - therapeutic and/or chemotherapy administration - chemot	0321	Radiology - diagnostic - angiocardiography	0850	CCPD - outpatient or home - general
0324 Radiology - diagnostic - chest x-ray 0328 Radiology - diagnostic - chest x-ray 0329 Radiology - diagnostic - chest 0329 Radiology - therapeutic and/or chemotherapy administration - general 0321 Radiology - therapeutic and/or chemotherapy administration - chemotherapy injected 0322 Radiology - therapeutic and/or chemotherapy administration - chemotherapy injected 0323 Radiology - therapeutic and/or chemotherapy administration - chemotherapy administration - chemotherapy administration - radiation therapy 0325 Radiology - therapeutic and/or chemotherapy administration - other of the chemotherapy administration - othe	0322	Radiology - diagnostic - arthrography	0851	•
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administration - general Addinospy - therapeutic and/or chemotherapy administration - chemotherapy - injected Agadiology - therapeutic and/or chemotherapy administration - chemotherapy - onal Agadiology - therapeutic and/or chemotherapy administration - radiation therapy administration - chemotherapy - IV Assistance - developed - administration - radiation therapy administration - other Alaiology - therapeutic and/or chemotherapy administration - other Assistance - developed - administration - developed - administration - other Assistance - developed - administration - developed - administration - other Assistance - developed - administration - developed - administration - other Assistance - developed - administration - developed - administration - other Assistance - developed - administration - developed - administration - other Assistance - developed - administration - developed - developed - administration - developed - administration - developed - developed - administration - developed	0329	Radiology - diagnostic - other	0854	CCPD - outpatient or home - maintenance 100%
administration - chemotherapy - injected Radiology - therapeutic and/or chemotherapy administration - chemotherapy - oral administration - chemotherapy - oral administration - radiation therapy administration - chemotherapy - IV Radiology - therapeutic and/or chemotherapy administration - other Nuclear medicine - diagnostic procedures Nuclear medicine -	0330	administration - general	0855	CCPD - outpatient or home - support services
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Nuclear medicine - diagnostic procedures Nuclear medicine - therapeutic procedures Nuclear medicine - diagnostic andiopharmaceuticals Nuclear medicine - diagnostic radiopharmaceuticals Nuclear medicine - therapeutic radiopharmaceuticals Nuclear medicine - therapeutic radiopharmaceuticals Nuclear medicine - other Nuclear medicine - diagnostic radiopharmaceuticals Nuclear medicine - dearnostic radiopharmaceuticals Nuclear medicine - diagnostic radiopharmaceuticals Nuclear medicine - dearnostic radiopharmaceuticals Nuclear medicine radiopharmaceutica	0339		0881	Miscellaneous dialysis - ultrafiltration
Nuclear medicine - therapeutic procedures Nuclear medicine - diagnostic radiopharmaceuticals Nuclear medicine - diagnostic radiopharmaceuticals Nuclear medicine - therapeutic radiopharmaceuticals Nuclear medicine - therapeutic radiopharmaceuticals Nuclear medicine - other Oscillatoria - other other Oscillatoria - other Oscillatoria - other ot	0340	Nuclear medicine - general	0882	Miscellaneous dialysis - home aide visit
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Operating room services - general Operating room services - general Operating room services - minor surgery Operating room services - minor surgery Operating room services - minor surgery Operating room services - organ transplant other than kidney Operating room services - kidney transplant other than kidney Operating room services - kidney transplant Operating room services - kidney transplant Operating room services - other Operating room servic	0359	CT scan - other	0907	Behavior health treatments/services -
Operating room services - minor surgery Operating room services - organ transplant other than kidney Operating room services - organ transplant other than kidney Operating room services - kidney transplant Operating room services - kidney transplant Operating room services - kidney transplant Operating room services - other Operating room services	0360	Operating room services - general	0911	Behavior health treatment/services -
Operating room services - organ transplant other than kidney Operating room services - kidney transplant other than kidney Operating room services - kidney transplant O367 Operating room services - other O369 Operating room services - other O369 Operating room services - other O370 Anesthesia - general O371 Anesthesia - incident to radiology O372 Anesthesia - incident to other diagnostic services O372 Anesthesia - incident to other diagnostic services O374 Anesthesia - acupuncture O379 Anesthesia - other O379 Anesthesia - other O370 Anesthesia - other O370 Operating room services - other O370 Anesthesia - incident to other diagnostic operation of the alth treatment/services - testing services O371 Operating room services - other O372 Anesthesia - incident to radiology O373 Behavior health treatment/services - testing operation of the diagnostic services - other O379 Anesthesia - other O379 Operating room services - other O370 Operating room services - other O370 Operating room services - other O371 Anesthesia - incident to radiology O371 Behavior health treatment/services - other O372 Operating room services - other O373 Operating room services - other O374 Anesthesia - incident to radiology O375 Behavior health treatment/services - other O379 Operating room services - other O370 Operating room services - other O370 Operating room services - other O371 Anesthesia - general O381 Behavior health treatment/services - other O372 Operating room services - other O373 Operating room services - other O374 Anesthesia - general O385 Blood - packed red cells O918 Behavior health treatment/services - partingly therapy O918 Behavior health treatment/services - other O919 Behavior health treatment/services - other O919 Behavior health treatment/services - other	0361	Operating room services - minor surgery	0912	Behavior health treatment/services - partial
Operating room services - kidney transplant Ogl4 Behavior health treatment/services - individual therapy Operating room services - other Ogl5 Behavior health treatment/services - group therapy Ogr4 Anesthesia - general Ogl6 Behavior health treatment/services - family therapy Ogr4 Anesthesia - incident to radiology Ogl7 Behavior health treatment/services - biofeedback Ogl8 Behavior health treatment/services - biofeedback Ogl8 Behavior health treatment/services - testing Ogl8 Behavior health treatment/services - testing Ogl9 Anesthesia - acupuncture Ogl9 Behavior health treatment/services - other Ogl9 Other diagnostic services - general Ogl9 Other diagnostic services - peripheral vascular lab Ogg1 Other diagnostic services - lectromyogram Ogg2 Other diagnostic services - pap smear Ogg2 Other diagnostic services - pap smear Ogg3 Other diagnostic services - allergy test Ogg4 Other diagnostic services - pregnancy test Ogg5 Other diagnostic services - pregnancy test Ogg9 Other diagnostic services - other	0362		0913	Behavior health treatment/services - partial
Ogerating room services - other Ogerating room services - other leath treatment/services - family therapy Ogerating room services - other leath treatment/services - other health treatment/services - other Ogerating room services - other leath treatment/services - other Ogerating room services - other leath treatment/services - other Ogerating room services - other leath treatment/services - other Ogerating room services - other leath treatment/services - other Ogerating room services	0367	•	0914	Behavior health treatment/services - individual
O370 Anesthesia - general O371 Anesthesia - incident to radiology O372 Anesthesia - incident to other diagnostic services O374 Anesthesia - acupuncture O379 Anesthesia - other O380 Blood - general O381 Blood - packed red cells O382 Blood - whole blood O383 Blood - plasma O384 Blood - platelets O385 Blood - leukocytes O385 Blood - leukocytes O386 Blood - leukocytes O387 Anesthesia - other O398 Behavior health treatment/services - testing O399 Behavior health treatment/services - other O319 Other diagnostic services - general O390 Other diagnostic services - peripheral vascular O380 Blood - packed red cells O381 Blood - whole blood O382 Blood - whole blood O383 Blood - plasma O384 Blood - platelets O385 Blood - leukocytes O385 Other diagnostic services - pregnancy test O386 Blood - leukocytes O387 Other diagnostic services - pregnancy test O387 Other diagnostic services - other	0369	Operating room services - other	0915	Behavior health treatment/services - group
O371 Anesthesia - incident to radiology O917 Behavior health treatment/services - biofeedback O372 Anesthesia - incident to other diagnostic services O374 Anesthesia - acupuncture O919 Behavior health treatment/services - testing O379 Anesthesia - other O380 Blood - general O380 Blood - general O381 Blood - packed red cells O382 Blood - whole blood O383 Blood - plasma O384 Blood - plasma O385 Blood - leukocytes O929 Other diagnostic services - peripheral vascular diagnostic services - allergy test O385 Blood - leukocytes O929 Other diagnostic services - pregnancy test O929 Other diagnostic services - other	0370	Anesthesia - general	0916	Behavior health treatment/services - family
services 0374 Anesthesia - acupuncture 0379 Anesthesia - other 0380 Blood - general 0381 Blood - packed red cells 0382 Blood - whole blood 0383 Blood - plasma 0384 Blood - plasma 0385 Blood - leukocytes 0385 Blood - leukocytes 0386 Open Anesthesia - other 0390 Other diagnostic services - peripheral vascular lab 0391 Other diagnostic services - electromyogram 0392 Other diagnostic services - pap smear 0393 Other diagnostic services - pap smear 0394 Other diagnostic services - allergy test 0395 Other diagnostic services - pregnancy test 0397 Other diagnostic services - other	0371	Anesthesia - incident to radiology	0917	Behavior health treatment/services -
0379Anesthesia - other0920Other diagnostic services - general0380Blood - general0921Other diagnostic services - peripheral vascular lab0381Blood - packed red cells0922Other diagnostic services - electromyogram0382Blood - whole blood0923Other diagnostic services - pap smear0383Blood - plasma0924Other diagnostic services - allergy test0384Blood - platelets0925Other diagnostic services - pregnancy test0385Blood - leukocytes0929Other diagnostic services - other	0372	C	0918	Behavior health treatment/services - testing
0380Blood - general0921Other diagnostic services - peripheral vascular lab0381Blood - packed red cells0922Other diagnostic services - electromyogram0382Blood - whole blood0923Other diagnostic services - pap smear0383Blood - plasma0924Other diagnostic services - allergy test0384Blood - platelets0925Other diagnostic services - pregnancy test0385Blood - leukocytes0929Other diagnostic services - other	0374		0919	Behavior health treatment/services - other
0381 Blood - packed red cells 0922 Other diagnostic services - electromyogram 0382 Blood - whole blood 0923 Other diagnostic services - pap smear 0383 Blood - plasma 0924 Other diagnostic services - allergy test 0384 Blood - platelets 0925 Other diagnostic services - pregnancy test 0385 Blood - leukocytes 0929 Other diagnostic services - other	0379	Anesthesia - other	0920	Other diagnostic services - general
0381Blood - packed red cells0922Other diagnostic services - electromyogram0382Blood - whole blood0923Other diagnostic services - pap smear0383Blood - plasma0924Other diagnostic services - allergy test0384Blood - platelets0925Other diagnostic services - pregnancy test0385Blood - leukocytes0929Other diagnostic services - other	0380	Blood - general	0921	
0383Blood - plasma0924Other diagnostic services - allergy test0384Blood - platelets0925Other diagnostic services - pregnancy test0385Blood - leukocytes0929Other diagnostic services - other	0381	Blood - packed red cells	0922	
0384Blood - platelets0925Other diagnostic services - pregnancy test0385Blood - leukocytes0929Other diagnostic services - other	0382	Blood - whole blood	0923	Other diagnostic services - pap smear
0385 Blood - leukocytes 0929 Other diagnostic services - other	0383	Blood - plasma	0924	Other diagnostic services - allergy test
•	0384	Blood - platelets	0925	Other diagnostic services - pregnancy test
0386 Blood - other components 0931 Medical rehabilitation day program - half day	0385	Blood - leukocytes	0929	Other diagnostic services - other
2222 2333 Said Components 5751 Fredren Tendomation day program than day	 0386	Blood - other components	0931	Medical rehabilitation day program - half day

0387	Blood - other derivatives (cryoprecipitate)	0932	Medical rehabilitation day program - full day
0389	Blood - other	0940	Other therapeutic services - general
0390	Blood and blood component administration, storage and processing - general	0941	Other therapeutic services - recreational therapy
0391	Blood and blood component administration, storage and processing - administration	0942	Other therapeutic services - education/training
0392	Blood and blood component administration, storage and processing – processing and storage	0943	Other therapeutic services - cardiac rehabilitation
0399	Blood and blood component administration, storage and processing - other	0944	Other therapeutic services - drug rehabilitation
0400	Other imaging services - general	0945	Other therapeutic services - alcohol rehabilitation
0401	Other imaging services - diagnostic mammography	0946	Other therapeutic services - complex medical equipment - routine
0402	Other imaging services - ultrasound	0947	Other therapeutic services - complex medical equipment - ancillary
0403	Other imaging services - screening mammography	0948	Other therapeutic services – pulmonary rehabilitation
0404	Other imaging services - PET	0949	Other therapeutic services - other
0409	Other imaging services - other	0951	Other therapeutic services – athletic training
0410	Respiratory services - general	0952	Other therapeutic services - kinesiotherapy
0412	Respiratory services - inhalation	0953	Other therapeutic services – chemical
0412	Respiratory services - initiatation	0933	dependency (drug and alcohol)
0413	Respiratory services - hyperbaric oxygen therapy	0960	Professional fees - general
0419	Respiratory services - other	0961	Professional fees - psychiatric
0420	Physical therapy - general	0962	Professional fees - ophthalmology
0421	Physical therapy - visit charge	0963	Professional fees - anesthesiologist (MD)
0422	Physical therapy - hourly charge	0964	Professional fees - anesthetist (CRNA)
0423	Physical therapy - group rate	0969	Professional fees - other
0424	Physical therapy - evaluation or reevaluation	0971	Professional fees - laboratory
0429	Physical therapy - other	0972	Professional fees - radiology - diagnostic
0430	Occupational therapy - general	0973	Professional fees - radiology - therapeutic
0431	Occupational therapy - visit charge	0974	Professional fees - radiology - nuclear medicine
0432	Occupational therapy - hourly charge	0975	Professional fees - operating room
0433	Occupational therapy - group rate	0976	Professional fees - respiratory therapy
0434	Occupational therapy - evaluation or reevaluation	0977	Professional fees - physical therapy
0439	Occupational therapy - other	0978	Professional fees - occupational therapy
0440	Speech-language pathology - general	0979	Professional fees - speech therapy
0441	Speech-language pathology - visit charge	0981	Professional fees - emergency room
0442	Speech-language pathology - hourly charge	0982	Professional fees - outpatient services
0443	Speech-language pathology - group rate	0983	Professional fees - clinic
0444	Speech-language pathology - evaluation or reevaluation	0984	Professional fees - medical social services
0449	Speech-language pathology - other	0985	Professional fees - EKG
0450	Emergency room - general	0986	Professional fees - EEG
0451	Emergency room - EMTALA emergency medical screening services	0987	Professional fees - hospital visit
0452	Emergency room - beyond EMTALA screening	0988	Professional fees - consultation
0456	Emergency room - urgent care	0989	Professional fees - private duty nurse
0459	Emergency room - other	0990	Patient convenience items - general
0460	Pulmonary function - general	0991	Patient convenience items - cafeteria/guest tray
0469	Pulmonary function - other	0992	Patient convenience items - private linen service
0470	Audiology - general	0993	Patient convenience items - telephone/telegraph
0471	Audiology - diagnostic	0994	Patient convenience items - TV/radio
0472	Audiology - treatment	0995	Patient convenience items - nonpatient room rentals
0479	Audiology - other	0996	Patient convenience items - late discharge charge
0480	Cardiology - general	0997	Patient convenience items - admission kits
0481	Cardiology - cardiac cath lab	0998	Patient convenience items - beauty shop/barber

	0482	Cardiology - stress test	0999	Patient convenience items - other
	0483	Cardiology - echocardiology	1000	Behavior health accommodations - general
	0489	Cardiology - other	1001	Behavior health accommodations - residential treatment - psychiatric
	0490	Ambulatory surgical care - general	1002	Behavior health accommodations - residential treatment - chemical dependency
	0499	Ambulatory surgical care - other	1003	Behavior health accommodations - supervised living
	0500	Outpatient services - general	1004	Behavior health accommodations - halfway house
	0509	Outpatient services - other	1005	Behavior health accommodations - group home
	0510	Clinic - general	2100	Alternative therapy services - general
	0511	Clinic - chronic pain	2101	Alternative therapy services - acupuncture
	0512	Clinic - dental	2102	Alternative therapy services - acupressure
	0513	Clinic - psychiatric	2103	Alternative therapy services - massage
	0514	Clinic - OB/GYN	2104	Alternative therapy services - reflexology
	0515	Clinic - pediatric	2105	Alternative therapy services - biofeedback
	0516	Clinic - urgent care	2106	Alternative therapy services - hypnosis
	0517	Clinic - family practice	2109	Alternative therapy services - other
	0519	Clinic - other	3101	Adult day care, medical and social - hourly
	0520	Freestanding Clinic - general	3102	Adult day care, social - hourly
	0521	Freestanding Clinic - Clinic Visit by Member to RHC/FQHC Freestanding Clinic - Home Visit by	3103	Adult day care, medical and social - daily
	0522	RHC/FQHC Practitioner	3104	Adult day care, social - daily
	0523	Freestanding Clinic - family practice	3105	Adult foster care - daily
	0524 0525	Freestanding Clinic - Visit by RHC/FQHC Practitioner to a Member in a Covered Part A Stay at SNF Freestanding Clinic - Visit by RHC/FQHC Provided The Company of the Compan	3109	Adult foster care - other
	0526	Practitioner to a Member in a SNF (not Covered Part A Stay) or NF or ICF MR or Other Residential Facility Freestanding Clinic - urgent care		
Beginning Position:	13	Data Source:	Claim	
Length:	4	Type:	Alphan	umeric
Field 3:		CS_QUALIFIER		
Description:	Code	identifying the type/source of the descrip CS_PROCEDURE_CODE	tive nun	nber used in
Beginning Position:	17	Data Source:	Claim	
Length:	2	Type:	Alphan	umeric
Field 4		CS PROCEDURE CODE	7 HpHan	unicite
Description:		A Common Procedure Coding System (He	CPCS) o	ode applicable to ancillary services or
- the ipaon.		modations.	J. 25) C	application distinary services of
Coding Scheme:		ttp://www.cms.hhs.gov/HCPCSReleaseCo	ndeSets/	ANHCPCS/list asp for complete list
Beginning Position:	19	Data Source:	Claim	1.1101 Community for complete list.
Length:	5	Type:		umeric
Field 5:		IFIER_1	тірпап	umene
Description:		fies special circumstances related to the p	performs	nce of the service
Coding Scheme:	22	Increased procedural services	P4	A patient with severe systemic disease that is a
Coding Benefite.	23	Unusual Anesthesia	P5	constant threat to life A moribund patient who is not expected to
	24	Unrelated Evaluation and Management Service by	P6	survive without the operation A declared brain-dead patient whose organs are
		the Same Physician or Other Qualified Health Care Professional during a Postoperative Period		being removed for donor purposes
	25	Significant, Separately Identifiable Evaluation and Management Service by the Same Physician or Other Qualified Health Care Professional on the	l E1	Upper left eyelid
	26	Same Day of the Procedure or Other Service	EO	Lower left evalid
	26	Professional Component	E2	Lower left eyelid

Beginning Position: Length: Field 6:	24 2 MOI	Data Source: Type: DIFIER_2	Claim Alphan	umeric
	P3	A patient with severe systemic disease		
	P2	A patient with mild systemic disease	XU	Unusual Non-Overlapping Service
	P1	A normal healthy patient	XP	Separate Practitioner
	8P	Performance Measure Reporting Modifier- Action not performed, reason not otherwise specified	XS	Separate Structure
	3P	Performance Measure Exclusion Modifier due to System Reasons	XE	Separate Encounter
	2P	Performance Measure Exclusion Modifier due to Patient Reasons	TA	Left foot, great toe
	1P	Performance Measure Exclusion Modifier due to Medical Reasons	Т9	Right foot, fifth digit
	99	Multiple Modifiers	T8	Right foot, fourth digit
	95	Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications System	Т7	Right foot, third digit
	92 05	Alternative Laboratory Platform Testing	T6	Right foot, second digit
	91	Repeat Clinical Diagnostic Laboratory Test	T5	Right foot, great toe
	90	Reference (Outside) Laboratory	T4	Left foot, fifth digit
	82	Repeat procedure by same physician	T3	Left foot, fourth digit
	81	Minimum Assistant Surgeon	T2	Left foot, third digit
	80	Assistant Surgeon	T1	Left foot, second digit
	79	Unrelated Procedure or Service by the Same Physician or Other Qualified Health Care Professional During the Postoperative Period	RT	Right side of the body procedure
	70	Room by the Same Physician or Other Qualified Health Care Professional Following Initial Procedure for a Related Procedure During the Postoperative Period	D.T.	Dieht eide of the bade access
	78	Qualified Health Care Professional Unplanned Return to the Operating/Procedure	RI	Ramus intermedius coronary artery
	77	Qualified Health Care Professional Repeat Procedure by Another Physician or Other	RC	provider of services Right coronary artery
	76	Surgery Center (ASC) Procedure after Administration of Anesthesia Repeat Procedure by Same Physician or Other	M QN	by a provider of services Ambulance service furnished directly by a
	74	Surgery Center (ASC) Procedure prior to the Administration of Anesthesia Discontinued Outpatient Hospital/Ambulatory	Q	Ambulance service provided under arrangemen
	73	Discontinued Outpatient Hospital/Ambulatory	LT	Left side of the body procedure
	66	Surgical Team	LM	Left main coronary artery
	63	Procedure Performed on Infants less than 4kg	LD	Left anterior descending coronary artery
	59 62	Distinct Procedural Service Two Surgeons	GH LC	Diagnostic mammogram converted from screening mammogram on same day Left circumflex coronary artery
	58	Staged or Related Procedure or Service by the Same Physician or Other Qualified Health Care Professional During the Postoperative Period	GG	Performance and payment of a screening mammography and diagnostic mammography came patient, same day.
	57	Decision for Surgery	FA	Left hand, thumb
	56	Preoperative Management Only	F9	Right hand, fifth digit
	55	Postoperative Management Only	F8	Right hand, fourth digit
	54	Surgical Care Only	F7	Right hand, third digit
	53	Discontinued Procedure	F6	Right hand, second digit
	52	Reduced Services	F5	Right hand, thumb
	51	Multiple Procedures	F4	Left hand, fifth digit
	50	Bilateral Procedure	F3	Left hand, fourth digit
	47	Anesthesia by Surgeon	F2	Left hand, third digit
	32 33	Mandated Services Preventive Service	E4 F1	Lower right eyelid Left hand, second digit
	22	the Same Date	E/4	I arrow wight arrolled

Coding Scheme:	Same as Field MODIFIER	_1	
Beginning Position:	26	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 7:	MODIFIER_3		
Description:	Identifies special circumsta	nces related to the	performance of the service.
Coding Scheme:	Same as Field MODIFIER_	_1	
Beginning Position:	28	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 8:	MODIFIER_4		
Description:	Identifies special circumsta	nces related to the	performance of the service.
Coding Scheme:	Same as Field MODIFIER_	_1	
Beginning Position:	30	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 9:	UNIT_MEASUREMENT	_CODE	
Description:	Code specifying the units in	n which a value is	being expressed.
Coding Scheme:	DA Days		
	F2 International unit UN Unit		
Beginning Position:	32	Data Source:	Claim
Length:	2	Type:	Alphanumeric
Field 10:	UNITS OF SERVICE	1 J P C .	The financial control of the first control of the f
Description:	Numeric value of quantity		
Beginning Position:	34	Data Source:	Claim
Length:	7	Type:	Numeric
Field 11:	UNIT RATE	J F	
Description:	Rate per unit		
Beginning Position:	41	Data Source:	Claim
Length:	12	Type:	Numeric
Field 12:	CHRGS_LINE_ITEM		
Description:	Total amount of the charge		
Beginning Position:	53	Data Source:	Assigned
Length:	14	Type:	Numeric
Field 13:	CHRGS NON COV	* *	
Description:	Total non-covered amount	of the charge	
Beginning Position:	67	Data Source:	Assigned
Length:	14	Type:	Numeric

FACILITY TYPE INDICATOR FILE

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

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Field 1:	THCIC_ID
Description:	Provider ID. Unique identifier assigned to the provider by DSHS.
Beginning Position:	1 Data Source: Assigned
Length:	6 Type: Alphanumeric
Field 2:	FACILITY_TYPE
Description:	Types of healthcare facilities.
Beginning Position:	7 Data Source: Provider
Length:	4 Type: Alphanumeric
Field 3:	FAC_TEACHING_IND
Description:	Teaching Facility Indicator.
Suppression:	Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999'). A Member, Council of Teaching Hospitals
Coding Scheme:	X Other teaching facility
Beginning Position:	Data Source: Provider
Length:	1 Type: Alphanumeric
Field 4:	FAC_PSYCH_IND
Description:	Psychiatric Facility Indicator.
Suppression:	Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Beginning Position:	Data Source: Provider
Length:	1 Type: Alphanumeric
Field 5:	FAC_REHAB_IND
Description:	Rehabilitation Facility Indicator.
Suppression:	Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Beginning Position:	Data Source: Provider
Length:	1 Type: Alphanumeric
Field 6:	FAC_ACUTE_CARE_IND
Description:	Acute Care Facility Indicator.
Suppression:	Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Beginning Position:	14 Data Source: Provider
Length:	1 Type: Alphanumeric
Field 7:	FAC_SNF_IND
Description:	Skilled Nursing Facility Indicator. Hospital facility type indicator provided by the hospital.
Suppression:	Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Beginning Position:	15 Data Source: Provider
Length:	1 Type: Alphanumeric
Field 8:	FAC_LONG_TERM_AC_IND
Description:	Long Term Acute Care Facility Indicator.
Suppression:	Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Beginning Position:	16 Data Source: Provider
Length:	1 Type: Alphanumeric
Field 9:	FAC_OTHER_LTC_IND
Description:	Other Long Term Care Facility Indicator.
Suppression:	Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Beginning Position:	17 Data Source: Provider
Length:	1 Type: Alphanumeric
Field 10:	FAC_PEDS_IND
Description:	Pediatric Facility Indicator.
Suppression:	Suppressed for hospitals with fewer than 50 discharges (Provider ID equals '999999').
Coding Scheme:	C Member, National Association of Children's Hospitals and Related Institutions (NACHRI) X Facilities that also treat children
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Beginning Position:	18	Data Source:	Provider		
Length:	1	Type:	Alphanumeric		
Field 11	PROVIDER_NAME	J.F.	<u>r</u>		
Description:	Hospital name provided	by the hospital.			
Beginning Position:	19	Data Source:	Provider		
Length:	55	Type:	Alphanumeric		
Field 12:	POA_PROVIDER_INI				
Description:			uired to submit Diagnosis Present on Admission		
•			the following facility types as exempt from		
			Access Hospitals, Inpatient Rehabilitation		
	Hospitals, Inpatient Psyc	hiatric Hospitals,	Cancer Hospitals, Children's or Pediatric Hospitals		
	and Long Term Care Ho	spitals.	•		
Coding Scheme:	M Mixed (Facility has sections that would be exempted from reporting POA for those patients)				
G	R Required				
	X Exempt ` Invalid				
Beginning Position:	74	Data Source:	Assigned		
Length:	1	Type:	Alphanumeric		
Field 13:	CERT_STATUS				
Description:	Assignment of a code to	indicate the certifi	cation of data and submission of comments by the		
•	hospital. First available 3		·		
Coding Scheme:	1 Certified, without comn				
G	2 Certified, with commen				
	3 Certified, with commen		d by deadline		
	4 Hospital elected not to c5 Hospital closed, data no	•			
	6 Hospital out of complian				
	-		or man-made disaster (Starting 4Q2016)		
Beginning Position:	75	·	Assigned		
Length:	1		Alphanumeric		
		- JPC-	i i piiuliuliioi i o		

GROUPER FILE

Field 1:	RECORD_ID					
Description:	Record Identification Number. Unique number assigned to identify the record. First available					
D ' ' D ''	1st quarter 2002. Does NOT match the RECORD_ID in THCIC Research Data Files (RDF's).					
Beginning Position:	1 Data Source: Assigned					
Length: Field 2:	12 Type: Alphanumeric FROZEN MS DRG					
	Centers for Medicare and Medicaid Services (CMS) Diagnosis Related Group (DRG), as					
Description:	assigned for hospital payment for Medicare beneficiaries.					
Beginning Position:	Data Source: Assigned					
Length:	3 Type: Alphanumeric					
Field 3:	FROZEN_MS_MDC					
Description:	Major Diagnostic Category (MDC) as assigned by Centers for Medicare and Medicaid Services					
•	(CMS) (formerly Health Care Financing Administration (HCFA)) for hospital payment for					
	Medicare beneficiaries. First available 2004.					
Beginning Position:	16 Data Source: Assigned					
Length:	2 Type: Alphanumeric					
Field 4:	FROZEN_MS_GROUPER_VERSION_NBR					
Description:	CMS Medicare Severity Diagnosis Related Grouper (formerly CMS DRG Grouper and					
	previously reported as HCFA_GROUPER_VERSION_NBR) version used to assign MS DRG					
	and, MS MDC codes					
Beginning Position:	Data Source: Assigned					
Length:	5 Type: Alphanumeric					
Field 5:	FROZEN_MS_GROUPER_ERROR_CODE					
Description:	Error codes identify potential variations with MS DRG code assignment					
Coding Scheme:	No errors. DRG successfully assigned. 19 DisableHac = 0 and at least one HAC POA is invalid or exempt					
	O1 Diagnosis code cannot be used as principal 20 DisableHac is invalid and at least one HAC POA is N or diagnosis U					
	02 Record does not meet criteria for any DRG 21 DisableHac is invalid and at least one HAC POA is invalid or exempt					
	03 Invalid Age 22 DisableHac = 0 and at least one HAC POA is exempt					
	O4 Invalid Sex DisableHac is invalid and at least one HAC POA is exempt					
	Invalid Discharge Status 24 DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U					
	10 Illogical Principal Diagnosis (CMS only) 25 DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W					
	11 Invalid Principal Diagnosis					
Beginning Position:	Data Source: Assigned					
Length:	2 Type: Alphanumeric					
Field 6:	FROZEN_APR_DRG					
Description:	All Patient Refined (APR) Diagnosis Related Group (DRG) as assigned by 3M APR-DRG					
D 1 1 D 1/1	Grouper					
Beginning Position:	Data Source: Assigned					
Length: Field 7:	3 Type: Alphanumeric FROZEN_RISK_MORTALITY					
Description:	Assignment of a risk of mortality score from the All Patient Refined (APR) Diagnosis Related					
Description.	Group (DRG) from the 3M [™] APR-DRG Grouper. Indicates the likelihood of dying.					
Coding Scheme:	1 Minor 2 Moderate 3 Major 4 Extreme					
Beginning Position:	28 Data Source: Assigned					
Length:	1 Type: Alphanumeric					
Field 8:	FROZEN_ILLNESS_SEVERITY					
- aa						
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Description:			m the All Patient Refined (APR) Diagnosis Related
	1 '	" APR-DRG Gro	ouper. Indicates the extent of physiologic
Cadina Sahamas	decompensation. 1 Minor		
Coding Scheme:	2 Moderate		
	3 Major		
	4 Extreme		
Daginning Dagitians	0 No class specified	Data Source:	Assigned
Beginning Position: Length:	29 1	Type:	Assigned Alphanumeric
Field 9:	FROZEN_APR_MDC	турс.	Alphanumene
Description:		(MDC) as assion	ed by 3M™ APR-DRG Grouper.
Beginning Position:	30	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 10:	FROZEN_APR_GROUPE		
Description:			d Grouper version used to assign APR DRG codes,
-	APR MDC codes, Risk of M	Iortality rankings	s and, Severity of Illness rankings
Beginning Position:	32	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 11:	FROZEN_APR_GROUPE		
Description:	Error codes identify potenti	al variations with	n APR DRG code assignment
Coding Scheme:	00 No errors. DRG successfully		Gestational age/birth weight conflict (APR only)
	01 Diagnosis code cannot be us principal diagnosis	sed as 19	DisableHac = 0 and at least one HAC POA is invalid or
	02 Record does not meet criteri	a for any 20	exempt DisableHac is invalid and at least one HAC POA is N or U
	DRG		
	03 Invalid Age	21	DisableHac is invalid and at least one HAC POA is invalid or exempt
	04 Invalid Sex	22	DisableHac = 0 and at least one HAC POA is exempt
	05 Invalid Discharge Status06 Invalid birthweight (AP & A	23 (DD only) 24	DisableHac is invalid and at least one HAC POA is exempt
	06 Invalid birthweight (AP & A	APR only) 24	DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U
	09 Invalid discharge age in day APR only)	s (AP & 25	DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W
	11 Invalid Principal Diagnosis		
Beginning Position:	37	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 12:	MS_DRG	. 1: :10 :	(G) (G) D: P. L. LG (D) G)
Description:			(CMS) Diagnosis Related Group (DRG), as
Beginning Position:	assigned for hospital payme.	Data Source:	Assigned
Length:	3	Type:	Alphanumeric
Field 13:	MS_MDC	турс.	Minimumente
Description:		(MDC) as assign	ed by Centers for Medicare and Medicaid Services
			ministration (HCFA)) for hospital payment for
	Medicare beneficiaries. Firs		
Beginning Position:	42	Data Source:	Assigned
Length:	2	Type:	Alphanumeric
Field 14:	MS_GROUPER_VERSIO		
Description:			Grouper (formerly CMS DRG Grouper and
	previously reported as HCF, and, MS MDC codes	A_GROUPER_V	VERSION_NBR) version used to assign MS DRG
Beginning Position:	44	Data Source:	Assigned
Length:	5	Type:	Alphanumeric
Field 15:	MS_GROUPER_ERROR	* *	•
Description:	Error codes identify potentia		MS DRG code assignment
Coding Scheme:	No errors. DRG successfully	1	9 DisableHac = 0 and at least one HAC POA is invalid or
	01 Diagnosis code cannot be us diagnosis	_	exempt 0 DisableHac is invalid and at least one HAC POA is N or U
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	00			21	D' 11 H ' ' 1'1 1 (1) HACDOA'
	02	Record does not meet criteria fo	or any DRG	21	DisableHac is invalid and at least one HAC POA is invalid or exempt
	03	Invalid Age		22	DisableHac = 0 and at least one HAC POA is exempt
	04	Invalid Sex		23	DisableHac is invalid and at least one HAC POA is
	05	Invalid Discharge Status		24	exempt DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U
	10	Illogical Principal Diagnosis (C	MS only)	25	DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W
	11	Invalid Principal Diagnosis			nave different 1011 (and so that the first 1 of the
Beginning Position:	49	D	ata Source:	: <i>A</i>	Assigned
Length:	2		ype:	P	Alphanumeric
Field 16:		L_DRG			
Description:		The state of the s	gnosis Relat	ed G	Group (DRG) as assigned by 3M APR-DRG
D 1 1 D 1/1	Grou	-			
Beginning Position:	51		ata Source:		Assigned
Length:	3		'ype:	F	Alphanumeric
Field 17:		K_MORTALITY	ity saora fra	m th	a All Dationt Defined (ADD) Diagnosis Belated
Description:					e All Patient Refined (APR) Diagnosis Related per. Indicates the likelihood of dying.
Coding Scheme:	1	Minor	AFK-DKU C	nou	per. marcales the fixenhood of dying.
Couning Scheme.	2	Moderate			
	3	Major			
n n	4	Extreme			
Beginning Position:	54 1		oata Source:		Assigned
Length: Field 18:	1 TT T 7	NESS_SEVERITY	'ype:	F	Alphanumeric
Description:			aces score fr	om t	the All Patient Refined (APR) Diagnosis Related
Description.					per. Indicates the extent of physiologic
		mpensation.	AI K-DRO C	ուսալ	per. mulcates the extent of physiologic
Coding Scheme:	1	Minor			
coung seneme.	2	Moderate			
	3	Major			
	4	Extreme			
Beginning Position:	4 0	Extreme No class specified	ata Source:	: <i>A</i>	Assigned
Beginning Position: Length:	4	Extreme No class specified D	oata Source: Type:		Assigned Alphanumeric
	4 0 55 1	Extreme No class specified D			•
Length:	4 0 55 1 APR	Extreme No class specified D T C_MDC or Diagnostic Category (M	Type: (DC) as assig	<i>A</i> gned	•
Length: Field 19:	4 0 55 1 APR Majo 56	Extreme No class specified D T C_MDC or Diagnostic Category (M	ype:	gned	Alphanumeric by 3M™ APR-DRG Grouper. Assigned
Length: Field 19: Description: Beginning Position: Length:	4 0 55 1 APR Majo 56 2	Extreme No class specified D T R_MDC or Diagnostic Category (M D T	Type: DC) as assignata Source: Type:	gned	Alphanumeric by 3M™ APR-DRG Grouper.
Length: Field 19: Description: Beginning Position: Length: Field 20:	4 0 55 1 APR Majo 56 2 APR	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION	ype: DC) as assignata Source: ype: N_NBR	gned s A	Alphanumeric by 3M™ APR-DRG Grouper. Assigned Alphanumeric
Length: Field 19: Description: Beginning Position: Length:	4 0 55 1 APR Majo 56 2 APR 3M ¹	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION M All Patient Refined Diagnostic Category (M D T R_GROUPER_VERSION	Type: DC) as assignate Source: Type: N_NBR gnosis Relate	gned Gned	Alphanumeric by 3M™ APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes,
Length: Field 19: Description: Beginning Position: Length: Field 20: Description:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION M All Patient Refined Diagnostic MDC codes, Risk of Mor	DC) as assignata Source: NNBR gnosis Relatitality rankin	gned gned A	Alphanumeric Aby 3M™ APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, nd,Severity of Illness rankings
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION M All Patient Refined Diag MDC codes, Risk of Mor D	DC) as assignata Source: Ype: N_NBR gnosis Relate tality rankin pata Source:	gned : A A ed G	Alphanumeric Alby 3M™ APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION M All Patient Refined Diagnostic Codes, Risk of Mor D T T T T T T T T T T T T T T T T T T	DC) as assignata Source: Type: N_NBR Ignosis Relatitatity rankin Data Source: Type:	gned : A A ed G	Alphanumeric Aby 3M™ APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, nd,Severity of Illness rankings
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21:	4 0 55 1 APR Majo 56 2 APR 3M ¹ APR 58 5	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION MAIL Patient Refined Diag MDC codes, Risk of Mor D T R_GROUPER_ERROR_C	DC) as assignata Source: Ype: N_NBR gnosis Relate tality rankin pata Source: Ype: CODE	gned A ed G	Alphanumeric By 3M™ APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION TM All Patient Refined Diagnostic Codes, Risk of Mor D T R_GROUPER_ERROR_Cor codes identify potential or	DC) as assignate Source: ype: N_NBR gnosis Relate tality rankin that Source: ype: CODE variations w	gned Gred Gregs are:	Alphanumeric L by 3M TM APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5 APR	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION TM All Patient Refined Diag. MDC codes, Risk of Mor D T R_GROUPER_ERROR_Cor codes identify potential value. No errors. DRG successfully assets	DC) as assignate Source: Spe: N_NBR gnosis Relate tality rankin that Source: Spe: CODE variations was signed.	gned Ged Gegs and A	Alphanumeric L by 3M TM APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, nd, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only)
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION TM All Patient Refined Diagnostic Codes, Risk of Mor D T R_GROUPER_ERROR_Cor codes identify potential or	DC) as assignate Source: Spe: N_NBR gnosis Relate tality rankin that Source: Spe: CODE variations was signed.	gned Ged Gegs and A	Alphanumeric L by 3M TM APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5 APR	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION TM All Patient Refined Diagnostic MDC codes, Risk of Mor D T R_GROUPER_ERROR_CO TO CODES identify potential to the code identified identifie	DC) as assigned.	gned Cogs and A	Alphanumeric Alby 3M TM APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ¹ APR 58 5 APR 60 01	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION MAIL Patient Refined Diag MDC codes, Risk of Mor D T R_GROUPER_ERROR_C Or codes identify potential versions No errors. DRG successfully ass Diagnosis code cannot be used a principal diagnosis Record does not meet criteria for DRG	DC) as assignata Source: NNBR gnosis Relative trality ranking the source: Ype: CODE Variations we signed. 12 as 19 or any 20	gned Ggs and A	Alphanumeric Alby 3M TM APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, nd, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is N or U
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ¹ APR 58 5 APR Erro 00 01	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION TM All Patient Refined Diagnostic MDC codes, Risk of Mor D T R_GROUPER_ERROR_CO TO CODES identify potential to the code identified identifie	DC) as assigned.	gned Ggs and A	Alphanumeric Alby 3M TM APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, nd, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or exempt
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5 APR 00 01 02 03	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION MAIl Patient Refined Diagnostic Codes, Risk of Mor D T R_GROUPER_ERROR_O or codes identify potential w No errors. DRG successfully ass Diagnosis code cannot be used a principal diagnosis Record does not meet criteria for DRG Invalid Age Invalid Sex	DC) as assignata Source: N_NBR gnosis Relative tality ranking tata Source: CODE variations we signed. 12 as 19 or any 20 22	A A A A A A A A A A A A A A A A A A A	Alphanumeric I by 3M TM APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac = 0 and at least one HAC POA is exempt
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5 APR Erro 00 01 02 03 04 05	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION MAIl Patient Refined Diagnostic Codes, Risk of Mor D T R_GROUPER_ERROR_O or codes identify potential of the codes identified by th	DC) as assignate Source: ype: N_NBR gnosis Relate tality ranking the Source: ype: CODE variations was signed. 12 as 19 or any 20 22 22 22	A A A A A A A A A A A A A A A A A A A	Alphanumeric I by 3M TM APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac = 0 and at least one HAC POA is exempt DisableHac = 0 and at least one HAC POA is exempt DisableHac is invalid and at least one HAC POA is exempt
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5 APR 00 01 02 03	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION MAIl Patient Refined Diagnostic Codes, Risk of Mor D T R_GROUPER_ERROR_O or codes identify potential w No errors. DRG successfully ass Diagnosis code cannot be used a principal diagnosis Record does not meet criteria for DRG Invalid Age Invalid Sex	DC) as assignate Source: ype: N_NBR gnosis Relate tality ranking the Source: ype: CODE variations was signed. 12 as 19 or any 20 22 22 22	A A A A A A A A A A A A A A A A A A A	Alphanumeric I by 3M TM APR-DRG Grouper. Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac = 0 and at least one HAC POA is exempt DisableHac = 0 and at least one HAC POA is exempt
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5 APR Erro 00 01 02 03 04 05	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION MAIl Patient Refined Diagnostic Codes, Risk of Mor D T R_GROUPER_ERROR_CO Or codes identify potential was Diagnosis code cannot be used a principal diagnosis Record does not meet criteria for DRG Invalid Age Invalid Sex Invalid Discharge Status Invalid birthweight (AP & APR Invalid discharge age in days (A)	DC) as assignate Source: Spe: N_NBR gnosis Relate tality ranking that Source: Spe: CODE variations was signed. 22 23 24 26 26 27 27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	A A A A A A A A A A A A A A A A A A A	Alphanumeric Assigned Alphanumeric Brouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is exempt DisableHac is invalid and at least one HAC POA is exempt DisableHac = 0 and at least one HAC POA is exempt DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U DisableHac is invalid and there are multiple HACs that
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3MT APR 58 5 APR Erro 00 01 02 03 04 05 06 09	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION EMAIL Patient Refined Diagnostic MDC codes, Risk of Mor D T R_GROUPER_ERROR_CO Or codes identify potential of the codes identify potential of the codes are codes identify potential of the codes identified in the c	DC) as assignate Source: Spe: N_NBR gnosis Relate tality ranking that Source: Spe: CODE variations was signed. 22 23 24 26 26 27 27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	A A A A A A A A A A A A A A A A A A A	Alphanumeric Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac = 0 and at least one HAC POA is exempt DisableHac is invalid and at least one HAC POA is exempt DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description: Coding Scheme:	4 0 55 1 APR Majo 56 2 APR 3MT APR 58 5 APR Erro 00 01 02 03 04 05 06	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION MAIl Patient Refined Diagnostic Codes, Risk of Mor D T R_GROUPER_ERROR_CO Or codes identify potential was Diagnosis code cannot be used a principal diagnosis Record does not meet criteria for DRG Invalid Age Invalid Sex Invalid Discharge Status Invalid birthweight (AP & APR Invalid discharge age in days (A)	DC) as assignate Source: Spe: N_NBR gnosis Relate tality ranking that Source: Spe: CODE variations was signed. 22 23 24 26 26 27 27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	A A A A A A A A A A A A A A A A A A A	Alphanumeric Assigned Alphanumeric Grouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is exempt DisableHac = 0 and at least one HAC POA is exempt DisableHac is invalid and at least one HAC POA is exempt DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U DisableHac is invalid and there are multiple HACs that have different HAC POA values that are not Y or W
Length: Field 19: Description: Beginning Position: Length: Field 20: Description: Beginning Position: Length: Field 21: Description:	4 0 55 1 APR Majo 56 2 APR 3M ^T APR 58 5 APR 00 01 02 03 04 05 06 09 11	Extreme No class specified D T R_MDC or Diagnostic Category (M D T R_GROUPER_VERSION MAIl Patient Refined Diagnostic MDC codes, Risk of Mor D T R_GROUPER_ERROR_OR T R_GROUP	DC) as assignate Source: Spe: N_NBR gnosis Relate tality ranking that Source: Spe: CODE variations was signed. 22 23 24 26 26 27 27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	A A A A A A A A A A A A A A A A A A A	Alphanumeric Assigned Alphanumeric Brouper version used to assign APR DRG codes, and, Severity of Illness rankings Assigned Alphanumeric APR DRG code assignment Gestational age/birth weight conflict (APR only) DisableHac = 0 and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is invalid or exempt DisableHac is invalid and at least one HAC POA is exempt DisableHac is invalid and at least one HAC POA is exempt DisableHac is invalid and at least one HAC POA is exempt DisableHac = 0 and there are multiple HACs that have different HAC POA values that are not Y, W, N, U DisableHac is invalid and there are multiple HACs that

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Beginning Position:63Data Source:AssignedLength:2Type:Alphanumeric



Texas Hospital Inpatient Discharge Public Use Data File DATA FIELDS

BASE DATA #1 FILE

Number	FIELD NAME (Base Data #1 File)	Position	Length	Field Type
1	RECORD_ID Does NOT match the RECORD_ID in THCIC Research Data Files (RDF's).	1	12	Alphanumeric
2	DISCHARGE	13	6	Alphanumeric
3	THCIC_ID	19	6	Alphanumeric
4	TYPE_OF_ADMISSION	25	1	Alphanumeric
5	SOURCE_OF_ADMISSION	26	1	Alphanumeric
6	SPEC_UNIT_1	27	1	Alphanumeric
7	SPEC_UNIT_2	28	1	Alphanumeric
8	SPEC_UNIT_3	29	1	Alphanumeric
9	SPEC_UNIT_4	30	1	Alphanumeric
10	SPEC_UNIT_5	31	1	Alphanumeric
11	PAT_STATE	32	2	Alphanumeric
12	PAT_ZIP	34	5	Alphanumeric
13	PAT_COUNTRY	39	2	Alphanumeric
14	PAT_COUNTY	41	3	Alphanumeric
15	PUBLIC_HEALTH_REGION	44	2	Alphanumeric
16	PAT_STATUS	46	2	Alphanumeric
17	SEX_CODE	48	1	Alphanumeric
18	RACE	49	1	Alphanumeric
19	ETHNICITY	50	1	Alphanumeric
20	ADMIT_WEEKDAY	51	1	Alphanumeric
21	LENGTH_OF_STAY	52	4	Alphanumeric
22	PAT_AGE	56	2	Alphanumeric
23	FIRST_PAYMENT_SRC	58	2	Alphanumeric

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Number	FIELD NAME (Base Data #1 File)	Position	Length	Field Type
24	SECONDARY_PAYMENT_SRC	60	2	Alphanumeric
25	TYPE_OF_BILL	62	3	Alphanumeric
26	TOTAL_CHARGES	65	12	Numeric
27	TOTAL_NON_COV_CHARGES	77	12	Numeric
28	TOTAL_CHARGES_ACCOMM	89	12	Numeric
29	TOTAL_NON_COV_CHARGES_ACCOMM	101	12	Numeric
30	TOTAL_CHARGES_ANCIL	113	12	Numeric
31	TOTAL_NON_COV_CHARGES_ANCIL	125	12	Numeric
32	ADMITTING_DIAGNOSIS	137	7	Alphanumeric
33	PRINC_DIAG_CODE	144	7	Alphanumeric
34	POA_PRINC_DIAG_CODE	151	1	Alphanumeric
35	OTH_DIAG_CODE_1	152	7	Alphanumeric
36	POA_OTH_DIAG_CODE_1	159	1	Alphanumeric
37	OTH_DIAG_CODE_2	160	7	Alphanumeric
38	POA_OTH_DIAG_CODE_2	167	1	Alphanumeric
39	OTH_DIAG_CODE_3	168	7	Alphanumeric
40	POA_OTH_DIAG_CODE_3	175	1	Alphanumeric
41	OTH_DIAG_CODE_4	176	7	Alphanumeric
42	POA_OTH_DIAG_CODE_4	183	1	Alphanumeric
43	OTH_DIAG_CODE_5	184	7	Alphanumeric
44	POA_OTH_DIAG_CODE_5	191	1	Alphanumeric
45	OTH_DIAG_CODE_6	192	7	Alphanumeric
46	POA_OTH_DIAG_CODE_6	199	1	Alphanumeric
47	OTH_DIAG_CODE_7	200	7	Alphanumeric
48	POA_OTH_DIAG_CODE_7	207	1	Alphanumeric
49	OTH_DIAG_CODE_8	208	7	Alphanumeric
50	POA_OTH_DIAG_CODE_8	215	1	Alphanumeric
51	OTH_DIAG_CODE_9	216	7	Alphanumeric
52	POA_OTH_DIAG_CODE_9	223	1	Alphanumeric
53	OTH_DIAG_CODE_10	224	7	Alphanumeric
54	POA_OTH_DIAG_CODE_10	231	1	Alphanumeric
55	OTH_DIAG_CODE_11	232	7	Alphanumeric
56	POA_OTH_DIAG_CODE_11	239	1	Alphanumeric
57	OTH_DIAG_CODE_12	240	7	Alphanumeric
58	POA_OTH_DIAG_CODE_12	247	1	Alphanumeric
59	OTH_DIAG_CODE_13	248	7	Alphanumeric
60	POA_OTH_DIAG_CODE_13	255	1	Alphanumeric
61	OTH_DIAG_CODE_14	256	7	Alphanumeric
62	POA_OTH_DIAG_CODE_14	263	1	Alphanumeric
63	OTH_DIAG_CODE_15	264	7	Alphanumeric

Number	FIELD NAME (Base Data #1 File)	Position	Length	Field Type
64	POA_OTH_DIAG_CODE_15	271	1	Alphanumeric
65	OTH_DIAG_CODE_16	272	7	Alphanumeric
66	POA_OTH_DIAG_CODE_16	279	1	Alphanumeric
67	OTH_DIAG_CODE_17	280	7	Alphanumeric
68	POA_OTH_DIAG_CODE_17	287	1	Alphanumeric
69	OTH_DIAG_CODE_18	288	7	Alphanumeric
70	POA_OTH_DIAG_CODE_18	295	1	Alphanumeric
71	OTH_DIAG_CODE_19	296	7	Alphanumeric
72	POA_OTH_DIAG_CODE_19	303	1	Alphanumeric
73	OTH_DIAG_CODE_20	304	7	Alphanumeric
74	POA_OTH_DIAG_CODE_20	311	1	Alphanumeric
75	OTH_DIAG_CODE_21	312	7	Alphanumeric
76	POA_OTH_DIAG_CODE_21	319	1	Alphanumeric
77	OTH_DIAG_CODE_22	320	7	Alphanumeric
78	POA_OTH_DIAG_CODE_22	327	1	Alphanumeric
79	OTH_DIAG_CODE_23	328	7	Alphanumeric
80	POA_OTH_DIAG_CODE_23	335	1	Alphanumeric
81	OTH_DIAG_CODE_24	336	7	Alphanumeric
82	POA_OTH_DIAG_CODE_24	343	1	Alphanumeric
83	E_CODE_1	344	7	Alphanumeric
84	POA_E_CODE_1	351	1	Alphanumeric
85	E_CODE_2	352	7	Alphanumeric
86	POA_E_CODE_2	359	1	Alphanumeric
87	E_CODE_3	360	7	Alphanumeric
88	POA_E_CODE_3	367	1	Alphanumeric
89	E_CODE_4	368	7	Alphanumeric
90	POA_E_CODE_4	375	1	Alphanumeric
91	E_CODE_5	376	7	Alphanumeric
92	POA_E_CODE_5	383	1	Alphanumeric
93	E_CODE_6	384	7	Alphanumeric
94	POA_E_CODE_6	391	1	Alphanumeric
95	E_CODE_7	392	7	Alphanumeric
96	POA_E_CODE_7	399	1	Alphanumeric
97	E_CODE_8	400	7	Alphanumeric
98	POA_E_CODE_8	407	1	Alphanumeric
99	E_CODE_9	408	7	Alphanumeric
100	POA_E_CODE_9	415	1	Alphanumeric
101	E_CODE_10	416	7	Alphanumeric
102	POA_E_CODE_10	423	1	Alphanumeric
103	PRINC_SURG_PROC_CODE	424	7	Alphanumeric

Number	FIELD NAME (Base Data #1 File)	Position	Length	Field Type
104	PRINC_SURG_PROC_DAY	431	4	Alphanumeric
105	OTH_SURG_PROC_CODE_1	435	7	Alphanumeric
106	OTH_SURG_PROC_DAY_1	442	4	Alphanumeric
107	OTH_SURG_PROC_CODE_2	446	7	Alphanumeric
108	OTH_SURG_PROC_DAY_2	453	4	Alphanumeric
109	OTH_SURG_PROC_CODE_3	457	7	Alphanumeric
110	OTH_SURG_PROC_DAY_3	464	4	Alphanumeric
111	OTH_SURG_PROC_CODE_4	468	7	Alphanumeric
112	OTH_SURG_PROC_DAY_4	475	4	Alphanumeric
113	OTH_SURG_PROC_CODE_5	479	7	Alphanumeric
114	OTH_SURG_PROC_DAY_5	486	4	Alphanumeric
115	OTH_SURG_PROC_CODE_6	490	7	Alphanumeric
116	OTH_SURG_PROC_DAY_6	497	4	Alphanumeric
117	OTH_SURG_PROC_CODE_7	501	7	Alphanumeric
118	OTH_SURG_PROC_DAY_7	508	4	Alphanumeric
119	OTH_SURG_PROC_CODE_8	512	7	Alphanumeric
120	OTH_SURG_PROC_DAY_8	519	4	Alphanumeric
121	OTH_SURG_PROC_CODE_9	523	7	Alphanumeric
122	OTH_SURG_PROC_DAY_9	530	4	Alphanumeric
123	OTH_SURG_PROC_CODE_10	534	7	Alphanumeric
124	OTH_SURG_PROC_DAY_10	541	4	Alphanumeric
125	OTH_SURG_PROC_CODE_11	545	7	Alphanumeric
126	OTH_SURG_PROC_DAY_11	552	4	Alphanumeric
127	OTH_SURG_PROC_CODE_12	556	7	Alphanumeric
128	OTH_SURG_PROC_DAY_12	563	4	Alphanumeric
129	OTH_SURG_PROC_CODE_13	567	7	Alphanumeric
130	OTH_SURG_PROC_DAY_13	574	4	Alphanumeric
131	OTH_SURG_PROC_CODE_14	578	7	Alphanumeric
132	OTH_SURG_PROC_DAY_14	585	4	Alphanumeric
133	OTH_SURG_PROC_CODE_15	589	7	Alphanumeric
134	OTH_SURG_PROC_DAY_15	596	4	Alphanumeric
135	OTH_SURG_PROC_CODE_16	600	7	Alphanumeric
136	OTH_SURG_PROC_DAY_16	607	4	Alphanumeric
137	OTH_SURG_PROC_CODE_17	611	7	Alphanumeric
138	OTH_SURG_PROC_DAY_17	618	4	Alphanumeric
139	OTH_SURG_PROC_CODE_18	622	7	Alphanumeric
140	OTH_SURG_PROC_DAY_18	629	4	Alphanumeric
141	OTH_SURG_PROC_CODE_19	633	7	Alphanumeric
142	OTH_SURG_PROC_DAY_19	640	4	Alphanumeric
143	OTH_SURG_PROC_CODE_20	644	7	Alphanumeric

Number	FIELD NAME (Base Data #1 File)	Position	Length	Field Type
144	OTH_SURG_PROC_DAY_20	651	4	Alphanumeric
145	OTH_SURG_PROC_CODE_21	655	7	Alphanumeric
146	OTH_SURG_PROC_DAY_21	662	4	Alphanumeric
147	OTH_SURG_PROC_CODE_22	666	7	Alphanumeric
148	OTH_SURG_PROC_DAY_22	673	4	Alphanumeric
149	OTH_SURG_PROC_CODE_23	677	7	Alphanumeric
150	OTH_SURG_PROC_DAY_23	684	4	Alphanumeric
151	OTH_SURG_PROC_CODE_24	688	7	Alphanumeric
152	OTH_SURG_PROC_DAY_24	695	4	Alphanumeric
153	ATTENDING_PHYSICIAN_UNIF_ID	699	10	Alphanumeric
154	OPERATING_PHYSICIAN_UNIF_ID	709	10	Alphanumeric
155	ENCOUNTER_INDICATOR	719	2	Alphanumeric
156	PROVIDER_NAME	721	55	Alphanumeric
157	EMERGENCY_DEPT_FLAG	776	1	Alphanumeric
	Record_Length		776	

BASE DATA #2 FILE

Number	Field Name(Base Data #2 File)	Position	Length	Field Type
1	RECORD_ID Does NOT match the RECORD_ID in THCIC Research Data Files (RDF's).	1	12	Alphanumeric
2	PRIVATE_AMOUNT	13	12	Numeric
3	SEMI_PRIVATE_AMOUNT	25	12	Numeric
4	WARD_AMOUNT	37	12	Numeric
5	ICU_AMOUNT	49	12	Numeric
6	CCU_AMOUNT	61	12	Numeric
7	OTHER_AMOUNT	73	12	Numeric
8	PHARM_AMOUNT	85	12	Numeric
9	MEDSURG_AMOUNT	97	12	Numeric
10	DME_AMOUNT	109	12	Numeric
11	USED_DME_AMOUNT	121	12	Numeric
12	PT_AMOUNT	133	12	Numeric
13	OT_AMOUNT	145	12	Numeric
14	SPEECH_AMOUNT	157	12	Numeric
15	IT_AMOUNT	169	12	Numeric
16	BLOOD_AMOUNT	181	12	Numeric
17	BLOOD_ADM_AMOUNT	193	12	Numeric
18	OR_AMOUNT	205	12	Numeric
19	LITH_AMOUNT	217	12	Numeric
20	CARD_AMOUNT	229	12	Numeric
21	ANES_AMOUNT	241	12	Numeric
22	LAB_AMOUNT	253	12	Numeric
23	RAD_AMOUNT	265	12	Numeric
24	MRI_AMOUNT	277	12	Numeric
25	OP_AMOUNT	289	12	Numeric
26	ER_AMOUNT	301	12	Numeric
27	AMBULANCE_AMOUNT	313	12	Numeric
28	PRO_FEE_AMOUNT	325	12	Numeric
29	ORGAN_AMOUNT	337	12	Numeric
30	ESRD_AMOUNT	349	12	Numeric
31	CLINIC_AMOUNT	361	12	Numeric
32	OCCUR_CODE_1	373	2	Alphanumeric
33	OCCUR_DAY_1	375	4	Alphanumeric
34	OCCUR_CODE_2	379	2	Alphanumeric
35	OCCUR_DAY_2	381	4	Alphanumeric
36	OCCUR_CODE_3	385	2	Alphanumeric

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Number	Field Name(Base Data #2 File)	Position	Length	Field Type
37	OCCUR_DAY_3	387	4	Alphanumeric
38	OCCUR_CODE_4	391	2	Alphanumeric
39	OCCUR_DAY_4	393	4	Alphanumeric
40	OCCUR_CODE_5	397	2	Alphanumeric
41	OCCUR_DAY_5	399	4	Alphanumeric
42	OCCUR_CODE_6	403	2	Alphanumeric
43	OCCUR_DAY_6	405	4	Alphanumeric
44	OCCUR_CODE_7	409	2	Alphanumeric
45	OCCUR_DAY_7	411	4	Alphanumeric
46	OCCUR_CODE_8	415	2	Alphanumeric
47	OCCUR_DAY_8	417	4	Alphanumeric
48	OCCUR_CODE_9	421	2	Alphanumeric
49	OCCUR_DAY_9	423	4	Alphanumeric
50	OCCUR_CODE_10	427	2	Alphanumeric
51	OCCUR_DAY_10	429	4	Alphanumeric
52	OCCUR_CODE_11	433	2	Alphanumeric
53	OCCUR_DAY_11	435	4	Alphanumeric
54	OCCUR_CODE_12	439	2	Alphanumeric
55	OCCUR_DAY_12	441	4	Alphanumeric
56	OCCUR_SPAN_CODE_1	445	2	Alphanumeric
57	OCCUR_SPAN_FROM_1	447	6	Alphanumeric
58	OCCUR_SPAN_THRU_1	453	6	Alphanumeric
59	OCCUR_SPAN_CODE_2	459	2	Alphanumeric
60	OCCUR_SPAN_FROM_2	461	6	Alphanumeric
61	OCCUR_SPAN_THRU_2	467	6	Alphanumeric
62	OCCUR_SPAN_CODE_3	473	2	Alphanumeric
63	OCCUR_SPAN_FROM_3	475	6	Alphanumeric
64	OCCUR_SPAN_THRU_3	481	6	Alphanumeric
65	OCCUR_SPAN_CODE_4	487	2	Alphanumeric
66	OCCUR_SPAN_FROM_4	489	6	Alphanumeric
67	OCCUR_SPAN_THRU_4	495	6	Alphanumeric
68	CONDITION_CODE_1	501	2	Alphanumeric
69	CONDITION_CODE_2	503	2	Alphanumeric
70	CONDITION_CODE_3	505	2	Alphanumeric
71	CONDITION_CODE_4	507	2	Alphanumeric
72	CONDITION_CODE_5	509	2	Alphanumeric
73	CONDITION_CODE_6	511	2	Alphanumeric
74	CONDITION_CODE_7	513	2	Alphanumeric
75	CONDITION_CODE_8	515	2	Alphanumeric
76	VALUE_CODE_1	517	2	Alphanumeric

Number	Field Name(Base Data #2 File)	Position	Length	Field Type
77	VALUE_AMOUNT_1	519	9	Numeric
78	VALUE_CODE_2	528	2	Alphanumeric
79	VALUE_AMOUNT_2	530	9	Numeric
80	VALUE_CODE_3	539	2	Alphanumeric
81	VALUE_AMOUNT_3	541	9	Numeric
82	VALUE_CODE_4	550	2	Alphanumeric
83	VALUE_AMOUNT_4	552	9	Numeric
84	VALUE_CODE_5	561	2	Alphanumeric
85	VALUE_AMOUNT_5	563	9	Numeric
86	VALUE_CODE_6	572	2	Alphanumeric
87	VALUE_AMOUNT_6	574	9	Numeric
88	VALUE_CODE_7	583	2	Alphanumeric
89	VALUE_AMOUNT_7	585	9	Numeric
90	VALUE_CODE_8	594	2	Alphanumeric
91	VALUE_AMOUNT_8	596	9	Numeric
92	VALUE_CODE_9	605	2	Alphanumeric
93	VALUE_AMOUNT_9	607	9	Numeric
94	VALUE_CODE_10	616	2	Alphanumeric
95	VALUE_AMOUNT_10	618	9	Numeric
96	VALUE_CODE_11	627	2	Alphanumeric
97	VALUE_AMOUNT_11	629	9	Numeric
98	VALUE_CODE_12	638	2	Alphanumeric
99	VALUE_AMOUNT_12	640	9	Numeric
	Record_Length		648	

CHARGES DATA FILE

Number	Field Name	Position	Length	Field Type
1	RECORD_ID	1	12	Alphanumeric
2	REVENUE_CODE	13	4	Alphanumeric
3	HCPCS_QUALIFIER	17	2	Alphanumeric
4	HCPCS_PROCEDURE_CODE	19	5	Alphanumeric
5	MODIFIER_1	24	2	Alphanumeric
6	MODIFIER_2	26	2	Alphanumeric
7	MODIFIER_3	28	2	Alphanumeric
8	MODIFIER_4	30	2	Alphanumeric
9	UNIT_MEASUREMENT_CODE	32	2	Alphanumeric
10	UNITS_OF_SERVICE	34	7	Numeric
11	UNIT_RATE	41	12	Numeric
12	CHRGS_LINE_ITEM	53	14	Numeric
13	CHRGS_NON_COV	67	14	Numeric
	Record_Length		80	

FACILITY TYPE INDICATOR FILE

Number	Field Name	Position	Length	Field Type
1	THCIC_ID	1	6	Alphanumeric
2	FACILITY_TYPE	7	4	Alphanumeric
3	FAC_TEACHING_IND	11	1	Alphanumeric
4	FAC_PSYCH_IND	12	1	Alphanumeric
5	FAC_REHAB_IND	13	1	Alphanumeric
6	FAC_ACUTE_CARE_IND	14	1	Alphanumeric
7	FAC_SNF_IND	15	1	Alphanumeric
8	FAC_LONG_TERM_AC_IND	16	1	Alphanumeric
9	FAC_OTHER_LTC_IND	17	1	Alphanumeric
10	FAC_PEDS_IND	18	1	Alphanumeric
11	PROVIDER_NAME	19	55	Alphanumeric
12	POA_PROVIDER_INDICATOR	74	1	Alphanumeric
13	CERT_STATUS	75	1	Alphanumeric
	Record_Length		75	

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GROUPER FILE

Number	Field Name	Position	Length	Field Type
1	RECORD_ID	1	12	Alphanumeric
2	FROZEN_MS_DRG	13	3	Alphanumeric
3	FROZEN_MS_MDC	16	2	Alphanumeric
4	FROZEN_MS_GRP_VER	18	5	Alphanumeric
5	FROZEN_MS_GRP_ERROR_CODE	23	2	Alphanumeric
6	FROZEN_APR_DRG	25	3	Alphanumeric
7	FROZEN_RISK_MORTALITY	28	1	Alphanumeric
8	FROZEN_ILLNESS_SEVERITY	29	1	Alphanumeric
9	FROZEN_APR_MDC	30	2	Alphanumeric
10	FROZEN_APR_GRP_VER	32	5	Alphanumeric
11	FROZEN_APR_GRP_ERROR_CODE	37	2	Alphanumeric
12	MS_DRG	39	3	Alphanumeric
13	MS_MDC	42	2	Alphanumeric
14	MS_GRP_VER	44	5	Alphanumeric
15	MS_GRP_ERROR_CODE	49	2	Alphanumeric
16	APR_DRG	51	3	Alphanumeric
17	RISK_MORTALITY	54	1	Alphanumeric
18	ILLNESS_SEVERITY	55	1	Alphanumeric
19	APR_MDC	56	2	Alphanumeric
20	APR_GRP_VER	58	5	Alphanumeric
21	APR_GRP_ERROR_CODE	63	2	Alphanumeric
	Record_Length		64	

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