

CCQI Medicaid Data Dictionary - Eligibility File - June 2006

Name	Label	Definition	Valid Values	Sort
ELATFRDT	AUTHORIZED_FROM_DATE	Date on which eligibility begins		EL1
ELCSIDNO	CASE_ID_NUM	Number of case id.		EL2
CLCLBRDT	CLIENT_BIRTH_DATE			EL3
ELCAPCNO	CLIENT_CA_PCP_NUM			EL4
ELCLPCD	CLIENT_CAP_CODE			EL5
ELCLCNTY	CLIENT_COUNTY			EL6
CLCLETCD	CLIENT_ETHNICITY_CODE	Ethnicity of client.	= Blank	EL7
			C = Hispanic Cuban	EL8
			H = Hispanic Other	EL9
			M = Hispanic Mexican Other	EL10
			N = Not Hispanic	EL11
			P = Hispanic Puerto Rican	EL12
			U = Unreported	EL13
CLCLGNCD	CLIENT_GENDER_CODE	The gender of the Medicaid recipient.	F = Female	EL14
			M = Male	EL15
CLCLMDID	CLIENT_MEDICAID_ID	A recipients unique Medicaid Identification Number.		EL16
ELPYTYCD	CLIENT_PAYMENT_TYPE_CODE			EL17
CLCLRCCD	CLIENT_RACE_CODE			EL18
CLCLRCC2	CLIENT_RACE_CODE2			EL19
CLCLRCC3	CLIENT_RACE_CODE3			EL20
CLCLRCC4	CLIENT_RACE_CODE4			EL21
CLCLRCC5	CLIENT_RACE_CODE5			EL22
ELHSTODT	HIST_TO_DATE	Date on which eligibility ends.		EL23
CLLSUPDT	LAST_UPDATE_DATE			EL24
ELLVARCD	LIVING_ARRANGEMENT_CODE			EL25
ELMDCLCD	MEDICAID_CLASS_CODE			EL26
ELPDMTIN	PIEDMONT_IND			EL27
ELPRCTCD	PROGRAM_CAT_CODE			EL28
ELSPNDCD	SPECIAL_NEEDS_CODE			EL29
ELSSSTCD	SSI_STATUS_CODE			EL30
CLUPTHDT	UPDATE_THRU_DATE			EL31