Codebook for Medicaid Institutional Claims Data

Enter X to Request	Variable Number	Variable Name	Variable Label	Variable Type	Variable Length	Valid Values
	1	ADMSN_DT	Admission Date	Num	8	SAS date, use format to display as DDMMMYYYY
	2	ALT_MBR_ID_ENCRYPT	Alternate Member ID Encrypted	Char	30	No value definitions
	3	BILL_PRVDR_ATYP_PRVDR_NBR	Billing Provider Atypical NPI	Char	30	No value definitions
	4	BILL_PRVDR_CTY	Billing Provider City	Char	25	No value definitions
	5	BILL_PRVDR_ID	Billing Provider Identification Number	Char	20	No value definitions
	6	BILL_PRVDR_LOC_CD	Billing Provider Location Code	Char	20	1 = Pay-to
						2 = Correspondence
						3 = Service
	7	BILL_PRVDR_NPI	Billing Provider NPI	Char	30	No value definitions
	8	BILL_PRVDR_ST_CD	Billing Provider State Code	Char	20	2-letter State Abbreviations
	9	BILL_PRVDR_TXNMY_CD	Billing Provider Taxonomy Code	Char	20	Consult Federal Provider Taxonomy Codes for Reference
	10	BILL_PRVDR_TXNMY_QLFR_CD	Billing Provider Taxonomy Qualifier Code	Char	20	Consult Federal Provider Taxonomy codes for reference; two 3-byte fields representing Provider Type and Provider Specialty
	11	BILL_PRVDR_ZIP_CD	Billing Provider Zip Code	Char	20	No value definitions
	12	CLM_HDR_PD_DT	Claim Header Paid Date	Num	8	SAS date, use format to display as DDMMMYYYY
	13	CVR_DAY_NBR	Number of Days Covered	Num	8	No value definitions
	14	DSCHRG_DT	Discharge Date	Num	8	SAS date, use format to display as DDMMMYYYY
	15	HDR_STAT_CD	Header status code	Char	20	No value definitions
	16	HDR_SVC_BGN_DT	Header Starting Date of Service	Num	8	SAS date, use format to display as DDMMMYYYY
	17	HDR_SVC_END_DT	Header Ending Date of Service	Num	8	SAS date, use format to display as DDMMMYYYY
	18	HDR_TRNSCT_TYP_CD	Header Transaction Type Code	Char	20	0 = ORIGINAL CLAIM
						1 = VOID/CREDIT
						2 = ADJUSTMENT CREDIT
						3 = ADJUSTMENT DEBIT
	19	HDR_TYP_CD	Claim Type Code	Char	20	0 = LOCAL EDUCATION AGENCIES

						1 = HOME INFUSION THERAPY
						2 = THERAPY SERVICES
						3 = INSTITUTIONAL AMBULANCE
						4 = CAPITATION
						5 = RURAL HLTH CLINIC / FEDERALLY QUALIFIED HLTH CNTR
						6 = PERSONAL CARE SERVICES
						8 = INDEP DIAG TESTING FACILITY / PORTABLE XRAY
						A = MEDICARE PART A CROSSOVER (INPATIENT)
						B = MEDICARE PART B CROSSOVER (PROFESSIONAL)
						C = HEALTH DEPARTMENTS
						D = DENTAL
						E = HEARING AID
						F = NURSING HOME
						G = HOSPICE
						H = HOME HEALTH
						I = INPATIENT
						K = PRIVATE DUTY NURSING
						L = INDEPENDENT LABORATORY / XRAY
						M = MANAGEMENT FEE
						N = ADULT CARE HOMES
						O = OUTPATIENT
						P = PROFESSIONAL
						Q = MENTAL HEALTH
						R = DRUG
						S = DURABLE MEDICAL EQUIPMENT
						T = AMBULANCE (PROFESSIONAL)
						U = MEDICARE PART B CROSSOVER UB (OUTPATIENT)
						V = CHILDRENS DEVELOPMENTAL SERVICES AGENCIES
						W = FINANCIAL CLAIM
						X = OPTICAL
						Y = UNDEFINED PROFESSIONAL
						Z = UNDEFINED INSTITUTIONAL
	20	MBR_LIV_ARRGMNT_CD	Living Arrangement Code	Char	20	10 = PRIVATE LIVING ARRANGEMENT (NOT 1/3 REDUCTION)
						11 = PRIVATE LIVING ARR (WITH 1/3 REDUCTION) (MEDICAID)
						12 = LIVING WITH ANOTHER WORK FIRST FAMILY
						13 = LIVING WITH SSI RECIPIENT(S)
						14 = PACE PRIVATE LIVING ARRANGEMENT
						15 = PACE LIVING WITH SSI RECIPIENT(S)
						16 = MEDICAID SUSPENDED ? STATE INCARCERATION
						17 = MEDICAID SUSPENDED - INSTIT FOR MENTAL DISEASES (IMD)
						18 = MEDICAID SUSPENDED ? SA FACILITY CLASSIFIED AS INSTIT FOR MENTAL DISEASE

						19 = MEDICAID SUSPENDED ? COUNTY/LOCAL INCARCERATION
						50 = SKILLED NURSING FACILITY
						51 = DOMICILIARY CARE, 5 OR FEWER BEDS (SAA, SAD, MSB)
						52 = DOMICILIARY CARE, 6 OR MORE BEDS (SAA, SAD, MSB)
						53 = FOSTER CARE (MAF, MIC, HSF, IAS)
						54 = PACE LIVING IN NURSING FACILITY
						56 = ADULT GROUP HOME (SAA, SAD, MSB, MAF, MRF)
						57 = CHILDREN'S GRP HOME (MSB, MAF, MIC, MAF, HSF, IAS)
						58 = INTERMEDIATE CARE FACILITY
						59 = INTERMEDIATE CARE FACILITY/MENTAL RETARDATION CTR
						60 = HOS, OVER 30DAYS/PSYCH RES TREAT-FACILITY (PRTF)
						70 = CHERRY HOSPITAL
						71 = DOROTHEA DIX HOSPITAL
						72 = UMSTEAD HOSPITAL
						73 = BROUGHTON HOSPITAL
						75 = OTHER MEDICAL INSTITUTION
						76 = CENTRAL REGIONAL HOSPITAL
						80 = ADOPTIVE HOME (MAF, MIC, MRF, HSF, IAS)
	21	MBR_LIV_ARRGMNT_DESC	Member Living Arrangement Description	Char	200	No value definitions
	22	MBR_PRGNCY_IND	Pregnancy Indicator	Char	1	0 = Not Specified
						1 = NOT PREGNANT
						2 = PREGNANT
						SPACE = BLANK
	23	PAT_STAT_CD	Patient Status Code	Char	20	Consult External Standard Reference for Patient Status Codes
	24	RPLCM_TRNSCT_CNTL_NBR	Replacement Transaction Control Number	Char	30	No value definitions
	25	RPLCD_TRNSCT_CNTL_NBR	Replaced Transaction Control Number	Char	30	No value definitions
	26	TRNSCT_CNTL_NBR	Transaction Control Number	Char	30	No value definitions
	27	TTL_ALLW_AMT	Claim Header Allowed Amount	Num	8	No value definitions
	28	TTL_CHRG_AMT	Total Billed or Charged Amount	Num	8	No value definitions
	29	TTL_CLM_CALCD_ALLW_AMT	Total Calculated Allowed Amount	Num	8	No value definitions
	30	TTL_NET_PAY_AMT	Total Amount Paid	Num	8	No value definitions
	31	TTL_RMBRSD_AMT	Total Reimbursed Amount	Num	8	No value definitions
	32	HDR_TTL_TPL_AMT	Total Third Party Liability Amount	Num	8	No value definitions

	33	HDRIN_TTL_TPL_AMT	Total Third Party Liability Amount	Num	8	No value definitions
	34	ATND_PRVDR_ID	Attending Provider Identification Number	Char	30	No value definitions
	35	ATND_PRVDR_NPI	Attending Provider NPI	Char	20	No value definitions
	36	OPRT_PRVDR_ID	Operating Provider Identification Number	Char	20	No value definitions
	37	OPRT_PRVDR_NPI	Operating Provider NPI	Char	20	No value definitions
	38	SVC_PRVDR_ID	Servicing Facility Provider Identification Number	Char	30	No value definitions
	39	SVC_PRVDR_NPI	Servicing Facility NPI	Char	30	No value definitions
	40	ATTD_PRVDR_LOC_CD	Attending Provider Location Code	Char	20	1 = Pay-to
						2 = Correspondence
						3 = Service
	41	SVC_PRVDR_LOC_CD	Servicing Facility Provider Location Code	Char	20	1 = Pay-to
						2 = Correspondence
						3 = Service
	42	DRG_CD	Diagnosis Related Group	Char	20	Consult Online DRG Listings
	43	TTL_DRG_DIR_AMT	Total DRG DME Amount	Num	8	No value definitions
	44	TTL_DRG_INDIR_AMT	Total DRG IME Amount	Num	8	No value definitions
	45	TYP_OF_BILL_DIGIT_3_CD	Type of Bill Frequency Code	Char	20	0 = NON-PAYMENT/ZERO CLAIM
						1 = ADMIT THRU DISCHARGE CLAIM
						2 = INTERIM - FIRST CLAIM
						3 = INTERIM - CONTINUING CLAIM
						4 = INTERIM - LAST CLAIM
						5 = LATE CHARGES ONLY
						6 = RESERVED BY NUBC6
						7 = REPLACEMENT OF PRIOR CLAIM
						8 = VOID/CANCEL OF PRIOR CLAIM
						9 = FINAL CLAIM FOR A HOME HEALTH PPS EPISODE
						A = ADMISSION/ELECTION NOTICE
						B = NOTICE OF TERMINATION/REVOCATION OF HOSPICE, CMS COORDINATED CARE
						C = NOTICE OF CHANGE TO HOSPICE PROVIDER
						D = NOTICE OF VOID
						E = NOTICE OF CHANGE OF OWNERSHIP FOR HOSPICE
						F = RECIPIENT INITATED ADJUSTMENT CLAIM
						G = COMMON WORKING FILE INITIATED ADJUSTMENT
						H = CMS INITATED ADJUSTMENT CLAIM

						I = INTERMEDIARY ADJUSTMENT CLAIM
						J = INITIATED ADJUSTMENT CLAIM - OTHER
						K = OIG INITIATED ADJUSTMENT
						L = RESERVED FOR NUBCL
						M = MEDICARE SECONDARY PAYER INITIATED ADJUSTMENT
						N = RESERVED FOR NUBCN
						O = NON-PAYMENT/ZERO CLAIM O
						P = QIO ADJUSTMENT CLAIM
						Q = NOT TO BE USED BY PROVIDERS
						R = RESERVED FOR NUBCR
						S = RESERVED FOR NUBCS
						T = RESERVED FOR NUBCT
						U = RESERVED FOR NUBCU
						V = RESERVED FOR NUBCV
						W = RESERVED FOR NUBCW
						X = USED BY MEDICARE ADVANTAGE TO VOID INCORRECT PREVIOUS ENCOUNTER
						Y = USED BY MEDICARE ADVANTAGE TO REPLACE PREVIOUS SUBMITTED ENCOUNTER
						Z = USED BY MEDICARE ADVANTAGE TO SUBMIT NEW ENCOUNTER DATA
	46	TYP_OF_BILL_DIGITS_1_AND_2_CD	Type of Bill Facility Type Code	Char	20	11 = HOSPITAL INPATIENT (INCLUDING MEDICARE PART A)
						12 = HOSPITAL INPATIENT (MEDICARE PART B ONLY)
						13 = HOSPITAL OUTPATIENT
						14 = HOSPITAL - LAB SERVICES PROVIDED TO NON-PATIENTS
						18 = HOSPITAL - SWING BEDS
						21 = SKILLED NURSING - INPATIENT (INCL MEDICARE PART A)
						22 = SKILLED NURSING - INPATIENT (MEDICARE PART B ONLY)
						23 = SKILLED NURSING - OUTPATIENT
						28 = SKILLED NURSING - SWING BEDS
						32 = HOME HEALTH - INPAT (PLAN OF TRET PART B ONLY)
						33 = HOME HEALTH - OUTPT (PLAN OF TRET PART A, INC DME)
						34 = HOME HEALTH - OTHER (FOR MED/SURG SERV NO PLAN)
						41 = RELIGIOUS NON-MED HEALTH CARE INSTITU - HOSP INP
						43 = RELIGIOUS NON-MEDICAL HEALTH CARE INSTITU - OUTPAT
						65 = INTERMEDIATE CARE - LEVEL I
						66 = INTERMEDIATE CARE - LEVEL II
						71 = CLINIC - RURAL HEALTH
						72 = CLINIC - HOSP BASED OR IND RENAL DIALYSIS CENTER
						73 = CLINIC - FREESTANDING
						74 = CLINIC - OUTPATIENT REHABILITATION FACILITY (ORF)

						75 = CLINIC - COMPREHENSIVE OUTPAT REH FACILITY (CORF)
						76 = CLINIC - COMMUNITY MENTAL HEALTH CENTER
						77 = CLINIC - FED QUALIFIED HEALTH CENT (FQHC 04/01/10)
						78 = LICENSED FREESTANDING EMERGENCY MEDICAL FACILITY (7/2012)
						79 = CLINIC-OTHER
						81 = SPECIAL FACILITY - HOSPICE (NON-HOSPITAL BASED)
						82 = SPECIAL FACILITY - HOSPICE (HOSPITAL BASED)
						83 = SPECIAL FACILITY - AMBULATORY SURGERY CENTER
						84 = SPECIAL FACILITY - FREE STANDING BIRTHING CENTER
						85 = SPECIAL FACILITY - CRITICAL ACCESS HOSPITAL
						86 = SPECIAL FACILITY - RESIDENTIAL FACILITY
						89 = SPECIAL FACILITY - OTHER
	47	HDRIN_BILL_PRVDR_NM	Billing Provider Name	Char	40	No value definitions
	48	HDRIN_MBR_GNDR_CD	Member Gender Code	Char	1	F = FEMALE
						M = MALE
						U = UNKNOWN
	49	CHI_SVC_AUTH_SA_TYP_SVC_CD	Type of Service Code	Char	20	No value definitions
	50	DRG_DRG_GRPR_VER_NBR	Diagnosis Related Group DRG Grouper Version Number	Char	30	23 = DRG GROUPER VERSION 23.
						24 = DRG GROUPER VERSION 24.
						25 = DRG GROUPER VERSION 25.1.
						26 = DRG GROUPER VERSION 26.
						27 = DRG GROUPER VERSION 27.
	51	CALCD_DAY_NBR	Calculated Days Number	Num	8	No value definitions
	52	RSN_VST_DIAG_CD	Reference Diagnosis Code 1_Reason for Visit	Char	20	ICD-9?
	53	RSN_VST_DIAG_2_CD	Reference Diagnosis Code 2_Reason for Visit	Char	20	ICD-9?
	54	RSN_VST_DIAG_3_CD	Reference Diagnosis Code 3_Reason for Visit	Char	20	ICD-9?
	55	CLM_LNE_NBR	Claim Line Number	Num	8	No value definitions
	56	CLM_LNE_PRLMNR_ALLW_AMT	Claim Line Preliminary Allowed Amount	Num	8	No value definitions
	57	LNE_ALLW_CHRG_AMT	Claim Line Allowed Amount	Num	8	No value definitions
	58	LNE_ALLW_UNT_NBR	Line Allowed Units	Num	8	No value definitions

	59	LNE_NET_PAY_AMT	Net Payment	Num	8	No value definitions
	60	LNE_RMBRS_AMT	Line Reimbursement Amount	Num	8	No value definitions
	61	LNE_RMBRS_UNT_NBR	Units Paid	Num	8	No value definitions
	62	LNE_SBMT_CHRG_AMT	Line Submit Charge Amount	Num	8	No value definitions
	63	LNE_STAT_CD	Line Status Code	Char	20	Consult Claim Status Code; or HDR_STAT_CD above
	64	LNE_SVC_BGN_DT	Line Starting Date of Service	Num	8	SAS date, use format to display as DDMMMYYYY
	65	LNE_SVC_END_DT	Line Ending Date of Service	Num	8	SAS date, use format to display as DDMMMYYYY
	66	LNE_TPL_AMT	Third Party Liability Amount	Num	8	No value definitions
	67	MBR_AGE_NBR	Member Age	Num	8	No value definitions
	68	MBR_AID_CTG_CD	Aid Category Code	Char	20	AA = ELIG-AID-AGED
						AB = ELIG-AID-BLIND
						AD = ELIG-AID-DISABLED
						AF = ELIG-AID-FDC
						AG = ELIG-ADOPT-GRAND
						AS = ELIG-ADOPT-SUBSIDY
						CD = ELIG-CERTAIN-DISAB
						CF = ELIG-CERTAIN-FC
						FC = ELIG-FOSTER-CARE
						IC = ELIG-INF-CHILD
						NA = Not Applicable
						PW = ELIG-PREG-WOMEN
						QB = ELIG-CATASTOPHIC
						RC = ELIG-REASON-CLASS
						RF = ELIG-AID-REFUGEE
						SB = ELIG-SA-BLIND
						SF = ELIG-AID-SFHF
	69	MBR_AID_CTG_DESC	Aid Category Description	Char	200	No value definitions
	70	MBR_AID_PGM_CD	Aid Program Code	Char	20	No value definitions
	71	MBR_AID_PGM_DESC	Aid Program Description	Char	200	No value definitions
	72	MBR_BNFT_SVC_GRP_ID	Member Group Number	Num	8	No value definitions
	73	MBR_HLTHPLN_ID	Health Plan ID	Num	8	No value definitions
	74	MBR_MCAID_CLSFN_CD	Medicaid Classification Code	Char	20	1 = USED ONLY AS MIC-1) 185-200% (<1) 133-200% (1-5)

						A = NO ENROLLMENT FEE, NA AND ALASKANS (< 150 FPL)
						B = CATEGORICALLY NEEDY (USED ONLY WITH MAABD OR MQB)
						C = CATEGORICALLY NEEDY
						D = USED ONLY AS MAF-D ? LIMITED TO FAMILY PLANNING
						E = QUALIFYING INDIVIDUAL (USED ONLY WITH MQB).
						F = NO MONEY PAY ? EMERG-SER FOR NON-QUALIFIED ALIENS
						G = NO MONEY PAYMENT ? FULL-COV FOR QUALIFIED ALIENS
						H = NO MONEY PAYMENT ? EMERG-SER FOR QUALIFIED ALIENS
						I = NO MONEY PAYMENT ? FULL COV FOR PREGNANT ALIEN
						J = NO ENROLLMENT FEE OTHERS
						K = ENROLLMENT FEE APPLICABLE
						L = OPTIONAL ECG
						M = MEDICALLY NEEDY
						N = CATEGORICALLY NEEDY- NO MONEY PAYMENT
						O = MEDICALLY NEEDY - EMERG-SER NON-QUALIFIED ALIENS
						P = MEDICALLY NEEDY ? FULL COV FOR QUALIFIED ALIENS
						Q = USED ONLY WITH DUALLY ELIGIBLE CASES OR M-QB CASES
						R = MEDICALLY NEEDY - EMERG-SER FOR QUALIFIED ALIENS
						S = NO ENROLLMENT FEE, NA AND ALASKANS (>150 FPL)
						T = FULL COVERAGE
						U = EMERGENCY COVERAGE (QUALIFIED ALIEN)
						V = EMERGENCY COVERAGE
						W = FULL REGULAR COVERAGE (NON-ALIEN)
						X = NOT APPLICABLE TO THE CASE
	75	MBR_SSI_STAT_CD	SSI Status Code	Char	20	N = NO
						Y = YES
	76	POS_CD	Place of Service Code	Char	20	Consult External Standard Reference for Place of Service Codes
	77	PROC_ADJDC_CD	Adjudicated Procedure Code	Char	20	CPT?
	78	RNDR_PRVDR_ID	Rendering Provider Identification Number	Char	20	No value definitions
	79	RNDR_PRVDR_LOC_CD	Rendering Provider Location Code	Char	20	No value definitions
	80	RNDR_PRVDR_NPI	Rendering Provider NPI	Char	20	No value definitions
	81	RNDR_PRVDR_TXNMY_CD	Rendering Provider Taxonomy	Char	20	No value definitions

	82	RVN_CD	Revenue Code	Char	20	Consult External Standard Reference for Revenu Codes
	83	REV_DESC	Revenue Code Description	Char	40	No value definitions
	84	LINE_RFR_PRVDR_ID	Referring Provider Identification Number	Char	20	No value definitions
	85	HDRIN_RFR_PRVDR_ID	Referring Provider Identification Number	Char	30	No value definitions
	86	LINE_RFR_PRVDR_NPI	Referring Provider NPI	Char	20	No value definitions
	87	HDRIN_RFR_PRVDR_NPI	Referring Provider NPI	Char	20	No value definitions
	88	RFR_PRVDR_TXNMY_CD	Referring Provider Taxonomy	Char	20	Consult Federal Provider Taxonomy Codes for Reference
	89	LNE_DRG_DIR_AMT	DRG DME Amount	Num	8	No value definitions
	90	LNE_DRG_INDIR_AMT	DRG IME Amount	Num	8	No value definitions
	91	LNEIN_LNE_COPAY_AMT	Claim Line Copay Amount	Num	8	No value definitions
	92	PYR_REF_ID	Payer ID	Num	8	No value definitions
	93	MBR_HLTHPLN_DESC	Health Plan Description	Char	200	No value definitions
	94	BNFTPLN_ID	Benefit Plan	Num	8	No value definitions
	95	MBR_BNFTPLN_DESC	Benefit Plan Description	Char	200	No value definitions
	96	ICD_VER_CD	ICD Version Code	Char	20	0 = ICD-10
						9 = ICD-9
	97	ADMT_DIAG_CD	Admitting Diagnosis Code	Char	20	ICD-9/ICD-10
	98	DIAG_PRI_POA_CD	Admitting Diagnosis Present on Admission Indicator	Char	20	1 = EXEMPT FROM POA REPORTING
						N = DIAGNOSIS WAS NOT PRESENT
						U = DOCUMENTATION INSUFFICIENT
						W = CLINICALLY UNDETERMINED IF DIAG WAS PRESENT
						Y = DIAGNOSIS WAS PRESENT
	99	DIAG_CD_01	Diagnosis Code 1	Char	20	ICD-9/ICD-10
	100	DIAG_CD_01_DESC	Diagnosis Code 1 Description	Char	200	No value definitions
	101	DIAG_CD_02	Diagnosis Code 2	Char	20	ICD-9/ICD-10
	102	DIAG_CD_02_DESC	Diagnosis Code 2 Description	Char	200	No value definitions
	103	DIAG_CD_03	Diagnosis Code 3	Char	20	ICD-9/ICD-10

	104	DIAG_CD_03_DESC	Diagnosis Code 3 Description	Char	200	No value definitions
	105	DIAG_CD_04	Diagnosis Code 4	Char	20	ICD-9/ICD-10
	106	DIAG_CD_04_DESC	Diagnosis Code 4 Description	Char	200	No value definitions
	107	DIAG_CD_05	Diagnosis Code 5	Char	20	ICD-9/ICD-10
	108	DIAG_CD_05_DESC	Diagnosis Code 5 Description	Char	200	No value definitions
	109	DIAG_CD_06	Diagnosis Code 6	Char	20	ICD-9/ICD-10
	110	DIAG_CD_06_DESC	Diagnosis Code 6 Description	Char	200	No value definitions
	111	DIAG_CD_07	Diagnosis Code 7	Char	20	ICD-9/ICD-10
	112	DIAG_CD_07_DESC	Diagnosis Code 7 Description	Char	200	No value definitions
	113	DIAG_CD_08	Diagnosis Code 8	Char	20	ICD-9/ICD-10
	114	DIAG_CD_08_DESC	Diagnosis Code 8 Description	Char	200	No value definitions
	115	DIAG_CD_09	Diagnosis Code 9	Char	20	ICD-9/ICD-10
	116	DIAG_CD_09_DESC	Diagnosis Code 9 Description	Char	200	No value definitions
	117	DIAG_CD_10	Diagnosis Code 10	Char	20	ICD-9/ICD-10
	118	DIAG_CD_10_DESC	Diagnosis Code 10 Description	Char	200	No value definitions
	119	PROC_MOD_1_CD	Procedure modifier 1	Char	20	No value definitions
	120	PROC_MOD_1_DESC	Procedure modifier 1 Description	Char	80	No value definitions
	121	PROC_MOD_2_CD	Procedure modifier 2	Char	20	No value definitions
	122	PROC_MOD_2_DESC	Procedure modifier 2 Description	Char	80	No value definitions
	123	PROC_MOD_3_CD	Procedure modifier 3	Char	20	No value definitions
	124	PROC_MOD_3_DESC	Procedure modifier 3 Description	Char	80	No value definitions
	125	PROC_MOD_4_CD	Procedure modifier 4	Char	20	No value definitions
	126	PROC_MOD_4_DESC	Procedure modifier 4 Description	Char	80	No value definitions
	127	HDRIN_MBR_GNDR_DESC	Member Gender Description	Char	200	No value definitions
	128	CLM_BTCH_DOC_TYP_CD	Specifies the classification of claims in a batch	Char	20	C = ORIGINAL CLAIM
						E = ENCOUNTER

						W = WEB SERVICE TRANSACTION
	129	CR_CD	Credit Code	Char	20	No value definitions
	130	MBR_DOB_DT	Member Date of Birth	Num	8	SAS date, use format to display as DDMMMYYYY
	131	MBR_REF_REL_TO_PAY_CD	Member Relationship Code	Char	20	A = SPOUSE
						B = SON
						C = DAUGHTER
						D = STEPSON
						E = STEPDAUGHTER
						F = MOTHER
						G = FATHER
						H = MOTHER IN LAW
						I = FATHER IN LAW
						J = GRAND CHILD
						K = STUDENT
						L = SELF
						M = BROTHER
						N = SISTER
						O = NEPHEW
						P = NIECE
						Q = FOSTER CHILD
						R = CHILD
	132	MBR_REF_CNTY_CD	Member County Code	Char	20	No value definitions
	133	MBR_REF_CTY	Member City	Char	50	No value definitions
	134	MBR_REF_ST_ABBREV	Member State Code	Char	20	No value definitions
	135	MBR_REF_ZIP_CD	Member Zip Code	Char	20	No value definitions
	136	MBR_REF_CNTY_NM	Member County Name	Char	40	No value definitions
	137	MBR_REF_CNTRY_DESC	Member Country Description	Char	200	No value definitions
	138	MBR_REF_ELGB_AUTH_BGN_DT	Member Eligibility Authorization Begin Date	Num	8	SAS date, use format to display as DDMMMYYYY
	139	MBR_REF_ELGB_BGN_DT	Member Eligibility Begin Date	Num	8	SAS date, use format to display as DDMMMYYYY
	140	MBR_REF_ELGB_CVRG_CD	Member Eligibility Coverage Code	Char	20	Consult External Standard Reference for Eligibility Coverage Codes
	141	MBR_REF_ELGB_END_DT	Member Eligibility End Date	Num	8	SAS date, use format to display as DDMMMYYYY
	142	MBR_REF_PCP_ID	Primary Care Physician ID	Char	30	No value definitions

	143	MBR_REF_SPCL_CVRG_CD	Special Coverage Code	Char	20	AI = AI-CAP/AIDS ICF-OBSOLETE 12/31/06
						AS = AS-CAP/AIDS SNF-OBSOLETE 12/31/06
						BH = TRAUMATIC BRAIN INJURY - SPECIALTY HOSPITAL
						BN = TRAUMATIC BRAIN INJURY - NURSING FACILITY
						C2 = C2-CAP-MR/DD ICF MR LEVEL OF CARE EFF 11/01/08
						CC = CC-CAP/CHILDREN-PRIOR TO 11/01/95
						CI = CI-CAP/DA ICF LEVEL OF CARE
						CM = CM-CAP-MR/DD ICF MR LEVEL OF CARE
						CS = CS-CAP/DA SNF LEVEL OF CARE
						HC = HC-CAP/CHILDREN HOSPITAL-EFF.11/01/95
						IC = IC-CAP/CHILDREN ICF-EFFECTIVE 11/01/95
						ID = ID-CAP CHOICE ICF
						IN = INNOVATIONS
						LT = SPL ASSIST-CASES AWAITING A HIGHER LEVEL OF CARE
						SC = SC-CAP/CHILDREN SNF-EFFECTIVE 11/01/95
						SD = SD-CAP CHOICE SNF
	144	MBR_REF_ELGB_CVRG_DESC	Member Eligibility Coverage Description	Char	200	No value definitions
	145	ATND_PRVDR_REF_FRST_NM	Attending Provider First Name	Char	40	No value definitions
	146	ATND_PRVDR_REF_LST_NM	Attending Provider Last Name	Char	40	No value definitions
	147	ATND_PRVDR_REF_MDL_NM	Attending Provider Middle Name	Char	20	No value definitions
	148	ATND_PRVDR_REF_CNTY_CD	Attending Provider County Code	Char	20	No value definitions
	149	ATND_PRVDR_REF_CTY	Attending Provider City	Char	80	No value definitions
	150	ATND_PRVDR_REF_ST_CD	Attending Provider State	Char	20	No value definitions
	151	ATND_PRVDR_REF_ZIP_CD	Attending Provider zip	Char	20	No value definitions
	152	ATND_PRVDR_REF_CNTY_NM	Attending Provider County Name	Char	40	No value definitions
	153	BILL_PRVDR_REF_FRST_NM	Billing Provider First Name	Char	40	No value definitions
	154	BILL_PRVDR_REF_LST_NM	Billing Provider Last Name	Char	40	No value definitions
	155	BILL_PRVDR_REF_MDL_NM	Billing Provider Middle Name	Char	20	No value definitions
	156	BILL_PRVDR_REF_STAT_CD	Billing Provider Status Code	Char	20	1 = ACTIVE
						2 = TERMINATED

						3 = SUSPENDED
	157	BILL_PRVDR_REF_TITL	Billing Provider Title	Char	30	No value definitions
	158	BILL_PRVDR_REF_CNTY_CD	Billing Provider County Code	Char	20	No value definitions
	159	BILL_PRVDR_REF_CNTY_NM	Billing Provider County Name	Char	40	No value definitions
	160	RFR_PRVDR_REF_FRST_NM	Referring Provider First Name	Char	40	No value definitions
	161	RFR_PRVDR_REF_LST_NM	Referring Provider Last Name	Char	40	No value definitions
	162	RFR_PRVDR_REF_MDL_NM	Referring Provider Middle Name	Char	20	No value definitions
	163	RFR_PRVDR_REF_TITL	Referring Provider Title	Char	30	No value definitions
	164	RNDR_PRVDR_REF_ATYPICAL_NPI	Rendering Provider Atypical NPI	Char	30	No value definitions
	165	RNDR_PRVDR_REF_DTH_DT	Rendering Provider Date of Death	Num	8	SAS date, use format to display as DDMMMYYYY
	166	RNDR_PRVDR_REF_FRST_NM	Rendering Provider First Name	Char	40	No value definitions
	167	RNDR_PRVDR_REF_LST_NM	Rendering Provider Last Name	Char	40	No value definitions
	168	RNDR_PRVDR_REF_MDL_NM	Rendering Provider Middle Name	Char	20	No value definitions
	169	RNDR_PRVDR_REF_STAT_CD	Rendering Provider Status Code	Char	20	1 = ACTIVE
						2 = TERMINATED
						3 = SUSPENDED
	170	RNDR_PRVDR_REF_STAT_EFF_DT	Rendering Provider Status Effective Date	Num	8	SAS date, use format to display as DDMMMYYYY
	171	RNDR_PRVDR_REF_STAT_END_DT	Rendering Provider Status End Date	Num	8	SAS date, use format to display as DDMMMYYYY
	172	RNDR_PRVDR_REF_TITL	Rendering Provider Title	Char	30	No value definitions
	173	RNDR_PRVDR_REF_CNTY_CD	Rendering Provider County Code	Char	20	No value definitions
	174	RNDR_PRVDR_REF_CTY	Rendering Provider City	Char	80	No value definitions
	175	RNDR_PRVDR_REF_ST_CD	Rendering Provider State	Char	20	No value definitions
	176	RNDR_PRVDR_REF_SVC_LOC_NM	Rendering Provider Site Location Name	Char	40	No value definitions
	177	RNDR_PRVDR_REF_ZIP_CD	Rendering Provider Zip	Char	20	No value definitions

	178	RNDR_PRVDR_REF_CNTY_NM	Rendering Provider County Name	Char	40	No value definitions
	179	OPRT_PRVDR_REF_FRST_NM	Operating Provider First Name	Char	40	No value definitions
	180	OPRT_PRVDR_REF_LST_NM	Operating Provider Last Name	Char	40	No value definitions
	181	OPRT_PRVDR_REF_MDL_NM	Operating Provider Middle Name	Char	20	No value definitions
	182	OPRT_PRVDR_REF_TITL	Operating Provider Title	Char	30	No value definitions
	183	SVC_PRVDR_REF_FRST_NM	Servicing Facility Provider First Name	Char	40	No value definitions
	184	SVC_PRVDR_REF_LST_NM	Servicing Facility Provider Last Name	Char	40	No value definitions
	185	SVC_PRVDR_REF_MDL_NM	Servicing Facility Provider Middle Name	Char	20	No value definitions
	186	SVC_PRVDR_REF_CNTY_CD	Servicing Facility Provider County Code	Char	20	No value definitions
	187	SVC_PRVDR_REF_CTY	Servicing Facility Provider City	Char	80	No value definitions
	188	SVC_PRVDR_REF_ST_CD	Servicing Facility Provider State	Char	20	No value definitions
	189	SVC_PRVDR_REF_ZIP_CD	Servicing Facility Provider Zip	Char	20	No value definitions
	190	SVC_PRVDR_REF_CNTY_NM	Servicing Facility Provider County Code	Char	40	No value definitions
	191	ATND_PRVDR_REF_ALT_ID	Attending Provider Medicaid Legacy Provider ID	Char	15	No value definitions
	192	BILL_PRVDR_REF_ALT_ID	Billing Provider Medicaid Legacy Provider ID	Char	15	No value definitions
	193	RNDR_PRVDR_REF_ALT_ID	Rendering Provider Medicaid Legacy Provider ID	Char	15	No value definitions