

INSIGHTS

REAL-WORLD DATA (RWD)

DATA DICTIONARY (CLOSED CLAIMS)

VERSION: JANUARY 2024



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INTRODUCTION

This data dictionary provides information about the definitions of all the data elements in each file type.

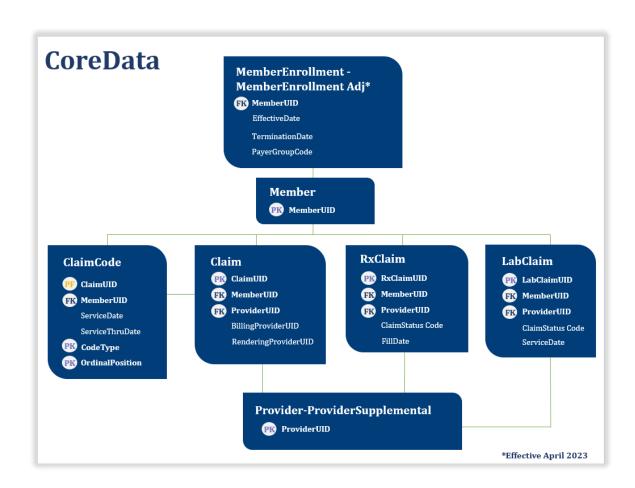
Inovalon Insights Real-World Data (RWD) datasets consists of:

- Core dataset of files that are included with each delivery type (per contractual terms)
- Supplemental files that may accompany the core dataset

Each file contains data that can be used to create a database structure with a system of choice. A list of columns is included, describing the column name used in the file, its data type, a description of the column content, expected values for each column, key notation, and required field indicators.

OVERVIEW OF FILES

Each file type describes the attributes included with each file in addition to their description, comments about expected values, and data details.





FILE TYPES

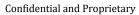
CLAIM

The *CLAIM* file contains claim service line information for medical services and may also include information relating to lab services (without an associated result), pharmaceuticals administered from the practitioner's office and medical encounter data.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ClaimUID	Unique record ID for a claim service line.	Unique ID of a health care claim. This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1).	BIGINT	PK	No
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.	This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	BIGINT	FK	No
ProviderUID	Unique ID of a health care provider. Re-assigned to make it unique across all data sources' data.	This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	BIGINT	FK	Yes
ClaimStatusCode	Code value identifying the payment status of a claim. Defined by Inovalon Insights	Value is mapped using source data values. Values: A - Adjustment to Original Claim D - Denied Claims I - Initial Pay Claim P - Pended for Adjudication R - Reversal to Original Claim U - Unknown X - Null	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ServiceDate	The date when the service was provided or began.	Use ServiceDate for the beginning date of service and ServiceThruDate for the ending date of service. For claims that only have a single date of service, ServiceThruDate equal to ServiceDate. For inpatient room and board claims, use ServiceDate for the admission date and ServiceThruDate for the discharge date. Value is passed through from source data.	DATE		No
ServiceThruDate	The date when the service ended. For claims that only have a single date of service, set equal to ServiceDate.	Use ServiceDate for the beginning date of service and ServiceThruDate for the ending date of service. For claims that only have a single date of service, ServiceThruDate equal to ServiceDate. For inpatient room and board claims, use ServiceDate for the admission date and ServiceThruDate for the discharge date. Value is passed through from source data.	DATE		No
UBPatientDischargeStatusCode	National Uniform Billing Committee (UB) Patient Discharge Status code value identifying the discharge status of an institutional claim.	Describes patient status on institutional claims; usually indicates status related to discharge or transfer.	VARCHAR		Yes
ServiceUnitQuantity	The quantity per service unit. Used for Relative Resource Use (RRU) cost calculation.	This will not be populated for all claims. Value is passed through from source data.	INTEGER		Yes
DeniedDaysCount	For inpatient claims, not all days are covered by certain payers. This field represents what days were not covered for those claims.	Denied days may not be tracked if paying by DRG. Value is passed through from source data.	INTEGER		Yes
BilledAmount	Not provided		NULL		Yes
AllowedAmount	The amount the insurance company allows the provider to be reimbursed under contract with the provider for the service performed.	Value is passed through from source data. <i>Not provided</i> when provider-identifying data is provided separately.	DECIMAL		Yes
CopayAmount	The amount the member is responsible to pay for the service performed.	Value is passed through from source data.	DECIMAL		Yes





COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
PaidAmount	The amount the insurance company actually paid to the provider for this claim service line.	Value is passed through from source data. Not provided when provider-identifying data is provided separately.	DECIMAL		Yes
CostAmount	Not provided		NULL		Yes
RxProviderIndicator	Indicates the claim provider has prescribing privileges for the MCO members.	Value is mapped from source data values. Values: 1 = True 0 = False	INTEGER		No
PCPProviderIndicator	Indicator for whether the claim provider serves as a PCP for the health plan. Refers to the provider's contractual relationship to the plan, rather than medical specialty. Valid values: 1=True; 0=False.	PCPFlag is not provided by all sources. Value is mapped from source data values.	INTEGER		No
RoomBoardIndicator	Indicates the claim is for Room and Board service. Valid values: 1 = True; 0 = False	RoomBoardFlag is used as the basis for determining discharges. RoomBoardFlag is derived from UBRevenueCode during the Discharge Build process. Only claims with a RoomBoardFlag value of 'Y' or '1' can create discharge records. Value is mapped from source data values.	INTEGER		No
MajorSurgeryIndicator	Indicates the claim includes a procedure code considered as a major surgery. Valid values: 1 = True; 0 = False	HEDIS specific field which works like the RoomBoardFlag variable. This field is used for RRU measures. When not set, the default value is 'N' or '0'. Value is mapped from source data values.	INTEGER		No
ExcludeFromDischargeIndicator	Indicates the claim should be excluded from discharge. Valid values: 1 = True; 0 = False	If a specific claim record needs to be excluded (regardless of its UBRevenueCode), ExcludeFromDischarge is set to "T rue". When not set, the default value is "False." Value is mapped from source data values.	INTEGER		No
ClaimFormTypeCode	Indicates type of claim form.	May not be well populated. Value is mapped from source data values. Values: I - Institutional P - Professional	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
InstitutionalTypeCode	A derived field indicating type of institutional service.	Field that should be used to define institutional versus professional instead of ClaimFormTypeCode. Values: I - Inpatient O - Outpatient U - Unkown (Institutional) Null - (Professional)	VARCHAR		Yes
ProfessionalTypeCode	A derived field indicating type of Professional service.	Field that should be used to define institutional versus professional instead of ClaimFormTypeCode. Values: I - Inpatient O - Outpatient U - Unkown (Institutional) Null - (Professional)	VARCHAR		Yes
BillingProviderUID	Unique ID of the health care provider billing the claim.	Re-assigned and used in the dataset to make it unique across all clients' data. Provider information is identifiable, but member information is unidentifiable. This is a unique number, generated sequentially and stored as an integer in the dataset database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1). This field is not highly populated.	BIGINT	FK	Yes
RenderingProviderUID	Unique ID of the health care provider rendering service on the claim.	Re-assigned and used in the dataset to make it unique across all clients' data. Provider information is identifiable, but member information is unidentifiable. This is a unique number, generated sequentially and stored as an integer in the dataset database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1). This field is not highly populated.	BIGINT	FK	Yes
RenderingProviderNPI	National Provider Identification number of the Rendering provider (for professional claims) or Attending provider (for institutional claims).	Value passed through from source data. Not provided when financial data is provided separately.	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
BillingProviderNPI	National Provider Identification number of the Billing provider.	Value passed through from source data. Not provided when financial data is provided separately.	VARCHAR		Yes
Sourcemodifieddate	Date the data source last modified the claim.		DATE		Yes
ClaimNumber	Hashed and salted claim header number for a claim transaction as it would appear on the CMS 1500 or UB04.		CHAR		Yes
ClaimLineNumber	Indicates the line number for the particular service being rendered.	Value passed through from source data.	VARCHAR		Yes
CreatedDate	Date when extract was created		DATE		No



CLAIM CODE

The *CLAIM CODE* file contains claim attributes related to encounter data.

Appendix A - Code Type Values provides the lookup values that support claim attributes.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ClaimUID	Unique record ID for a claim service line, from the Claim table.	Unique ID of a health care claim. This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1).	BIGINT	PF	No
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.	This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	BIGINT	FK	No
ServiceDate	The date when the service was provided or started.	Use ServiceDate for the beginning date of service and ServiceThruDate for the ending date of service. For claims that only have a single date of service, ServiceThruDate equal to ServiceDate. For inpatient room and board claims, use ServiceDate for the admission date and ServiceThruDate for the discharge date. Value is passed through from source data.	DATE		No
ServiceThruDate	The date when the service ended.	Use ServiceDate for the beginning date of service and ServiceThruDate for the ending date of service. For claims that only have a single date of service, ServiceThruDate equal to ServiceDate. For inpatient room and board claims, use ServiceDate for the admission date and ServiceThruDate for the discharge date. Value is passed through from source data.	DATE		No
CodeType	Describes the claim attribute related to encounter claims.	See Appendix (Code Type Values) Describes the code value of this record. Ex. CodeType = 17 means that the value in CodeValue is an ICD10CMDx code	INTEGER	PK	No
OrdinalPosition	Ordinal position within the source data; (all CodeTypes start with 0).		INTEGER	PK	No
CodeValue	Contains the actual value corresponding to the claim attribute.	Value is passed through from source data once validated against the reference table.	VARCHAR		No



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
DerivedIndicator	Derived fields use other data from the claim to approximate the code value.	This is most common for place of service codes. Values: 1 = Derived 0 = Not Derived	INTEGER		No
CreatedDate	Date when extract was created		DATE		No



ENHANCED - CLAIM PRICE

The CLAIM PRICE cost file contains attributes related to medical claims. This supplemental file may not be included with your delivery and is only provided per the terms of your contract.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ClaimUID	Unique record ID for a claim service line. From Claim file.	Unique ID of a health care claim. This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1).	BIGINT	FK	No
MemberUID	Unique ID of a person identified because of matching patients across all plans, bridges data across entire dataset. From Claim file.	This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1).	BIGINT	FK	No
ProviderUID	The billing provider NPI when available. Otherwise, the billing provider UID or provider UID as available.	The billing provider UID and provider UID are unique, generated numbers. Provider UID refers to a provider of an unknown type, it may not be the billing provider.	VARCHAR	FK	Yes
ServiceDate	The date when the service was provided or began. From Claim file.	Use ServiceDate for the beginning date of service and ServiceThruDate for the ending date of service. For claims that only have a single date of service, ServiceThruDate equal to ServiceDate. For inpatient room and board claims, use ServiceDate for the admission date and ServiceThruDate for the discharge date. Value is passed through from source data.	DATE		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ServiceThruDate	The date when the service ended. For claims that only have a single date of service, set equal to ServiceDate. From Claim file.	Use ServiceDate for the beginning date of service and ServiceThruDate for the ending date of service. For claims that only have a single date of service, ServiceThruDate equal to ServiceDate. For inpatient room and board claims, use ServiceDate for the admission date and ServiceThruDate for the discharge date. Value is passe	DATE		Yes
HCPCSCode	Includes HCPCS or CPT procedure codes for a ClaimUID. From Claim Code file.	Healthcare Common Procedure Coding System Modifier code value.	VARCHAR		Yes
HCPCSModifierCode1	Healthcare Common Procedure Coding System Modifier or Current Procedural Terminology code value 1.		VARCHAR		Yes
HCPCSModifierCode2	Healthcare Common Procedure Coding System Modifier or Current Procedural Terminology code value 2.		VARCHAR		Yes
UbRevenueCode	Revenue code. From Claim Code file.	Code value of International Classification of Diseases, 9th Edition, Clinical Modification Diagnosis code.	VARCHAR		Yes
ServiceUnitQuantity	The quantity per service unit. From Claim file.		INTEGER		Yes
AdmissionDate	The date when a patient is admitted into an institution. Derived for Proxy.	Applicable when service type is IP	DATE		Yes
DischargeDate	The date of discharge from an Institution. Derived for Proxy.	Applicable when service type is IP	DATE		Yes
UbPatientDischargeStatusCode	National Uniform Billing Committee (UB) Patient Discharge Status code value identifying the discharge status of an institutional claim. From Claim file.	Describes patient status on institutional claims; usually indicates status related to discharge or transfer.	VARCHAR		Yes
ServiceType	Type of service, hospital, professional, etc.	See Appendix (Service Type) For Physician: Can be equal to PH, PA, or PO, which are abbreviations for Physician Home Health, Physician Anesthesia, or Physician Other For Inpatient/SNF: Equal to IP For Outpatient/SNF: Equal to OP	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
MedicareFeeSchedule	Fee schedule used for repricing	See Appendix (Medicare Fee Schedule)	VARCHAR		Yes
EncounterID	Unique key for encounter which is the grouping of one or more claim lines that are priced together.	Hash Key	VARCHAR		No
Pricing_HCPCSCode	Includes HCPCS or CPT procedure codes	Applicable when ServiceType equals to PH, PA, or PO	VARCHAR		Yes
Pricing_APCCode	APC Code	Applicable when ServiceType equals to OP	VARCHAR		Yes
Pricing_DRGCode	Includes MSDRG code from Claim code file	Applicable when service type is IP	VARCHAR		Yes
Pricing_HIPPSCode		Applicable when Medicare Fee Schedule equals to SNF	VARCHAR		Yes
Pricing_REVCode	Revenue Code	Applicable when MedicareFeeSchedule = "HH" (Home Health)	VARCHAR		Yes
Pricing_LOS	Indicates length of stay for a patient. Derived for Proxy.		DECIMAL		Yes
Pricing_BundledFlag	1 if bundled service, 0 otherwise	When Service Lines are bundled, then bundled flag will be set to 1 and only one of the services lines will have a non-zero allowed amount for the bundle. Applicable when service type is OP, PH, PA, or PO	BOOLEAN		Yes
Pricing_AllowedAmount	Total allowable amount for claim		DECIMAL		Yes
CreatedDate			DATE		No



ENHANCED - RX CLAIM PRICE

The RX CLAIM PRICE file contains attributes related to Rx claims. This supplemental file may not be included with your delivery and is only provided per the terms of your contract.

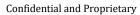
COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
RxClaimUID	Unique record ID for Rx claim service line	Unique ID of a health care claim. This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1).	BIGINT	FK	No
MemberUID	Unique ID of a person identified because of matching patients across all plans, bridges data across entire dataset. From Claim file.	This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1).	BIGINT	FK	No
ProviderID	The dispensing provider NPI when available otherwise the provider UID.	The provider UID is a unique, generated number. Provider UID refers to a provider of an unknown type, it may not be the dispensing provider.	VARCHAR	FK	Yes
FillDate	The date when the prescription was filled.	Use ServiceDate for the beginning date of service and ServiceThruDate for the ending date of service. For claims that only have a single date of service, ServiceThruDate equal to ServiceDate. For inpatient room and board claims, use ServiceDate for the admission date and ServiceThruDate for the discharge date. Value is passed through from source data.	DATE		Yes
NDC11Code	11-digit National Drug Code for the drug filled.		VARCHAR		Yes
SupplyDaysCount	Supply days count for the prescription.		INTEGER		Yes
QuantityDispensed	Unit quantity for the prescription fill.		DECIMAL		Yes
Pricing_AllowedAmount	Prescription drug allowed amount.		DECIMAL		Yes
CreatedDate			DATE		No



LAB CLAIM

The *LAB CLAIM* file contains claim attributes associated with laboratory procedures.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
LabClaimUID	Unique ID assigned to a laboratory claim record	Re-assigned and used in the dataset to make it unidentifiable and unique across all client data. This is a unique number i.e., generated sequentially and is stored as an integer in the database. This is a unique number, generated sequentially and stored as an integer in the dataset database. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	BIGINT	PK	No
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.		BIGINT	FK	No
ProviderUID	Unique ID of a health care provider. Re-assigned to make it unique across all data sources' data.	Provider information is identifiable, but member information is unidentifiable. This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	BIGINT	FK	Yes
ClaimStatusCode	Code value identifying the payment status of a claim. Defined by Inovalon Insights;	Value is mapped using source data values. Values: A - Adjustment to Original Claim D - Denied Claims I - Initial Pay Claim P - Pended for Adjudication R - Reversal to Original Claim U - Unknown X, x - Null	VARCHAR		Yes





COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ServiceDate	The date when the service was provided.	Value is passed through from source data.	DATE		No
CPTCode	Current Procedural Terminology Code value identifying medical services and procedures provided by healthcare providers.	Value is passed through from source data.	VARCHAR		Yes
LOINCCode	Code value of Logical Observation Identifiers Names and Codes identifying laboratory tests conducted.	Value is passed through from source data.	VARCHAR		Yes
ResultNumber	Not provided		NULL		Yes
ResultText	Not provided		NULL		Yes
PosNegResultIndicator	Indicates whether the result is positive or negative (PosNeg) for results not having an associated numeric result.	Value is passed through from source data. Values: True = Positive False = Negative	BOOLEAN		Yes
UnitName	Name of the unit used in the lab test.	Value is passed through from source data.	VARCHAR		Yes
Sourcemodifieddate	Date the data source last modified the claim.		DATE		
CreatedDate	Date when Extract was created.		DATE		No



MEMBER

The *MEMBER* file contains attributes pertaining to members enrolled in an insurance company provided health plan.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.	This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	BIGINT	PK	No
BirthYear	Year of birth, top-coded at 89. Ages 90 and above are coded as 1800. Refer to deidentification rule for detail.	De-identification rule: To calculate Member age, the maximum of the following date is first determined: - Plan termination date - Claim service date - Lab service date - Rx fill date - MMR payment month - MOR payment month - RAPS Return service date - RAPS Return service thru date The maximum date determined is then compared to the system run date; the year associated with the minimum of these two values is used as the minuend. To calculate age, year of birth is subtracted from the minuend selected.	INTEGER		Yes
GenderCode	Code value identifying the gender of a person.	Value is mapped from source data. Values: F - Female M - Male U - Unknown X - NULL	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
StateCode	Two-character code value identifying US State or territory.	Value is passed through from source data.	VARCHAR		Yes
Zip3Value	Derived from the zip code of patient residence.	The zip code of patient residence is either removed (as 000) or mapped to a string of 1 or more 3-digit zip codes, describing a larger postal delivery area (ex. 21401 maps to 210_211_214_219).	VARCHAR		Yes
RaceEthnicityTypeCode	Code value identifying the type of race of a person.	Value is mapped from source data. Values: 01 - White 02 - Black or African American 04 - Asian or Pacific Islander 06 - Some Other Race 09 - Unknown 11 - Hispanic or Latino	VARCHAR		Yes
CreatedDate	Date when extract was created		DATE		No



MEMBER ENROLLMENT

The MEMBER ENROLLMENT file contains benefit plan enrollment information for members.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.	This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	BIGINT	FK	No
EffectiveDate	Effective date of the health plan enrollment.	Value is passed through from source data.	DATE		No
TerminationDate	Termination date of the health plan enrollment.	Value is passed through from source data.	DATE		No
PayerGroupCode	Rollup of PayerTypeCode.	Value is derived from the payertypecode. Values: C - Commercial M - Medicaid R - Medicare Advantage U - Unknown / Other	VARCHAR		Yes



COLUMN NAM	E DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
PayerTypeCode	Code value identifying the type of entities responsible for the costs for the services performed. Defined by Inovalon Insights.	Value is passed through from source data. Values: C -Commercial CM - Commercial and Medicaid CR - Commercial and Medicare CS - Commercial and SNP D -Dual Eligible F -Family Care H -CHIP K - Marketplace M -Medicaid MD -Medicaid Disabled ML -Medicaid Low Income MR -Medicaid Restricted NC -Special Needs Plan - Chronic Condition ND -Special Needs Plan - Institutionalized NM - SNP with Medicaid only NR - SNP with Medicare only O -Other R -Medicare RC -Medicare Cost RM - Medicare and Medicaid RR -Medicare Risk S -Self Insured X - Null	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ProductCode	Code value identifying the type of health plan product. Defined by Inovalon Insights.	ProductCode differentiates product lines. Value is passed through from source data. Values: E - EPO F - PFFS H - HMO O - Other P - PPO S - POS X - Null	VARCHAR		Yes
MedicalIndicator	Indicates if medical benefit is included.	Value is mapped from source data values.	INTEGER		No
RxIndicator	Indicates if pharmacy benefit is included.	Value is mapped from source data values. Values: 1 = True 0 = False	INTEGER		No
SourceID	NULL	Not Provided	INTEGER		Yes
GroupPlanTypeCode	The type of enrollment group size for which the Commercial Plan is designed.	This is only applicable to commercial plans. Value is mapped from source data values. Values: ID - Individual SM - Small Group LG - Large Group	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
MAContractTypeCode	Medicare Advantage contract type.	This is only applicable to Medicare Advantage plans. Value is mapped from source data values. Values: E - Employer Direct Prescription Drug Plan (PDP) H - Local Medicare Advantage (MA), Local Medicare Advantage Prescription Drug (MAPD), or non-Medicare Advantage (MA) Plan R - Regional Medicare Advantage (MA) or Medicare Advantage Prescription Drug (MAPD) Plan S - Regular Standalone Prescription Drug Plan (PDP)	VARCHAR		Yes
ACAIndicator	Indicates if plan is ACA.	ACA can be on or off exchange plans. Value is mapped from source data values. Values: 1 = True 0 = False	INTEGER		Yes
ACAIssuerStateCode	Indicates the state for which the IssuerID has been issued for each client.	Value is mapped from source data values.	VARCHAR		Yes
ACAGrandfatheredIndicator	Indicates if plan has ACA grandfathered status.	Grandfathered Plan - a group health plan or individual coverage that was in effect on March 23, 2010. Value is mapped from source data values. Values: 1 = True 0 = False	INTEGER		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ACAOnExchangeIndicator	Indicates if plan is offered on ACA exchange.	ACA can be on or off exchange plans. Value is mapped from source data values. Values: 1 = True 0 = False	INTEGER		Yes
ACAMetalLevel	Indicator that classifies the plan based on the range and the quality of benefits offered by a plan.	Value is mapped from source data values. Values: B = Bronze E = Bronze Expanded C = Catastrophic G = Gold P = Platinum S = Silver U = Unknown	VARCHAR		Yes
ACAActuarialValue	Indicates the Actuarial value rate. The projected average amount an ACA plan will pay for covered essential benefits, for a standard population, as a whole number percentage, +/- 2%.	Value is mapped from source data values.	INTEGER		Yes
CreatedDate	Date when Extract was created		DATE		No



MEMBER ENROLLMENT ADJUSTED

The *MEMBER ENROLLMENT ADJUSTED* file contains adjusted enrollment dates that align with claims data. Sources often send enrollment information for their members for time spans that are longer than the spans for which they supply claims information. The process of aligning the begin and end dates with claims data is Inovalon defined as "enrollment adjusted".

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.	This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1).	BIGINT	FK	No
EffectiveDate	Effective date of the health plan enrollment.	Value is passed through from source data.	DATE		No
TerminationDate	Termination date of the health plan enrollment.	Value is passed through from source data.	DATE		No
ClaimAdjustedEffectiveDate	The effective date is increased to the earliest date for which medical claims data can be expected to exist.	Value is derived from source data.	DATE		Yes
ClaimAdjustedTerminationDate	The termination date is decreased to the latest date for which medical claims data can be expected to exist.	Value is derived from source data.	DATE		Yes
RxClaimAdjustedEffectiveDate	The effective date is increased to the earliest date for which Rx claims data can be expected to exist.	Value is derived from source data.	DATE		Yes
RxClaimAdjustedTerminationDate	The termination date is decreased to the latest date for which Rx claims data can be expected to exist.	Value is derived from source data.	DATE		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
PayerGroupCode	Rollup of PayerTypeCode.	Value is derived from the payertypecode. Values: C - Commercial M - Medicaid R - Medicare Advantage U - Unknown / Other	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
PayerTypeCode	Code value identifying the type of entities responsible for the costs for the services performed.	Value is passed through from source data. Defined by Inovalon Insights. Values: C - Commercial CM - Commercial and Medicaid CR - Commercial and Medicare CS - Commercial and SNP D - Dual Eligible F - Family Care H - CHIP K - Marketplace M - Medicaid MD - Medicaid Disabled ML - Medicaid Low Income MR - Medicaid Restricted NC - Special Needs Plan - Chronic Condition ND - Special Needs Plan - Institutionalized NM - SNP with Medicaid only NR - SNP with Medicare only O - Other R - Medicare RC - Medicare Cost RM - Medicare Risk S - Self Insured X - Null	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ProductCode	Code value identifying the type of health plan product.	ProductCode differentiates product lines. Value is passed through from source data. Defined by Inovalon Insights. Values: E - EPO F - PFFS H - HMO O - Other P - PPO S - POS X - Null	VARCHAR		Yes
MedicalIndicator	Indicates if medical benefit is included.	Value is mapped from source data values. Values: 1 = True 0 = False	INTEGER		No
RxIndicator	Indicates if pharmacy benefit is included.	Value is mapped from source data values. Values: 1 = True 0 = False	INTEGER		No
SourceID	NULL	Not Provided	INTEGER		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
GroupPlanTypeCode	The type of enrollment group size for which the Commercial Plan is designed.	This is only applicable to commercial plans. Value is mapped from source data values. Values: ID - Individual SM - Small Group LG - Large Group	VARCHAR		Yes
MAContractTypeCode	Medicare Advantage contract type.	This is only applicable to Medicare Advantage plans. Value is mapped from source data values. Values: E - Employer Direct Prescription Drug Plan (PDP) H - Local Medicare Advantage (MA), Local Medicare Advantage Prescription Drug (MAPD), or non-Medicare Advantage (MA) Plan R - Regional Medicare Advantage (MA) or Medicare Advantage Prescription Drug (MAPD) Plan S - Regular Standalone Prescription Drug Plan (PDP)	VARCHAR		Yes
ACAIndicator	Indicates if plan is ACA	ACA can be on or off exchange plans. Value is mapped from source data values. Values: 1 = True 0 = False	INTEGER		Yes
ACAIssuerStateCode	Indicates the state for which the IssuerID has been issued for each client.	Value is mapped from source data values.	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ACAGrandfatheredIndicator	Grandfathered Plan - a group health plan or individual coverage that was in effect on March 23, 2010. Value is mapped from source data values. HeredIndicator Indicates if plan has ACA grandfathered status. Values: 1 = True 0 = False		INTEGER		Yes
CAOnExchangeIndicator Indicates if plan is offered on ACA exchange Values: 1 = True 0 = False		ACA can be on or off exchange plans. Value is mapped from source data values. Values: 1 = True 0 = False	INTEGER		Yes
ACAMetalLevel Indicator that classifies the plan based on the range and the quality of benefits offered by a plan. Indicates the Actuarial value rate. The projected average amount an ACA plan will pay for covered		Value is mapped from source data values. Values: B = Bronze E = Bronze Expanded C = Catastrophic G = Gold P = Platinum S = Silver U = Unknown	VARCHAR		Yes
		Value is mapped from source data values.	INTEGER		Yes
CreatedDate	Date when extract was created.		DATE		No



PROVIDER

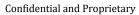
The *PROVIDER* file contains attributes pertaining to health care providers, as identified by each health plan, who submit claims for services rendered to health plan members.

Appendix D – Provider Taxonomy Code Values provides the lookup values based on the National Uniform Claim Committee (NUCC) Health Care Provider Taxonomy Code Set.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ProviderUID	Unique ID of a health care provider. Re-assigned to make it unique across all data sources' data.	Provider information is identifiable, but member information is unidentifiable. This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	INTEGER	PK	No
LastName	Standardized last name.	Value is enriched using third party data. Not provided when financial data is provided separately.	VARCHAR		Yes
FirstName	Standardized first name.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
MiddleName	Standardized middle name.	Value is enriched using third party data. Not provided when financial data is provided separately.	VARCHAR		Yes
CompanyName	Legal business name used to file tax returns with the IRS.	Value is enriched using third party data. Not provided when financial data is provided separately.	VARCHAR		Yes
NPI1	National Provider Identification number.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes

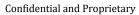


COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
NPITypeCode1	Code value indicating the provider entity type.	Value is enriched using third party data. Not provided when financial data is provided separately. Values: 1 = Type 1 (Individuals) 2 = Type 2 (Non-Individuals)	VARCHAR		Yes
ParentOrganization1	Parent organization Name.	Value is enriched using third party data. Not provided when financial data is provided separately.	VARCHAR		Yes
NP12	National Provider Identification number.	Value is enriched using third party data. Legacy field that may be populated if a provider has more than one NPI. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
NPITypeCode2	Code value indicating the provider entity type.	Value is enriched using third party data. Legacy field that may be populated if a provider has more than one NPI. <i>Not provided when financial data is provided separately.</i> Values: 1 = Type 1 (Individuals) 2 = Type 2 (Non-Individuals)	VARCHAR		Yes
ParentOrganization2	Parent Organization Name.	Value is enriched using third party data. Legacy field that may be populated if a provider has more than one NPI. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
PrimaryPracticeAddress	Address data on practice location.	Value is enriched using third party data. Not provided when financial data is provided separately.	VARCHAR		Yes
SecondaryPracticeAddress	Address data on practice location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
PracticeCity	Address data on practice location.	Value is enriched using third party data. Not provided when financial data is provided separately.	VARCHAR		Yes





COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
PracticeState	Address data on practice location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
PracticeZip	Address data on practice location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
PracticeZip4	Address data on practice location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
PracticePhone	Address data on practice location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
PrimaryBillingAddress	Address data on billing location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
SecondaryBillingAddress	Address data on billing location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
BillingCity	Address data on billing location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
BillingState	Address data on billing location.	Value is enriched using third party data. Not provided when financial data is provided separately.	VARCHAR		Yes
BillingZip	Address data on billing location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
BillingZip4	Address data on billing location.	Value is enriched using third party data. Not provided when financial data is provided separately.	VARCHAR		Yes
BillingPhone	Address data on billing location.	Value is enriched using third party data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes





COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
TaxonomyCode1	Taxonomy is the NUCC healthcare provider taxonomy code set and is self-reported by providers when applying for an NPI.	The Provider Taxonomy codes are based on the National Uniform Claim Committee (NUCC) Health Care Provider Taxonomy Code Set. The taxonomy code is a unique 10-character code that designates a provider's classification and specialization. More information on the provider taxonomy codes can be found on the CMS website. Values can be found in Appendix (Provider Taxonomy).	VARCHAR		Yes
TaxonomyType1	Provider Type.	Values can be found in Appendix (Provider Taxonomy)	VARCHAR		Yes
TaxonomyClassification1	Provider Classification.	Values can be found in Appendix (Provider Taxonomy)	VARCHAR		Yes
TaxonomySpecialization1	Provider Specialization.	Values can be found in Appendix (Provider Taxonomy)	VARCHAR		Yes
TaxonomyCode2	Taxonomy is the NUCC healthcare provider taxonomy code set and is self-reported by providers when applying for an NPI.	The Provider Taxonomy codes are based on the National Uniform Claim Committee (NUCC) Health Care Provider Taxonomy Code Set. The taxonomy code is a unique 10-character code that designates a provider's classification and specialization. More information on the provider taxonomy codes can be found on the CMS website. Values can be found in Appendix (Provider Taxonomy).	VARCHAR		Yes
TaxonomyType2	Provider Type.	Values can be found in Appendix (Provider Taxonomy)	VARCHAR		Yes
TaxonomyClassification2	Provider Classification.	Values can be found in Appendix (Provider Taxonomy)	VARCHAR		Yes
TaxonomySpecialization2	Provider Specialization.	Values can be found in Appendix (Provider Taxonomy)	VARCHAR		Yes
CreatedDate	Date when Extract was created		DATE		No



PROVIDER SUPPLEMENTAL

The *PROVIDER SUPPLEMENTAL* file contains the provider details passed through from our data sources, excluding validation from our third-party vendor.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ProviderUID	Unique ID of a health care provider. Re-assigned to make it unique across all data sources' data.	Provider information is identifiable, but member information is unidentifiable. This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	INTEGER	PK	No
NamePrefix	Source provider name prefix, such as "Dr".	Not provided when financial data is provided separately.	VARCHAR		Yes
Name	Source provider name. Could be an organization name. Could contain prefix and/or suffix.	Not provided when financial data is provided separately.	VARCHAR		Yes
NameSuffix	Source provider name suffix, such as "Jr.", "Sr.", "III"	Standardization is defined as parsing name elements in the correct field positions. Typing error corrections are not part of the standardization process. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
Address1	Source provider address data.	Not provided when financial data is provided separately.	VARCHAR		Yes
Address2	Source provider address data.	Not provided when financial data is provided separately.	VARCHAR		Yes
City	Source provider address data.	Not provided when financial data is provided separately.	VARCHAR		Yes
State	Source provider address data.	Not provided when financial data is provided separately.	VARCHAR		Yes
Zip	Source provider address data.	Not provided when financial data is provided separately.	VARCHAR		Yes
Phone	Source provider phone number.	Not provided when financial data is provided separately.	VARCHAR		Yes
Fax	Source provider fax number.	Not provided when financial data is provided separately.	VARCHAR		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
DEANumber	Source provider DEA number.	Drug Enforcement Administration (DEA) Number associated with a provider. It is a number assigned to a health care provider by the U.S. Drug Enforcement Administration allowing them to write prescriptions for controlled substances. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
NPINumber	Source provider NPI number	National Provider Identification number. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
CreatedDate	Date when extract was created		DATE		No



PROXY - INPATIENT PROSPECTIVE PAYMENT SYSTEM (IPPS) CLAIM COST

The proxy *IPPS CLAIM COST* file contains attributes for IPPS claim cost. *This supplemental file may not be included with your delivery and is only provided per the terms of your contract.*

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
DischargeUID	Unique discharge record ID from the IPPSclaimcost table.	Derived by Proxy process	BIGINT	PK	No
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.		BIGINT	FK	No
ProviderUID	Unique ID of a health care provider. Re-assigned to make it unique across all data sources' data.		BIGINT	FK	Yes
AdmissionDate	The date when patient is admitted into an institution.	Derived by Proxy process	DATE		No
DischargeDate	The date of discharge from an Institution.	Derived by Proxy process	DATE		No
LOS	Indicates length of stay for a patient.	Derived by Proxy process	INTEGER		Yes
FinalDRG	DRG assigned based on a MS-DRG grouper.	Derived by Proxy process	VARCHAR		Yes
UbPatientDischargeStatusCode	National Uniform Billing Committee (UB) Patient Discharge Status code value identifying the discharge status of an institutional claim.	More information provided in separate tab.	INTEGER		Yes
UnadjustedPrice	The total medical service allowed amount incurred prior to Line of Business adjustment.	Derived by Proxy process	DECIMAL		Yes
Multiplier	Adjustments made based of Line of Business.	Derived by Proxy process	DOUBLE		Yes
LobAdjustedPrice	Derived field obtained by multiplying UnadjustedPrice and Multiplier at the discharge level.	Derived by Proxy process	DECIMAL		Yes



PROXY - NON-IPPS CLAIM COST

The proxy NON- IPPS CLAIM COST file contains attributes for non-IPPS claims. This supplemental file may not be included with your delivery and is only provided per the terms of your contract.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
ClaimUID	Unique record ID for a claim service line, from the Claim table.		BIGINT	PK	No
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.		BIGINT	FK	No
ProviderUID	Unique ID of a health care provider. Re-assigned to make it unique across all data sources' data.			FK	Yes
ServiceDate	The date when the service was provided.		DATE		Yes
ServiceThruDate	The date when the service ended.		DATE		Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
СаѕеТуре	This field indicates which case type was used to price the corresponding claim.	Values: -AMBULANCE - Ambulance Fee Schedule (AFS) or Ambulance Services payment system ANESTHESIA- anesthesia-specific reimbursement rule of the Physician Fee Schedule (PFS) or Physician and Other Health Professional payment system ASCENTER- Ambulatory Surgical Center payment system (ASC) DME- Durable Medical Equipment (DME) payment system DRUG- Part B Drugs payment systems ESRD- (all \$0, PPS not yet implemented)- Outpatient Dialysis Services payment system (all \$0, PPS not yet implemented) LAB- Clinical Laboratory Fee Schedule (CLFS) or Clinical Laboratory Services payment system OPPS- Outpatient Hospital Services payment system or Outpatient Prospective Payment System (OPPS) PROFESSIONAL- Physician Fee Schedule (PFS) or Physician and Other Health Professional payment system UNASSIGNED- (6% of all records [all with price of \$0] now labeled with no case type)	VARCHAR		Yes
UnadjustedPrice	Claim line allowed amount incurred prior to Line of Business adjustment.	Derived by Proxy process	DECIMAL		Yes
Multiplier	Adjustments made based on Line Of Business.	Derived by Proxy process	DOUBLE		Yes
LOBAdjustedPrice	Derived field obtained by multiplying UnadjustedPrice and Multiplier.	Derived by Proxy process	DECIMAL		Yes



PROXY - IPPS CLAIM XREF (CROSSWALK)

The proxy *IPPS CLAIM XREF* file contains attributes that link to *IPPS CLAIM COST*. This supplemental file may not be included with your delivery and is only provided per the terms of your contract.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.		BIGINT	FK	No
DischargeUID	Unique discharge record ID from the IPPSclaimcost table.	Derived by Proxy process	BIGINT	FK	No
AcuteInd	derived field indicating an acute hospital stay. Derived by Proxy process		INTEGER		Yes
ClaimUID	Unique record ID for a claim service line, from the Claim table.		BIGINT	PK, FK	No



PROXY - POST ACUTE CARE (PAC) CLAIM COST

The proxy *PAC CLAIM COST* file contains attributes related to post-acute care claim cost. *This supplemental file may not be included with your delivery and is only provided per the terms of your contract.*

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
PacUID	Unique record ID for the PAC Claim Cost file.	Derived by Proxy process	BIGINT	PK	No
EpisodeUID	Consecutive PAC claims are grouped together as an episode. ClaimUIDs are linked to PAC Claim Cost by EpisodeUID.	Derived by Proxy process	BIGINT		No
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.		INTEGER	FK	No
ProviderUID	Unique ID of a health care provider. Re-assigned to make it unique across all clients' data.		INTEGER	FK	No
AdmissionDate	The date when patient is admitted into an institution.	Derived by Proxy process	DATE		Yes
DischargeDate	The date of discharge from an Institution.	Derived by Proxy process	DATE		Yes
LOS	Indicates length of stay for a patient.	Derived by Proxy process	INTEGER		Yes



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COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
Setting	PAC setting assigned by the post-acute grouping process.	Derived by Proxy process Values: HHA- home health IRF- inpatient rehab LTACH- long-term acute SNF- skilled nursing	VARCHAR		Yes
UnadjustedPrice	The total medical service cost incurred prior to Line of Business adjustment.	Derived by Proxy process	DECIMAL		Yes
Multiplier	Adjustments made based on Line of Business.	Derived by Proxy process	DOUBLE		Yes
LobAdjustedPrice	Derived field obtained by multiplying UnadjustedPrice and Multiplier at the discharge level.	Derived by Proxy process	DECIMAL		Yes



PROXY - POST ACUTE CARE (PAC) CLAIM XREF (CROSSWALK)

The proxy *PAC CLAIM COST XREF* file contains attributes that link to *PAC CLAIM COST. This supplemental file may not be included with your delivery and is only provided per the terms of your contract.*

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.		BIGINT	FK	No
PacUID	Link back to the PAC Claim Cost file.	Derived by Proxy process	BIGINT	FK	No
Setting	PAC setting assigned by the post-acute grouping process.	Derived by Proxy process. Values: HHA- home health IRF- inpatient rehab LTACH- long-term acute SNF- skilled nursing	VARCHAR		Yes
ClaimUID	Unique record ID from the Claim file.		BIGINT	PK, FK	No



PROXY - RX CLAIM COST

The proxy RX CLAIM COST file contains RX claim cost attributes. This supplemental file may not be included with your delivery and is only provided per the terms of your contract.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
RxFillUID	Unique record ID for the Rx Cost file.	Derived by Proxy process	BIGINT	PK	No
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.		BIGINT	FK	No
FillDate	The date when the prescription was filled.		DATE		No
NDC11Code	11-digit National Drug Code for the drug filled.		VARCHAR		Yes
SupplyDaysCount	Supply days count for the prescription.	Derived by Proxy process	INTEGER		Yes
UnitQuantity	Unit quantity for the prescription fill.	Derived by Proxy process	DECIMAL		Yes
UnadjustedPrice	Prescription drug allowed amount.	Derived by Proxy process	DECIMAL		Yes



PROXY - RX FILL XREF (CROSSWALK)

The proxy RX FILL XREF file contains attributes that link back to RX CLAIM and RX CLAIM COST. This supplemental file may not be included with your delivery and is only provided per the terms of your contract.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
RxClaimUID	Link back at the Rx Claim		BIGINT	PK	No
RxFillUID	Link back at the Rx Claim Cost	Derived by proxy process	BIGINT	FK	No
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.		INTEGER	FK	No



RX CLAIM

The RX CLAIM file contains attributes associated with pharmacy (prescription) claims.

COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	NULL
RxClaimUID	Re-assigned and used in the dataset to make it unidentifiable and unique across Unique ID of a pharmacy (Rx) claim service line record. Re-assigned and used in the dataset to make it unidentifiable and unique across all client data. This is a unique number, generated sequentially and stored as an integer in the database. It is "not derived from or related to the individual" and is compliant with Section 164.514(c)(1).		BIGINT	PK	No
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.			FK	No
ProviderUID	Unique ID of a health care provider. Reassigned to make it unique across all data sources' data.	ned to make it unique across all database. It is "not derived from or related to the individual" and is compliant BI		FK	Yes
ClaimStatusCode	Code value identifying the payment status of a claim. Defined by Inovalon Insights.	Value is mapped using source data values. Values: A - Adjustment to Original Claim D - Depied Claims			Yes
FillDate	The date when the prescription is filled.	Value is passed through from source data.	DATE		No
NDC11Code	Dispensed drug identifier.	Value is passed through from source data. Usually 11-digit National Drug Code (NDC), but can be a formatted NDC, a truncated NDC, or an alternate identifier like UPC, HRI, GPI, DDID, RxNorm, etc.			Yes



COLUMN NAME	DESCRIPTION	COMMENTS	DATA TYPE	KEY(S)	IULL
SupplyDaysCount	Number of days' supply of Rx.	Value is passed through from source data.	INTEGER		Yes
DispensedQuantity	dispensed. Used for Relative Resource	This field must be populated in the same metric they come in, milliliter for liquid, number of pills for pills, and grams for cream. When QuantityDispensed is not supplied the RRU cost is calculated by multiplying SupplyDaysCount by a standard cost provided by NCQA.	DOUBLE		Yes
BilledAmount	Not provided		NULL		Yes
AllowedAmount	The amount the insurance company allows the provider to charge under contract with the provider for the service performed.	Value is passed through from source data. Not provided when provider-identifying data is provided separately.	DECIMAL		Yes
CopayAmount	The amount the member is responsible to pay for the service performed.	Value is passed through from source data.	DECIMAL		Yes
PaidAmount	The amount the insurance company actually paid to the provider for this claim service line.	Value is passed through from source data. Not provided when provider-identifying data is provided separately.	DECIMAL		Yes
CostAmount	Not provided		NULL		Yes
PrescribingNPI		Value passed through from source data. <i>Not provided when financial data is provided separately.</i>	VARCHAR		Yes
DispensingNPI	National Provider Identification number of the dispensing healthcare provider, facility, clinic, or pharmacy.	Value passed through from source data. Not provided when financial data is provided separately.	VARCHAR		Yes
Sourcemodifieddate	Date the data source last modified the claim.		DATE		Yes
CreatedDate	Date when Extract was created		DATE		No



UPK MEMBER KEYS

The *UPK MEMBER KEYS* file contains member keys. Our default Datavant token list includes tokens 1, 2, 4 & 7.

COLUMN NAME	DESCRIPTION COMMENTS		DATA TYPE	KEY(S)	NULL
UPK_Key_1	Datavant Key 1	Default Datavant token. (last name + 1st initial of first name + gender + DOB	VARCHAR		No
UPK_Key_2	Datavant Key 2	Default Datavant token. (last name (soundex) + first name (soundex) + gender + DOB)	VARCHAR		No
UPK_Key_4	Datavant Key 4	Default Datavant token. (4 last name + first name + gender + DOB)	VARCHAR		No
UPK_Key_7	Datavant Key 7	Default Datavant token. (last name + 1st 3 characters of first name + gender + DOB)	VARCHAR		No
Birth_Dt	Not provided		NULL		Yes
Gender_Cd	Not provided		NULL		Yes
Zip3	Not provided		NULL		Yes
MemberUID	Unique ID of a person identified as a result of matching patients across all plans; bridges data across entire dataset.	This is a unique number, generated sequentially and stored as an integer. It is "not derived from or related to the individual" and is compliant with Section $164.514(c)(1)$.	BIGINT	PK, FK	No



APPENDIX OVERVIEW

The following appendix sections provide additional support with the data files described in the *File Types* section.

APPENDIX A - CODE TYPE VALUES

APPENDIX B - DISCHARGE STATUS CODE VALUES

APPENDIX C - PLACE OF SERVICE (POS) CODE VALUES

APPENDIX D - PROVIDER TAXONOMY CODE VALUES

APPENDIX E - TYPE OF BILL (TOB) CODE VALUES

APPENDIX F - SERVICE TYPE VALUES

APPENDIX G - MEDICARE FEE SCHEDULE VALUES



APPENDIX A - CODE TYPE VALUES

Code type values describe the attribute related to encounter claims.

CODE TYPE VALUE	NAME	DESCRIPTION
1	Ambulatory Surgery Code	Code value indicating the year when it is classified as Ambulatory Surgery procedure. Defined by Inovalon Insights.
2	APDRG	All Patient Diagnosis Related Group (APDRG) code value. APDRG is specific to NY.
3	CPT Code	Current Procedural Terminology Code value identifying medical services and procedures provided by healthcare providers.
4	CPT Modifier Code	Current Procedural Terminology Modifier Code value.
5	HCPCS Code	Healthcare Common Procedure Coding System code value identifying products, supplies, and services not included in the CPT codes.
6	HCPCS Modifier Code	Healthcare Common Procedure Coding System Modifier code value.
7	ICD9CMDx Code	Code value of International Classification of Diseases, 9th Edition, Clinical Modification Diagnosis code.
8	ICD9CMPx Code	Code value of International Classification of Diseases, 9th Edition, Clinical Modification Procedure code.
9	MSDRG Code	Medicare Severity Diagnosis Related Group code value. DRG is not always collected for all clients
10	POS Code	Place of Service (POS) code value. Defined by CMS.



CODE TYPE VALUE	NAME	DESCRIPTION
11	POS Group Code	Rolled-up Place of Service code value. Defined by Inovalon Insights. Values: BC - Birthing Center DN - Day/ Night (Partial Hospitalization) ER - Emergency Room IA - Inpatient Acute IN - Inpatient Non-Acute LA - Laboratory OA - Outpatient/ Ambulatory OC - Office/ Clinic OT - Other RM - Mail Order Prescription Drugs
Provider Taxonomy Healthcare Provider Ta Code		Healthcare Provider Taxonomy code value.
13	TOB Code	Three-digit alphanumeric Type of Bill (TOB) code value (leading zero ignored).
14	UB Occurrence Code	National Uniform Billing Committee (UB) Patient Occurrence code value identifying a significant event relating to the bill that may affect payer processing.



CODE TYPE VALUE	NAME	DESCRIPTION	
15	Provider Type Code	Values: AMB - Ambulance ANE - Anesthesiologist CARD - Cardiologist CD - Chemical Dependency Provider DME - Durable Medical Equipment DN - Dental Provider ENDO - Endocrinologist FAC - Facility GAST - Gastroenterologist HH - Home Health INFD - Infectious Disease Specialist MHN - Mental Health Provider - Non-Prescribing MHP - Mental Health Provider - Prescribing NPCP - Non-Physician Primary Care Provider NEPH - Nephrology OB - Obstetrician OTHR - Other Specialist/ Facility Provider PCP - Primary Care Provider PNC - Prenatal Care Provider not Providing Delivery Svcs RAD - Radiologist RN - Registered Nurse RPH - Clinical Pharmacist UC - Urgent Care Center VC - Vision Care Provider	
16	UB Revenue Code	National Uniform Billing Committee (UB) Patient Occurrence code value identifying a specific accommodation, ancillary service, or billing calculation such as emergency room charges.	
17	ICD10CMDx Code	Code value of International Classification of Diseases, 10th Edition, Clinical Modification Diagnosis code.	
18	ICD10CMPx Code	Code value of International Classification of Diseases, 10th Edition, Clinical Modification Procedure code.	



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CODE TYPE VALUE	NAME	DESCRIPTION
19	ADM ICD9CMDx Code	Admitting Diagnosis. Code value of International Classification of Diseases, 9th Edition, Clinical Modification Diagnosis code.
PRV ICD9CMDx Code Patient's Reason for Visit. Code value of International Classif Diagnosis code.		Patient's Reason for Visit. Code value of International Classification of Diseases, 9th Edition, Clinical Modification Diagnosis code.
21	ECTIONACMINA CODE	External Cause of Injury. Code value of International Classification of Diseases, 9th Edition, Clinical Modification Diagnosis code.
22	ADM ICD10CMDx Code	Admitting Diagnosis. Code value of International Classification of Diseases, 10th Edition, Clinical Modification Diagnosis code.
23	PRV ICD10CMDx Code	Patient's Reason for Visit. Code value of International Classification of Diseases, 10th Edition, Clinical Modification Diagnosis code.
24	ECI ICD10CMDx Code	External Cause of Injury. Code value of International Classification of Diseases, 10th Edition, Clinical Modification Diagnosis code.



APPENDIX B - DISCHARGE STATUS CODE VALUES

The National Uniform Billing Committee (NUBC) patient discharge status codes are industry standard codes; values identifying the discharge status of an institutional claim. Inovalon converts sensitive codes (20-21, 40-42) to 'NULL' in compliance with statistical de-identification rules.

CODE	DISCHARGE STATUS CODE DESCRIPTION		
1	Discharged to home or self-care (routine discharge)		
2	Discharged/transferred to another short-term general hospital		
3	Discharged/transferred to Skilled Nursing Facility (SNF)		
4	Discharged/transferred to Intermediate Care Facility (ICF)		
5	Discharged/transferred to a designated cancer center or children's hospital		
6	Disch/trans to home under care of HHS in anticipation of cov skills care		
7	Left against medical advice or discontinued care		
8	Discharged/transferred to home under care of home IV drug therapy provider		
9	Admitted as an inpatient to this hospital		
30	Still patient or expected to return for outpatient services		
43	Discharged/transferred to a Federal Hospital		
50	Discharged/transferred to Hospice - home		
51	Discharged/transferred to Hospice - medical facility		
61	Discharged/transferred to hospital-based Medicare Approved Swing Bed		
62	Disch/trans to inpat rehab fac incl distinct part units of a hospital		
63	Discharged/transferred to long term care hospitals		



CODE	DISCHARGE STATUS CODE DESCRIPTION
64	Discharged/transferred to nursing fac cert under Medicaid but not Medicare
65	Disch/trans to a psychiatric hospital or psychiatric distinct part of hosp
66	Discharged/transferred to a Critical Access Hospital (CAH)
69	Discharged/Transferred to a Designated Disaster Alternative Care Site
70	Discharge/transfer to another type of health care institution not defined elsewhere in the code list
71	Discharged/transferred/referred to another institution for OP services
72	Discharged/transferred/referred to this institution for OP services
81	Discharged to home or self-care with a planned acute care hospital inpatient readmission
82	Discharged/Transferred to a Short-Term General Hospital for Inpatient Care with a Planned Acute Care Hospital Inpatient Readmission
83	Discharged/Transferred to a Skilled Nursing Facility (SNF) with Medicare Certification with a Planned Acute Care Hospital Inpatient Readmission
84	Discharged/Transferred to a Facility that Provides Custodial or Supportive Care with a Planned Acute Care Hospital Inpatient Readmission
85	Discharged/Transferred to a Designated Cancer Center or Children's Hospital with a Planned Acute Care Hospital Inpatient Readmission
86	Discharged/transferred to home under care of organized home health service organization in anticipation of covered skilled care with a planned acute care hospital inpatient readmission
88	Discharged/Transferred to a Federal Health Care Facility with a Planned Acute Care Hospital Inpatient Readmission
89	Discharged/Transferred to a Hospital-based Medicare Approved Swing Bed with a Planned Acute Care Hospital Inpatient Readmission
90	Discharged/Transferred to an Inpatient Rehabilitation Facility (IRF) including Rehabilitation Distinct Part Units of a Hospital with a Planned Acute Care Hospital Inpatient Readmission
91	Discharged/Transferred to a Medicare Certified Long Term Care Hospital (LTCH) with a Planned Acute Care Hospital Inpatient Readmission
92	Discharged/Transferred to a Nursing Facility Certified Under Medicaid but not Certified Under Medicare with a Planned Acute Care Hospital Inpatient Readmission



CODE	DISCHARGE STATUS CODE DESCRIPTION		
93	Discharged/Transferred to a Psychiatric Hospital or Psychiatric Distinct Part Unit of a Hospital with a Planned Acute Care Hospital Inpatient Readmission		
94	Discharged/Transferred to a Critical Access Hospital (CAH) with a Planned Acute Care Hospital Inpatient Readmission		
95	Discharged/transferred to another type of health care institution not defined elsewhere in this code list with a planned acute care hospital inpatient readmission		
NULL	Null		
X	Null		



APPENDIX C - PLACE OF SERVICE (POS) CODE VALUES

Centers for Medicare & Medicaid Services (CMS) place of service (POS) codes are industry standard codes. Codes marked with asterisk (*) have been recoded to '99' in compliance with statistical de-identification rules.

CODE	POS NAME	PLACE OF SERVICE DESCRIPTION
1	Pnarmacy	A facility of location where drugs and other medically related items and services are sold, dispensed, or otherwise provided directly to patients.
2	Telehealth Provided Other than in Patient's Home	The location where health services and health related services are provided or received, through telecommunication technology. Patient is not located in their home when receiving health services or health related services through telecommunication technology.
3	School	A facility whose primary purpose is education.
4	Homolocc Shaltar	A facility or location whose primary purpose is to provide temporary housing to homeless individuals (e.g., emergency shelters, individuals or family shelters).
05*		A facility or location, owned and operated by the Indian Health Service, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to American Indians and Alaska Natives who do not require hospitalization.
06*	Provider-based Facility	A facility of location, owned and operated by the Indian Health Service, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services rendered by, or under the supervision of, physicians to American Indians and Alaska Natives admitted as inpatients or outpatients.
07*	Free-standing Facility	A facility of location owned and operated by a federally recognized American Indian or Alaska Native tribe or tribal organization under a 638 agreement, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to tribal members who do not require hospitalization.
08*	Provider-based Facility	A facility or location owned and operated by a federally recognized American Indian or Alaska Native tribe or tribal organization under a 638 agreement, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to tribal members admitted as inpatients or outpatients.
09*	Prison/Correctional Facility	A prison, jail, reformatory, work farm, detention center, or any other similar facility maintained by either Federal, State or local authorities for the purpose of confinement or rehabilitation of adult or juvenile criminal offenders.



CODE	POS NAME	PLACE OF SERVICE DESCRIPTION			
10	Telehealth Provided in Patient's Home	The location where health services and health related services are provided or received, through telecommunication technology. Patient is located in their home (which is a location other than a hospital or other facility where the patient receives care in a private residence) when receiving health services or health related services through telecommunication technology.			
11	Office	Location other than a hospital, skilled nursing facility (SNF), military treatment facility, community health center, State or local public health clinic, or intermediate care facility (ICF), where the health professional routinely provides health examinations, diagnosis, and treatment of illness or injury on an ambulatory basis.			
12	Home	Location, other than a hospital or other facility, where the patient receives care in a private residence.			
13	Assisted Living Facility	Congregate residential facility with self-contained living units providing assessment of each resident's needs and on-site support 24 hours a day, 7 days a week, with the capacity to deliver or arrange for services including some health care and other services.			
14	Group Home	A residence, with shared living areas, where clients receive supervision and other services such as social and/or behavioral services, custodial service, and minimal services (e.g., medication administration).			
15	Mobile Unit	A facility/unit that moves from place-to-place equipped to provide preventive, screening, diagnostic, and/or treatment services.			
16	Temporary Lodging	A short-term accommodation such as a hotel, campground, hostel, cruise ship or resort where the patient receive care, and which not identified by any other POS code.			
17	Walk-in Retail Health Clinic	A walk-in health clinic, other than an office, urgent care facility, pharmacy or independent clinic and not described by any other POS code, that is located within a retail operation and provides, on an ambulatory basis, preventive, and primary care services.			
18	Place of Employment-Worksite A location, not described by any other POS code, owned, or operated by a public or private entity where the patient is employed, and where a health professional provides on-going or episodic occupational medical, therapeutic or rehabilitative services to the individual.				
19	Off Campus-Outpatient Hospital A portion of an off-campus hospital provider-based department which provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization.				
20	Urgent Care Facility Location, distinct from a hospital emergency room, an office, or a clinic, whose purpose is to diagnose and treat illness or injury for unscheduled, ambulatory patients seeking immediate medical attention.				
21	Inpatient Hospital	A facility, other than psychiatric, which primarily provides diagnostic, therapeutic (both surgical and non-surgical), and rehabilitation services by, or under, the supervision of physicians to patients admitted for a variety of medical conditions.			



CODE	POS NAME	PLACE OF SERVICE DESCRIPTION		
22	On Campus-Outpatient Hospital	A portion of a hospital's main campus which provides diagnostic, therapeutic (both surgical and nonsurgical), and rehabilitation services to sick or injured persons who do not require hospitalization or institutionalization.		
23	Emergency Room - Hospital	A portion of a hospital where emergency diagnosis and treatment of illness or injury is provided.		
24	Ambulatory Surgical Center	A freestanding facility, other than a physician's office, where surgical and diagnostic services are provided on an ambulatory basis.		
25	Birthing Center	A facility, other than a hospital's maternity facilities or a physician's office, which provides a setting for labor, delivery, and immediate post-partum care as well as immediate care of newborn infants.		
26*	Military Treatment Center	medical facility operated by one or more of the Uniformed Services. Military Treatment Facility (MTF) also refers to certain ormer U.S. Public Health Service (USPHS) facilities now designated as Uniformed Service Treatment Facilities (USTF).		
27-30	Unassigned	N/A		
31	Skilled Nursing Facility	A facility which primarily provides inpatient skilled nursing care and related services to patients who require medical, nursing, or rehabilitative services but does not provide the level or care or treatment available in a hospital.		
32	Nursing Facility	A facility which primarily provides to residents skilled nursing care and related services for the rehabilitation of injured, disabled, or sick persons, or, on a regular basis, health-related care services above the level of custodial care to other than individuals with intellectual disabilities.		
33	Custodial Care Facility	A facility which provides room, board and other personal assistance services, generally on a long-term basis, and which does not include a medical component.		
34	Hospice	A facility, other than a patient's home, in which palliative and supportive care for terminally ill patients and their families are provided.		
35-40	Unassigned	N/A		
41	Ambulance - Land	A land vehicle specifically designed, equipped, and staffed for lifesaving and transporting the sick or injured.		
42	Ambulance - Air or Water	An air or water vehicle specifically designed, equipped, and staffed for lifesaving and transporting the sick or injured.		
43-48	Unassigned	N/A		



CODE	POS NAME	PLACE OF SERVICE DESCRIPTION		
49	Independent Clinic	A location, not part of a hospital and not described by any other POS code, that is organized and operated to provide preventive, diagnostic, therapeutic, rehabilitative, or palliative services to outpatients only.		
50	Federally Qualified Health Center	A facility located in a medically underserved area that provides Medicare beneficiaries preventive primary medical care under the general direction of a physician.		
51	Inpatient Psychiatric Facility	A facility that provides inpatient psychiatric services for the diagnosis and treatment of mental illness on a 24-hour basis, by or under the supervision of a physician.		
52	Psychiatric Facility - Partial Hospitalization	A facility for the diagnosis and treatment of mental illness that provides a planned therapeutic program for patients who do not require full time hospitalization, but who need broader programs than are possible from outpatient visits to a hospital-based or hospital-affiliated facility.		
53	Community Mental Health Center A facility that provides the following services: outpatient services, including specialized outpatient services for children elderly, individuals who are chronically ill, and residents of the CMHC's mental health services area who have been di inpatient treatment at a mental health facility; 24 hour a day emergency care services; day treatment, other partial hos services, or psychosocial rehabilitation services; screening for patients being considered for admission to State mental facilities to determine that appropriateness of such admission; and consultation and education services.			
54	Intermediate Care Facility/ A facility which primarily provides health-related care and services above the level of custodial care to individuals but doe provide the level of care or treatment available in a hospital or SNF. Intellectual Disabilities			
55	Residential Substance Abuse Treatment Facility A facility which provides treatment for substance (alcohol and drug) abuse to live-in residents who do not require acute medicare. Services include individual and group therapy and counseling, family counseling, laboratory tests, drugs and supplies, psychological testing, and room and board.			
56	Psychiatric Residential Treatment Center A facility or distinct part of a facility for psychiatric care which provides a total 24-hour therapeutically planned staffed group living and learning environment.			
57	Non-residential Substance A location which provides treatment for substance (alcohol and drug) abuse on an ambulatory basis. Services include indiand group therapy and counseling, family counseling, laboratory tests, drugs and supplies, and psychological testing.			
Non-residential Opioid Treatment Facility A location that provides treatment for opioid use disorder on an ambulatory basis. Services include methadone and Medication Assisted Treatment (MAT).		A location that provides treatment for opioid use disorder on an ambulatory basis. Services include methadone and other forms of Medication Assisted Treatment (MAT).		



CODE	POS NAME	PLACE OF SERVICE DESCRIPTION		
59	Unassigned	N/A		
60	Mass Immunization Center	A location where providers administer pneumococcal pneumonia and influenza virus vaccinations and submit these services as electronic media claims, paper claims, or using the roster billing method. This generally takes place in a mass immunization setting, such as, a public health center, pharmacy, or mall but may include a physician office setting.		
61	Comprehensive Inpatient Rehabilitation Facility	facility that provides comprehensive rehabilitation services under the supervision of a physician to inpatients with physical lisabilities. Services include physical therapy, occupational therapy, speech pathology, social or psychological services, and orthotics and prosthetics services.		
62	Comprehensive Outpatient Rehabilitation Facility	A facility that provides comprehensive rehabilitation services under the supervision of a physician to outpatients with physical disabilities. Services include physical therapy, occupational therapy, and speech pathology services.		
63-64	Unassigned	N/A		
65	End-Stage Renal Disease Treatment Facility	A facility other than a hospital, which provides dialysis treatment, maintenance, and/or training to patients or caregivers on an ambulatory or home-care basis.		
66-70	Unassigned	N/A		
71	Public Health Clinic	A facility maintained by either State or local health departments that provides ambulatory primary medical care under the genera direction of a physician.		
72	Rural Health Clinic	A certified facility which is located in a rural medically underserved area that provides ambulatory primary medical care under the general direction of a physician.		
73-80	Unassigned	N/A		
81	Independent Laboratory	A laboratory certified to perform diagnostic and/or clinical tests independent of an institution or a physician's office.		
82-98	Unassigned	N/A		
99	Other Place of Service	Other place of service not identified above.		
*	Other	Values converted to 99 according to current statistical de-identification rules.		



APPENDIX D - PROVIDER TAXONOMY CODE VALUES

The National Uniform Claim Committee (NUCC) provider taxonomy codes are industry standard codes. Providers use these codes when applying for a National Provider Identifier (NPI). Inovalon converts sensitive codes to '000000000X' in compliance with statistical de-identification rules.

TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
000000000X	Ambulatory Health Care Facilities	Clinic/Center	Military Outpatient Operational (Transportable) Component
00000000X	Ambulatory Health Care Facilities	Clinic/Center	Prison Health
00000000X	Ambulatory Health Care Facilities	Clinic/Center	Military/U.S. Coast Guard Outpatient
00000000X	Other Service Providers	Military Health Care Provider	Independent Duty Corpsman
00000000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Art Therapist	
00000000X	Laboratories	Military Clinical Medical Laboratory	
00000000X	Ambulatory Health Care Facilities	Clinic/Center	VA
00000000X	Suppliers	Department of Veterans Affairs (VA) Pharmacy	
00000000X	Ambulatory Health Care Facilities	Clinic/Center	Military and U.S. Coast Guard Ambulatory Procedure
00000000X	Hospitals	Military Hospital	
00000000X	Behavioral Health & Social Service Providers	Poetry Therapist	
00000000X	Other Service Providers	Military Health Care Provider	
00000000X	Transportation Services	Military/U.S. Coast Guard Transport	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
000000000X	Other Service Providers	Military Health Care Provider	Independent Duty Medical Technicians
00000000X	Hospitals	Religious Nonmedical Health Care Institution	
00000000X	Suppliers	Military/U.S. Coast Guard Pharmacy	
00000000X	Other Service Providers	Naprapath	
00000000X	Hospitals	Military Hospital	Military General Acute Care Hospital
00000000X	Transportation Services	Military/U.S. Coast Guard Transport	Military or U.S. Coast Guard Ambulance, Air Transport
101Y00000X	Behavioral Health & Social Service Providers	Counselor	
101YA0400X	Behavioral Health & Social Service Providers	Counselor	Addiction (Substance Use Disorder)
101YM0800X	Behavioral Health & Social Service Providers	Counselor	Mental Health
101YP1600X	Behavioral Health & Social Service Providers	Counselor	Pastoral
101YP2500X	Behavioral Health & Social Service Providers	Counselor	Professional
101YS0200X	Behavioral Health & Social Service Providers	Counselor	School
102L00000X	Behavioral Health & Social Service Providers	Psychoanalyst	
103G00000X	Behavioral Health & Social Service Providers	Clinical Neuropsychologist	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
103K00000X	Behavioral Health & Social Service Providers	Behavioral Analyst	
103T00000X	Behavioral Health & Social Service Providers	Psychologist	
103TA0400X	Behavioral Health & Social Service Providers	Psychologist	Addiction (Substance Use Disorder)
103TA0700X	Behavioral Health & Social Service Providers	Psychologist	Adult Development & Aging
103TB0200X	Behavioral Health & Social Service Providers	Psychologist	Cognitive & Behavioral
103TC0700X	Behavioral Health & Social Service Providers	Psychologist	Clinical
103TC1900X	Behavioral Health & Social Service Providers	Psychologist	Counseling
103TC2200X	Behavioral Health & Social Service Providers	Psychologist	Clinical Child & Adolescent
103TE1000X	Behavioral Health & Social Service Providers	Psychologist	Educational
103TE1100X	Behavioral Health & Social Service Providers	Psychologist	Exercise & Sports
103TF0000X	Behavioral Health & Social Service Providers	Psychologist	Family
103TF0200X	Behavioral Health & Social Service Providers	Psychologist	Forensic



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
103TH0004X	Behavioral Health & Social Service Providers	Psychologist	Health
103TH0100X	Behavioral Health & Social Service Providers	Psychologist	Health Service
103TM1800X	Behavioral Health & Social Service Providers	Psychologist	Mental Retardation & Developmental Disabilities
103TP0016X	Behavioral Health & Social Service Providers	Psychologist	Prescribing (Medical)
103TP0814X	Behavioral Health & Social Service Providers	Psychologist	Psychoanalysis
103TP2700X	Behavioral Health & Social Service Providers	Psychologist	Psychotherapy
103TP2701X	Behavioral Health & Social Service Providers	Psychologist	Group Psychotherapy
103TR0400X	Behavioral Health & Social Service Providers	Psychologist	Rehabilitation
103TS0200X	Behavioral Health & Social Service Providers	Psychologist	School
104100000X	Behavioral Health & Social Service Providers	Social Worker	
1041C0700X	Behavioral Health & Social Service Providers	Social Worker	Clinical
1041S0200X	Behavioral Health & Social Service Providers	Social Worker	School



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
106E00000X	Behavioral Health & Social Service Providers	Assistant Behavior Analyst	
106H00000X	Behavioral Health & Social Service Providers	Marriage & Family Therapist	
106S00000X	Behavioral Health & Social Service Providers	Behavior Technician	
111N00000X	Chiropractic Providers	Chiropractor	
111NI0013X	Chiropractic Providers	Chiropractor	Independent Medical Examiner
111NI0900X	Chiropractic Providers	Chiropractor	Internist
111NN0400X	Chiropractic Providers	Chiropractor	Neurology
111NN1001X	Chiropractic Providers	Chiropractor	Nutrition
111NP0017X	Chiropractic Providers	Chiropractor	Pediatric Chiropractor
111NR0200X	Chiropractic Providers	Chiropractor	Radiology
111NR0400X	Chiropractic Providers	Chiropractor	Rehabilitation
111NS0005X	Chiropractic Providers	Chiropractor	Sports Physician
111NT0100X	Chiropractic Providers	Chiropractor	Thermography
111NX0100X	Chiropractic Providers	Chiropractor	Occupational Health
111NX0800X	Chiropractic Providers	Chiropractor	Orthopedic
122300000X	Dental Providers	Dentist	
1223D0001X	Dental Providers	Dentist	Dental Public Health



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
1223D0004X	Dental Providers	Dentist	Dentist Anesthesiologist
1223E0200X	Dental Providers	Dentist	Endodontics
1223G0001X	Dental Providers	Dentist	General Practice
1223P0106X	Dental Providers	Dentist	Oral and Maxillofacial Pathology
1223P0221X	Dental Providers	Dentist	Pediatric Dentistry
1223P0300X	Dental Providers	Dentist	Periodontics
1223P0700X	Dental Providers	Dentist	Prosthodontics
1223S0112X	Dental Providers	Dentist	Oral and Maxillofacial Surgery
1223X0008X	Dental Providers	Dentist	Oral and Maxillofacial Radiology
1223X0400X	Dental Providers	Dentist	Orthodontics and Dentofacial Orthopedics
122400000X	Dental Providers	Denturist	
124Q00000X	Dental Providers	Dental Hygienist	
125J00000X	Dental Providers	Dental Therapist	
125K00000X	Dental Providers	Advanced Practice Dental Therapist	
125Q00000X	Dental Providers	Oral Medicinist	
126800000X	Dental Providers	Dental Assistant	
126900000X	Dental Providers	Dental Laboratory Technician	
132700000X	Dietary & Nutritional Service Providers	Dietary Manager	
133N00000X	Dietary & Nutritional Service Providers	Nutritionist	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
133NN1002X	Dietary & Nutritional Service Providers	Nutritionist	Nutrition, Education
133V00000X	Dietary & Nutritional Service Providers	Dietitian, Registered	
133VN1004X	Dietary & Nutritional Service Providers	Dietitian, Registered	Nutrition, Pediatric
133VN1005X	Dietary & Nutritional Service Providers	Dietitian, Registered	Nutrition, Renal
133VN1006X	Dietary & Nutritional Service Providers	Dietitian, Registered	Nutrition, Metabolic
136A00000X	Dietary & Nutritional Service Providers	Dietetic Technician, Registered	
146D00000X	Emergency Medical Service Providers	Personal Emergency Response Attendant	
146L00000X	Emergency Medical Service Providers	Emergency Medical Technician, Paramedic	
146M00000X	Emergency Medical Service Providers	Emergency Medical Technician, Intermediate	
146N00000X	Emergency Medical Service Providers	Emergency Medical Technician, Basic	
152W00000X	Eye and Vision Services Providers	Optometrist	
152WC0802X	Eye and Vision Services Providers	Optometrist	Corneal and Contact Management
152WL0500X	Eye and Vision Services Providers	Optometrist	Low Vision Rehabilitation
152WP0200X	Eye and Vision Services Providers	Optometrist	Pediatrics
152WS0006X	Eye and Vision Services Providers	Optometrist	Sports Vision
152WV0400X	Eye and Vision Services Providers	Optometrist	Vision Therapy
152WX0102X	Eye and Vision Services Providers	Optometrist	Occupational Vision
156F00000X	Eye and Vision Services Providers	Technician/Technologist	
156FC0800X	Eye and Vision Services Providers	Technician/Technologist	Contact Lens



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
156FC0801X	Eye and Vision Services Providers	Technician/Technologist	Contact Lens Fitter
156FX1100X	Eye and Vision Services Providers	Technician/Technologist	Ophthalmic
156FX1101X	Eye and Vision Services Providers	Technician/Technologist	Ophthalmic Assistant
156FX1201X	Eye and Vision Services Providers	Technician/Technologist	Optometric Assistant
156FX1202X	Eye and Vision Services Providers	Technician/Technologist	Optometric Technician
156FX1700X	Eye and Vision Services Providers	Technician/Technologist	Ocularist
156FX1800X	Eye and Vision Services Providers	Technician/Technologist	Optician
156FX1900X	Eye and Vision Services Providers	Technician/Technologist	Orthoptist
163W00000X	Nursing Service Providers	Registered Nurse	
163WA0400X	Nursing Service Providers	Registered Nurse	Addiction (Substance Use Disorder)
163WA2000X	Nursing Service Providers	Registered Nurse	Administrator
163WC0200X	Nursing Service Providers	Registered Nurse	Critical Care Medicine
163WC0400X	Nursing Service Providers	Registered Nurse	Case Management
163WC1400X	Nursing Service Providers	Registered Nurse	College Health
163WC1500X	Nursing Service Providers	Registered Nurse	Community Health
163WC1600X	Nursing Service Providers	Registered Nurse	Continuing Education/Staff Development
163WC2100X	Nursing Service Providers	Registered Nurse	Continence Care
163WC3500X	Nursing Service Providers	Registered Nurse	Cardiac Rehabilitation
163WD0400X	Nursing Service Providers	Registered Nurse	Diabetes Educator



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
163WD1100X	Nursing Service Providers	Registered Nurse	Dialysis, Peritoneal
163WE0003X	Nursing Service Providers	Registered Nurse	Emergency
163WE0900X	Nursing Service Providers	Registered Nurse	Enterostomal Therapy
163WG0000X	Nursing Service Providers	Registered Nurse	General Practice
163WG0100X	Nursing Service Providers	Registered Nurse	Gastroenterology
163WG0600X	Nursing Service Providers	Registered Nurse	Gerontology
163WH0200X	Nursing Service Providers	Registered Nurse	Home Health
163WH0500X	Nursing Service Providers	Registered Nurse	Hemodialysis
163WH1000X	Nursing Service Providers	Registered Nurse	Hospice
163WI0500X	Nursing Service Providers	Registered Nurse	Infusion Therapy
163WI0600X	Nursing Service Providers	Registered Nurse	Infection Control
163WL0100X	Nursing Service Providers	Registered Nurse	Lactation Consultant
163WM0102X	Nursing Service Providers	Registered Nurse	Maternal Newborn
163WM0705X	Nursing Service Providers	Registered Nurse	Medical-Surgical
163WM1400X	Nursing Service Providers	Registered Nurse	Nurse Massage Therapist (NMT)
163WN0002X	Nursing Service Providers	Registered Nurse	Neonatal Intensive Care
163WN0003X	Nursing Service Providers	Registered Nurse	Neonatal, Low-Risk
163WN0300X	Nursing Service Providers	Registered Nurse	Nephrology
163WN0800X	Nursing Service Providers	Registered Nurse	Neuroscience



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
163WN1003X	Nursing Service Providers	Registered Nurse	Nutrition Support
163WP0000X	Nursing Service Providers	Registered Nurse	Pain Management
163WP0200X	Nursing Service Providers	Registered Nurse	Pediatrics
163WP0807X	Nursing Service Providers	Registered Nurse	Psych/Mental Health, Child & Adolescent
163WP0808X	Nursing Service Providers	Registered Nurse	Psych/Mental Health
163WP0809X	Nursing Service Providers	Registered Nurse	Psych/Mental Health, Adult
163WP1700X	Nursing Service Providers	Registered Nurse	Perinatal
163WP2201X	Nursing Service Providers	Registered Nurse	Ambulatory Care
163WR0006X	Nursing Service Providers	Registered Nurse	Registered Nurse First Assistant
163WR0400X	Nursing Service Providers	Registered Nurse	Rehabilitation
163WR1000X	Nursing Service Providers	Registered Nurse	Reproductive Endocrinology/Infertility
163WS0121X	Nursing Service Providers	Registered Nurse	Plastic Surgery
163WS0200X	Nursing Service Providers	Registered Nurse	School
163WU0100X	Nursing Service Providers	Registered Nurse	Urology
163WW0000X	Nursing Service Providers	Registered Nurse	Wound Care
163WW0101X	Nursing Service Providers	Registered Nurse	Women's Health Care, Ambulatory
163WX0002X	Nursing Service Providers	Registered Nurse	Obstetric, High-Risk
163WX0003X	Nursing Service Providers	Registered Nurse	Obstetric, Inpatient
163WX0106X	Nursing Service Providers	Registered Nurse	Occupational Health



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
163WX0200X	Nursing Service Providers	Registered Nurse	Oncology
163WX0601X	Nursing Service Providers	Registered Nurse	Otorhinolaryngology & Head-Neck
163WX0800X	Nursing Service Providers	Registered Nurse	Orthopedic
163WX1100X	Nursing Service Providers	Registered Nurse	Ophthalmic
163WX1500X	Nursing Service Providers	Registered Nurse	Ostomy Care
164W00000X	Nursing Service Providers	Licensed Practical Nurse	
164X00000X	Nursing Service Providers	Licensed Vocational Nurse	
167G00000X	Nursing Service Providers	Licensed Psychiatric Technician	
170100000X	Other Service Providers	Medical Genetics, Ph.D. Medical Genetics	
170300000X	Other Service Providers	Genetic Counselor, MS	
171100000X	Other Service Providers	Acupuncturist	
171M00000X	Other Service Providers	Case Manager/Care Coordinator	
171R00000X	Other Service Providers	Interpreter	
171W00000X	Other Service Providers	Contractor	
171WH0202X	Other Service Providers	Contractor	Home Modifications
171WV0202X	Other Service Providers	Contractor	Vehicle Modifications
172A00000X	Other Service Providers	Driver	
172M00000X	Other Service Providers	Mechanotherapist	
172V00000X	Other Service Providers	Community Health Worker	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
173000000X	Other Service Providers	Legal Medicine	
173C00000X	Other Service Providers	Reflexologist	
173F00000X	Other Service Providers	Sleep Specialist, PhD	
174200000X	Other Service Providers	Meals	
174400000X	Other Service Providers	Specialist	
1744G0900X	Other Service Providers	Specialist	Graphics Designer
1744P3200X	Other Service Providers	Specialist	Prosthetics Case Management
1744R1102X	Other Service Providers	Specialist	Research Study
1744R1103X	Other Service Providers	Specialist	Research Data Abstracter/Coder
174H00000X	Other Service Providers	Health Educator	
174M00000X	Other Service Providers	Veterinarian	
174MM1900X	Other Service Providers	Veterinarian	Medical Research
174N00000X	Other Service Providers	Lactation Consultant, Non-RN	
174V00000X	Other Service Providers	Clinical Ethicist	
175F00000X	Other Service Providers	Naturopath	
175L00000X	Other Service Providers	Homeopath	
175M00000X	Other Service Providers	Midwife, Lay	
175T00000X	Other Service Providers	Peer Specialist	
176B00000X	Other Service Providers	Midwife	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
176P00000X	Other Service Providers	Funeral Director	
177F00000X	Other Service Providers	Lodging	
1835G0303X	Pharmacy Service Providers	Pharmacist	Geriatric
1835N1003X	Pharmacy Service Providers	Pharmacist	Nutrition Support
1835P0018X	Pharmacy Service Providers	Pharmacist	Pharmacist Clinician (PhC)/ Clinical Pharmacy Specialist
1835P1200X	Pharmacy Service Providers	Pharmacist	Pharmacotherapy
1835P2201X	Pharmacy Service Providers	Pharmacist	Ambulatory Care
1835X0200X	Pharmacy Service Providers	Pharmacist	Oncology
183700000X	Pharmacy Service Providers	Pharmacy Technician	
193200000X	Group	Multi-Specialty	
193400000X	Group	Single Specialty	
202C00000X	Allopathic & Osteopathic Physicians	Independent Medical Examiner	
202K00000X	Allopathic & Osteopathic Physicians	Phlebology	
204C00000X	Allopathic & Osteopathic Physicians	Neuromusculoskeletal Medicine, Sports Medicine	
204D00000X	Allopathic & Osteopathic Physicians	Neuromusculoskeletal Medicine & OMM	
204E00000X	Allopathic & Osteopathic Physicians	Oral & Maxillofacial Surgery	
204F00000X	Allopathic & Osteopathic Physicians	Transplant Surgery	
204R00000X	Allopathic & Osteopathic Physicians	Electrodiagnostic Medicine	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
207K00000X	Allopathic & Osteopathic Physicians	Allergy & Immunology	
207KA0200X	Allopathic & Osteopathic Physicians	Allergy & Immunology	Allergy
207KI0005X	Allopathic & Osteopathic Physicians	Allergy & Immunology	Clinical & Laboratory Immunology
207L00000X	Allopathic & Osteopathic Physicians	Anesthesiology	
207LA0401X	Allopathic & Osteopathic Physicians	Anesthesiology	Addiction Medicine
207LC0200X	Allopathic & Osteopathic Physicians	Anesthesiology	Critical Care Medicine
207LH0002X	Allopathic & Osteopathic Physicians	Anesthesiology	Hospice and Palliative Medicine
207LP2900X	Allopathic & Osteopathic Physicians	Anesthesiology	Pain Medicine
207LP3000X	Allopathic & Osteopathic Physicians	Anesthesiology	Pediatric Anesthesiology
207N00000X	Allopathic & Osteopathic Physicians	Dermatology	
207ND0101X	Allopathic & Osteopathic Physicians	Dermatology	MOHS-Micrographic Surgery
207ND0900X	Allopathic & Osteopathic Physicians	Dermatology	Dermatopathology
207NI0002X	Allopathic & Osteopathic Physicians	Dermatology	Clinical & Laboratory Dermatological Immunology
207NP0225X	Allopathic & Osteopathic Physicians	Dermatology	Pediatric Dermatology
207NS0135X	Allopathic & Osteopathic Physicians	Dermatology	Procedural Dermatology
207P00000X	Allopathic & Osteopathic Physicians	Emergency Medicine	
207PE0004X	Allopathic & Osteopathic Physicians	Emergency Medicine	Emergency Medical Services
207PE0005X	Allopathic & Osteopathic Physicians	Emergency Medicine	Undersea and Hyperbaric Medicine



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
207PH0002X	Allopathic & Osteopathic Physicians	Emergency Medicine	Hospice and Palliative Medicine
207PP0204X	Allopathic & Osteopathic Physicians	Emergency Medicine	Pediatric Emergency Medicine
207PS0010X	Allopathic & Osteopathic Physicians	Emergency Medicine	Sports Medicine
207PT0002X	Allopathic & Osteopathic Physicians	Emergency Medicine	Medical Toxicology
207Q00000X	Allopathic & Osteopathic Physicians	Family Medicine	
207QA0000X	Allopathic & Osteopathic Physicians	Family Medicine	Adolescent Medicine
207QA0401X	Allopathic & Osteopathic Physicians	Family Medicine	Addiction Medicine
207QA0505X	Allopathic & Osteopathic Physicians	Family Medicine	Adult Medicine
207QB0002X	Allopathic & Osteopathic Physicians	Family Medicine	Obesity Medicine
207QG0300X	Allopathic & Osteopathic Physicians	Family Medicine	Geriatric Medicine
207QH0002X	Allopathic & Osteopathic Physicians	Family Medicine	Hospice and Palliative Medicine
207QS0010X	Allopathic & Osteopathic Physicians	Family Medicine	Sports Medicine
207QS1201X	Allopathic & Osteopathic Physicians	Family Medicine	Sleep Medicine
207R00000X	Allopathic & Osteopathic Physicians	Internal Medicine	
207RA0000X	Allopathic & Osteopathic Physicians	Internal Medicine	Adolescent Medicine
207RA0001X	Allopathic & Osteopathic Physicians	Internal Medicine	Advanced Heart Failure and Transplant Cardiology
207RA0201X	Allopathic & Osteopathic Physicians	Internal Medicine	Allergy & Immunology
207RA0401X	Allopathic & Osteopathic Physicians	Internal Medicine	Addiction Medicine



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
207RB0002X	Allopathic & Osteopathic Physicians	Internal Medicine	Obesity Medicine
207RC0000X	Allopathic & Osteopathic Physicians	Internal Medicine	Cardiovascular Disease
207RC0001X	Allopathic & Osteopathic Physicians	Internal Medicine	Clinical Cardiac Electrophysiology
207RC0200X	Allopathic & Osteopathic Physicians	Internal Medicine	Critical Care Medicine
207RE0101X	Allopathic & Osteopathic Physicians	Internal Medicine	Endocrinology, Diabetes & Metabolism
207RG0100X	Allopathic & Osteopathic Physicians	Internal Medicine	Gastroenterology
207RG0300X	Allopathic & Osteopathic Physicians	Internal Medicine	Geriatric Medicine
207RH0000X	Allopathic & Osteopathic Physicians	Internal Medicine	Hematology
207RH0002X	Allopathic & Osteopathic Physicians	Internal Medicine	Hospice and Palliative Medicine
207RH0003X	Allopathic & Osteopathic Physicians	Internal Medicine	Hematology & Oncology
207RH0005X	Allopathic & Osteopathic Physicians	Internal Medicine	Hypertension Specialist
207RI0001X	Allopathic & Osteopathic Physicians	Internal Medicine	Clinical & Laboratory Immunology
207RI0008X	Allopathic & Osteopathic Physicians	Internal Medicine	Hepatology
207RI0011X	Allopathic & Osteopathic Physicians	Internal Medicine	Interventional Cardiology
207RI0200X	Allopathic & Osteopathic Physicians	Internal Medicine	Infectious Disease
207RM1200X	Allopathic & Osteopathic Physicians	Internal Medicine	Magnetic Resonance Imaging (MRI)
207RN0300X	Allopathic & Osteopathic Physicians	Internal Medicine	Nephrology
207RP1001X	Allopathic & Osteopathic Physicians	Internal Medicine	Pulmonary Disease
207RR0500X	Allopathic & Osteopathic Physicians	Internal Medicine	Rheumatology



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
207RS0010X	Allopathic & Osteopathic Physicians	Internal Medicine	Sports Medicine
207RS0012X	Allopathic & Osteopathic Physicians	Internal Medicine	Sleep Medicine
207RT0003X	Allopathic & Osteopathic Physicians	Internal Medicine	Transplant Hepatology
207RX0202X	Allopathic & Osteopathic Physicians	Internal Medicine	Medical Oncology
207SC0300X	Allopathic & Osteopathic Physicians	Medical Genetics	Clinical Cytogenetic
207SG0201X	Allopathic & Osteopathic Physicians	Medical Genetics	Clinical Genetics (M.D.)
207SG0202X	Allopathic & Osteopathic Physicians	Medical Genetics	Clinical Biochemical Genetics
207SG0203X	Allopathic & Osteopathic Physicians	Medical Genetics	Clinical Molecular Genetics
207SG0205X	Allopathic & Osteopathic Physicians	Medical Genetics	Ph.D. Medical Genetics
207SM0001X	Allopathic & Osteopathic Physicians	Medical Genetics	Molecular Genetic Pathology
207T00000X	Allopathic & Osteopathic Physicians	Neurological Surgery	
207U00000X	Allopathic & Osteopathic Physicians	Nuclear Medicine	
207UN0901X	Allopathic & Osteopathic Physicians	Nuclear Medicine	Nuclear Cardiology
207UN0902X	Allopathic & Osteopathic Physicians	Nuclear Medicine	Nuclear Imaging & Therapy
207UN0903X	Allopathic & Osteopathic Physicians	Nuclear Medicine	In Vivo & In Vitro Nuclear Medicine
207V00000X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	
207VB0002X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	Obesity Medicine
207VC0200X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	Critical Care Medicine
207VE0102X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	Reproductive Endocrinology



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
207VF0040X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	Female Pelvic Medicine and Reconstructive Surgery
207VG0400X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	Gynecology
207VH0002X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	Hospice and Palliative Medicine
207VM0101X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	Maternal & Fetal Medicine
207VX0000X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	Obstetrics
207VX0201X	Allopathic & Osteopathic Physicians	Obstetrics & Gynecology	Gynecologic Oncology
207W00000X	Allopathic & Osteopathic Physicians	Ophthalmology	
207WX0009X	Allopathic & Osteopathic Physicians	Ophthalmology	Glaucoma Specialist
207WX0107X	Allopathic & Osteopathic Physicians	Ophthalmology	Retina Specialist
207WX0108X	Allopathic & Osteopathic Physicians	Ophthalmology	Uveitis and Ocular Inflammatory Disease
	Allopathic & Osteopathic Physicians	Ophthalmology	Neuro-ophthalmology
207WX0110X	Allopathic & Osteopathic Physicians	Ophthalmology	Pediatric Ophthalmology and Strabismus Specialist
207WX0120X	Allopathic & Osteopathic Physicians	Ophthalmology	Cornea and External Diseases Specialist
207WX0200X	Allopathic & Osteopathic Physicians	Ophthalmology	Ophthalmic Plastic and Reconstructive Surgery
207X00000X	Allopathic & Osteopathic Physicians	Orthopaedic Surgery	
207XP3100X	Allopathic & Osteopathic Physicians	Orthopaedic Surgery	Pediatric Orthopaedic Surgery
207XS0106X	Allopathic & Osteopathic Physicians	Orthopaedic Surgery	Hand Surgery
207XS0114X	Allopathic & Osteopathic Physicians	Orthopaedic Surgery	Adult Reconstructive Orthopaedic Surgery



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
207XS0117X	Allopathic & Osteopathic Physicians	Orthopaedic Surgery	Orthopaedic Surgery of the Spine
207XX0004X	Allopathic & Osteopathic Physicians	Orthopaedic Surgery	Foot and Ankle Surgery
207XX0005X	Allopathic & Osteopathic Physicians	Orthopaedic Surgery	Sports Medicine
207XX0801X	Allopathic & Osteopathic Physicians	Orthopaedic Surgery	Orthopaedic Trauma
207Y00000X	Allopathic & Osteopathic Physicians	Otolaryngology	
207YP0228X	Allopathic & Osteopathic Physicians	Otolaryngology	Pediatric Otolaryngology
207YS0012X	Allopathic & Osteopathic Physicians	Otolaryngology	Sleep Medicine
207YS0123X	Allopathic & Osteopathic Physicians	Otolaryngology	Facial Plastic Surgery
207YX0007X	Allopathic & Osteopathic Physicians	Otolaryngology	Plastic Surgery within the Head & Neck
207YX0602X	Allopathic & Osteopathic Physicians	Otolaryngology	Otolaryngic Allergy
207YX0901X	Allopathic & Osteopathic Physicians	Otolaryngology	Otology & Neurotology
207YX0905X	Allopathic & Osteopathic Physicians	Otolaryngology	Otolaryngology/Facial Plastic Surgery
207ZB0001X	Allopathic & Osteopathic Physicians	Pathology	Blood Banking & Transfusion Medicine
207ZC0006X	Allopathic & Osteopathic Physicians	Pathology	Clinical Pathology
207ZC0008X	Allopathic & Osteopathic Physicians	Pathology	Clinical Informatics
207ZC0500X	Allopathic & Osteopathic Physicians	Pathology	Cytopathology
207ZD0900X	Allopathic & Osteopathic Physicians	Pathology	Dermatopathology
207ZF0201X	Allopathic & Osteopathic Physicians	Pathology	Forensic Pathology
207ZH0000X	Allopathic & Osteopathic Physicians	Pathology	Hematology



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
207ZI0100X	Allopathic & Osteopathic Physicians	Pathology	Immunopathology
207ZM0300X	Allopathic & Osteopathic Physicians	Pathology	Medical Microbiology
207ZN0500X	Allopathic & Osteopathic Physicians	Pathology	Neuropathology
207ZP0007X	Allopathic & Osteopathic Physicians	Pathology	Molecular Genetic Pathology
207ZP0101X	Allopathic & Osteopathic Physicians	Pathology	Anatomic Pathology
207ZP0102X	Allopathic & Osteopathic Physicians	Pathology	Anatomic Pathology & Clinical Pathology
207ZP0104X	Allopathic & Osteopathic Physicians	Pathology	Chemical Pathology
207ZP0105X	Allopathic & Osteopathic Physicians	Pathology	Clinical Pathology/Laboratory Medicine
207ZP0213X	Allopathic & Osteopathic Physicians	Pathology	Pediatric Pathology
208000000X	Allopathic & Osteopathic Physicians	Pediatrics	
2080A0000X	Allopathic & Osteopathic Physicians	Pediatrics	Adolescent Medicine
2080B0002X	Allopathic & Osteopathic Physicians	Pediatrics	Obesity Medicine
2080C0008X	Allopathic & Osteopathic Physicians	Pediatrics	Child Abuse Pediatrics
2080H0002X	Allopathic & Osteopathic Physicians	Pediatrics	Hospice and Palliative Medicine
2080I0007X	Allopathic & Osteopathic Physicians	Pediatrics	Clinical & Laboratory Immunology
2080N0001X	Allopathic & Osteopathic Physicians	Pediatrics	Neonatal-Perinatal Medicine
2080P0006X	Allopathic & Osteopathic Physicians	Pediatrics	Developmental – Behavioral Pediatrics
2080P0008X	Allopathic & Osteopathic Physicians	Pediatrics	Neurodevelopmental Disabilities
2080P0201X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Allergy/Immunology



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2080P0202X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Cardiology
2080P0203X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Critical Care Medicine
2080P0204X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Emergency Medicine
2080P0205X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Endocrinology
2080P0206X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Gastroenterology
2080P0207X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Hematology-Oncology
2080P0208X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Infectious Diseases
2080P0210X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Nephrology
2080P0214X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Pulmonology
2080P0216X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Rheumatology
2080S0010X	Allopathic & Osteopathic Physicians	Pediatrics	Sports Medicine
2080S0012X	Allopathic & Osteopathic Physicians	Pediatrics	Sleep Medicine
2080T0002X	Allopathic & Osteopathic Physicians	Pediatrics	Medical Toxicology
2080T0004X	Allopathic & Osteopathic Physicians	Pediatrics	Pediatric Transplant Hepatology
208100000X	Allopathic & Osteopathic Physicians	Physical Medicine & Rehabilitation	
2081H0002X	Allopathic & Osteopathic Physicians	Physical Medicine & Rehabilitation	Hospice and Palliative Medicine
2081N0008X	Allopathic & Osteopathic Physicians	Physical Medicine & Rehabilitation	Neuromuscular Medicine
2081P0004X	Allopathic & Osteopathic Physicians	Physical Medicine & Rehabilitation	Spinal Cord Injury Medicine
2081P0010X	Allopathic & Osteopathic Physicians	Physical Medicine & Rehabilitation	Pediatric Rehabilitation Medicine



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2081P0301X	Allopathic & Osteopathic Physicians	Physical Medicine & Rehabilitation	Brain Injury Medicine
2081P2900X	Allopathic & Osteopathic Physicians	Physical Medicine & Rehabilitation	Pain Medicine
2081S0010X	Allopathic & Osteopathic Physicians	Physical Medicine & Rehabilitation	Sports Medicine
208200000X	Allopathic & Osteopathic Physicians	Plastic Surgery	
2082S0099X	Allopathic & Osteopathic Physicians	Plastic Surgery	Plastic Surgery Within the Head and Neck
2082S0105X	Allopathic & Osteopathic Physicians	Plastic Surgery	Surgery of the Hand
2083A0100X	Allopathic & Osteopathic Physicians	Preventive Medicine	Aerospace Medicine
2083B0002X	Allopathic & Osteopathic Physicians	Preventive Medicine	Obesity Medicine
2083C0008X	Allopathic & Osteopathic Physicians	Preventive Medicine	Clinical Informatics
2083P0011X	Allopathic & Osteopathic Physicians	Preventive Medicine	Undersea and Hyperbaric Medicine
2083P0500X	Allopathic & Osteopathic Physicians	Preventive Medicine	Preventive Medicine/Occupational Environmental Medicine
2083P0901X	Allopathic & Osteopathic Physicians	Preventive Medicine	Public Health & General Preventive Medicine
2083S0010X	Allopathic & Osteopathic Physicians	Preventive Medicine	Sports Medicine
2083T0002X	Allopathic & Osteopathic Physicians	Preventive Medicine	Medical Toxicology
2083X0100X	Allopathic & Osteopathic Physicians	Preventive Medicine	Occupational Medicine
2084A0401X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Addiction Medicine
2084A2900X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Neurocritical Care
2084B0002X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Obesity Medicine



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2084B0040X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Behavioral Neurology & Neuropsychiatry
2084D0003X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Diagnostic Neuroimaging
2084F0202X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Forensic Psychiatry
2084H0002X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Hospice and Palliative Medicine
2084N0008X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Neuromuscular Medicine
2084N0400X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Neurology
2084N0402X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Neurology with Special Qualifications in Child Neurology
2084N0600X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Clinical Neurophysiology
2084P0005X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Neurodevelopmental Disabilities
2084P0015X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Psychosomatic Medicine
2084P0301X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Brain Injury Medicine
2084P0800X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Psychiatry
2084P0802X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Addiction Psychiatry
2084P0804X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Child & Adolescent Psychiatry
2084P0805X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Geriatric Psychiatry
2084P2900X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Pain Medicine
2084S0010X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Sports Medicine
2084S0012X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Sleep Medicine



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2084V0102X	Allopathic & Osteopathic Physicians	Psychiatry & Neurology	Vascular Neurology
2085B0100X	Allopathic & Osteopathic Physicians	Radiology	Body Imaging
2085D0003X	Allopathic & Osteopathic Physicians	Radiology	Diagnostic Neuroimaging
2085N0700X	Allopathic & Osteopathic Physicians	Radiology	Neuroradiology
2085N0904X	Allopathic & Osteopathic Physicians	Radiology	Nuclear Radiology
2085P0229X	Allopathic & Osteopathic Physicians	Radiology	Pediatric Radiology
2085R0001X	Allopathic & Osteopathic Physicians	Radiology	Radiation Oncology
2085R0202X	Allopathic & Osteopathic Physicians	Radiology	Diagnostic Radiology
2085R0203X	Allopathic & Osteopathic Physicians	Radiology	Therapeutic Radiology
2085R0204X	Allopathic & Osteopathic Physicians	Radiology	Vascular & Interventional Radiology
2085R0205X	Allopathic & Osteopathic Physicians	Radiology	Radiological Physics
2085U0001X	Allopathic & Osteopathic Physicians	Radiology	Diagnostic Ultrasound
208600000X	Allopathic & Osteopathic Physicians	Surgery	
2086H0002X	Allopathic & Osteopathic Physicians	Surgery	Hospice and Palliative Medicine
2086S0102X	Allopathic & Osteopathic Physicians	Surgery	Surgical Critical Care
2086S0105X	Allopathic & Osteopathic Physicians	Surgery	Surgery of the Hand
2086S0120X	Allopathic & Osteopathic Physicians	Surgery	Pediatric Surgery
2086S0122X	Allopathic & Osteopathic Physicians	Surgery	Plastic and Reconstructive Surgery
2086S0127X	Allopathic & Osteopathic Physicians	Surgery	Trauma Surgery



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2086S0129X	Allopathic & Osteopathic Physicians	Surgery	Vascular Surgery
2086X0206X	Allopathic & Osteopathic Physicians	Surgery	Surgical Oncology
208800000X	Allopathic & Osteopathic Physicians	Urology	
2088F0040X	Allopathic & Osteopathic Physicians	Urology	Female Pelvic Medicine and Reconstructive Surgery
2088P0231X	Allopathic & Osteopathic Physicians	Urology	Pediatric Urology
208C00000X	Allopathic & Osteopathic Physicians	Colon & Rectal Surgery	
208D00000X	Allopathic & Osteopathic Physicians	General Practice	
208G00000X	Allopathic & Osteopathic Physicians	Thoracic Surgery (Cardiothoracic Vascular Surgery)	
208M00000X	Allopathic & Osteopathic Physicians	Hospitalist	
208U00000X	Allopathic & Osteopathic Physicians	Clinical Pharmacology	
208VP0000X	Allopathic & Osteopathic Physicians	Pain Medicine	Pain Medicine
208VP0014X	Allopathic & Osteopathic Physicians	Pain Medicine	Interventional Pain Medicine
209800000X	Allopathic & Osteopathic Physicians	Legal Medicine	
211D00000X	Podiatric Medicine & Surgery Service Providers	Assistant, Podiatric	
213E00000X	Podiatric Medicine & Surgery Service Providers	Podiatrist	
213EP0504X	Podiatric Medicine & Surgery Service Providers	Podiatrist	Public Medicine



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
213EP1101X	Podiatric Medicine & Surgery Service Providers	Podiatrist	Primary Podiatric Medicine
213ER0200X	Podiatric Medicine & Surgery Service Providers	Podiatrist	Radiology
213ES0000X	Podiatric Medicine & Surgery Service Providers	Podiatrist	Sports Medicine
213ES0103X	Podiatric Medicine & Surgery Service Providers	Podiatrist	Foot & Ankle Surgery
213ES0131X	Podiatric Medicine & Surgery Service Providers	Podiatrist	Foot Surgery
222Q00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Developmental Therapist	
222Z00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Orthotist	
224900000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Mastectomy Fitter	
224L00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Pedorthist	
224P00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Prosthetist	
224Y00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Clinical Exercise Physiologist	
224Z00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapy Assistant	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
224ZE0001X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapy Assistant	Environmental Modification
224ZF0002X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapy Assistant	Feeding, Eating & Swallowing
224ZR0403X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapy Assistant	Driving and Community Mobility
225000000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Orthotic Fitter	
225100000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	
2251C2600X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Cardiopulmonary
2251E1200X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Ergonomics
2251E1300X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Electrophysiology, Clinical
2251G0304X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Geriatrics
2251H1200X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Hand
2251H1300X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Human Factors
2251N0400X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Neurology



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2251P0200X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Pediatrics
2251S0007X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Sports
2251X0800X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapist	Orthopedic
225200000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Physical Therapy Assistant	
225400000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Rehabilitation Practitioner	
225500000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Specialist/Technologist	
2255A2300X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Specialist/Technologist	Athletic Trainer
2255R0406X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Specialist/Technologist	Rehabilitation, Blind
225600000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Dance Therapist	
225700000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Massage Therapist	
225800000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Recreation Therapist	
225A00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Music Therapist	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
225B00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Pulmonary Function Technologist	
225C00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Rehabilitation Counselor	
225CA2400X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Rehabilitation Counselor	Assistive Technology Practitioner
225CA2500X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Rehabilitation Counselor	Assistive Technology Supplier
225CX0006X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Rehabilitation Counselor	Orientation and Mobility Training Provider
225X00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	
225XE0001X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Environmental Modification
225XE1200X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Ergonomics
225XF0002X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Feeding, Eating & Swallowing
225XG0600X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Gerontology
225XH1200X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Hand
225XH1300X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Human Factors



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
225XL0004X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Low Vision
225XM0800X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Mental Health
225XN1300X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Neurorehabilitation
225XP0019X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Physical Rehabilitation
225XP0200X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Pediatrics
225XR0403X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Occupational Therapist	Driving and Community Mobility
226000000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Recreational Therapist Assistant	
226300000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Kinesiotherapist	
227800000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	
2278C0205X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Critical Care
2278E1000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Educational
2278G0305X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Geriatric Care



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2278G1100X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	General Care
2278H0200X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Home Health
2278P1004X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Pulmonary Diagnostics
2278P1005X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Pulmonary Rehabilitation
2278P1006X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Pulmonary Function Technologist
2278P3800X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Palliative/Hospice
2278P3900X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Neonatal/Pediatrics
2278P4000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	Patient Transport
2278S1500X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Certified	SNF/Subacute Care
227900000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	
2279C0205X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	Critical Care
2279E1000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	Educational



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2279G0305X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	Geriatric Care
2279G1100X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	General Care
2279Н0200Х	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	Home Health
2279P1004X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	Pulmonary Diagnostics
2279P1005X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	Pulmonary Rehabilitation
2279P1006X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	Pulmonary Function Technologist
2279P3900X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	Neonatal/Pediatrics
2279S1500X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Respiratory Therapist, Registered	SNF/Subacute Care
229N00000X	Respiratory, Developmental, Rehabilitative and Restorative Service Providers	Anaplastologist	
231H00000X	Speech, Language and Hearing Service Providers	Audiologist	
231HA2400X	Speech, Language and Hearing Service Providers	Audiologist	Assistive Technology Practitioner
231HA2500X	Speech, Language and Hearing Service Providers	Audiologist	Assistive Technology Supplier



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
235500000X	Speech, Language and Hearing Service Providers	Specialist/Technologist	
2355A2700X	Speech, Language and Hearing Service Providers	Specialist/Technologist	Audiology Assistant
2355S0801X	Speech, Language and Hearing Service Providers	Specialist/Technologist	Speech-Language Assistant
235Z00000X	Speech, Language and Hearing Service Providers	Speech-Language Pathologist	
237600000X	Speech, Language and Hearing Service Providers	Audiologist-Hearing Aid Fitter	
237700000X	Speech, Language and Hearing Service Providers	Hearing Instrument Specialist	
242T00000X	Technologists, Technicians & Other Technical Service Providers	Perfusionist	
243U00000X	Technologists, Technicians & Other Technical Service Providers	Radiology Practitioner Assistant	
246Q00000X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	
246QC1000X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	Chemistry
246QC2700X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	Cytotechnology
246QH0000X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	Hematology



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
246QH0600X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	Histology
246QI0000X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	Immunology
246QL0900X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	Laboratory Management
246QL0901X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	Laboratory Management, Diplomate
246QM0706X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	Medical Technologist
246QM0900X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Pathology	Microbiology
246R00000X	Technologists, Technicians & Other Technical Service Providers	Technician, Pathology	
246RH0600X	Technologists, Technicians & Other Technical Service Providers	Technician, Pathology	Histology
246RM2200X	Technologists, Technicians & Other Technical Service Providers	Technician, Pathology	Medical Laboratory
246RP1900X	Technologists, Technicians & Other Technical Service Providers	Technician, Pathology	Phlebotomy
246W00000X	Technologists, Technicians & Other Technical Service Providers	Technician, Cardiology	
246X00000X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Cardiovascular	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
246XC2901X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Cardiovascular	Cardiovascular Invasive Specialist
246XC2903X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Cardiovascular	Vascular Specialist
246XS1301X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Cardiovascular	Sonography
246Y00000X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Health Info	
246YC3302X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Health Info	Coding Specialist, Physician Office Based
246YR1600X	Technologists, Technicians & Other Technical Service Providers	Spec/Tech, Health Info	Registered Record Administrator
246Z00000X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	
246ZA2600X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	Art, Medical
246ZB0301X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	Biomedical Engineering
246ZB0600X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	Biostatistician
246ZC0007X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	Surgical Assistant
246ZE0500X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	EEG



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
246ZE0600X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	Electroneurodiagnostic
246ZG1000X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	Geneticist, Medical (PhD)
246ZN0300X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	Nephrology
246ZS0410X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	Surgical Technologist
246ZX2200X	Technologists, Technicians & Other Technical Service Providers	Specialist/Technologist, Other	Orthopedic Assistant
247000000X	Technologists, Technicians & Other Technical Service Providers	Technician, Health Information	
2470A2800X	Technologists, Technicians & Other Technical Service Providers	Technician, Health Information	Assistant Record Technician
247100000X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	
2471B0102X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Bone Densitometry
2471C1101X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Cardiovascular-Interventional Technology
2471C1106X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Cardiac-Interventional Technology
2471C3401X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Computed Tomography



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2471C3402X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Radiography
2471M1202X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Magnetic Resonance Imaging
2471M2300X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Mammography
2471N0900X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Nuclear Medicine Technology
2471Q0001X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Quality Management
2471R0002X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Radiation Therapy
2471S1302X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Sonography
2471V0105X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Vascular Sonography
2471V0106X	Technologists, Technicians & Other Technical Service Providers	Radiologic Technologist	Vascular-Interventional Technology
247200000X	Technologists, Technicians & Other Technical Service Providers	Technician, Other	
2472B0301X	Technologists, Technicians & Other Technical Service Providers	Technician, Other	Biomedical Engineering
2472D0500X	Technologists, Technicians & Other Technical Service Providers	Technician, Other	Darkroom



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
2472E0500X	Technologists, Technicians & Other Technical Service Providers	Technician, Other	EEG
2472R0900X	Technologists, Technicians & Other Technical Service Providers	Technician, Other	Renal Dialysis
247ZC0005X	Technologists, Technicians & Other Technical Service Providers	Pathology	Clinical Laboratory Director, Non-physician
251300000X	Agencies	Local Education Agency (LEA)	
251B00000X	Agencies	Case Management	
251C00000X	Agencies	Day Training, Developmentally Disabled Services	
251E00000X	Agencies	Home Health	
251F00000X	Agencies	Home Infusion	
251G00000X	Agencies	Hospice Care, Community Based	
251J00000X	Agencies	Nursing Care	
251K00000X	Agencies	Public Health or Welfare	
251S00000X	Agencies	Community/Behavioral Health	
251T00000X	Agencies	PACE Provider Organization	
251V00000X	Agencies	Voluntary or Charitable	
251X00000X	Agencies	Supports Brokerage	
252Y00000X	Agencies	Early Intervention Provider Agency	
253J00000X	Agencies	Foster Care Agency	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
253Z00000X	Agencies	In Home Supportive Care	
261Q00000X	Ambulatory Health Care Facilities	Clinic/Center	
261QA0005X	Ambulatory Health Care Facilities	Clinic/Center	Ambulatory Family Planning Facility
261QA0006X	Ambulatory Health Care Facilities	Clinic/Center	Ambulatory Fertility Facility
261QA0600X	Ambulatory Health Care Facilities	Clinic/Center	Adult Day Care
261QA0900X	Ambulatory Health Care Facilities	Clinic/Center	Amputee
261QA1903X	Ambulatory Health Care Facilities	Clinic/Center	Ambulatory Surgical
261QA3000X	Ambulatory Health Care Facilities	Clinic/Center	Augmentative Communication
261QB0400X	Ambulatory Health Care Facilities	Clinic/Center	Birthing
261QC0050X	Ambulatory Health Care Facilities	Clinic/Center	Critical Access Hospital
261QC1500X	Ambulatory Health Care Facilities	Clinic/Center	Community Health
261QC1800X	Ambulatory Health Care Facilities	Clinic/Center	Corporate Health
261QD0000X	Ambulatory Health Care Facilities	Clinic/Center	Dental
261QD1600X	Ambulatory Health Care Facilities	Clinic/Center	Developmental Disabilities
261QE0002X	Ambulatory Health Care Facilities	Clinic/Center	Emergency Care
261QE0700X	Ambulatory Health Care Facilities	Clinic/Center	End-Stage Renal Disease (ESRD) Treatment
261QE0800X	Ambulatory Health Care Facilities	Clinic/Center	Endoscopy
261QF0050X	Ambulatory Health Care Facilities	Clinic/Center	Family Planning, Non-Surgical
261QF0400X	Ambulatory Health Care Facilities	Clinic/Center	Federally Qualified Health Center (FQHC)



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
261QG0250X	Ambulatory Health Care Facilities	Clinic/Center	Genetics
261QH0100X	Ambulatory Health Care Facilities	Clinic/Center	Health Service
261QH0700X	Ambulatory Health Care Facilities	Clinic/Center	Hearing and Speech
261QI0500X	Ambulatory Health Care Facilities	Clinic/Center	Infusion Therapy
261QL0400X	Ambulatory Health Care Facilities	Clinic/Center	Lithotripsy
261QM0801X	Ambulatory Health Care Facilities	Clinic/Center	Mental Health (Including Community Mental Health Center)
261QM0850X	Ambulatory Health Care Facilities	Clinic/Center	Adult Mental Health
261QM0855X	Ambulatory Health Care Facilities	Clinic/Center	Adolescent and Children Mental Health
261QM1000X	Ambulatory Health Care Facilities	Clinic/Center	Migrant Health
261QM1200X	Ambulatory Health Care Facilities	Clinic/Center	Magnetic Resonance Imaging (MRI)
261QM1300X	Ambulatory Health Care Facilities	Clinic/Center	Multi-Specialty
261QM2500X	Ambulatory Health Care Facilities	Clinic/Center	Medical Specialty
261QM2800X	Ambulatory Health Care Facilities	Clinic/Center	Methadone Clinic
261QM3000X	Ambulatory Health Care Facilities	Clinic/Center	Medically Fragile Intants and Children Day Care
261QP0904X	Ambulatory Health Care Facilities	Clinic/Center	Public Health, Federal
261QP0905X	Ambulatory Health Care Facilities	Clinic/Center	Public Health, State or Local
261QP1100X	Ambulatory Health Care Facilities	Clinic/Center	Podiatric
261QP2000X	Ambulatory Health Care Facilities	Clinic/Center	Physical Therapy



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
261QP2300X	Ambulatory Health Care Facilities	Clinic/Center	Primary Care
261QP3300X	Ambulatory Health Care Facilities	Clinic/Center	Pain
261QR0200X	Ambulatory Health Care Facilities	Clinic/Center	Radiology
261QR0206X	Ambulatory Health Care Facilities	Clinic/Center	Radiology, Mammography
261QR0207X	Ambulatory Health Care Facilities	Clinic/Center	Radiology, Mobile Mammography
261QR0208X	Ambulatory Health Care Facilities	Clinic/Center	Radiology, Mobile
261QR0400X	Ambulatory Health Care Facilities	Clinic/Center	Rehabilitation
261QR0401X	Ambulatory Health Care Facilities	Clinic/Center	Rehabilitation, Comprehensive Outpatient Rehabilitation Facility (CORF)
261QR0404X	Ambulatory Health Care Facilities	Clinic/Center	Rehabilitation, Cardiac Facilities
261QR0405X	Ambulatory Health Care Facilities	Clinic/Center	Rehabilitation, Substance Use Disorder
261QR0800X	Ambulatory Health Care Facilities	Clinic/Center	Recovery Care
261QR1100X	Ambulatory Health Care Facilities	Clinic/Center	Research
261QR1300X	Ambulatory Health Care Facilities	Clinic/Center	Rural Health
261QS0112X	Ambulatory Health Care Facilities	Clinic/Center	Oral and Maxillofacial Surgery
261QS0132X	Ambulatory Health Care Facilities	Clinic/Center	Ophthalmologic Surgery
261QS1000X	Ambulatory Health Care Facilities	Clinic/Center	Student Health
261QS1200X	Ambulatory Health Care Facilities	Clinic/Center	Sleep Disorder Diagnostic
261QU0200X	Ambulatory Health Care Facilities	Clinic/Center	Urgent Care



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
261QX0100X	Ambulatory Health Care Facilities	Clinic/Center	Occupational Medicine
261QX0200X	Ambulatory Health Care Facilities	Clinic/Center	Oncology
261QX0203X	Ambulatory Health Care Facilities	Clinic/Center	Oncology, Radiation
273100000X	Hospital Units	Epilepsy Unit	
273R00000X	Hospital Units	Psychiatric Unit	
273Y00000X	Hospital Units	Rehabilitation Unit	
275N00000X	Hospital Units	Medicare Defined Swing Bed Unit	
276400000X	Hospital Units	Rehabilitation, Substance Use Disorder Unit	
281P00000X	Hospitals	Chronic Disease Hospital	
281PC2000X	Hospitals	Chronic Disease Hospital	Children
282E00000X	Hospitals	Long Term Care Hospital	
282N00000X	Hospitals	General Acute Care Hospital	
282NC0060X	Hospitals	General Acute Care Hospital	Critical Access
282NC2000X	Hospitals	General Acute Care Hospital	Children
282NR1301X	Hospitals	General Acute Care Hospital	Rural
282NW0100X	Hospitals	General Acute Care Hospital	Women
283Q00000X	Hospitals	Psychiatric Hospital	
283X00000X	Hospitals	Rehabilitation Hospital	
283XC2000X	Hospitals	Rehabilitation Hospital	Children



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
284300000X	Hospitals	Special Hospital	
291U00000X	Laboratories	Clinical Medical Laboratory	
292200000X	Laboratories	Dental Laboratory	
293D00000X	Laboratories	Physiological Laboratory	
302F00000X	Managed Care Organizations	Exclusive Provider Organization	
302R00000X	Managed Care Organizations	Health Maintenance Organization	
305R00000X	Managed Care Organizations	Preferred Provider Organization	
305S00000X	Managed Care Organizations	Point of Service	
310400000X	Nursing & Custodial Care Facilities	Assisted Living Facility	
3104A0625X	Nursing & Custodial Care Facilities	Assisted Living Facility	Assisted Living, Mental Illness
3104A0630X	Nursing & Custodial Care Facilities	Assisted Living Facility	Assisted Living, Behavioral Disturbances
310500000X	Nursing & Custodial Care Facilities	Intermediate Care Facility, Mental Illness	
311500000X	Nursing & Custodial Care Facilities	Alzheimer Center (Dementia Center)	
311Z00000X	Nursing & Custodial Care Facilities	Custodial Care Facility	
311ZA0620X	Nursing & Custodial Care Facilities	Custodial Care Facility	Adult Care Home
313M00000X	Nursing & Custodial Care Facilities	Nursing Facility/Intermediate Care Facility	
314000000X	Nursing & Custodial Care Facilities	Skilled Nursing Facility	
3140N1450X	Nursing & Custodial Care Facilities	Skilled Nursing Facility	Nursing Care, Pediatric
315D00000X	Nursing & Custodial Care Facilities	Hospice, Inpatient	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
315P00000X	Nursing & Custodial Care Facilities	Intermediate Care Facility, Mentally Retarded	
320600000X	Residential Treatment Facilities	Residential Treatment Facility, Mental Retardation and/or Developmental Disabilities	
320700000X	Residential Treatment Facilities	Residential Treatment Facility, Physical Disabilities	
320800000X	Residential Treatment Facilities	Community Based Residential Treatment Facility, Mental Illness	
320900000X	Residential Treatment Facilities	Community Based Residential Treatment, Mental Retardation and/or Developmental Disabilities	
322D00000X	Residential Treatment Facilities	Residential Treatment Facility, Emotionally Disturbed Children	
323P00000X	Residential Treatment Facilities	Psychiatric Residential Treatment Facility	
324500000X	Residential Treatment Facilities	Substance Abuse Rehabilitation Facility	
3245S0500X	Residential Treatment Facilities	Substance Abuse Rehabilitation Facility	Substance Abuse Treatment, Children
331L00000X	Suppliers	Blood Bank	
332900000X	Suppliers	Non-Pharmacy Dispensing Site	
332B00000X	Suppliers	Durable Medical Equipment & Medical Supplies	
332BC3200X	Suppliers	Durable Medical Equipment & Medical Supplies	Customized Equipment
332BD1200X	Suppliers	Durable Medical Equipment & Medical Supplies	Dialysis Equipment & Supplies
332BN1400X	Suppliers	Durable Medical Equipment & Medical Supplies	Nursing Facility Supplies
332BP3500X	Suppliers	Durable Medical Equipment & Medical Supplies	Parenteral & Enteral Nutrition
332BX2000X	Suppliers	Durable Medical Equipment & Medical Supplies	Oxygen Equipment & Supplies



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
332G00000X	Suppliers	Eye Bank	
332H00000X	Suppliers	Eyewear Supplier (Equipment, not the service)	
332S00000X	Suppliers	Hearing Aid Equipment	
332U00000X	Suppliers	Home Delivered Meals	
333300000X	Suppliers	Emergency Response System Companies	
3336C0002X	Suppliers	Pharmacy	Clinic Pharmacy
3336C0004X	Suppliers	Pharmacy	Compounding Pharmacy
3336Н0001Х	Suppliers	Pharmacy	Home Infusion Therapy Pharmacy
3336I0012X	Suppliers	Pharmacy	Institutional Pharmacy
3336L0003X	Suppliers	Pharmacy	Long Term Care Pharmacy
3336M0002X	Suppliers	Pharmacy	Mail Order Pharmacy
3336M0003X	Suppliers	Pharmacy	Managed Care Organization Pharmacy
3336N0007X	Suppliers	Pharmacy	Nuclear Pharmacy
3336S0011X	Suppliers	Pharmacy	Specialty Pharmacy
335E00000X	Suppliers	Prosthetic/Orthotic Supplier	
335G00000X	Suppliers	Medical Foods Supplier	
335U00000X	Suppliers	Organ Procurement Organization	
335V00000X	Suppliers	Portable X-ray and/or Other Portable Diagnostic Imaging Supplier	



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
341600000X	Transportation Services	Ambulance	
3416A0800X	Transportation Services	Ambulance	Air Transport
3416L0300X	Transportation Services	Ambulance	Land Transport
3416S0300X	Transportation Services	Ambulance	Water Transport
343800000X	Transportation Services	Secured Medical Transport (VAN)	
343900000X	Transportation Services	Non-emergency Medical Transport (VAN)	
344600000X	Transportation Services	Taxi	
344800000X	Transportation Services	Air Carrier	
347B00000X	Transportation Services	Bus	
347C00000X	Transportation Services	Private Vehicle	
347E00000X	Transportation Services	Transportation Broker	
363A00000X	Physician Assistants & Advanced Practice Nursing Providers	Physician Assistant	
363AM0700X	Physician Assistants & Advanced Practice Nursing Providers	Physician Assistant	Medical
363AS0400X	Physician Assistants & Advanced Practice Nursing Providers	Physician Assistant	Surgical Technologist
363L00000X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	
363LA2100X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Acute Care



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
363LA2200X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Adult Health
363LC0200X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Critical Care Medicine
363LC1500X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Community Health
363LF0000X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Family
363LG0600X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Gerontology
363LN0000X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Neonatal
363LN0005X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Neonatal, Critical Care
363LP0200X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Pediatrics
363LP0222X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Pediatrics, Critical Care
363LP0808X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Psych/Mental Health
363LP1700X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Perinatal
363LP2300X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Primary Care



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
363LS0200X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	School
363LW0102X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Women's Health
363LX0001X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Obstetrics & Gynecology
363LX0106X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Practitioner	Occupational Health
364S00000X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	
364SA2100X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Acute Care
364SA2200X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Adult Health
364SC0200X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Critical Care Medicine
364SC1501X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Community Health/Public Health
364SC2300X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Chronic Care
364SE0003X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Emergency
364SF0001X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Family Health



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
364SG0600X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Gerontology
364SH0200X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Home Health
364SH1100X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Holistic
364SL0600X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Long-Term Care
364SM0705X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Medical-Surgical
364SN0000X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Neonatal
364SN0800X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Neuroscience
364SP0200X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Pediatrics
364SP0807X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Psych/Mental Health, Child & Adolescent
364SP0808X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Psych/Mental Health
364SP0809X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Psych/Mental Health, Adult
364SP0810X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Psych/Mental Health, Child & Family



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
364SP0811X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Psych/Mental Health, Chronically Ill
364SP0812X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Psych/Mental Health, Community
364SP0813X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Psych/Mental Health, Geropsychiatric
364SP1700X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Perinatal
364SP2800X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Perioperative
364SR0400X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Rehabilitation
364SS0200X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	School
364ST0500X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Transplantation
364SW0102X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Women's Health
364SX0106X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Occupational Health
364SX0200X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Oncology
364SX0204X	Physician Assistants & Advanced Practice Nursing Providers	Clinical Nurse Specialist	Oncology, Pediatrics



TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
367500000X	Physician Assistants & Advanced Practice Nursing Providers	Nurse Anesthetist, Certified Registered	
367A00000X	Physician Assistants & Advanced Practice Nursing Providers	Advanced Practice Midwife	
367H00000X	Physician Assistants & Advanced Practice Nursing Providers	Anesthesiologist Assistant	
372500000X	Nursing Service Related Providers	Chore Provider	
372600000X	Nursing Service Related Providers	Adult Companion	
373H00000X	Nursing Service Related Providers	Day Training/Habilitation Specialist	
374700000X	Nursing Service Related Providers	Technician	
3747A0650X	Nursing Service Related Providers	Technician	Attendant Care Provider
3747P1801X	Nursing Service Related Providers	Technician	Personal Care Attendant
374J00000X	Nursing Service Related Providers	Doula	
374K00000X	Nursing Service Related Providers	Religious Nonmedical Practitioner	
374T00000X	Nursing Service Related Providers	Religious Nonmedical Nursing Personnel	
374U00000X	Nursing Service Related Providers	Home Health Aide	
376G00000X	Nursing Service Related Providers	Nursing Home Administrator	
376J00000X	Nursing Service Related Providers	Homemaker	
376K00000X	Nursing Service Related Providers	Nurse's Aide	
385H00000X	Respite Care Facility	Respite Care	



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TAXONOMY CODE	TAXONOMY TYPE	TAXONOMY CLASSIFICATION	TAXONOMY SPECIALIZATION
385HR2050X	Respite Care Facility	Respite Care	Respite Care Camp
385HR2055X	Respite Care Facility	Respite Care	Respite Care, Mental Illness, Child
385HR2060X	Respite Care Facility	Respite Care	Respite Care, Mental Retardation and/or Developmental Disabilities, Child
385HR2065X	Respite Care Facility	Respite Care	Respite Care, Physical Disabilities, Child
390200000X	Student, Health Care	Student in an Organized Health Care Education/Training Program	
405300000X	Other Service Providers	Prevention Professional	



APPENDIX E – TYPE OF BILL (TOB) CODE VALUES

Type of Bill (TOB) code values identifies the type of bill being submitted to a payer.

CODE	TYPE OF BILL CODE DESCRIPTION
11	Inpatient (Part A) - Hospital
110	Hosp, Inpat (Pt A), Nonpayment/zero claims
111	Hosp, Inpat (Pt A), Admit Through Discharge Claim
112	Hosp, Inpat (Pt A), Interim-First Claim
113	Hosp, Inpat (Pt A), Interim-Continuing Claims
114	Hosp, Inpat (Pt A), Interim-Last Claim
115	Hosp, Inpat (Pt A), Late Charge Only
117	Hosp, Inpat (Pt A), Replacement of Prior Claims
118	Hosp, Inpat (Pt A), Void/Cancel of a Prior Claim
119	Hosp, Inpat (Pt A), Final Clms for HH PPS Episode
11A	Hosp, Inpat (Pt A), Hospice Admission Notice
11B	Hosp, Inpat (Pt A), Hospice Term/Revocation Notice
11C	Hosp, Inpat (Pt A), Hospice Change of Provider Notice
11D	Hosp, Inpat (Pt A), Hospice Election Void/Cancel
11E	Hosp, Inpat (Pt A), Hospice Change of Ownership
11F	Hosp, Inpat (Pt A), Beneficiary Initiated Adj Claims



CODE	TYPE OF BILL CODE DESCRIPTION
11G	Hosp, Inpat (Pt A), CWF Initiated Adj Claim
11H	Hosp, Inpat (Pt A), CMS Initiated Adj Claim
11 I	Hosp, Inpat (Pt A), FI Adj Claim (other than PRO/Prov)
11J	Hosp, Inpat (Pt A), Initiated Adj Claim-Other
11K	Hosp, Inpat (Pt A), OIG Initiated Adj Claim
11M	Hosp, Inpat (Pt A), MSP Initiated Adj Claim
11P	Hosp, Inpat (Pt A), QIO Adj Claim
12	Inpatient (Part B) - Hospital
120	Hosp, Hosp Based/Inpat (Pt B), Nonpayment/zero claims
121	Hosp, Hosp Based/Inpat (Pt B), Admit Through Discharge Claim
122	Hosp, Hosp Based/Inpat (Pt B), Interim-First Claim
123	Hosp, Hosp Based/Inpat (Pt B), Interim-Continuing Claims
124	Hosp, Hosp Based/Inpat (Pt B), Interim-Last Claim
125	Hosp, Hosp Based/Inpat (Pt B), Late Charge Only
127	Hosp, Hosp Based/Inpat (Pt B), Replacement of Prior Claims
128	Hosp, Hosp Based/Inpat (Pt B), Void/Cancel of a Prior Claim
129	Hosp, Hosp Based/Inpat (Pt B), Final Clms for HH PPS Episode
12A	Hosp, Hosp Based/Inpat (Pt B), Hospice Admission Notice
12B	Hosp, Hosp Based/Inpat (Pt B), Hospice Term/Revocation Notice



CODE	TYPE OF BILL CODE DESCRIPTION
12C	Hosp, Hosp Based/Inpat (Pt B), Hospice Change of Provider Notice
12D	Hosp, Hosp Based/Inpat (Pt B), Hospice Election Void/Cancel
12E	Hosp, Hosp Based/Inpat (Pt B), Hospice Change of Ownership
12F	Hosp, Hosp Based/Inpat (Pt B), Beneficiary Initiated Adj Claims
12G	Hosp, Hosp Based/Inpat (Pt B), CWF Initiated Adj Claim
12H	Hosp, Hosp Based/Inpat (Pt B), CMS Initiated Adj Claim
12 I	Hosp, Hosp Based/Inpat (Pt B), FI Adj Claim (other than PRO/Prov)
12J	Hosp, Hosp Based/Inpat (Pt B), Initiated Adj Claim-Other
12K	Hosp, Hosp Based/Inpat (Pt B), OIG Initiated Adj Claim
12M	Hosp, Hosp Based/Inpat (Pt B), MSP Initiated Adj Claim
12P	Hosp, Hosp Based/Inpat (Pt B), QIO Adj Claim
13	Outpatient - Hospital
130	Hosp, Outpat, Nonpayment/zero claims
131	Hosp, Outpat, Admit Through Discharge Claim
132	Hosp, Outpat, Interim-First Claim
133	Hosp, Outpat, Interim-Continuing Claims
134	Hosp, Outpat, Interim-Last Claim
135	Hosp, Outpat, Late Charge Only
137	Hosp, Outpat, Replacement of Prior Claims



138 Hosp, Outpat, Void/Cancel of a Prior Claim 139 Hosp, Outpat, Final Clms for HH PPS Episode 13A Hosp, Outpat, Hospice Admission Notice 13B Hosp, Outpat, Hospice Term/Revocation Notice 13C Hosp, Outpat, Hospice Change of Provider Notice 13D Hosp, Outpat, Hospice Election Void/Cancel 13E Hosp, Outpat, Hospice Change of Ownership 13F Hosp, Outpat, Beneficiary Initiated Adj Claims 13G Hosp, Outpat, CWF Initiated Adj Claim
Hosp, Outpat, Hospice Admission Notice Hosp, Outpat, Hospice Term/Revocation Notice Hosp, Outpat, Hospice Change of Provider Notice Hosp, Outpat, Hospice Election Void/Cancel Hosp, Outpat, Hospice Change of Ownership Hosp, Outpat, Beneficiary Initiated Adj Claims
 Hosp, Outpat, Hospice Term/Revocation Notice Hosp, Outpat, Hospice Change of Provider Notice Hosp, Outpat, Hospice Election Void/Cancel Hosp, Outpat, Hospice Change of Ownership Hosp, Outpat, Beneficiary Initiated Adj Claims
 Hosp, Outpat, Hospice Change of Provider Notice Hosp, Outpat, Hospice Election Void/Cancel Hosp, Outpat, Hospice Change of Ownership Hosp, Outpat, Beneficiary Initiated Adj Claims
 Hosp, Outpat, Hospice Election Void/Cancel Hosp, Outpat, Hospice Change of Ownership Hosp, Outpat, Beneficiary Initiated Adj Claims
 Hosp, Outpat, Hospice Change of Ownership Hosp, Outpat, Beneficiary Initiated Adj Claims
13F Hosp, Outpat, Beneficiary Initiated Adj Claims
13G Hosp, Outpat, CWF Initiated Adj Claim
13H Hosp, Outpat, CMS Initiated Adj Claim
Hosp, Outpat, FI Adj Claim (other than PRO/Prov)
13J Hosp, Outpat, Initiated Adj Claim-Other
13K Hosp, Outpat, OIG Initiated Adj Claim
13M Hosp, Outpat, MSP Initiated Adj Claim
13P Hosp, Outpat, QIO Adj Claim
14 Other (Part B) - Hospital
Hosp, Other (Pt B), Nonpayment/zero claims
Hosp, Other (Pt B), Admit Through Discharge Claim
Hosp, Other (Pt B), Interim-First Claim



CODE	TYPE OF BILL CODE DESCRIPTION
143	Hosp, Other (Pt B), Interim-Continuing Claims
144	Hosp, Other (Pt B), Interim-Last Claim
145	Hosp, Other (Pt B), Late Charge Only
147	Hosp, Other (Pt B), Replacement of Prior Claims
148	Hosp, Other (Pt B), Void/Cancel of a Prior Claim
149	Hosp, Other (Pt B), Final Clms for HH PPS Episode
14A	Hosp, Other (Pt B), Hospice Admission Notice
14B	Hosp, Other (Pt B), Hospice Term/Revocation Notice
14C	Hosp, Other (Pt B), Hospice Change of Provider Notice
14D	Hosp, Other (Pt B), Hospice Election Void/Cancel
14E	Hosp, Other (Pt B), Hospice Change of Ownership
14F	Hosp, Other (Pt B), Beneficiary Initiated Adj Claims
14G	Hosp, Other (Pt B), CWF Initiated Adj Claim
14H	Hosp, Other (Pt B), CMS Initiated Adj Claim
14I	Hosp, Other (Pt B), FI Adj Claim (other than PRO/Prov)
14J	Hosp, Other (Pt B), Initiated Adj Claim-Other
14K	Hosp, Other (Pt B), OIG Initiated Adj Claim
14M	Hosp, Other (Pt B), MSP Initiated Adj Claim
14P	Hosp, Other (Pt B), QIO Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
15	Intermediate Care - Level I - Hospital
150	Hosp, Intm Care-Level I, Nonpayment/zero claims
151	Hosp, Intm Care-Level I, Admit Through Discharge Claim
152	Hosp, Intm Care-Level I, Interim-First Claim
153	Hosp, Intm Care-Level I, Interim-Continuing Claims
154	Hosp, Intm Care-Level I, Interim-Last Claim
155	Hosp, Intm Care-Level I, Late Charge Only
157	Hosp, Intm Care-Level I, Replacement of Prior Claims
158	Hosp, Intm Care-Level I, Void/Cancel of a Prior Claim
159	Hosp, Intm Care-Level I, Final Clms for HH PPS Episode
15A	Hosp, Intm Care-Level I, Hospice Admission Notice
15B	Hosp, Intm Care-Level I, Hospice Term/Revocation Notice
15C	Hosp, Intm Care-Level I, Hospice Change of Provider Notice
15D	Hosp, Intm Care-Level I, Hospice Election Void/Cancel
15E	Hosp, Intm Care-Level I, Hospice Change of Ownership
15F	Hosp, Intm Care-Level I, Beneficiary Initiated Adj Claims
15G	Hosp, Intm Care-Level I, CWF Initiated Adj Claim
15H	Hosp, Intm Care-Level I, CMS Initiated Adj Claim
15 I	Hosp, Intm Care-Level I, FI Adj Claim (other than PRO/Prov)



TYPE OF BILL CODE DESCRIPTION
Hosp, Intm Care-Level I, Initiated Adj Claim-Other
Hosp, Intm Care-Level I, OIG Initiated Adj Claim
Hosp, Intm Care-Level I, MSP Initiated Adj Claim
Hosp, Intm Care-Level I, QIO Adj Claim
Intermediate Care - Level II - Hospital
Hosp, Intm Care-Level II, Nonpayment/zero claims
Hosp, Intm Care-Level II, Admit Through Discharge Claim
Hosp, Intm Care-Level II, Interim-First Claim
Hosp, Intm Care-Level II, Interim-Continuing Claims
Hosp, Intm Care-Level II, Interim-Last Claim
Hosp, Intm Care-Level II, Late Charge Only
Hosp, Intm Care-Level II, Replacement of Prior Claims
Hosp, Intm Care-Level II, Void/Cancel of a Prior Claim
Hosp, Intm Care-Level II, Final Clms for HH PPS Episode
Hosp, Intm Care-Level II, Hospice Admission Notice
Hosp, Intm Care-Level II, Hospice Term/Revocation Notice
Hosp, Intm Care-Level II, Hospice Change of Provider Notice
Hosp, Intm Care-Level II, Hospice Election Void/Cancel
Hosp, Intm Care-Level II, Hospice Change of Ownership



CODE	TYPE OF BILL CODE DESCRIPTION
16F	Hosp, Intm Care-Level II, Beneficiary Initiated Adj Claims
16G	Hosp, Intm Care-Level II, CWF Initiated Adj Claim
16H	Hosp, Intm Care-Level II, CMS Initiated Adj Claim
16I	Hosp, Intm Care-Level II, FI Adj Claim (other than PRO/Prov)
16J	Hosp, Intm Care-Level II, Initiated Adj Claim-Other
16K	Hosp, Intm Care-Level II, OIG Initiated Adj Claim
16M	Hosp, Intm Care-Level II, MSP Initiated Adj Claim
16P	Hosp, Intm Care-Level II, QIO Adj Claim
18	Swing Bed - Hospital
180	Hosp, Swing Bed, Nonpayment/zero claims
181	Hosp, Swing Bed, Admit Through Discharge Claim
182	Hosp, Swing Bed, Interim-First Claim
183	Hosp, Swing Bed, Interim-Continuing Claims
184	Hosp, Swing Bed, Interim-Last Claim
185	Hosp, Swing Bed, Late Charge Only
186	Hosp, Swing Bed, NCQA Defined
187	Hosp, Swing Bed, Replacement of Prior Claims
188	Hosp, Swing Bed, Void/Cancel of a Prior Claim
189	Hosp, Swing Bed, Final Clms for HH PPS Episode



CODE	TYPE OF BILL CODE DESCRIPTION
18A	Hosp, Swing Bed, Hospice Admission Notice
18B	Hosp, Swing Bed, Hospice Term/Revocation Notice
18C	Hosp, Swing Bed, Hospice Change of Provider Notice
18D	Hosp, Swing Bed, Hospice Election Void/Cancel
18E	Hosp, Swing Bed, Hospice Change of Ownership
18F	Hosp, Swing Bed, Beneficiary Initiated Adj Claims
18G	Hosp, Swing Bed, CWF Initiated Adj Claim
18H	Hosp, Swing Bed, CMS Initiated Adj Claim
18 I	Hosp, Swing Bed, FI Adj Claim (other than PRO/Prov)
18J	Hosp, Swing Bed, Initiated Adj Claim-Other
18K	Hosp, Swing Bed, OIG Initiated Adj Claim
18M	Hosp, Swing Bed, MSP Initiated Adj Claim
18P	Hosp, Swing Bed, QIO Adj Claim
21	Inpatient (Part A) - Skilled Nursing
210	Skilled Nursing, Inpat (Pt A), Nonpayment/zero claims
211	Skilled Nursing, Inpat (Pt A), Admit Through Discharge Claim
212	Skilled Nursing, Inpat (Pt A), Interim-First Claim
213	Skilled Nursing, Inpat (Pt A), Interim-Continuing Claims
214	Skilled Nursing, Inpat (Pt A), Interim-Last Claim



CODE	TYPE OF BILL CODE DESCRIPTION
215	Skilled Nursing, Inpat (Pt A), Late Charge Only
216	Skilled Nursing, NCQA Defined
217	Skilled Nursing, Inpat (Pt A), Replacement of Prior Claims
218	Skilled Nursing, Inpat (Pt A), Void/Cancel of a Prior Claim
219	Skilled Nursing, Inpat (Pt A), Final Clms for HH PPS Episode
21A	Skilled Nursing, Inpat (Pt A), Hospice Admission Notice
21B	Skilled Nursing, Inpat (Pt A), Hospice Term/Revocation Notice
21 C	Skilled Nursing, Inpat (Pt A), Hospice Change of Provider Notice
21D	Skilled Nursing, Inpat (Pt A), Hospice Election Void/Cancel
21E	Skilled Nursing, Inpat (Pt A), Hospice Change of Ownership
21F	Skilled Nursing, Inpat (Pt A), Beneficiary Initiated Adj Claims
21G	Skilled Nursing, Inpat (Pt A), CWF Initiated Adj Claim
21H	Skilled Nursing, Inpat (Pt A), CMS Initiated Adj Claim
21 I	Skilled Nursing, Inpat (Pt A), FI Adj Claim (other than PRO/Prov)
21J	Skilled Nursing, Inpat (Pt A), Initiated Adj Claim-Other
21K	Skilled Nursing, Inpat (Pt A), OIG Initiated Adj Claim
21M	Skilled Nursing, Inpat (Pt A), MSP Initiated Adj Claim
21P	Skilled Nursing, Inpat (Pt A), QIO Adj Claim
22	Inpatient (Part B) - Skilled Nursing



CODE	TYPE OF BILL CODE DESCRIPTION
220	Skilled Nursing, Hosp Based/Inpat (Pt B), Nonpayment/zero claims
221	Skilled Nursing, Hosp Based/Inpat (Pt B), Admit Through Discharge Claim
222	Skilled Nursing, Hosp Based/Inpat (Pt B), Interim-First Claim
223	Skilled Nursing, Hosp Based/Inpat (Pt B), Interim-Continuing Claims
224	Skilled Nursing, Hosp Based/Inpat (Pt B), Interim-Last Claim
225	Skilled Nursing, Hosp Based/Inpat (Pt B), Late Charge Only
226	Skilled Nursing, NCQA Defined
227	Skilled Nursing, Hosp Based/Inpat (Pt B), Replacement of Prior Claims
228	Skilled Nursing, Hosp Based/Inpat (Pt B), Void/Cancel of a Prior Claim
229	Skilled Nursing, Hosp Based/Inpat (Pt B), Final Clms for HH PPS Episode
22A	Skilled Nursing, Hosp Based/Inpat (Pt B), Hospice Admission Notice
22B	Skilled Nursing, Hosp Based/Inpat (Pt B), Hospice Term/Revocation Notice
22C	Skilled Nursing, Hosp Based/Inpat (Pt B), Hospice Change of Provider Notice
22D	Skilled Nursing, Hosp Based/Inpat (Pt B), Hospice Election Void/Cancel
22E	Skilled Nursing, Hosp Based/Inpat (Pt B), Hospice Change of Ownership
22F	Skilled Nursing, Hosp Based/Inpat (Pt B), Beneficiary Initiated Adj Claims
22G	Skilled Nursing, Hosp Based/Inpat (Pt B), CWF Initiated Adj Claim
22H	Skilled Nursing, Hosp Based/Inpat (Pt B), CMS Initiated Adj Claim
22I	Skilled Nursing, Hosp Based/Inpat (Pt B), FI Adj Claim (other than PRO/Prov)



CODE	TYPE OF BILL CODE DESCRIPTION
22 J	Skilled Nursing, Hosp Based/Inpat (Pt B), Initiated Adj Claim-Other
22K	Skilled Nursing, Hosp Based/Inpat (Pt B), OIG Initiated Adj Claim
22M	Skilled Nursing, Hosp Based/Inpat (Pt B), MSP Initiated Adj Claim
22P	Skilled Nursing, Hosp Based/Inpat (Pt B), QIO Adj Claim
23	Outpatient - Skilled Nursing
230	Skilled Nursing, Outpat, Nonpayment/zero claims
231	Skilled Nursing, Outpat, Admit Through Discharge Claim
232	Skilled Nursing, Outpat, Interim-First Claim
233	Skilled Nursing, Outpat, Interim-Continuing Claims
234	Skilled Nursing, Outpat, Interim-Last Claim
235	Skilled Nursing, Outpat, Late Charge Only
237	Skilled Nursing, Outpat, Replacement of Prior Claims
238	Skilled Nursing, Outpat, Void/Cancel of a Prior Claim
239	Skilled Nursing, Outpat, Final Clms for HH PPS Episode
23A	Skilled Nursing, Outpat, Hospice Admission Notice
23B	Skilled Nursing, Outpat, Hospice Term/Revocation Notice
23C	Skilled Nursing, Outpat, Hospice Change of Provider Notice
23D	Skilled Nursing, Outpat, Hospice Election Void/Cancel
23E	Skilled Nursing, Outpat, Hospice Change of Ownership



CODE	TYPE OF BILL CODE DESCRIPTION
23F	Skilled Nursing, Outpat, Beneficiary Initiated Adj Claims
23G	Skilled Nursing, Outpat, CWF Initiated Adj Claim
23Н	Skilled Nursing, Outpat, CMS Initiated Adj Claim
23I	Skilled Nursing, Outpat, FI Adj Claim (other than PRO/Prov)
23J	Skilled Nursing, Outpat, Initiated Adj Claim-Other
23K	Skilled Nursing, Outpat, OIG Initiated Adj Claim
23M	Skilled Nursing, Outpat, MSP Initiated Adj Claim
23P	Skilled Nursing, Outpat, QIO Adj Claim
24	Other (Part B) - Skilled Nursing
240	Skilled Nursing, Other (Pt B), Nonpayment/zero claims
241	Skilled Nursing, Other (Pt B), Admit Through Discharge Claim
242	Skilled Nursing, Other (Pt B), Interim-First Claim
243	Skilled Nursing, Other (Pt B), Interim-Continuing Claims
244	Skilled Nursing, Other (Pt B), Interim-Last Claim
245	Skilled Nursing, Other (Pt B), Late Charge Only
247	Skilled Nursing, Other (Pt B), Replacement of Prior Claims
248	Skilled Nursing, Other (Pt B), Void/Cancel of a Prior Claim
249	Skilled Nursing, Other (Pt B), Final Clms for HH PPS Episode
24A	Skilled Nursing, Other (Pt B), Hospice Admission Notice



CODE	TYPE OF BILL CODE DESCRIPTION
24B	Skilled Nursing, Other (Pt B), Hospice Term/Revocation Notice
24C	Skilled Nursing, Other (Pt B), Hospice Change of Provider Notice
24D	Skilled Nursing, Other (Pt B), Hospice Election Void/Cancel
24E	Skilled Nursing, Other (Pt B), Hospice Change of Ownership
24F	Skilled Nursing, Other (Pt B), Beneficiary Initiated Adj Claims
24G	Skilled Nursing, Other (Pt B), CWF Initiated Adj Claim
24H	Skilled Nursing, Other (Pt B), CMS Initiated Adj Claim
24I	Skilled Nursing, Other (Pt B), FI Adj Claim (other than PRO/Prov)
24J	Skilled Nursing, Other (Pt B), Initiated Adj Claim-Other
24K	Skilled Nursing, Other (Pt B), OIG Initiated Adj Claim
24M	Skilled Nursing, Other (Pt B), MSP Initiated Adj Claim
24P	Skilled Nursing, Other (Pt B), QIO Adj Claim
25	Intermediate Care - Level I - Skilled Nursing
250	Skilled Nursing, Intm Care-Level I, Nonpayment/zero claims
251	Skilled Nursing, Intm Care-Level I, Admit Through Discharge Claim
252	Skilled Nursing, Intm Care-Level I, Interim-First Claim
253	Skilled Nursing, Intm Care-Level I, Interim-Continuing Claims
254	Skilled Nursing, Intm Care-Level I, Interim-Last Claim
255	Skilled Nursing, Intm Care-Level I, Late Charge Only



CODE	TYPE OF BILL CODE DESCRIPTION
257	Skilled Nursing, Intm Care-Level I, Replacement of Prior Claims
258	Skilled Nursing, Intm Care-Level I, Void/Cancel of a Prior Claim
259	Skilled Nursing, Intm Care-Level I, Final Clms for HH PPS Episode
25A	Skilled Nursing, Intm Care-Level I, Hospice Admission Notice
25B	Skilled Nursing, Intm Care-Level I, Hospice Term/Revocation Notice
25C	Skilled Nursing, Intm Care-Level I, Hospice Change of Provider Notice
25D	Skilled Nursing, Intm Care-Level I, Hospice Election Void/Cancel
25E	Skilled Nursing, Intm Care-Level I, Hospice Change of Ownership
25F	Skilled Nursing, Intm Care-Level I, Beneficiary Initiated Adj Claims
25G	Skilled Nursing, Intm Care-Level I, CWF Initiated Adj Claim
25H	Skilled Nursing, Intm Care-Level I, CMS Initiated Adj Claim
25 I	Skilled Nursing, Intm Care-Level I, FI Adj Claim (other than PRO/Prov)
25J	Skilled Nursing, Intm Care-Level I, Initiated Adj Claim-Other
25K	Skilled Nursing, Intm Care-Level I, OIG Initiated Adj Claim
25M	Skilled Nursing, Intm Care-Level I, MSP Initiated Adj Claim
25P	Skilled Nursing, Intm Care-Level I, QIO Adj Claim
26	Intermediate Care - Level II - Skilled Nursing
260	Skilled Nursing, Intm Care-Level II, Nonpayment/zero claims
261	Skilled Nursing, Intm Care-Level II, Admit Through Discharge Claim



TYPE OF BILL CODE DESCRIPTION
Skilled Nursing, Intm Care-Level II, Interim-First Claim
Skilled Nursing, Intm Care-Level II, Interim-Continuing Claims
Skilled Nursing, Intm Care-Level II, Interim-Last Claim
Skilled Nursing, Intm Care-Level II, Late Charge Only
Skilled Nursing, Intm Care-Level II, Replacement of Prior Claims
Skilled Nursing, Intm Care-Level II, Void/Cancel of a Prior Claim
Skilled Nursing, Intm Care-Level II, Final Clms for HH PPS Episode
Skilled Nursing, Intm Care-Level II, Hospice Admission Notice
Skilled Nursing, Intm Care-Level II, Hospice Term/Revocation Notice
Skilled Nursing, Intm Care-Level II, Hospice Change of Provider Notice
Skilled Nursing, Intm Care-Level II, Hospice Election Void/Cancel
Skilled Nursing, Intm Care-Level II, Hospice Change of Ownership
Skilled Nursing, Intm Care-Level II, Beneficiary Initiated Adj Claims
Skilled Nursing, Intm Care-Level II, CWF Initiated Adj Claim
Skilled Nursing, Intm Care-Level II, CMS Initiated Adj Claim
Skilled Nursing, Intm Care-Level II, FI Adj Claim (other than PRO/Prov)
Skilled Nursing, Intm Care-Level II, Initiated Adj Claim-Other
Skilled Nursing, Intm Care-Level II, OIG Initiated Adj Claim
Skilled Nursing, Intm Care-Level II, MSP Initiated Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
26P	Skilled Nursing, Intm Care-Level II, QIO Adj Claim
28	Swing Bed - Skilled Nursing
280	Skilled Nursing, Swing Bed, Nonpayment/zero claims
281	Skilled Nursing, Swing Bed, Admit Through Discharge Claim
282	Skilled Nursing, Swing Bed, Interim-First Claim
283	Skilled Nursing, Swing Bed, Interim-Continuing Claims
284	Skilled Nursing, Swing Bed, Interim-Last Claim
285	Skilled Nursing, Swing Bed, Late Charge Only
287	Skilled Nursing, Swing Bed, Replacement of Prior Claims
288	Skilled Nursing, Swing Bed, Void/Cancel of a Prior Claim
289	Skilled Nursing, Swing Bed, Final Clms for HH PPS Episode
28A	Skilled Nursing, Swing Bed, Hospice Admission Notice
28B	Skilled Nursing, Swing Bed, Hospice Term/Revocation Notice
28C	Skilled Nursing, Swing Bed, Hospice Change of Provider Notice
28D	Skilled Nursing, Swing Bed, Hospice Election Void/Cancel
28E	Skilled Nursing, Swing Bed, Hospice Change of Ownership
28F	Skilled Nursing, Swing Bed, Beneficiary Initiated Adj Claims
28G	Skilled Nursing, Swing Bed, CWF Initiated Adj Claim
28H	Skilled Nursing, Swing Bed, CMS Initiated Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
281	Skilled Nursing, Swing Bed, FI Adj Claim (other than PRO/Prov)
28J	Skilled Nursing, Swing Bed, Initiated Adj Claim-Other
28K	Skilled Nursing, Swing Bed, OIG Initiated Adj Claim
28M	Skilled Nursing, Swing Bed, MSP Initiated Adj Claim
28P	Skilled Nursing, Swing Bed, QIO Adj Claim
31	Inpatient (Part A) - Home Health
310	Home Health, Inpat (Pt A), Nonpayment/zero claims
311	Home Health, Inpat (Pt A), Admit Through Discharge Claim
312	Home Health, Inpat (Pt A), Interim-First Claim
313	Home Health, Inpat (Pt A), Interim-Continuing Claims
314	Home Health, Inpat (Pt A), Interim-Last Claim
315	Home Health, Inpat (Pt A), Late Charge Only
317	Home Health, Inpat (Pt A), Replacement of Prior Claims
318	Home Health, Inpat (Pt A), Void/Cancel of a Prior Claim
319	Home Health, Inpat (Pt A), Final Clms for HH PPS Episode
31A	Home Health, Inpat (Pt A), Hospice Admission Notice
31B	Home Health, Inpat (Pt A), Hospice Term/Revocation Notice
31C	Home Health, Inpat (Pt A), Hospice Change of Provider Notice
31D	Home Health, Inpat (Pt A), Hospice Election Void/Cancel



CODE	TYPE OF BILL CODE DESCRIPTION
31E	Home Health, Inpat (Pt A), Hospice Change of Ownership
31F	Home Health, Inpat (Pt A), Beneficiary Initiated Adj Claims
31G	Home Health, Inpat (Pt A), CWF Initiated Adj Claim
31H	Home Health, Inpat (Pt A), CMS Initiated Adj Claim
31I	Home Health, Inpat (Pt A), FI Adj Claim (other than PRO/Prov)
31J	Home Health, Inpat (Pt A), Initiated Adj Claim-Other
31K	Home Health, Inpat (Pt A), OIG Initiated Adj Claim
31M	Home Health, Inpat (Pt A), MSP Initiated Adj Claim
31P	Home Health, Inpat (Pt A), QIO Adj Claim
32	Inpatient (Part B) - Home Health
320	Home Health, Hosp Based/Inpat (Pt B), Nonpayment/zero claims
321	Home Health, Hosp Based/Inpat (Pt B), Admit Through Discharge Claim
322	Home Health, Hosp Based/Inpat (Pt B), Interim-First Claim
323	Home Health, Hosp Based/Inpat (Pt B), Interim-Continuing Claims
324	Home Health, Hosp Based/Inpat (Pt B), Interim-Last Claim
325	Home Health, Hosp Based/Inpat (Pt B), Late Charge Only
327	Home Health, Hosp Based/Inpat (Pt B), Replacement of Prior Claims
328	Home Health, Hosp Based/Inpat (Pt B), Void/Cancel of a Prior Claim
329	Home Health, Hosp Based/Inpat (Pt B), Final Clms for HH PPS Episode



CODE	TYPE OF BILL CODE DESCRIPTION
32A	Home Health, Hosp Based/Inpat (Pt B), Hospice Admission Notice
32B	Home Health, Hosp Based/Inpat (Pt B), Hospice Term/Revocation Notice
32C	Home Health, Hosp Based/Inpat (Pt B), Hospice Change of Provider Notice
32D	Home Health, Hosp Based/Inpat (Pt B), Hospice Election Void/Cancel
32E	Home Health, Hosp Based/Inpat (Pt B), Hospice Change of Ownership
32F	Home Health, Hosp Based/Inpat (Pt B), Beneficiary Initiated Adj Claims
32G	Home Health, Hosp Based/Inpat (Pt B), CWF Initiated Adj Claim
32H	Home Health, Hosp Based/Inpat (Pt B), CMS Initiated Adj Claim
32I	Home Health, Hosp Based/Inpat (Pt B), FI Adj Claim (other than PRO/Prov)
32J	Home Health, Hosp Based/Inpat (Pt B), Initiated Adj Claim-Other
32K	Home Health, Hosp Based/Inpat (Pt B), OIG Initiated Adj Claim
32M	Home Health, Hosp Based/Inpat (Pt B), MSP Initiated Adj Claim
32P	Home Health, Hosp Based/Inpat (Pt B), QIO Adj Claim
33	Outpatient - Home Health
330	Home Health, Outpat, Nonpayment/zero claims
331	Home Health, Outpat, Admit Through Discharge Claim
332	Home Health, Outpat, Interim-First Claim
333	Home Health, Outpat, Interim-Continuing Claims
334	Home Health, Outpat, Interim-Last Claim



CODE	TYPE OF BILL CODE DESCRIPTION
335	Home Health, Outpat, Late Charge Only
337	Home Health, Outpat, Replacement of Prior Claims
338	Home Health, Outpat, Void/Cancel of a Prior Claim
339	Home Health, Outpat, Final Clms for HH PPS Episode
33A	Home Health, Outpat, Hospice Admission Notice
33B	Home Health, Outpat, Hospice Term/Revocation Notice
33C	Home Health, Outpat, Hospice Change of Provider Notice
33D	Home Health, Outpat, Hospice Election Void/Cancel
33E	Home Health, Outpat, Hospice Change of Ownership
33F	Home Health, Outpat, Beneficiary Initiated Adj Claims
33G	Home Health, Outpat, CWF Initiated Adj Claim
33H	Home Health, Outpat, CMS Initiated Adj Claim
33I	Home Health, Outpat, FI Adj Claim (other than PRO/Prov)
33J	Home Health, Outpat, Initiated Adj Claim-Other
33K	Home Health, Outpat, OIG Initiated Adj Claim
33M	Home Health, Outpat, MSP Initiated Adj Claim
33P	Home Health, Outpat, QIO Adj Claim
34	Other (Part B) - Home Health
340	Home Health, Other (Pt B), Nonpayment/zero claims



Home Health, Other (Pt B), Admit Through Discharge Claim Home Health, Other (Pt B), Interim-First Claim Home Health, Other (Pt B), Interim-Continuing Claims Home Health, Other (Pt B), Interim-Last Claim Home Health, Other (Pt B), Late Charge Only Home Health, Other (Pt B), Replacement of Prior Claims Home Health, Other (Pt B), Void/Cancel of a Prior Claim
 343 Home Health, Other (Pt B), Interim-Continuing Claims 344 Home Health, Other (Pt B), Interim-Last Claim 345 Home Health, Other (Pt B), Late Charge Only 347 Home Health, Other (Pt B), Replacement of Prior Claims
 344 Home Health, Other (Pt B), Interim-Last Claim 345 Home Health, Other (Pt B), Late Charge Only 347 Home Health, Other (Pt B), Replacement of Prior Claims
345 Home Health, Other (Pt B), Late Charge Only 347 Home Health, Other (Pt B), Replacement of Prior Claims
347 Home Health, Other (Pt B), Replacement of Prior Claims
348 Home Health, Other (Pt B), Void/Cancel of a Prior Claim
349 Home Health, Other (Pt B), Final Clms for HH PPS Episode
34A Home Health, Other (Pt B), Hospice Admission Notice
34B Home Health, Other (Pt B), Hospice Term/Revocation Notice
34C Home Health, Other (Pt B), Hospice Change of Provider Notice
34D Home Health, Other (Pt B), Hospice Election Void/Cancel
34E Home Health, Other (Pt B), Hospice Change of Ownership
34F Home Health, Other (Pt B), Beneficiary Initiated Adj Claims
34G Home Health, Other (Pt B), CWF Initiated Adj Claim
34H Home Health, Other (Pt B), CMS Initiated Adj Claim
Home Health, Other (Pt B), FI Adj Claim (other than PRO/Prov)
34J Home Health, Other (Pt B), Initiated Adj Claim-Other
34K Home Health, Other (Pt B), OIG Initiated Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
34M	Home Health, Other (Pt B), MSP Initiated Adj Claim
34P	Home Health, Other (Pt B), QIO Adj Claim
35	Intermediate Care - Level I - Home Health
350	Home Health, Intm Care-Level I, Nonpayment/zero claims
351	Home Health, Intm Care-Level I, Admit Through Discharge Claim
352	Home Health, Intm Care-Level I, Interim-First Claim
353	Home Health, Intm Care-Level I, Interim-Continuing Claims
354	Home Health, Intm Care-Level I, Interim-Last Claim
355	Home Health, Intm Care-Level I, Late Charge Only
357	Home Health, Intm Care-Level I, Replacement of Prior Claims
358	Home Health, Intm Care-Level I, Void/Cancel of a Prior Claim
359	Home Health, Intm Care-Level I, Final Clms for HH PPS Episode
35A	Home Health, Intm Care-Level I, Hospice Admission Notice
35B	Home Health, Intm Care-Level I, Hospice Term/Revocation Notice
35C	Home Health, Intm Care-Level I, Hospice Change of Provider Notice
35D	Home Health, Intm Care-Level I, Hospice Election Void/Cancel
35E	Home Health, Intm Care-Level I, Hospice Change of Ownership
35F	Home Health, Intm Care-Level I, Beneficiary Initiated Adj Claims
35G	Home Health, Intm Care-Level I, CWF Initiated Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
35H	Home Health, Intm Care-Level I, CMS Initiated Adj Claim
35 I	Home Health, Intm Care-Level I, FI Adj Claim (other than PRO/Prov)
35J	Home Health, Intm Care-Level I, Initiated Adj Claim-Other
35K	Home Health, Intm Care-Level I, OIG Initiated Adj Claim
35M	Home Health, Intm Care-Level I, MSP Initiated Adj Claim
35P	Home Health, Intm Care-Level I, QIO Adj Claim
36	Intermediate Care - Level II - Home Health
360	Home Health, Intm Care-Level II, Nonpayment/zero claims
361	Home Health, Intm Care-Level II, Admit Through Discharge Claim
362	Home Health, Intm Care-Level II, Interim-First Claim
363	Home Health, Intm Care-Level II, Interim-Continuing Claims
364	Home Health, Intm Care-Level II, Interim-Last Claim
365	Home Health, Intm Care-Level II, Late Charge Only
367	Home Health, Intm Care-Level II, Replacement of Prior Claims
368	Home Health, Intm Care-Level II, Void/Cancel of a Prior Claim
369	Home Health, Intm Care-Level II, Final Clms for HH PPS Episode
36A	Home Health, Intm Care-Level II, Hospice Admission Notice
36B	Home Health, Intm Care-Level II, Hospice Term/Revocation Notice
36C	Home Health, Intm Care-Level II, Hospice Change of Provider Notice



CODE	TYPE OF BILL CODE DESCRIPTION
36D	Home Health, Intm Care-Level II, Hospice Election Void/Cancel
36E	Home Health, Intm Care-Level II, Hospice Change of Ownership
36F	Home Health, Intm Care-Level II, Beneficiary Initiated Adj Claims
36G	Home Health, Intm Care-Level II, CWF Initiated Adj Claim
36H	Home Health, Intm Care-Level II, CMS Initiated Adj Claim
36I	Home Health, Intm Care-Level II, FI Adj Claim (other than PRO/Prov)
36J	Home Health, Intm Care-Level II, Initiated Adj Claim-Other
36K	Home Health, Intm Care-Level II, OIG Initiated Adj Claim
36M	Home Health, Intm Care-Level II, MSP Initiated Adj Claim
36P	Home Health, Intm Care-Level II, QIO Adj Claim
38	Swing Bed - Home Health
380	Home Health, Swing Bed, Nonpayment/zero claims
381	Home Health, Swing Bed, Admit Through Discharge Claim
382	Home Health, Swing Bed, Interim-First Claim
383	Home Health, Swing Bed, Interim-Continuing Claims
384	Home Health, Swing Bed, Interim-Last Claim
385	Home Health, Swing Bed, Late Charge Only
387	Home Health, Swing Bed, Replacement of Prior Claims
388	Home Health, Swing Bed, Void/Cancel of a Prior Claim





CODE	TYPE OF BILL CODE DESCRIPTION
414	Religious Non-Med (Hosp), Inpat (Pt A), Interim-Last Claim
415	Religious Non-Med (Hosp), Inpat (Pt A), Late Charge Only
417	Religious Non-Med (Hosp), Inpat (Pt A), Replacement of Prior Claims
418	Religious Non-Med (Hosp), Inpat (Pt A), Void/Cancel of a Prior Claim
419	Religious Non-Med (Hosp), Inpat (Pt A), Final Clms for HH PPS Episode
41A	Religious Non-Med (Hosp), Inpat (Pt A), Hospice Admission Notice
41B	Religious Non-Med (Hosp), Inpat (Pt A), Hospice Term/Revocation Notice
41C	Religious Non-Med (Hosp), Inpat (Pt A), Hospice Change of Provider Notice
41D	Religious Non-Med (Hosp), Inpat (Pt A), Hospice Election Void/Cancel
41E	Religious Non-Med (Hosp), Inpat (Pt A), Hospice Change of Ownership
41F	Religious Non-Med (Hosp), Inpat (Pt A), Beneficiary Initiated Adj Claims
41G	Religious Non-Med (Hosp), Inpat (Pt A), CWF Initiated Adj Claim
41H	Religious Non-Med (Hosp), Inpat (Pt A), CMS Initiated Adj Claim
41I	Religious Non-Med (Hosp), Inpat (Pt A), FI Adj Claim (other than PRO/Prov)
41J	Religious Non-Med (Hosp), Inpat (Pt A), Initiated Adj Claim-Other
41K	Religious Non-Med (Hosp), Inpat (Pt A), OIG Initiated Adj Claim
41M	Religious Non-Med (Hosp), Inpat (Pt A), MSP Initiated Adj Claim
41P	Religious Non-Med (Hosp), Inpat (Pt A), QIO Adj Claim
42	Inpatient (Part B) - Religious Nonmedical Hospital



TYPE OF BILL CODE DESCRIPTION
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Nonpayment/zero claims
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Admit Through Discharge Claim
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Interim-First Claim
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Interim-Continuing Claims
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Interim-Last Claim
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Late Charge Only
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Replacement of Prior Claims
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Void/Cancel of a Prior Claim
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Final Clms for HH PPS Episode
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Hospice Admission Notice
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Hospice Term/Revocation Notice
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Hospice Change of Provider No
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Hospice Election Void/Cancel
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Hospice Change of Ownership
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Beneficiary Initiated Adj Claim
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), CWF Initiated Adj Claim
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), CMS Initiated Adj Claim
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), FI. Adj Claim (other than PR
Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), Initiated Adj Claim-Other



CODE	TYPE OF BILL CODE DESCRIPTION
42K	Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), OIG Initiated Adj Claim
42M	Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), MSP Initiated Adj Claim
42P	Religious Non-Med (Hosp), Hosp Based/Inpat (Pt B), QIO Adj Claim
43	Outpatient - Religious Nonmedical Hospital
430	Religious Non-Med (Hosp), Outpat, Nonpayment/zero claims
431	Religious Non-Med (Hosp), Outpat, Admit Through Discharge Claim
432	Religious Non-Med (Hosp), Outpat, Interim-First Claim
433	Religious Non-Med (Hosp), Outpat, Interim-Continuing Claims
434	Religious Non-Med (Hosp), Outpat, Interim-Last Claim
435	Religious Non-Med (Hosp), Outpat, Late Charge Only
437	Religious Non-Med (Hosp), Outpat, Replacement of Prior Claims
438	Religious Non-Med (Hosp), Outpat, Void/Cancel of a Prior Claim
439	Religious Non-Med (Hosp), Outpat, Final Clms for HH PPS Episode
43A	Religious Non-Med (Hosp), Outpat, Hospice Admission Notice
43B	Religious Non-Med (Hosp), Outpat, Hospice Term/Revocation Notice
43C	Religious Non-Med (Hosp), Outpat, Hospice Change of Provider Notice
43D	Religious Non-Med (Hosp), Outpat, Hospice Election Void/Cancel
43E	Religious Non-Med (Hosp), Outpat, Hospice Change of Ownership
43F	Religious Non-Med (Hosp), Outpat, Beneficiary Initiated Adj Claims



CODE	TYPE OF BILL CODE DESCRIPTION
43G	Religious Non-Med (Hosp), Outpat, CWF Initiated Adj Claim
43H	Religious Non-Med (Hosp), Outpat, CMS Initiated Adj Claim
43I	Religious Non-Med (Hosp), Outpat, FI Adj Claim (other than PRO/Prov)
43J	Religious Non-Med (Hosp), Outpat, Initiated Adj Claim-Other
43K	Religious Non-Med (Hosp), Outpat, OIG Initiated Adj Claim
43M	Religious Non-Med (Hosp), Outpat, MSP Initiated Adj Claim
43P	Religious Non-Med (Hosp), Outpat, QIO Adj Claim
44	Other (Part B) - Religious Nonmedical Hospital
440	Religious Non-Med (Hosp), Other (Pt B), Nonpayment/zero claims
441	Religious Non-Med (Hosp), Other (Pt B), Admit Through Discharge Claim
442	Religious Non-Med (Hosp), Other (Pt B), Interim-First Claim
443	Religious Non-Med (Hosp), Other (Pt B), Interim-Continuing Claims
444	Religious Non-Med (Hosp), Other (Pt B), Interim-Last Claim
445	Religious Non-Med (Hosp), Other (Pt B), Late Charge Only
447	Religious Non-Med (Hosp), Other (Pt B), Replacement of Prior Claims
448	Religious Non-Med (Hosp), Other (Pt B), Void/Cancel of a Prior Claim
449	Religious Non-Med (Hosp), Other (Pt B), Final Clms for HH PPS Episode
44A	Religious Non-Med (Hosp), Other (Pt B), Hospice Admission Notice
44B	Religious Non-Med (Hosp), Other (Pt B), Hospice Term/Revocation Notice



CODE	TYPE OF BILL CODE DESCRIPTION
44C	Religious Non-Med (Hosp), Other (Pt B), Hospice Change of Provider Notice
44D	Religious Non-Med (Hosp), Other (Pt B), Hospice Election Void/Cancel
44E	Religious Non-Med (Hosp), Other (Pt B), Hospice Change of Ownership
44F	Religious Non-Med (Hosp), Other (Pt B), Beneficiary Initiated Adj Claims
44G	Religious Non-Med (Hosp), Other (Pt B), CWF Initiated Adj Claim
44H	Religious Non-Med (Hosp), Other (Pt B), CMS Initiated Adj Claim
44I	Religious Non-Med (Hosp), Other (Pt B), FI Adj Claim (other than PRO/Prov)
44J	Religious Non-Med (Hosp), Other (Pt B), Initiated Adj Claim-Other
44K	Religious Non-Med (Hosp), Other (Pt B), OIG Initiated Adj Claim
44M	Religious Non-Med (Hosp), Other (Pt B), MSP Initiated Adj Claim
44P	Religious Non-Med (Hosp), Other (Pt B), QIO Adj Claim
45	Intermediate Care - Level I - Religious Nonmedical Hospital
450	Religious Non-Med (Hosp), Intm Care-Level I, Nonpayment/zero claims
451	Religious Non-Med (Hosp), Intm Care-Level I, Admit Through Discharge Claim
452	Religious Non-Med (Hosp), Intm Care-Level I, Interim-First Claim
453	Religious Non-Med (Hosp), Intm Care-Level I, Interim-Continuing Claims
454	Religious Non-Med (Hosp), Intm Care-Level I, Interim-Last Claim
455	Religious Non-Med (Hosp), Intm Care-Level I, Late Charge Only
457	Religious Non-Med (Hosp), Intm Care-Level I, Replacement of Prior Claims



CODE	TYPE OF BILL CODE DESCRIPTION
458	Religious Non-Med (Hosp), Intm Care-Level I, Void/Cancel of a Prior Claim
459	Religious Non-Med (Hosp), Intm Care-Level I, Final Clms for HH PPS Episode
45A	Religious Non-Med (Hosp), Intm Care-Level I, Hospice Admission Notice
45B	Religious Non-Med (Hosp), Intm Care-Level I, Hospice Term/Revocation Notice
45C	Religious Non-Med (Hosp), Intm Care-Level I, Hospice Change of Provider Notice
45D	Religious Non-Med (Hosp), Intm Care-Level I, Hospice Election Void/Cancel
45E	Religious Non-Med (Hosp), Intm Care-Level I, Hospice Change of Ownership
45F	Religious Non-Med (Hosp), Intm Care-Level I, Beneficiary Initiated Adj Claims
45G	Religious Non-Med (Hosp), Intm Care-Level I, CWF Initiated Adj Claim
45H	Religious Non-Med (Hosp), Intm Care-Level I, CMS Initiated Adj Claim
45 I	Religious Non-Med (Hosp), Intm Care-Level I, FI Adj Claim (other than PRO/Prov
45J	Religious Non-Med (Hosp), Intm Care-Level I, Initiated Adj Claim-Other
45K	Religious Non-Med (Hosp), Intm Care-Level I, OIG Initiated Adj Claim
45M	Religious Non-Med (Hosp), Intm Care-Level I, MSP Initiated Adj Claim
45P	Religious Non-Med (Hosp), Intm Care-Level I, QIO Adj Claim
46	Intermediate Care - Level II - Religious Nonmedical Hospital
460	Religious Non-Med (Hosp), Intm Care-Level II, Nonpayment/zero claims
461	Religious Non-Med (Hosp), Intm Care-Level II, Admit Through Discharge Claim
462	Religious Non-Med (Hosp), Intm Care-Level II, Interim-First Claim
45P 46 460 461	Religious Non-Med (Hosp), Intm Care-Level I, QIO Adj Claim Intermediate Care - Level II - Religious Nonmedical Hospital Religious Non-Med (Hosp), Intm Care-Level II, Nonpayment/zero claims Religious Non-Med (Hosp), Intm Care-Level II, Admit Through Discharge Claim



CODE	TYPE OF BILL CODE DESCRIPTION
463	Religious Non-Med (Hosp), Intm Care-Level II, Interim-Continuing Claims
464	Religious Non-Med (Hosp), Intm Care-Level II, Interim-Last Claim
465	Religious Non-Med (Hosp), Intm Care-Level II, Late Charge Only
467	Religious Non-Med (Hosp), Intm Care-Level II, Replacement of Prior Claims
468	Religious Non-Med (Hosp), Intm Care-Level II, Void/Cancel of a Prior Claim
469	Religious Non-Med (Hosp), Intm Care-Level II, Final Clms for HH PPS Episode
46A	Religious Non-Med (Hosp), Intm Care-Level II, Hospice Admission Notice
46B	Religious Non-Med (Hosp), Intm Care-Level II, Hospice Term/Revocation Notice
46C	Religious Non-Med (Hosp), Intm Care-Level II, Hospice Change of Provider Notice
46D	Religious Non-Med (Hosp), Intm Care-Level II, Hospice Election Void/Cancel
46E	Religious Non-Med (Hosp), Intm Care-Level II, Hospice Change of Ownership
46F	Religious Non-Med (Hosp), Intm Care-Level II, Beneficiary Initiated Adj Claims
46G	Religious Non-Med (Hosp), Intm Care-Level II, CWF Initiated Adj Claim
46H	Religious Non-Med (Hosp), Intm Care-Level II, CMS Initiated Adj Claim
46I	Religious Non-Med (Hosp), Intm Care-Level II, FI Adj Claim (other than PRO/Pro
46J	Religious Non-Med (Hosp), Intm Care-Level II, Initiated Adj Claim-Other
46K	Religious Non-Med (Hosp), Intm Care-Level II, OIG Initiated Adj Claim
46M	Religious Non-Med (Hosp), Intm Care-Level II, MSP Initiated Adj Claim
46P	Religious Non-Med (Hosp), Intm Care-Level II, QIO Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
48	Swing Bed - Religious Nonmedical Hospital
480	Religious Non-Med (Hosp), Swing Bed, Nonpayment/zero claims
481	Religious Non-Med (Hosp), Swing Bed, Admit Through Discharge Claim
482	Religious Non-Med (Hosp), Swing Bed, Interim-First Claim
483	Religious Non-Med (Hosp), Swing Bed, Interim-Continuing Claims
484	Religious Non-Med (Hosp), Swing Bed, Interim-Last Claim
485	Religious Non-Med (Hosp), Swing Bed, Late Charge Only
487	Religious Non-Med (Hosp), Swing Bed, Replacement of Prior Claims
488	Religious Non-Med (Hosp), Swing Bed, Void/Cancel of a Prior Claim
489	Religious Non-Med (Hosp), Swing Bed, Final Clms for HH PPS Episode
48A	Religious Non-Med (Hosp), Swing Bed, Hospice Admission Notice
48B	Religious Non-Med (Hosp), Swing Bed, Hospice Term/Revocation Notice
48C	Religious Non-Med (Hosp), Swing Bed, Hospice Change of Provider Notice
48D	Religious Non-Med (Hosp), Swing Bed, Hospice Election Void/Cancel
48E	Religious Non-Med (Hosp), Swing Bed, Hospice Change of Ownership
48F	Religious Non-Med (Hosp), Swing Bed, Beneficiary Initiated Adj Claims
48G	Religious Non-Med (Hosp), Swing Bed, CWF Initiated Adj Claim
48H	Religious Non-Med (Hosp), Swing Bed, CMS Initiated Adj Claim
48I	Religious Non-Med (Hosp), Swing Bed, FI Adj Claim (other than PRO/Prov)



CODE	TYPE OF BILL CODE DESCRIPTION
48J	Religious Non-Med (Hosp), Swing Bed, Initiated Adj Claim-Other
48K	Religious Non-Med (Hosp), Swing Bed, OIG Initiated Adj Claim
48M	Religious Non-Med (Hosp), Swing Bed, MSP Initiated Adj Claim
48P	Religious Non-Med (Hosp), Swing Bed, QIO Adj Claim
61	Inpatient (Part A) - Intermediate Care
610	Intm Care, Inpat (Pt A), Nonpayment/zero claims
611	Intm Care, Inpat (Pt A), Admit Through Discharge Claim
612	Intm Care, Inpat (Pt A), Interim-First Claim
613	Intm Care, Inpat (Pt A), Interim-Continuing Claims
614	Intm Care, Inpat (Pt A), Interim-Last Claim
615	Intm Care, Inpat (Pt A), Late Charge Only
617	Intm Care, Inpat (Pt A), Replacement of Prior Claims
618	Intm Care, Inpat (Pt A), Void/Cancel of a Prior Claim
619	Intm Care, Inpat (Pt A), Final Clms for HH PPS Episode
61A	Intm Care, Inpat (Pt A), Hospice Admission Notice
61B	Intm Care, Inpat (Pt A), Hospice Term/Revocation Notice
61C	Intm Care, Inpat (Pt A), Hospice Change of Provider Notice
61D	Intm Care, Inpat (Pt A), Hospice Election Void/Cancel
61E	Intm Care, Inpat (Pt A), Hospice Change of Ownership



CODE	TYPE OF BILL CODE DESCRIPTION
61F	Intm Care, Inpat (Pt A), Beneficiary Initiated Adj Claims
61G	Intm Care, Inpat (Pt A), CWF Initiated Adj Claim
61H	Intm Care, Inpat (Pt A), CMS Initiated Adj Claim
61I	Intm Care, Inpat (Pt A), FI Adj Claim (other than PRO/Prov)
61J	Intm Care, Inpat (Pt A), Initiated Adj Claim-Other
61K	Intm Care, Inpat (Pt A), OIG Initiated Adj Claim
61M	Intm Care, Inpat (Pt A), MSP Initiated Adj Claim
61P	Intm Care, Inpat (Pt A), QIO Adj Claim
62	Inpatient (Part B) - Intermediate Care
620	Intm Care, Hosp Based/Inpat (Pt B), Nonpayment/zero claims
621	Intm Care, Hosp Based/Inpat (Pt B), Admit Through Discharge Claim
622	Intm Care, Hosp Based/Inpat (Pt B), Interim-First Claim
623	Intm Care, Hosp Based/Inpat (Pt B), Interim-Continuing Claims
624	Intm Care, Hosp Based/Inpat (Pt B), Interim-Last Claim
625	Intm Care, Hosp Based/Inpat (Pt B), Late Charge Only
627	Intm Care, Hosp Based/Inpat (Pt B), Replacement of Prior Claims
628	Intm Care, Hosp Based/Inpat (Pt B), Void/Cancel of a Prior Claim
629	Intm Care, Hosp Based/Inpat (Pt B), Final Clms for HH PPS Episode
62A	Intm Care, Hosp Based/Inpat (Pt B), Hospice Admission Notice



CODE	TYPE OF BILL CODE DESCRIPTION
62B	Intm Care, Hosp Based/Inpat (Pt B), Hospice Term/Revocation Notice
62C	Intm Care, Hosp Based/Inpat (Pt B), Hospice Change of Provider Notice
62D	Intm Care, Hosp Based/Inpat (Pt B), Hospice Election Void/Cancel
62E	Intm Care, Hosp Based/Inpat (Pt B), Hospice Change of Ownership
62F	Intm Care, Hosp Based/Inpat (Pt B), Beneficiary Initiated Adj Claims
62G	Intm Care, Hosp Based/Inpat (Pt B), CWF Initiated Adj Claim
62H	Intm Care, Hosp Based/Inpat (Pt B), CMS Initiated Adj Claim
62I	Intm Care, Hosp Based/Inpat (Pt B), FI Adj Claim (other than PRO/Prov)
62J	Intm Care, Hosp Based/Inpat (Pt B), Initiated Adj Claim-Other
62K	Intm Care, Hosp Based/Inpat (Pt B), OIG Initiated Adj Claim
62M	Intm Care, Hosp Based/Inpat (Pt B), MSP Initiated Adj Claim
62P	Intm Care, Hosp Based/Inpat (Pt B), QIO Adj Claim
63	Outpatient - Intermediate Care
630	Intm Care, Outpat, Nonpayment/zero claims
631	Intm Care, Outpat, Admit Through Discharge Claim
632	Intm Care, Outpat, Interim-First Claim
633	Intm Care, Outpat, Interim-Continuing Claims
634	Intm Care, Outpat, Interim-Last Claim
635	Intm Care, Outpat, Late Charge Only



CODE	TYPE OF BILL CODE DESCRIPTION
637	Intm Care, Outpat, Replacement of Prior Claims
638	Intm Care, Outpat, Void/Cancel of a Prior Claim
639	Intm Care, Outpat, Final Clms for HH PPS Episode
63A	Intm Care, Outpat, Hospice Admission Notice
63B	Intm Care, Outpat, Hospice Term/Revocation Notice
63C	Intm Care, Outpat, Hospice Change of Provider Notice
63D	Intm Care, Outpat, Hospice Election Void/Cancel
63E	Intm Care, Outpat, Hospice Change of Ownership
63F	Intm Care, Outpat, Beneficiary Initiated Adj Claims
63G	Intm Care, Outpat, CWF Initiated Adj Claim
63H	Intm Care, Outpat, CMS Initiated Adj Claim
63I	Intm Care, Outpat, FI Adj Claim (other than PRO/Prov)
63J	Intm Care, Outpat, Initiated Adj Claim-Other
63K	Intm Care, Outpat, OIG Initiated Adj Claim
63M	Intm Care, Outpat, MSP Initiated Adj Claim
63P	Intm Care, Outpat, QIO Adj Claim
64	Other (Part B) - Intermediate Care
640	Intm Care, Other (Pt B), Nonpayment/zero claims
641	Intm Care, Other (Pt B), Admit Through Discharge Claim



CODE	TYPE OF BILL CODE DESCRIPTION
642	Intm Care, Other (Pt B), Interim-First Claim
643	Intm Care, Other (Pt B), Interim-Continuing Claims
644	Intm Care, Other (Pt B), Interim-Last Claim
645	Intm Care, Other (Pt B), Late Charge Only
647	Intm Care, Other (Pt B), Replacement of Prior Claims
648	Intm Care, Other (Pt B), Void/Cancel of a Prior Claim
649	Intm Care, Other (Pt B), Final Clms for HH PPS Episode
64A	Intm Care, Other (Pt B), Hospice Admission Notice
64B	Intm Care, Other (Pt B), Hospice Term/Revocation Notice
64C	Intm Care, Other (Pt B), Hospice Change of Provider Notice
64D	Intm Care, Other (Pt B), Hospice Election Void/Cancel
64E	Intm Care, Other (Pt B), Hospice Change of Ownership
64F	Intm Care, Other (Pt B), Beneficiary Initiated Adj Claims
64G	Intm Care, Other (Pt B), CWF Initiated Adj Claim
64H	Intm Care, Other (Pt B), CMS Initiated Adj Claim
64I	Intm Care, Other (Pt B), FI Adj Claim (other than PRO/Prov)
64J	Intm Care, Other (Pt B), Initiated Adj Claim-Other
64K	Intm Care, Other (Pt B), OIG Initiated Adj Claim
64M	Intm Care, Other (Pt B), MSP Initiated Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
64P	Intm Care, Other (Pt B), QIO Adj Claim
65	Intermediate Care - Level I - Intermediate Care
650	Intm Care, Intm Care-Level I, Nonpayment/zero claims
651	Intm Care, Intm Care-Level I, Admit Through Discharge Claim
652	Intm Care, Intm Care-Level I, Interim-First Claim
653	Intm Care, Intm Care-Level I, Interim-Continuing Claims
654	Intm Care, Intm Care-Level I, Interim-Last Claim
655	Intm Care, Intm Care-Level I, Late Charge Only
657	Intm Care, Intm Care-Level I, Replacement of Prior Claims
658	Intm Care, Intm Care-Level I, Void/Cancel of a Prior Claim
659	Intm Care, Intm Care-Level I, Final Clms for HH PPS Episode
65A	Intm Care, Intm Care-Level I, Hospice Admission Notice
65B	Intm Care, Intm Care-Level I, Hospice Term/Revocation Notice
65C	Intm Care, Intm Care-Level I, Hospice Change of Provider Notice
65D	Intm Care, Intm Care-Level I, Hospice Election Void/Cancel
65E	Intm Care, Intm Care-Level I, Hospice Change of Ownership
65F	Intm Care, Intm Care-Level I, Beneficiary Initiated Adj Claims
65G	Intm Care, Intm Care-Level I, CWF Initiated Adj Claim
65H	Intm Care, Intm Care-Level I, CMS Initiated Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
65I	Intm Care, Intm Care-Level I, FI Adj Claim (other than PRO/Prov)
65J	Intm Care, Intm Care-Level I, Initiated Adj Claim-Other
65K	Intm Care, Intm Care-Level I, OIG Initiated Adj Claim
65M	Intm Care, Intm Care-Level I, MSP Initiated Adj Claim
65P	Intm Care, Intm Care-Level I, QIO Adj Claim
66	Intermediate Care - Level II - Intermediate Care
660	Intm Care, Intm Care-Level II, Nonpayment/zero claims
661	Intm Care, Intm Care-Level II, Admit Through Discharge Claim
662	Intm Care, Intm Care-Level II, Interim-First Claim
663	Intm Care, Intm Care-Level II, Interim-Continuing Claims
664	Intm Care, Intm Care-Level II, Interim-Last Claim
665	Intm Care, Intm Care-Level II, Late Charge Only
667	Intm Care, Intm Care-Level II, Replacement of Prior Claims
668	Intm Care, Intm Care-Level II, Void/Cancel of a Prior Claim
669	Intm Care, Intm Care-Level II, Final Clms for HH PPS Episode
66A	Intm Care, Intm Care-Level II, Hospice Admission Notice
66B	Intm Care, Intm Care-Level II, Hospice Term/Revocation Notice
66C	Intm Care, Intm Care-Level II, Hospice Change of Provider Notice
66D	Intm Care, Intm Care-Level II, Hospice Election Void/Cancel



CODE	TYPE OF BILL CODE DESCRIPTION
66E	Intm Care, Intm Care-Level II, Hospice Change of Ownership
66F	Intm Care, Intm Care-Level II, Beneficiary Initiated Adj Claims
66G	Intm Care, Intm Care-Level II, CWF Initiated Adj Claim
66H	Intm Care, Intm Care-Level II, CMS Initiated Adj Claim
66I	Intm Care, Intm Care-Level II, FI Adj Claim (other than PRO/Prov)
66J	Intm Care, Intm Care-Level II, Initiated Adj Claim-Other
66K	Intm Care, Intm Care-Level II, OIG Initiated Adj Claim
66M	Intm Care, Intm Care-Level II, MSP Initiated Adj Claim
66P	Intm Care, Intm Care-Level II, QIO Adj Claim
68	Swing Bed - Intermediate Care
680	Intm Care, Swing Bed, Nonpayment/zero claims
681	Intm Care, Swing Bed, Admit Through Discharge Claim
682	Intm Care, Swing Bed, Interim-First Claim
683	Intm Care, Swing Bed, Interim-Continuing Claims
684	Intm Care, Swing Bed, Interim-Last Claim
685	Intm Care, Swing Bed, Late Charge Only
687	Intm Care, Swing Bed, Replacement of Prior Claims
688	Intm Care, Swing Bed, Void/Cancel of a Prior Claim
689	Intm Care, Swing Bed, Final Clms for HH PPS Episode
682 683 684 685 687 688	Intm Care, Swing Bed, Interim-First Claim Intm Care, Swing Bed, Interim-Continuing Claims Intm Care, Swing Bed, Interim-Last Claim Intm Care, Swing Bed, Late Charge Only Intm Care, Swing Bed, Replacement of Prior Claims Intm Care, Swing Bed, Void/Cancel of a Prior Claim



CODE	TYPE OF BILL CODE DESCRIPTION
68A	Intm Care, Swing Bed, Hospice Admission Notice
68B	Intm Care, Swing Bed, Hospice Term/Revocation Notice
68C	Intm Care, Swing Bed, Hospice Change of Provider Notice
68D	Intm Care, Swing Bed, Hospice Election Void/Cancel
68E	Intm Care, Swing Bed, Hospice Change of Ownership
68F	Intm Care, Swing Bed, Beneficiary Initiated Adj Claims
68G	Intm Care, Swing Bed, CWF Initiated Adj Claim
68H	Intm Care, Swing Bed, CMS Initiated Adj Claim
68I	Intm Care, Swing Bed, FI Adj Claim (other than PRO/Prov)
68J	Intm Care, Swing Bed, Initiated Adj Claim-Other
68K	Intm Care, Swing Bed, OIG Initiated Adj Claim
68M	Intm Care, Swing Bed, MSP Initiated Adj Claim
68P	Intm Care, Swing Bed, QIO Adj Claim
71	Rural Health Clinic (RHC) - Clinic or Hospital Based Renal Dialysis Facility
710	Clinic/Hosp Based RDF, RHC, Nonpayment/zero claims
711	Clinic/Hosp Based RDF, RHC, Admit Through Discharge Claim
712	Clinic/Hosp Based RDF, RHC, Interim-First Claim
713	Clinic/Hosp Based RDF, RHC, Interim-Continuing Claims
714	Clinic/Hosp Based RDF, RHC, Interim-Last Claim



CODE	TYPE OF BILL CODE DESCRIPTION
715	Clinic/Hosp Based RDF, RHC, Late Charge Only
717	Clinic/Hosp Based RDF, RHC, Replacement of Prior Claims
718	Clinic/Hosp Based RDF, RHC, Void/Cancel of a Prior Claim
719	Clinic/Hosp Based RDF, RHC, Final Clms for HH PPS Episode
71A	Clinic/Hosp Based RDF, RHC, Hospice Admission Notice
71B	Clinic/Hosp Based RDF, RHC, Hospice Term/Revocation Notice
71C	Clinic/Hosp Based RDF, RHC, Hospice Change of Provider Notice
71D	Clinic/Hosp Based RDF, RHC, Hospice Election Void/Cancel
71E	Clinic/Hosp Based RDF, RHC, Hospice Change of Ownership
71F	Clinic/Hosp Based RDF, RHC, Beneficiary Initiated Adj Claims
71G	Clinic/Hosp Based RDF, RHC, CWF Initiated Adj Claim
71H	Clinic/Hosp Based RDF, RHC, CMS Initiated Adj Claim
71 I	Clinic/Hosp Based RDF, RHC, FI Adj Claim (other than PRO/Prov)
71J	Clinic/Hosp Based RDF, RHC, Initiated Adj Claim-Other
71K	Clinic/Hosp Based RDF, RHC, OIG Initiated Adj Claim
71M	Clinic/Hosp Based RDF, RHC, MSP Initiated Adj Claim
71P	Clinic/Hosp Based RDF, RHC, QIO Adj Claim
72	Hospital Based or Independent Renal Dialysis Facility - Clinic or Hospital Based Renal Dialysis Facility
720	Clinic/Hosp Based RDF, Hosp Based/IRDF, Nonpayment/zero claims



CODE	TYPE OF BILL CODE DESCRIPTION
721	Clinic/Hosp Based RDF, Hosp Based/IRDF, Admit Through Discharge Claim
722	Clinic/Hosp Based RDF, Hosp Based/IRDF, Interim-First Claim
723	Clinic/Hosp Based RDF, Hosp Based/IRDF, Interim-Continuing Claims
724	Clinic/Hosp Based RDF, Hosp Based/IRDF, Interim-Last Claim
725	Clinic/Hosp Based RDF, Hosp Based/IRDF, Late Charge Only
727	Clinic/Hosp Based RDF, Hosp Based/IRDF, Replacement of Prior Claims
728	Clinic/Hosp Based RDF, Hosp Based/IRDF, Void/Cancel of a Prior Claim
729	Clinic/Hosp Based RDF, Hosp Based/IRDF, Final Clms for HH PPS Episode
72A	Clinic/Hosp Based RDF, Hosp Based/IRDF, Hospice Admission Notice
72B	Clinic/Hosp Based RDF, Hosp Based/IRDF, Hospice Term/Revocation Notice
72C	Clinic/Hosp Based RDF, Hosp Based/IRDF, Hospice Change of Provider Notice
72D	Clinic/Hosp Based RDF, Hosp Based/IRDF, Hospice Election Void/Cancel
72E	Clinic/Hosp Based RDF, Hosp Based/IRDF, Hospice Change of Ownership
72F	Clinic/Hosp Based RDF, Hosp Based/IRDF, Beneficiary Initiated Adj Claims
72G	Clinic/Hosp Based RDF, Hosp Based/IRDF, CWF Initiated Adj Claim
72H	Clinic/Hosp Based RDF, Hosp Based/IRDF, CMS Initiated Adj Claim
72 I	Clinic/Hosp Based RDF, Hosp Based/IRDF, FI Adj Claim (other than PRO/Prov)
72J	Clinic/Hosp Based RDF, Hosp Based/IRDF, Initiated Adj Claim-Other
72K	Clinic/Hosp Based RDF, Hosp Based/IRDF, OIG Initiated Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
72M	Clinic/Hosp Based RDF, Hosp Based/IRDF, MSP Initiated Adj Claim
72P	Clinic/Hosp Based RDF, Hosp Based/IRDF, QIO Adj Claim
73	Free Standing Provider-Based Federally Qualified Health Center (FQHC) - Clinic or Hospital Based Renal Dialysis Facility
730	Clinic/Hosp Based RDF, FQHC, Nonpayment/zero claims
731	Clinic/Hosp Based RDF, FQHC, Admit Through Discharge Claim
732	Clinic/Hosp Based RDF, FQHC, Interim-First Claim
733	Clinic/Hosp Based RDF, FQHC, Interim-Continuing Claims
734	Clinic/Hosp Based RDF, FQHC, Interim-Last Claim
735	Clinic/Hosp Based RDF, FQHC, Late Charge Only
737	Clinic/Hosp Based RDF, FQHC, Replacement of Prior Claims
738	Clinic/Hosp Based RDF, FQHC, Void/Cancel of a Prior Claim
739	Clinic/Hosp Based RDF, FQHC, Final Clms for HH PPS Episode
73A	Clinic/Hosp Based RDF, FQHC, Hospice Admission Notice
73B	Clinic/Hosp Based RDF, FQHC, Hospice Term/Revocation Notice
73C	Clinic/Hosp Based RDF, FQHC, Hospice Change of Provider Notice
73D	Clinic/Hosp Based RDF, FQHC, Hospice Election Void/Cancel
73E	Clinic/Hosp Based RDF, FQHC, Hospice Change of Ownership
73F	Clinic/Hosp Based RDF, FQHC, Beneficiary Initiated Adj Claims
73G	Clinic/Hosp Based RDF, FQHC, CWF Initiated Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION
73H	Clinic/Hosp Based RDF, FQHC, CMS Initiated Adj Claim
73 I	Clinic/Hosp Based RDF, FQHC, FI Adj Claim (other than PRO/Prov)
73J	Clinic/Hosp Based RDF, FQHC, Initiated Adj Claim-Other
73K	Clinic/Hosp Based RDF, FQHC, OIG Initiated Adj Claim
73M	Clinic/Hosp Based RDF, FQHC, MSP Initiated Adj Claim
73P	Clinic/Hosp Based RDF, FQHC, QIO Adj Claim
74	Other Rehabilitation Facility (ORF) - Clinic or Hospital Based Renal Dialysis Facility
740	Clinic/Hosp Based RDF, ORF, Nonpayment/zero claims
741	Clinic/Hosp Based RDF, ORF, Admit Through Discharge Claim
742	Clinic/Hosp Based RDF, ORF, Interim-First Claim
743	Clinic/Hosp Based RDF, ORF, Interim-Continuing Claims
744	Clinic/Hosp Based RDF, ORF, Interim-Last Claim
745	Clinic/Hosp Based RDF, ORF, Late Charge Only
747	Clinic/Hosp Based RDF, ORF, Replacement of Prior Claims
748	Clinic/Hosp Based RDF, ORF, Void/Cancel of a Prior Claim
749	Clinic/Hosp Based RDF, ORF, Final Clms for HH PPS Episode
74A	Clinic/Hosp Based RDF, ORF, Hospice Admission Notice
74B	Clinic/Hosp Based RDF, ORF, Hospice Term/Revocation Notice
74C	Clinic/Hosp Based RDF, ORF, Hospice Change of Provider Notice



CODE	TYPE OF BILL CODE DESCRIPTION
74D	Clinic/Hosp Based RDF, ORF, Hospice Election Void/Cancel
74E	Clinic/Hosp Based RDF, ORF, Hospice Change of Ownership
74F	Clinic/Hosp Based RDF, ORF, Beneficiary Initiated Adj Claims
74G	Clinic/Hosp Based RDF, ORF, CWF Initiated Adj Claim
74H	Clinic/Hosp Based RDF, ORF, CMS Initiated Adj Claim
74I	Clinic/Hosp Based RDF, ORF, FI Adj Claim (other than PRO/Prov)
74J	Clinic/Hosp Based RDF, ORF, Initiated Adj Claim-Other
74K	Clinic/Hosp Based RDF, ORF, OIG Initiated Adj Claim
74M	Clinic/Hosp Based RDF, ORF, MSP Initiated Adj Claim
74P	Clinic/Hosp Based RDF, ORF, QIO Adj Claim
75	Comprehensive Outpatient Rehabilitation Facility (CORF) - Clinic or Hospital Based Renal Dialysis Facility
750	Clinic/Hosp Based RDF, CORF, Nonpayment/zero claims
751	Clinic/Hosp Based RDF, CORF, Admit Through Discharge Claim
752	Clinic/Hosp Based RDF, CORF, Interim-First Claim
753	Clinic/Hosp Based RDF, CORF, Interim-Continuing Claims
754	Clinic/Hosp Based RDF, CORF, Interim-Last Claim
755	Clinic/Hosp Based RDF, CORF, Late Charge Only
757	Clinic/Hosp Based RDF, CORF, Replacement of Prior Claims
758	Clinic/Hosp Based RDF, CORF, Void/Cancel of a Prior Claim



CODE	TYPE OF BILL CODE DESCRIPTION
759	Clinic/Hosp Based RDF, CORF, Final Clms for HH PPS Episode
75A	Clinic/Hosp Based RDF, CORF, Hospice Admission Notice
75B	Clinic/Hosp Based RDF, CORF, Hospice Term/Revocation Notice
75C	Clinic/Hosp Based RDF, CORF, Hospice Change of Provider Notice
75D	Clinic/Hosp Based RDF, CORF, Hospice Election Void/Cancel
75E	Clinic/Hosp Based RDF, CORF, Hospice Change of Ownership
75F	Clinic/Hosp Based RDF, CORF, Beneficiary Initiated Adj Claims
75G	Clinic/Hosp Based RDF, CORF, CWF Initiated Adj Claim
75H	Clinic/Hosp Based RDF, CORF, CMS Initiated Adj Claim
75 I	Clinic/Hosp Based RDF, CORF, FI Adj Claim (other than PRO/Prov)
75J	Clinic/Hosp Based RDF, CORF, Initiated Adj Claim-Other
75K	Clinic/Hosp Based RDF, CORF, OIG Initiated Adj Claim
75M	Clinic/Hosp Based RDF, CORF, MSP Initiated Adj Claim
75P	Clinic/Hosp Based RDF, CORF, QIO Adj Claim
76	Community Mental Health Center (CMHC) - Clinic or Hospital Based Renal Dialysis Facility
760	Clinic/Hosp Based RDF, CMHC, Nonpayment/zero claims
761	Clinic/Hosp Based RDF, CMHC, Admit Through Discharge Claim
762	Clinic/Hosp Based RDF, CMHC, Interim-First Claim
763	Clinic/Hosp Based RDF, CMHC, Interim-Continuing Claims



CODE	TYPE OF BILL CODE DESCRIPTION
764	Clinic/Hosp Based RDF, CMHC, Interim-Last Claim
765	Clinic/Hosp Based RDF, CMHC, Late Charge Only
767	Clinic/Hosp Based RDF, CMHC, Replacement of Prior Claims
768	Clinic/Hosp Based RDF, CMHC, Void/Cancel of a Prior Claim
769	Clinic/Hosp Based RDF, CMHC, Final Clms for HH PPS Episode
76A	Clinic/Hosp Based RDF, CMHC, Hospice Admission Notice
76B	Clinic/Hosp Based RDF, CMHC, Hospice Term/Revocation Notice
76C	Clinic/Hosp Based RDF, CMHC, Hospice Change of Provider Notice
76D	Clinic/Hosp Based RDF, CMHC, Hospice Election Void/Cancel
76E	Clinic/Hosp Based RDF, CMHC, Hospice Change of Ownership
76F	Clinic/Hosp Based RDF, CMHC, Beneficiary Initiated Adj Claims
76G	Clinic/Hosp Based RDF, CMHC, CWF Initiated Adj Claim
76H	Clinic/Hosp Based RDF, CMHC, CMS Initiated Adj Claim
76I	Clinic/Hosp Based RDF, CMHC, FI Adj Claim (other than PRO/Prov)
76J	Clinic/Hosp Based RDF, CMHC, Initiated Adj Claim-Other
76K	Clinic/Hosp Based RDF, CMHC, OIG Initiated Adj Claim
76M	Clinic/Hosp Based RDF, CMHC, MSP Initiated Adj Claim
76P	Clinic/Hosp Based RDF, CMHC, QIO Adj Claim
77	Reserved - Clinic or Hospital Based Renal Dialysis Facility



CODE	TYPE OF BILL CODE DESCRIPTION
770	Clinic/Hosp Based RDF, FQHC, Nonpayment/zero claims
771	Clinic/Hosp Based RDF, FQHC, Admit Through Discharge Claim
772	Clinic/Hosp Based RDF, FQHC, Interim-First Claim
773	Clinic/Hosp Based RDF, FQHC, Interim-Continuing Claims
774	Clinic/Hosp Based RDF, FQHC, Interim-Last Claim
775	Clinic/Hosp Based RDF, FQHC, Late Charge Only
777	Clinic/Hosp Based RDF, FQHC, Replacement of Prior Claims
778	Clinic/Hosp Based RDF, FQHC, Void/Cancel of a Prior Claim
779	Clinic/Hosp Based RDF, FQHC, Final Clms for HH PPS Episode
77A	Clinic/Hosp Based RDF, FQHC, Hospice Admission Notice
77B	Clinic/Hosp Based RDF, FQHC, Hospice Term/Revocation Notice
77C	Clinic/Hosp Based RDF, FQHC, Hospice Change of Provider Notice
77D	Clinic/Hosp Based RDF, FQHC, Hospice Election Void/Cancel
77E	Clinic/Hosp Based RDF, FQHC, Hospice Change of Ownership
77F	Clinic/Hosp Based RDF, FQHC, Beneficiary Initiated Adj Claims
77G	Clinic/Hosp Based RDF, FQHC, CWF Initiated Adj Claim
77H	Clinic/Hosp Based RDF, FQHC, CMS Initiated Adj Claim
77I	Clinic/Hosp Based RDF, FQHC, FI Adj Claim (other than PRO/Prov)
77 J	Clinic/Hosp Based RDF, FQHC, Initiated Adj Claim-Other



CODE	TYPE OF BILL CODE DESCRIPTION
77K	Clinic/Hosp Based RDF, FQHC, OIG Initiated Adj Claim
77M	Clinic/Hosp Based RDF, FQHC, MSP Initiated Adj Claim
77P	Clinic/Hosp Based RDF, FQHC, QIO Adj Claim
78	Reserved - Clinic or Hospital Based Renal Dialysis Facility
780	Spc Fac/Hosp, Emergency Facility, Nonpayment/zero claims
781	Spc Fac/Hosp, Emergency Facility, Admit Through Discharge Claim
782	Spc Fac/Hosp, Emergency Facility, Interim-First Claim
783	Spc Fac/Hosp, Emergency Facility, Interim-Continuing Claims
784	Spc Fac/Hosp, Emergency Facility, Interim-Last Claim
785	Spc Fac/Hosp, Emergency Facility, Late Charge Only
787	Spc Fac/Hosp, Emergency Facility, Replacement of Prior Claims
788	Spc Fac/Hosp, Emergency Facility, Void/Cancel of a Prior Claim
789	Spc Fac/Hosp, Emergency Facility, Final Clms for HH PPS Episode
78A	Spc Fac/Hosp, Emergency Facility, Hospice Admission Notice
78B	Spc Fac/Hosp, Emergency Facility, Hospice Term/Revocation Notice
78C	Spc Fac/Hosp, Emergency Facility, Hospice Change of Provider Notice
78D	Spc Fac/Hosp, Emergency Facility, Hospice Election Void/Cancel
78E	Spc Fac/Hosp, Emergency Facility, Hospice Change of Ownership
78F	Spc Fac/Hosp, Emergency Facility, Beneficiary Initiated Adj Claims



CODE	TYPE OF BILL CODE DESCRIPTION
78G	Spc Fac/Hosp, Emergency Facility, CWF Initiated Adj Claim
78H	Spc Fac/Hosp, Emergency Facility, CMS Initiated Adj Claim
78 I	Spc Fac/Hosp, Emergency Facility, FI Adj Claim (other than PRO/Prov)
78J	Spc Fac/Hosp, Emergency Facility, Initiated Adj Claim-Other
78K	Spc Fac/Hosp, Emergency Facility, OIG Initiated Adj Claim
78M	Spc Fac/Hosp, Emergency Facility, MSP Initiated Adj Claim
78P	Spc Fac/Hosp, Emergency Facility, QIO Adj Claim
79	Other - Clinic or Hospital Based Renal Dialysis Facility
790	Clinic/Hosp Based RDF, Other, Nonpayment/zero claims
791	Clinic/Hosp Based RDF, Other, Admit Through Discharge Claim
792	Clinic/Hosp Based RDF, Other, Interim-First Claim
793	Clinic/Hosp Based RDF, Other, Interim-Continuing Claims
794	Clinic/Hosp Based RDF, Other, Interim-Last Claim
795	Clinic/Hosp Based RDF, Other, Late Charge Only
797	Clinic/Hosp Based RDF, Other, Replacement of Prior Claims
798	Clinic/Hosp Based RDF, Other, Void/Cancel of a Prior Claim
799	Clinic/Hosp Based RDF, Other, Final Clms for HH PPS Episode
79A	Clinic/Hosp Based RDF, Other, Hospice Admission Notice
79B	Clinic/Hosp Based RDF, Other, Hospice Term/Revocation Notice



CODE	TYPE OF BILL CODE DESCRIPTION
79C	Clinic/Hosp Based RDF, Other, Hospice Change of Provider Notice
79D	Clinic/Hosp Based RDF, Other, Hospice Election Void/Cancel
79E	Clinic/Hosp Based RDF, Other, Hospice Change of Ownership
79F	Clinic/Hosp Based RDF, Other, Beneficiary Initiated Adj Claims
79G	Clinic/Hosp Based RDF, Other, CWF Initiated Adj Claim
79H	Clinic/Hosp Based RDF, Other, CMS Initiated Adj Claim
79 I	Clinic/Hosp Based RDF, Other, FI Adj Claim (other than PRO/Prov)
79J	Clinic/Hosp Based RDF, Other, Initiated Adj Claim-Other
79K	Clinic/Hosp Based RDF, Other, OIG Initiated Adj Claim
79M	Clinic/Hosp Based RDF, Other, MSP Initiated Adj Claim
79P	Clinic/Hosp Based RDF, Other, QIO Adj Claim
81	Hospice (Nonhospital Based) - Special Facility or Hospital ASC Surgery
810	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Nonpayment/zero claims
811	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Admit Through Discharge Claim
812	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Interim-First Claim
813	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Interim-Continuing Claims
814	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Interim-Last Claim
815	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Late Charge Only
816	Spc Fac/Hosp ASC Surg, NCQA Defined



CODE	TYPE OF BILL CODE DESCRIPTION
817	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Replacement of Prior Claims
818	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Void/Cancel of a Prior Claim
819	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Final Clms for HH PPS Episode
81A	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Hospice Admission Notice
81B	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Hospice Term/Revocation Notice
81C	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Hospice Change of Provider Notice
81D	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Hospice Election Void/Cancel
81E	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Hospice Change of Ownership
81F	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Beneficiary Initiated Adj Claims
81G	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), CWF Initiated Adj Claim
81H	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), CMS Initiated Adj Claim
81I	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), FI Adj Claim (other than PRO/P
81J	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), Initiated Adj Claim-Other
81K	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), OIG Initiated Adj Claim
81M	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), MSP Initiated Adj Claim
81P	Spc Fac/Hosp ASC Surg, Hospice (NonHosp Based), QIO Adj Claim
82	Hospice (Hospital Based) - Special Facility or Hospital ASC Surgery
820	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Nonpayment/zero claims
821	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Admit Through Discharge Claim



CODE	TYPE OF BILL CODE DESCRIPTION
822	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Interim-First Claim
823	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Interim-Continuing Claims
824	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Interim-Last Claim
825	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Late Charge Only
826	Spc Fac/Hosp ASC Surg, NCQA Defined
827	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Replacement of Prior Claims
828	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Void/Cancel of a Prior Claim
829	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Final Clms for HH PPS Episode
82A	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Hospice Admission Notice
82B	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Hospice Term/Revocation Notice
82C	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Hospice Change of Provider Notice
82D	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Hospice Election Void/Cancel
82E	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Hospice Change of Ownership
82F	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Beneficiary Initiated Adj Claims
82G	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), CWF Initiated Adj Claim
82H	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), CMS Initiated Adj Claim
82I	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), FI Adj Claim (other than PRO/Prov
82J	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), Initiated Adj Claim-Other
82K	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), OIG Initiated Adj Claim



CODE	TYPE OF BILL CODE DESCRIPTION	
82M	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), MSP Initiated Adj Claim	
82P	Spc Fac/Hosp ASC Surg, Hospice (Hosp Based), QIO Adj Claim	
83	Ambulatory Surgical Center Services to Hospital Outpatients - Special Facility or Hospital ASC Surgery	
830	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Nonpayment/zero claims	
831	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Admit Through Discharge Claim	
832	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Interim-First Claim	
833	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Interim-Continuing Claims	
834	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Interim-Last Claim	
835	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Late Charge Only	
837	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Replacement of Prior Claims	
838	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Void/Cancel of a Prior Claim	
839	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Final Clms for HH PPS Episode	
83A	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Hospice Admission Notice	
83B	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Hospice Term/Revocation Notice	
83C	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Hospice Change of Provider Notice	
83D	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Hospice Election Void/Cancel	
83E	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Hospice Change of Ownership	
83F	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Beneficiary Initiated Adj Claims	
83G	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, CWF Initiated Adj Claim	



CODE	TYPE OF BILL CODE DESCRIPTION	
83H	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, CMS Initiated Adj Claim	
83I	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, FI Adj Claim (other than PRO/P	
83J	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, Initiated Adj Claim-Other	
83K	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, OIG Initiated Adj Claim	
83M	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, MSP Initiated Adj Claim	
83P	Spc Fac/Hosp ASC Surg, ASC Svcs to Hosp Outpat, QIO Adj Claim	
84	Free Standing Birth Center - Special Facility or Hospital ASC Surgery	
840	Spc Fac/Hosp ASC Surg, Birthing Center, Nonpayment/zero claims	
841	Spc Fac/Hosp ASC Surg, Birthing Center, Admit Through Discharge Claim	
842	Spc Fac/Hosp ASC Surg, Birthing Center, Interim-First Claim	
843	Spc Fac/Hosp ASC Surg, Birthing Center, Interim-Continuing Claims	
844	Spc Fac/Hosp ASC Surg, Birthing Center, Interim-Last Claim	
845	Spc Fac/Hosp ASC Surg, Birthing Center, Late Charge Only	
847	Spc Fac/Hosp ASC Surg, Birthing Center, Replacement of Prior Claims	
848	Spc Fac/Hosp ASC Surg, Birthing Center, Void/Cancel of a Prior Claim	
849	Spc Fac/Hosp ASC Surg, Birthing Center, Final Clms for HH PPS Episode	
84A	Spc Fac/Hosp ASC Surg, Birthing Center, Hospice Admission Notice	
84B	Spc Fac/Hosp ASC Surg, Birthing Center, Hospice Term/Revocation Notice	
84C	Spc Fac/Hosp ASC Surg, Birthing Center, Hospice Change of Provider Notice	



CODE	TYPE OF BILL CODE DESCRIPTION	
84D	Spc Fac/Hosp ASC Surg, Birthing Center, Hospice Election Void/Cancel	
84E	Spc Fac/Hosp ASC Surg, Birthing Center, Hospice Change of Ownership	
84F	Spc Fac/Hosp ASC Surg, Birthing Center, Beneficiary Initiated Adj Claims	
84G	Spc Fac/Hosp ASC Surg, Birthing Center, CWF Initiated Adj Claim	
84H	Spc Fac/Hosp ASC Surg, Birthing Center, CMS Initiated Adj Claim	
84I	Spc Fac/Hosp ASC Surg, Birthing Center, FI Adj Claim (other than PRO/Prov)	
84J	Spc Fac/Hosp ASC Surg, Birthing Center, Initiated Adj Claim-Other	
84K	Spc Fac/Hosp ASC Surg, Birthing Center, OIG Initiated Adj Claim	
84M	Spc Fac/Hosp ASC Surg, Birthing Center, MSP Initiated Adj Claim	
84P	Spc Fac/Hosp ASC Surg, Birthing Center, QIO Adj Claim	
85	Critical Access Hospital - Special Facility or Hospital ASC Surgery	
850	Spc Fac/Hosp ASC Surg, CA Hosp, Nonpayment/zero claims	
851	Spc Fac/Hosp ASC Surg, CA Hosp, Admit Through Discharge Claim	
852	Spc Fac/Hosp ASC Surg, CA Hosp, Interim-First Claim	
853	Spc Fac/Hosp ASC Surg, CA Hosp, Interim-Continuing Claims	
854	Spc Fac/Hosp ASC Surg, CA Hosp, Interim-Last Claim	
855	Spc Fac/Hosp ASC Surg, CA Hosp, Late Charge Only	
857	Spc Fac/Hosp ASC Surg, CA Hosp, Replacement of Prior Claims	
858	Spc Fac/Hosp ASC Surg, CA Hosp, Void/Cancel of a Prior Claim	



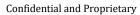
CODE	TYPE OF BILL CODE DESCRIPTION	
859	Spc Fac/Hosp ASC Surg, CA Hosp, Final Clms for HH PPS Episode	
85A	Spc Fac/Hosp ASC Surg, CA Hosp, Hospice Admission Notice	
85B	Spc Fac/Hosp ASC Surg, CA Hosp, Hospice Term/Revocation Notice	
85C	Spc Fac/Hosp ASC Surg, CA Hosp, Hospice Change of Provider Notice	
85D	Spc Fac/Hosp ASC Surg, CA Hosp, Hospice Election Void/Cancel	
85E	Spc Fac/Hosp ASC Surg, CA Hosp, Hospice Change of Ownership	
85F	Spc Fac/Hosp ASC Surg, CA Hosp, Beneficiary Initiated Adj Claims	
85G	Spc Fac/Hosp ASC Surg, CA Hosp, CWF Initiated Adj Claim	
85H	Spc Fac/Hosp ASC Surg, CA Hosp, CMS Initiated Adj Claim	
85I	Spc Fac/Hosp ASC Surg, CA Hosp, FI Adj Claim (other than PRO/Prov)	
85J	Spc Fac/Hosp ASC Surg, CA Hosp, Initiated Adj Claim-Other	
85K	Spc Fac/Hosp ASC Surg, CA Hosp, OIG Initiated Adj Claim	
85M	Spc Fac/Hosp ASC Surg, CA Hosp, MSP Initiated Adj Claim	
85P	Spc Fac/Hosp ASC Surg, CA Hosp, QIO Adj Claim	
86	Reserved - Special Facility or Hospital ASC Surgery	
860	Res Fac/Hosp, Other, Nonpayment/zero claims	
861	Res Fac/Hosp, Other, Other, Admit Through Discharge Claim	
862	Res Fac/Hosp, Other, Other, Interim-First Claim	
863	Res Fac/Hosp, Other, Other, Interim-Continuing Claims	



CODE	TYPE OF BILL CODE DESCRIPTION	
864	Res Fac/Hosp, Other, Other, Interim-Last Claim	
865	Res Fac/Hosp, Other, Other, Late Charge Only	
867	Res Fac/Hosp, Other, Other, Replacement of Prior Claims	
868	Res Fac/Hosp, Other, Other, Void/Cancel of a Prior Claim	
869	Res Fac/Hosp, Other, Other, Final Clms for HH PPS Episode	
86A	Res Fac/Hosp, Other, Other, Hospice Admission Notice	
86B	Res Fac/Hosp, Other, Other, Hospice Term/Revocation Notice	
86C	Res Fac/Hosp, Other, Other, Hospice Change of Provider Notice	
86D	Res Fac/Hosp, Other, Other, Hospice Election Void/Cancel	
86E	Res Fac/Hosp, Other, Other, Hospice Change of Ownership	
86F	Res Fac/Hosp, Other, Other, Beneficiary Initiated Adj Claims	
86G	Res Fac/Hosp, Other, Other, CWF Initiated Adj Claim	
86H	Res Fac/Hosp, Other, Other, CMS Initiated Adj Claim	
86I	Res Fac/Hosp, Other, Other, FI Adj Claim (other than PRO/Prov)	
86J	Res Fac/Hosp, Other, Other, Initiated Adj Claim-Other	
86K	Res Fac/Hosp, Other, Other, OIG Initiated Adj Claim	
86M	Res Fac/Hosp, Other, Other, MSP Initiated Adj Claim	
86P	Res Fac/Hosp, Other, Other, QIO Adj Claim	
87	Reserved - Special Facility or Hospital ASC Surgery	



CODE	TYPE OF BILL CODE DESCRIPTION			
88	Reserved - Special Facility or Hospital ASC Surgery			
89	Reserved - Special Facility or Hospital ASC Surgery			
890	Spc Fac/Hosp ASC Surg, Other, Nonpayment/zero claims			
891	Spc Fac/Hosp ASC Surg, Other, Admit Through Discharge Claim			
892	Spc Fac/Hosp ASC Surg, Other, Interim-First Claim			
893	Spc Fac/Hosp ASC Surg, Other, Interim-Continuing Claims			
894	Spc Fac/Hosp ASC Surg, Other, Interim-Last Claim			
895	Spc Fac/Hosp ASC Surg, Other, Late Charge Only			
897	Spc Fac/Hosp ASC Surg, Other, Replacement of Prior Claims			
898	Spc Fac/Hosp ASC Surg, Other, Void/Cancel of a Prior Claim			
899	Spc Fac/Hosp ASC Surg, Other, Final Clms for HH PPS Episode			
89A	Spc Fac/Hosp ASC Surg, Other, Hospice Admission Notice			
89B	Spc Fac/Hosp ASC Surg, Other, Hospice Term/Revocation Notice			
89C	Spc Fac/Hosp ASC Surg, Other, Hospice Change of Provider Notice			
89D	Spc Fac/Hosp ASC Surg, Other, Hospice Election Void/Cancel			
89E	Spc Fac/Hosp ASC Surg, Other, Hospice Change of Ownership			
89F	Spc Fac/Hosp ASC Surg, Other, Beneficiary Initiated Adj Claims			
89G	Spc Fac/Hosp ASC Surg, Other, CWF Initiated Adj Claim			
89H	Spc Fac/Hosp ASC Surg, Other, CMS Initiated Adj Claim			





CODE	TYPE OF BILL CODE DESCRIPTION
891	Spc Fac/Hosp ASC Surg, Other, FI Adj Claim (other than PRO/Prov)
89J	Spc Fac/Hosp ASC Surg, Other, Initiated Adj Claim-Other
89K	Spc Fac/Hosp ASC Surg, Other, OIG Initiated Adj Claim
89M	Spc Fac/Hosp ASC Surg, Other, MSP Initiated Adj Claim
89P	Spc Fac/Hosp ASC Surg, Other, QIO Adj Claim



APPENDIX F - SERVICE TYPE VALUES

The following table describes the service type values.

VALUE	DESCRIPTION
IP	Inpatient prospective payment system (including SNF)
OP	Outpatient PPS
PH	Physician home health
PA	Physician Anesthesia
PO	Physician Other
IRF	Inpatient Rehab Facility
IPF	Inpatient psychiatric facility
НН	Home Health
LTCH	Long-Term Care Hospital



APPENDIX G – MEDICARE FEE SCHEDULE VALUES

Medicare fee schedule values for enahanced pricer.

VALUE	DESCRIPTION
AMB	Ambulance
ANES	Anesthesia
APC	Ambulatory Payment Classification (part of OPPS)
ASC	Ambulatory Surgical Center
ASP	Average Sales Price (drugs)
BUNDL	Bundled service
САН	Critical Access Hospital
DIAL	Dialysis
DME	Durable Medical Equipment
DMESAC	Durable Medical Equipment - Splits and Casts
EXCLD	Excluded from repricing
EXTEND	Extended fee schedule
НН	Home Health Prospective Payment System
IPF	Inpatient Psychiatric Facilities Prospective Payment System
IPPS	Inpatient Prospective Payment System
IRF	Inpatient Rehabilitation Facilities Prospective Payment System
LAB	Clinical Laboratory
LTCH	Long-term Care Hospitals Prospective Payment System
OP	Outpatient Prospective Payment System
PEN	Parenteral and Enteral Nutrition
RBRVS	Resource Based Relative Value Sale (part of the Medicare Physician Fee Schedule)
SNFPPS	Skilled Nursing Facility