## Inpatient Output Data Elements

NOTE: Bolded and UPPER CASE are IDENTIFYING DATA ELEMENTS [see "Data Protection Review Board" (DPRB)]

(See Bottom of table regarding AIDS/HIV and Abortion Edits)

**COMMON DETAIL - Primary Records** 

Record	Data Element	Tyme	Size		Data Sets		Description	Daga Na
Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1-14	Discharge Sequential Number	NUM	14	х	х	х	Discharge year, plus an eight digit sequentially assigned number by SPARCS	40
15	Continuation Indicator	NUM	1	x	x	x	Indicates if continuation records exists  0 = no continuation records  1 or greater = continuation record exists	41
16-18	Record Sequence Number	NUM	3	х	х	х	Assigned by SPARCS. Indicates record's position within a set of records for a particular stay/discharge Primary Record =001 Continuation Records will be = 002 thru 016	42
19-21	Record Sequence Count	NUM	3	x	х	х	Total number of records reported for a particular patient stay/discharge	43

**PATIENT SEGMENT - Primary Records** 

Record	Data Element	Turno	Size		Data Sets		Description	Daga Na
Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
22-27	Filler	CHAR	6	х	Х	х	No Data	
28-47	PATIENT CONTROL NUMBER (UNENCRYPTED)		20		BLANK			
(2701 - 2744)	( PATIENT CONTROL NUMBER Encrypted)	CHAR	(44)	BLANK	x	х	Patient's unique number assigned by the provider	44

Record	Data Flamour	Toma	C:		Data Sets	;	Passintian	Dawa Na
Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
48-64	MEDICAL RECORD NUMBER	CHAR	17	BLANK	BLANK	x	The number used by the Medical Records Department to identify the patient's permanent	45
(2745 - 2788)	MEDICAL RECORD NUMBER Encrypted		(44)		x		medical/health record file	40
65-74	UNIQUE PERSONAL IDENTIFIER	CHAR	10	BLANK	BLANK	x	Composed of portions of last name (first2, last2),	46-47
(2789 - 2810)	UNIQUE PERSONAL IDENTIFIER Encrypted		(22)		х		first name (first 2), SNN (last 4).	
75-93	ENHANCED UNIQUE PERSONAL IDENTIFIER	CHAD	19	BLANK	BLANK	x	Unique Personal Identifier plus date of birth, and	48-49
(2811 - 2854)	ENHANCED UNIQUE PERSONAL IDENTIFIER Encrypted	- CHAR	(44)	DLANK	x	*	sex	46-49
94-101	PATIENT BIRTH DATE	- NUM	8	DAY/MO. BLANK YYYY	YYYY\MM	x	Patient Birth Date (CCYYMMDD)	50
(2855 - 2876)	PATIENT BIRTH DATE Encrypted	140101	(22)	x	х		Tallon Blan Bale (GGT TWINGS)	00
102-104	Age	NUM	3	X (BLANK if Age>90O)	х	x	Patient's age calculated at time of visit.	51
105-107	Age in Days (for Newborn)	NUM	3	BLANK	х	х	Age calculated in days for all records with age of 0 (under one year of age)	52
108	Patient Sex	CHAR	1	х	х	х	Sex of patient as recorded at start of care.  M = Male F = Female U = Unknown	53
109-110	Patient Race	CHAR	2	x	х	x	Code best describing race of patient.  "01" = White "02" = Black or African American "03" = Native American or Alaskan Native "04" = Asian "05" = Native Hawaiian or Other Pacific Islander "88" = Other Race "99" = Unknown	54

Record	Data Element	Type	Size		Data Sets		Description	Page No.
Positions		71		De-identified	Limited	Identifiable		J
111	Patient Ethnicity	CHAR	1	x	х	х	Code best describing ethnic origin of patient.  "1" = Spanish/Hispanic Origin  "2" = Not of Spanish/Hispanic Origin  "9" = Unknown	55
112-129	PATIENT ADDRESS LINE 1	01115	18		BLANK			
(2877 - 2920)	PATIENT ADDRESS LINE 1 Encrypted	CHAR	(44)	BLANK	х	X	Patient's street number, PO box number, or RFD	56
130-147	PATIENT ADDRESS LINE 2	CHAR	18	BLANK	BLANK	v		F.7
(2921- 2964)	PATIENT ADDRESS LINE 2 Encrypted	CHAR	(44)	BLANK	х	X	Continuation of the mailing address (blank if n/a)	57
148-162	Patient City	CHAR	15	BLANK	х	Х	City, Town or Village	58
163-164	Patient State	CHAR	2	х	х	х	Capitalized two-letter abbreviation for the state in which the patient's principal residence is located on the day of admission/visit, including US Territories, Commonwealth and Canadian Provinces.	59
165-169	Patient Postal Zip code	CHAR	5	1st 3 digits	х	х	Postal Service Zip Code (five digit)	60
170-173	PATIENT ZIP CODE EXTENSION		9		BLANK			
(2965 - 2986)	PATIENT ZIP CODE EXTENSION Encrypted	CHAR	22	BLANK	х	х	Zip Code Extension (four digit)	60
174-175	Patient County Code	NUM	2	BLANK	х	X	Valid two-digit code in accordance with Zip/County Code Edit Validation Table in Appendix F	61
176-177	SPARCS Region Code	CHAR	2	BLANK	х	х	Assigned by SPARCS based on county of the facility	62

**NEWBORN SEGMENT - Primary Records** 

Record Positions	Data Element	Turno	Size		Data Sets		Description	Dave No.
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
178	Newborn Flag	CHAR	1	х	х	х	Flag indicating newborn status  "0" = not newborn  "1" = newborn  "2" = one of multiple newborns	63-64
179-195	MOTHER'S MEDICAL RECORD NUMBER for Newborns	CHAR	17	BLANK	BLANK	x	Mother's Medical Record Number (MRN) of the newborn child which links to the newborn's and	65
(2987- 3030)	MOTHER'S MEDICAL RECORD NUMBER Encrypted	CHAR	44	BLANK	x	^	mother's stay.	05
196-199	NEWBORN BIRTH WEIGHT (previously Neonate Birth Weight)	NUM	4	х	х	х	Actual birth weight (in grams)	67

**FACILITY SEGMENT - Primary Records** 

TAGIETT GEGINEN					Data Sets			
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
200-205	Facility Identifier (previously SPARCS Identification Number)	CHAR	6	BLANK IF ABORTION PROC/DIAG PRESENT	BLANK IF ABORTION PROC/DIAG PRESENT	x	Number assigned by the NYSDOH upon certification. Previously Permanent Facility Identifier (PFI).	68
206	Facility Identifier Check Digit	CHAR	1	x	х	x	Follows the Facility Identifier Assigned by the SPARCS Administrative Unit.	69
207-276	Facility Name	CHAR	70	BLANK IF ABORTION PROC/DIAG PRESENT	BLANK IF ABORTION PROC/DIAG PRESENT	x	Facility Name as maintained by the NYSDOH Division of Health Facility Planning.	70
277	Health Service Area	NUM	1	BLANK IF ABORTION PROC/DIAG PRESENT	BLANK IF ABORTION PROC/DIAG PRESENT	x	Assigned by SPARCS based on county of facility. See Appendix U.	71
278-279	Facility County	NUM	2	BLANK IF ABORTION PROC/DIAG PRESENT	BLANK IF ABORTION PROC/DIAG PRESENT	x	Assigned by SPARCS based upon county of facility. See Appendix U.	72
280-286	Operating Certificate Number	NUM	7	BLANK IF ABORTION PROC/DIAG PRESENT	BLANK IF ABORTION PROC/DIAG PRESENT	x	Number assigned by NYSDOH Division of Health Facility Planning	73
287-296	National Provider ID ( <i>previously</i> Provider Identification Number)	NUM	10	BLANK IF ABORTION PROC/DIAG PRESENT	BLANK IF ABORTION PROC/DIAG PRESENT	x	Facility's National Provider ID (NPI)	74

**PHYSICIAN SEGMENT - Primary Records** 

Record Positions	Data Element	Type	Size		Data Sets		Description	Page No
Record Fositions	Data Element	Туре	De-identified		Limited	Identifiable	Description	Page No.
297-304	Attending Provider State License Number	CHAR	8	BLANK IF ABORTION PROC/DIAG PRESENT	BLANK IF ABORTION PROC/DIAG PRESENT	x	Professional license number, issued by NYS Dept. of Ed. Identifies health care professional primarily responsible for patient's care (Attending Physician ID)	75
305-312	Operating Physician State License Number	CHAR	8	BLANK IF ABORTION PROC/DIAG PRESENT	BLANK IF ABORTION PROC/DIAG PRESENT	x	Professional license number, issued by NYS Dept. of Ed. Identifies the health care professional who performed principal procedure (Operating Physician ID)	76
313 - 320	Other Physician State License Number	CHAR	8	BLANK IF ABORTION PROC/DIAG PRESENT	BLANK IF ABORTION PROC/DIAG PRESENT	x	Professional license number, issued by NYS Dept. of Ed. Identifies other health care professional responsible for patient's care. (Other Physician ID)	77

**PAYER SEGMENT - Primary Records** 

December Decitions	Data Flamont	Time	Ciro		Data Sets		Description	Dogo No
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
321 - 325	Source of Payment Typology 1	NUM	5	х	х	х	Identifies payer expected to pay the MAJOR portion of the bill. See Appendix P for values.	78
326 - 330	Source of Payment Typology 2	NUM	5	х	х	х	Identifies secondary payer expected to pay a portion of bill. See Appendix P for values.	79
331 - 335	Source of Payment Typology 3	NUM	5	х	х	х	Identifies third payer expected to pay a portion of bill. See Appendix P for values.	80
336	Source of Payment 1	CHAR	1	x	х	х	Code indicating type of payment	81-83
337-338	Claim Filing Indicator Code 1	CHAR	2	x	х	х	X-12 code indicating type of payment	84-85
339-357	INSURED'S POLICY NUMBER 1		19		BLANK			
(3031 - 3074)	INSURED'S POLICY NUMBER 1 Encrypted	CHAR	(44)	BLANK	х	х	Insurance Policy Number	86-87
358-365	Payer ID Number 1	CHAR	8	х	х	х	NAIC ID Number or Plan Number for Insurance Company	88
366-369	Covered Days 1	NUM	4	х	х	х	Number of days covered by insurance	89
370-373	Non-Covered Days 1	NUM	4	х	х	Х	Number of days not covered by insurance	90
374-386	Billing National Provider Identification NPI 1	CHAR	13	х	х	х	Insurance Company's ID for Facility (Facility NPI)	91
387-390	Alternate Level of Care Days 1	NUM	4	х	х	х	Number of days at level of Non-Acute care	92
391-394	Leave of Absence (LOA) Days 1	NUM	4	х	Х	х	Number of days in leave of absence status	93

Barand Barattana	Pete Florent	<b>T</b>	0:		Data Sets		Description	Page No
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
395	Source of Payment 2	CHAR	1	х	х	х	Code indicating type of payment	81-83
396-397	Claim Filing Indicator Code 2	CHAR	2	х	х	х	X-12 code indicating type of payment	84-85
398-416	INSURED'S POLICY NUMBER 2		19		BLANK			
(3075 - 3118)	INSURED'S POLICY NUMBER 2 Encrypted	CHAR	(44)	BLANK	Х	X	Insurance Policy Number	86-87
417-424	Payer ID Number 2	CHAR	8	х	х	х	NAIC ID Number or Plan Number for Insurance Company	88
425-428	Covered Days 2	NUM	4	х	х	х	Number of days covered by insurance	89
429-432	Non-Covered Days 2	NUM	4	x	х	х	Number of days not covered by insurance	90
433-445	Billing National Provider NPI 2	CHAR	13	х	х	х	Insurance Company's ID for Facility (Facility NPI)	91
446-449	Alternate Level of Care Days 2	NUM	4	х	х	х	Number of days at level of Non-Acute care	92
450-453	Leave of Absence (LOA) Days 2	NUM	4	х	х	х	Number of days in leave of absence status	93
454	Source of Payment 3	CHAR	1	х	х	х	Code indicating type of payment	81-83
455-456	Claim Filing Indicator Code 3	CHAR	2	х	х	х	X-12 code indicating type of payment	84-85
457-475	INSURED'S POLICY NUMBER 3		19		BLANK			
(3119 - 3162)	INSURED'S POLICY NUMBER 3 Encrypted	CHAR	(44)	BLANK	х	х	Insurance Policy Number	86-87
476-483	Payer ID Number 3	CHAR	8	х	х	х	NAIC ID Number or Plan Number for Insurance Company	88
484-487	Covered Days 3	NUM	4	х	х	х	Number of days covered by insurance	89
488-491	Non-Covered Days 3	NUM	4	х	х	х	Number of days not covered by insurance	90
492-504	Billing National Provider NPI 3	CHAR	13	х	х	х	Insurance Company's ID for Facility (Facility NPI)	91
505-508	Alternate Level of Care Days 3	NUM	4	х	Х	х	Number of days at level of Non-Acute care	92
509-512	Leave of Absence (LOA) Days 3	NUM	4	х	Х	х	Number of days in leave of absence status	93
513	Source of Payment 4	CHAR	1	x	x	х	Code indicating type of payment	81-83
514-515	Claim Filing Indicator Code 4	CHAR	2	x	х	x	X-12 code indicating type of payment	84-85
516-534	INSURED'S POLICY NUMBER 4	CHAR	19	BLANK	BLANK	x	Insurance Policy Number	86-87
(3163 - 3206)	INSURED'S POLICY NUMBER 4 Encrypted		(44)		х		,	

Record Positions	Data Element	Туре	Size		Data Sets		Description	Page No.
Record Fositions	Data Element	Туре	3126	De-identified	Limited	Identifiable	Description	rage No.
535-542	Payer ID Number 4	CHAR	8	х	X	х	NAIC ID Number or Plan Number for Insurance Company	88
543-546	Covered Days 4	NUM	4	х	X	x	Number of days covered by insurance	89
547-550	Non-Covered Days 4	NUM	4	х	X	х	Number of days not covered by insurance	90
551-563	Billing National Provider NPI 4	CHAR	13	x	X	x	Insurance Company's ID for Facility (Facility NPI)	82
564-567	Alternate Level of Care Days 4	NUM	4	x	X	Х	Number of days at level of Non-Acute care	92
568-571	Leave of Absence (LOA) Days 4	NUM	4	х	х	x	Number of days in leave of absence status	93
572	Source of Payment 5	CHAR	1	х	x	х	Code indicating type of payment	81-83
573-574	Claim Filing Indicator Code 5	CHAR	2	x	х	х	X-12 code indicating type of payment	84-85
575-593	INSURED'S POLICY NUMBER 5		19		BLANK			
(3207 - 3250)	INSURED'S POLICY NUMBER 5 Encrypted	CHAR	(44)	BLANK	X	Х	Insurance Policy Number	86-87
594-601	Payer ID Number 5	CHAR	8	x	X	х	NAIC ID Number or Plan Number for Insurance Company	88
602-605	Covered Days 5	NUM	4	x	X	х	Number of days covered by insurance	89
606-609	Non-Covered Days 5	NUM	4	x	Х	х	Number of days not covered by insurance	90
610-622	Billing National Provider NPI 5	CHAR	13	x	X	x	Insurance Company's ID for Facility (Facility NPI)	82
623-626	Alternate Level of Care Days 5	NUM	4	x	Х	х	Number of days at level of Non-Acute care	92
627-630	Leave of Absence (LOA) Days 5	NUM	4	x	х	х	Number of days in leave of absence status	93
631	Source of Payment 6	CHAR	1	x	X	x	Code indicating type of payment	81-83
632-633	Claim Filing Indicator Code 6	CHAR	2	x	х	x	X-12 code indicating type of payment	84-85
634-652	INSURED'S POLICY NUMBER 6		19		BLANK			
(3251 - 3294)	INSURED'S POLICY NUMBER 6 Encrypted	CHAR	(44)	BLANK	x	х	Insurance Policy Number	86-87
653-660	Payer ID Number 6	CHAR	8	х	х	х	NAIC ID Number or Plan Number for Insurance Company	88
661-664	Covered Days 6	NUM	4	Х	х	х	Number of days covered by insurance	89
665-668	Non-Covered Days 6	NUM	4	Х	х	х	Number of days not covered by insurance	90
669-681	Billing National Provider NPI 6	CHAR	13	х	х	х	Insurance Company's ID for Facility (Facility NPI)	82

Record Positions	Data Element	Time	Size		Data Sets		Description	Dago No
Record Positions	Data Element	Туре	Size	De-identified			Description	Page No.
682-685	Alternate Level of Care Days 6	NUM	4	х	х	х	Number of days at level of Non-Acute care	92
686-689	Leave of Absence (LOA) Days 6	NUM	4	х	х	х	Number of days in leave of absence status	93
690 - 691	Expected Principal Reimbursement	CHAR	2	х	х	х	See Appendix D. Code identifying the payer expected to pay the major portion of the patient's bill.	94
692 - 693	Expected Principal Reimbursement Other 1	CHAR	2	х	х	х	See Appendix D. Code identifying the secondary payer expected to pay a portion of the patient's bill.	95
694 - 695	Expected Principal Reimbursement Other 2	CHAR	2	х	х	х	See Appendix D. Code identifying the third payer expected to pay a portion of the patient's bill.	96
696 - 697	Worker's Compensation/No Fault Indicator	CHAR	2	х	х	х	Codes indicating if bill was covered by: WC =Workers' Compensation NF = No-Fault Insurance	97
698 - 706	Worker's Compensation/No Fault Amount	NUM	9	x	х	x	Dollar amount covered by WC/NF	98
707	Surplus Catastrophic or Recurring Monthly Income Code	CHAR	1	х	х	х	Code indicating a monthly payment was required of Medicaid patient towards cost of hospitalization.  "1" = Surplus  "2" = Catastrophic.  "3" = Recurring Monthly Income	99
708 - 716	Surplus Catastrophic or Recurring Monthly Amount	NUM	9	х	х	х	Amount of monthly payment required of Medicaid patients towards cost of hospitalization.	100

**DATA COLLECTION SEGMENT - Primary Records** 

Record Positions	Data Element				Data Sets		Description	Dave No.
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
717 - 722	Log Number	NUM	6	х	х	х	Assigned by SPARCS. Identifies submission to which the record belongs.	101
723	Transaction Code	CHAR	1	x	x	x	Identifies transaction type for the electronic institutional claims <u>Code Value</u> 1= Delete  2= Add  3= Correction	102
724 - 731	Date Processed	CHAR	8	x	х	x	Date facility created the file to submit to SPARCS.	103
732 - 734	SPARCS Collector Code	NUM	3	х	х	х	SPARCS Collector Code	104
735	Claim Type	CHAR	1	х	х	x	Claim Type I = Inpatient Services	105
736	Source File Type	NUM	1	х	х	х	File Type C= Complete I= Incomplete	106

**MISCELLANEOUS SEGMENT - Primary Records** 

B 18 W	B / F!		٥.		Data Sets		2	Dogo No
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
737	Residence Indicator	CHAR	1	х	х	х	Code indicating Homeless / Non-US Resident. "H" = HOMELESS Patient "F" = Non-United States Resident (Foreign Born) Blank if N/A	107
738	Special Program (DIS)	CHAR	1	х	х	х	Indicates entitlement to Medicaid benefits due to disability Y = Disability, blank = none	108
739	Special Program (FP)	CHAR	1	х	х	х	Indicates entitlement to Medicaid benefits due to Family Planning Procedures Y = Family Planning blank = none	109
740	Special Program (PHC)	CHAR	1	х	х	х	Indicates entitlement to Medicaid benefits under Physically Handicapped Children's Program (PHC) Y = PHC, Blank= none	110
741	Special Program (SFP)	CHAR	1	х	х	х	Indicates entitlement to Medicaid benefits under the Special Funding Project (SFP). Y = SPF, blank = none	111
742 - 745	Old SPARCS Accommodation Codes 1	CHAR	4	х	х	х	Old SPARCS Accommodation Code 1. See Appendix I.	112
746 - 749	Old SPARCS Accommodation Codes 2	CHAR	4	х	х	х	Old SPARCS Accommodation Code 2. See Appendix I.	112
750 - 753	Old SPARCS Accommodation Codes 3	CHAR	4	х	х	х	Old SPARCS Accommodation Code 3. See Appendix I.	112
754 - 757	Old SPARCS Accommodation Codes 4	CHAR	4	х	х	х	Old SPARCS Accommodation Codes 4. See Appendix I.	112
758 - 761	Old SPARCS Accommodation Codes 5	CHAR	4	х	х	х	Old SPARCS Accommodation Codes 5. See Appendix I.	112
762 - 764	Bed Placement Indicator	CHAR	3	x	х	х	Bed placement indicator used from 1994 to 1996.  "UB" = Unit Bed  "SB" = Scatter Bed  blank = n/a	113
765	DNR Indicator	CHAR	1	х	х	х	Indicates if Do Not Resuscitate Order (DNR) Collected1996-1997. "Y" = A DNR Order Does exist "N" = A DNR Order Does Not exist	114
766	ED Indicator	CHAR	1	х	х	х	Emergency Department Indicator based on submitted revenue codes.  E = revenue code of 045X, blank=n/a	115
767 - 769	Exempt Unit Indicator	CHAR	3	х	х	х	Identifies discharge from unit exempt from Diagnosis Related Group (DRG) reimbursement.	116

**TREATMENT SEGMENT - Primary Records** 

December 19	Bata Flamont	_	0:		Data Sets		Description	Dogo No
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
770 - 777	STATEMENT FROM DATE		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3295 - 3316)	STATEMENT FROM DATE Encrypted	NUM	(22)	BLANK (YYYY)	x	х	Beginning date of the billing period (CCYYMMDD)	117 - 118
778 - 785	STATEMENT THRU DATE		8	DAY/MO.	DAY BLANK (YYYYMM)		Ending date of the billing period (Discharge Date)	440
(3317 - 3338)	STATEMENT THRU DATE Encrypted	NUM	(22)	BLANK YYYY)	x	х	(CCYYMMDD)	119
786 - 793	ADMISSION DATE		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3339 - 3360)	ADMISSION DATE Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date of Admission (CCYYMMDD)	120
794 - 796	Admit Weekday	CHAR	3	BLANK	х	х	Day of week patient was admitted (1st three letters)	122
797 - 798	Admission Hour	NUM	2	х	х	х	Hour of visit	123
799	Unscheduled/Scheduled Admission	CHAR	1	х	х	х	Describes urgency of admission to hospital.  "1" = Unscheduled / "2" = Scheduled  "9" = Information not available.	124
800 - 807	DISCHARGE DATE		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3361 - 3382)	DISCHARGE DATE Encrypted	NUM	(22)	BLANK (YYYY)	x	X	Date of discharge or death. (CCYYMMDD)	125
808 - 810	Discharge Weekday	CHAR	3	х	х	х	Weekday of discharge or death (1st three letters)	126
811 - 812	Discharge Hour	NUM	2	х	х	х	Hour of discharge or death	127
813 - 816	Length of Stay	NUM	4	х	х	х	Total number of patient days (excluding leave of absence days)	128
817 - 820	Insured Days	NUM	4	х	х	х	Number of days covered by the primary payer as qualified by the payer (Insured Days)	129
821 - 824	Non- Insured Days	NUM	4	х	х	х	Non-Insured Days	130
825 - 828	Total Leave of Absence Days	NUM	4	х	х	х	Total leave of absence days for the inpatient stay	131
829 - 832	Total Alternate Care Days	NUM	4	х	х	х	Total number of patient days at a level of care other than acute.	132

Record Positions	Data Element	Туре	Size		Data Sets		Description	Page No.
				De-identified	Limited	Identifiable		
833	Type of Alternate Care required	CHAR	1	x	x	x	Code specifying the type of alternate care: "1" = Residential Health Care Facility "2" = Medically Related Home Care Services "3" = Domiciliary Care "4" = Other Institution "5" = Home Health Service	133
834 - 841	DATE ALTERNATE CARE REQUIRED		8	DAY/MO.	DAY BLANK (YYYYMM)		First date that acute care was no longer needed	404
(3383 - 3404)	DATE ALTERNATE CARE REQUIRED Encrypted	NUM	(22)	BLANK (YYYY)	x	х	(CCYYMMDD)	134
842 - 845	Total Acute Certified Days	NUM	4	х	х	х	Total number of days at acute level of care	135
846 - 847	Non-Acute Care Type 1	CHAR	2	x	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
848 - 855	NON-ACUTE FROM DATE 1		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3405 - 3426)	NON-ACUTE FROM DATE 1 Encrypted	NUM	(22)	BLANK (YYYY)	x	Х	Date non-acute care began (CCYYMMDD)	137-138
856 - 863	NON ACUTE THRU DATE 1	- 1111114	8	DAY/MO.	DAY BLANK (YYYYMM)			400
(3427 - 3448)	NON ACUTE THRU DATE 1 Encrypted	NUM	(22)	BLANK (YYYY)	x	х	Date non-acute care ended (CCYYMMDD)	139
864 - 865	Non-Acute Care Type 2	CHAR	2	x	х	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
866 - 873	NON-ACUTE FROM DATE 2	NII IN A	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	D. (a. (a. (a. (a. (a. (a. (a. (a. (a. (a	407.400
(3449 - 3470)	NON-ACUTE FROM DATE 2 Encrypted	NUM	(22)	(YYYY)	x	^	Date non-acute care began (CCYYMMDD)	137-138
874 - 881	NON ACUTE THRU DATE 2		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3471 - 3492)	NON ACUTE THRU DATE 2 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care ended (CCYYMMDD)	139

Record Positions	Data Element	Туре	Size		Data Sets		Description	Page No.
		.,,,,,		De-identified	Limited	Identifiable		<b></b>
882 - 883	Non-Acute Care Type 3	CHAR	2	x	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
884 - 891	NON-ACUTE FROM DATE 3		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3493 - 3514)	NON-ACUTE FROM DATE 3 Encrypted	NUM	(22)	BLANK (YYYY)	х	x	Date non-acute care began (CCYYMMDD)	137-138
892 - 899	NON ACUTE THRU DATE 3		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3515 - 3536)	NON ACUTE THRU DATE 3 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care ended (CCYYMMDD)	139
900 - 901	Non-Acute Care Type 4	CHAR	2	х	x	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
902 - 909	NON-ACUTE FROM DATE 4		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3537 - 3558)	NON-ACUTE FROM DATE 4 Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date non-acute care began (CCYYMMDD)	137-138
910 - 917	NON ACUTE THRU DATE 4	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYY)**	x	Date non-acute care ended (CCYYMMDD)	139
(3559 - 3580)	NON ACUTE THRU DATE 4 Encrypted	NOW	(22)	(YYYY)	х	^	Date Horracute care ended (CCT (WINDD)	139
918 - 919	Non-Acute Care Type 5	CHAR	2	x	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
920 - 927	NON-ACUTE FROM DATE 5		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3581 - 3602)	NON-ACUTE FROM DATE 5 Encrypted	NUM	(22)	BLANK (YYYY)	x	х	Date non-acute care began (CCYYMMDD)	137-138
928 - 935	NON ACUTE THRU DATE 5		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3603 - 3624)	NON ACUTE THRU DATE 5 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care ended (CCYYMMDD)	139
936 - 937	Non-Acute Care Type 6	CHAR	2	x	x	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136

B 18 W	B ( F)	_	a:		Data Sets		5	
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
938 - 945	NON-ACUTE FROM DATE 6		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3625 - 3646)	NON-ACUTE FROM DATE 6 Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date non-acute care began (CCYYMMDD)	137-138
946 - 953	NON ACUTE THRU DATE 6		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3647 - 3668)	NON ACUTE THRU DATE 6 Encrypted	NUM	(22)	BLANK (YYYY)	x	х	Date non-acute care ended (CCYYMMDD)	139
954 - 955	Non-Acute Care Type 7	CHAR	2	x	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
956 - 963	NON-ACUTE FROM DATE 7		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3669 - 3690)	NON-ACUTE FROM DATE 7 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care began (CCYYMMDD)	137-138
964 - 971	NON ACUTE THRU DATE 7		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3691 - 3712)	NON ACUTE THRU DATE 7 Encrypted	NUM	(22)	BLANK (YYYY)	Х	х	Date non-acute care ended (CCYYMMDD)	139
972 - 973	Non-Acute Care Type 8	CHAR	2	х	х	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
974 - 981	NON-ACUTE FROM DATE 8		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3713 - 3734)	NON-ACUTE FROM DATE 8 Encrypted	NUM	(22)	BLANK (YYYY)	х	Х	Date non-acute care began (CCYYMMDD)	137-138
982 - 989	NON ACUTE THRU DATE 8		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3735 - 3756)	NON ACUTE THRU DATE 8 Encrypted	- NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care ended (CCYYMMDD)	139
990 - 991	Non-Acute Care Type 9	CHAR	2	х	х	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
992 - 999	NON-ACUTE FROM DATE 9		8	DAY/MO. BLANK	DAY BLANK (YYYYMM)			
(3757 - 3778)	NON-ACUTE FROM DATE 9 Encrypted	NUM	(22)	(YYYY)	х	х	Date non-acute care began (CCYYMMDD)	137-138
1000 - 1007	NON ACUTE THRU DATE 9		8	DAY/MO. BLANK	DAY BLANK (YYYYMM)			
(3779 - 3800)	NON ACUTE THRU DATE 9 Encrypted	NUM	(22)	(YYYY)	х	Х	Date non-acute care ended (CCYYMMDD)	139

Record Positions	Data Element	Туре	Size		Data Sets		Description	Page No.
Record Fositions	Data Liement	Турс	312 <del>0</del>	De-identified	Limited	Identifiable	Description	i age ivo.
1008 - 1009	Non-Acute Care Type 10	CHAR	2	х	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1010 - 1017	NON-ACUTE FROM DATE 10		8	DAY/MO. BLANK	DAY BLANK (YYYYMM)			
(3801 - 3822)	NON-ACUTE FROM DATE 10 Encrypted	NUM	(22)	(YYYY)	х	х	Date non-acute care began (CCYYMMDD)	137-138
1018 - 1025	NON ACUTE THRU DATE 10		8	DAY/MO. BLANK	DAY BLANK (YYYYMM)			
(3823 - 3844)	NON ACUTE THRU DATE 10 Encrypted	NUM	(22)	(YYYY)	х	x	Date non-acute care ended (CCYYMMDD)	139
1026 - 1027	Non-Acute Care Type 11	CHAR	2	x	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1028 - 1035	NON-ACUTE FROM DATE 11		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3845 - 3866)	NON-ACUTE FROM DATE 11 Encrypted	NUM	(22)	BLANK (YYYY)	х	x	Date non-acute care began (CCYYMMDD)	137-138
1036 - 1043	NON ACUTE THRU DATE 11		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3867 - 3888)	NON ACUTE THRU DATE 11 Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date non-acute care ended (CCYYMMDD)	139
1044 - 1045	Non-Acute Care Type 12	CHAR	2	x	х	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1046 - 1053	NON-ACUTE FROM DATE 12		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3889 - 3910)	NON-ACUTE FROM DATE 12 Encrypted	NUM	(22)	BLANK (YYYY)	x	x	Date non-acute care began (CCYYMMDD)	137-138
1054 - 1061	NON ACUTE THRU DATE 12		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3911 - 3932)	NON ACUTE THRU DATE 12 Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date non-acute care ended (CCYYMMDD)	139
1062 - 1063	Non-Acute Care Type 13	CHAR	2	x	х	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1064 - 1071	NON-ACUTE FROM DATE 13		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3933 - 3954)	NON-ACUTE FROM DATE 13 Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date non-acute care began (CCYYMMDD)	137-138

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Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1072 - 1079	NON ACUTE THRU DATE 13		8	DAY/MO.	DAY BLANK (YYYYMM)			
(3955 - 3976)	NON ACUTE THRU DATE 13 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care ended (CCYYMMDD)	139
1080 - 1081	Non-Acute Care Type 14	CHAR	2	х	х	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1082 - 1089	NON-ACUTE FROM DATE 14	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM) X	x	Date non-acute care began (CCYYMMDD)	137-138
(3977 - 3998)	NON-ACUTE FROM DATE 14 Encrypted		(22)	(YYYY)	х			
1090 - 1097	NON ACUTE THRU DATE 14	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Date non-acute care ended (CCYYMMDD)	139
(3999 - 4020)	NON ACUTE THRU DATE 14 Encrypted		(22)	(YYYY)	х		,	
1098 - 1099	Non-Acute Care Type 15	CHAR	2	х	х	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1100 - 1107	NON-ACUTE FROM DATE 15	NII IN A	8	DAY/MO.	DAY BLANK (YYYYMM)		D. (	407.400
(4021 - 4042)	NON-ACUTE FROM DATE 15 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care began (CCYYMMDD)	137-138
1108 - 1115	NON ACUTE THRU DATE 15	NII IN 4	8	DAY/MO.	DAY BLANK (YYYYMM)	v	Data man assita assis and ad (CCVV/AMADD)	420
(4043 - 4064)	NON ACUTE THRU DATE 15 Encrypted	NUM	(22)	BLANK (YYYY)	x	х	Date non-acute care ended (CCYYMMDD)	139
1116 - 1117	Non-Acute Care Type 16	CHAR	2	х	х	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1118 - 1125	NON-ACUTE FROM DATE 16	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	X	Date non-acute care began (CCYYMMDD)	137-138
(4065 - 4086)	NON ACUTE FROM DATE 16 Encrypted		(22)	(YYYY)	x			
1126 - 1133	NON ACUTE THRU DATE 16		8	DAY/MO.	DAY BLANK (YYYYMM)		_	
(4087 - 4108)	NON-ACUTE THRU DATE 16 Encrypted	NUM	(22)	BLANK (YYYY)	x	Х	Date non-acute care ended (CCYYMMDD)	139
1134 - 1135	Non-Acute Care Type 17	CHAR	2	х	х	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136

December 201	Data Florens	<b>T</b>	0:		Data Sets		Beautottan	Dama Na
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1136 - 1143	NON-ACUTE FROM DATE 17		8	DAY/MO.	DAY BLANK (YYYYMM)		(20)(444)	407 400
(4109 - 4130)	NON-ACUTE FROM DATE 17 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care began (CCYYMMDD)	137-138
1144 - 1151	NON ACUTE THRU DATE 17	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Date non-acute care ended (CCYYMMDD)	139
(4131 - 4152)	NON ACUTE THRU DATE 17 Encrypted	INOIVI	(22)	(YYYY)	х	^	Date non-acute care ended (CC11 wildD)	139
1152 - 1153	Non-Acute Care Type 18	CHAR	2	x	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1154 - 1161	NON-ACUTE FROM DATE 18	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Date non-acute care began (CCYYMMDD)	137-138
(4153 - 4174)	NON-ACUTE FROM DATE 18 Encrypted	INOIVI	(22)	(YYYY)	x	^	Date non-acute care began (CC11 wildD)	137-136
1162 - 1169	NON ACUTE THRU DATE 18	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Date non-acute care ended (CCYYMMDD)	139
(4175 - 4196)	NON ACUTE THRU DATE 18 Encrypted	INOIVI	(22)	(YYYY)	х	^	Date horracute care ended (CCT HWIWIDD)	139
1170 - 1171	Non-Acute Care Type 19	CHAR	2	x	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1172 - 1179	NON-ACUTE FROM DATE 19		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4197 - 4218)	NON-ACUTE FROM DATE 19 Encrypted	NUM	(22)	BLANK (YYYY)	x	х	Date non-acute care began (CCYYMMDD)	137-138
1180 - 1187	NON ACUTE THRU DATE 19		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4219 - 4240)	NON ACUTE THRU DATE 19 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care ended (CCYYMMDD)	139
1188 - 1189	Non-Acute Care Type 20	CHAR	2	x	х	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136

December 18 and 18 and	Data Element	<b>T</b>	Size		Data Sets		Beautottau	Dava Na
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1190 - 1197	NON-ACUTE FROM DATE 20		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4241 - 4262)	NON-ACUTE FROM DATE 20 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care began (CCYYMMDD)	137-138
1198 - 1205	NON ACUTE THRU DATE 20	- NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Date non-acute care ended (CCYYMMDD)	139
(4263 - 4284)	NON ACUTE THRU DATE 20 Encrypted	- INUIVI	(22)	(YYYY)	х	^	Date non-acute care ended (CC++MINIDD)	139
1206 - 1207	Non-Acute Care Type 21	CHAR	2	x	х	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1208 - 1215	NON-ACUTE FROM DATE 21		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4285 - 4306)	NON-ACUTE FROM DATE 21 Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date non-acute care began (CCYYMMDD)	137-138
1216 - 1223	NON ACUTE THRU DATE 21		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4307 - 4328)	NON ACUTE THRU DATE 21 Encrypted	NUM	(22)	BLANK (YYYY)	х	Х	Date non-acute care ended (CCYYMMDD)	139
1224 - 1225	Non-Acute Care Type 22	CHAR	2	x	х	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1226 - 1233	NON-ACUTE FROM DATE 22	NII INA	8	DAY/MO.	DAY BLANK (YYYYMM)	v	Data and south and have (CCVVAIADD)	137-138
(4329 - 4350)	NON-ACUTE FROM DATE 22 Encrypted	- NUM	(22)	BLANK (YYYY)	х	X	Date non-acute care began (CCYYMMDD)	137-138
1234 - 1241	NON ACUTE THRU DATE 22	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Date non-acute care ended (CCYYMMDD)	139
(4351 - 4372)	NON ACUTE THRU DATE 22 Encrypted		(22)	(YYYY)	х			
1242 - 1243	Non-Acute Care Type 23	CHAR	2	x	х	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136

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Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1244 - 1251	NON-ACUTE FROM DATE 23		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4373 - 4394)	NON-ACUTE FROM DATE 23 Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date non-acute care began (CCYYMMDD)	137-138
1252 - 1259	NON ACUTE THRU DATE 23		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4395 - 4416)	NON ACUTE THRU DATE 23 Encrypted	NUM	(22)	BLANK (YYYY)	х	x	Date non-acute care ended (CCYYMMDD)	139
1260 - 1261	Non-Acute Care Type 24	CHA R	2	х	х	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1262 - 1269	NON-ACUTE FROM DATE 24	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Dete non coute core haren (CCVV/MMDD)	137-138
(4417 - 4438)	NON-ACUTE FROM DATE 24 Encrypted	NOIVI	(22)	(YYYY)	х	_ ^	Date non-acute care began (CCYYMMDD)	137-136
1270 - 1277	NON ACUTE THRU DATE 24		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4439 - 4460)	NON ACUTE THRU DATE 24 Encrypted	NUM	(22)	BLANK (YYYY)	х	×	Date non-acute care ended (CCYYMMDD)	139
1278 - 1279	Non-Acute Care Type 25	CHA R	2	х	х	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1280 - 1287	NON-ACUTE FROM DATE 25		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4461 - 4482)	NON-ACUTE FROM DATE 25 Encrypted	NUM	(22)	BLANK (YYYY)	х	×	Date non-acute care began (CCYYMMDD)	137-138
1288 - 1295	NON ACUTE THRU DATE 25		8		DAY BLANK (YYYYMM)			
4483 - 4504)	NON ACUTE THRU DATE 25 Encrypted	NUM	(22)	DAY/MO. BLANK (YYYY)	x	x	Date non-acute care ended (CCYYMMDD)	139

B 18 W	B . El	_			Data Sets		5	- · · ·
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1296 - 1297	Non-Acute Care Type 26	CHAR	2	x	х	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1298 - 1305	NON-ACUTE FROM DATE 26		8	DAY/MO.	DAY BLANK (YYYYMM)		(00)(444)(77)	407.400
(4505 - 4526)	NON-ACUTE FROM DATE 26 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care began (CCYYMMDD))	137-138
1306 - 1313	NON ACUTE THRU DATE 26	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Date non-acute care ended (CCYYMMDD)	139
(4527 - 4548)	NON ACUTE THRU DATE 26 Encrypted	NOW	(22)	(YYYY)	Х	^	Date Horracute care ended (CC++MiMiDD)	139
1314 - 1315	Non-Acute Care Type 27	CHAR	2	х	x	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1316 - 1323	NON-ACUTE FROM DATE 27		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4549 - 4570)	NON-ACUTE FROM DATE 27 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care began (CCYYMMDD)	137-138
1324 - 1331	NON ACUTE THRU DATE 27	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Data non coute core anded (CCVVMMDD)	139
(4571 - 4592)	NON ACUTE THRU DATE 27 Encrypted	NOM	(22)	(YYYY)	х	^	Date non-acute care ended (CCYYMMDD)	139
1332 - 1333	Non-Acute Care Type 28	CHAR	2	х	x	х	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1334 - 1341 (4593 - 4614)	NON-ACUTE FROM DATE 28  NON-ACUTE FROM DATE 28  Encrypted	NUM	8 (22)	DAY/MO. BLANK (YYYY)	DAY BLANK (YYYYMM)	х	Date non-acute care began (CCYYMMDD)	137-138

Record Positions	Data Element	Toma	Size		Data Sets		Description	Dawa Ma
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1342 - 1349	NON ACUTE THRU DATE 28		8	DAY/MO.	DAY BLANK (YYYYMM)			400
(4615 - 4636)	NON ACUTE THRU DATE 28 Encrypted	NUM	(22)	BLANK (YYYY)	х	х	Date non-acute care ended (CCYYMMDD)	139
1350 - 1351	Non-Acute Care Type 29	CHAR	2	x	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1352 - 1359	NON-ACUTE FROM DATE 29	NUM	8	DAY/MO. BLANK	DAY BLANK (YYYYMM)	x	Data non acuta core haven (CCVVANADD)	137-138
(4637 - 4658)	NON-ACUTE FROM DATE 29 Encrypted	NUM	(22)	(YYYY)	х	^	Date non-acute care began (CCYYMMDD)	137-138
1360 - 1367	NON ACUTE THRU DATE 29		8	DAY/MO.	DAY BLANK (YYYYMM)		Determined to the control of the con	400
(4659 - 4680)	NON ACUTE THRU DATE 29 Encrypted	NUM	(22)	BLANK (YYYY)	X	Х	Date non-acute care ended (CCYYMMDD)	139
1368 - 1369	Non-Acute Care Type 30	CHAR	2	x	x	x	Code indicating type of non-acute care reported "74" = Leave of Absence "75" = SNF or Residential Care Facility "81" = Home Health Level of Care "82" = Other Level of Care	136
1370 - 1377	NON-ACUTE FROM DATE 30		8	DAY/MO.	DAY BLANK (YYYYMM)		(00)	
(4681 - 4702)	NON-ACUTE FROM DATE 30 Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date non-acute care began (CCYYMMDD)	137-138
1378 - 1385	NON ACUTE THRU DATE 30		8	DAY/MO.	DAY BLANK (YYYYMM)			400
(4703 - 4724)	NON ACUTE THRU DATE 30 Encrypted	NUM	(22)	BLANK (YYYY)	x	X	Date non-acute care ended (CCYYMMDD)	139
1386	Same-Day Discharge Indicator	CHAR	1	x	х	х	Flag indicating if patient admitted and discharged same day. "0" = not same day, "1" = same day	141
1387 - 1388	Patient Status	CHAR	2	x	х	х	Code which best identifies the patient's destination or status upon discharge. See Appendix C.	142

Beard Besitions	Data Element	Turna	Size		Data Sets		Description	Page No.
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	i age ivo.
1389 - 1391	Type of Bill	CHAR	3	x	х	x	Three-digit numeric code identifying the specific type of bill and the transaction.	143
1392	Service Category Group	CHAR	1	BLANK	x	x	Service Category Group of the discharge record  1 = Medical  2 = Surgical  3 = Pediatric  4 = Obstetrical  5 = Nursery/Newborn  6 = Psychiatric	144
1393	Type of Admission	CHAR	1	x	x	x	Code indicating manner the patient was admitted "1" = Emergency "2" = Urgent "3" = Elective "4" = Newborn "5" = Trauma "9" = Information not available	145
1394	Point of Origin	CHAR	1	х	х	х	Code indicating point of patient origin for admission	146 -147

**DIAGNOSIS SEGMENT - Primary Records** 

December Decisions	Data Element	T	Cima			Data Se	ets	Description	Dawa Ma
Record Positions	Data Element	Туре	Size	De-ident	ified	Limit	ed Identifiable	Description	Page No.
1395 - 1401	Admitting Diagnosis Code	CHAR	7	х	>	(	х	Code describing condition at time of admission	148
1402 - 1408	Principal Diagnosis Code	CHAR	7	х	>	•	х	Code indicating condition established after study to have been chiefly responsible for admission	149-150
1409	Filler	CHAR	1	Х	>	(	х		
1410 - 1416	Other Diagnosis Code 1	CHAR	7	х	>	(	х	Any other condition affecting treatment and/or length of stay	151-152
1417	Present on Admission (POA) Indicator 1	CHAR	1	x	>	•	x	Indicates if onset of diagnosis preceded or followed admission to hospital  1 = Yes - Present at inpatient admission  2 = No - Not present at inpatient admission  3 = Clinically Undetermined  9 = Unknown  X = Exempt from POA reporting	153-154
1418 - 1424	Other Diagnosis Code 2	CHAR	7	Х	)	(	х	SEE Other Diagnosis Code 1	151-152
1425	Present on Admission Indicator 2	CHAR	1	Х	)	(	Х	See POA 1	153-154
1426 - 1432	Other Diagnosis Code 3	CHAR	7	Х	)	(	Х	SEE Other Diagnosis Code 1	151-152

		_			Data Se	ts	5	
Record Positions	Data Element	Type	Size	De-identified	Limited	Identifiable	- Description	Page No.
1433	Present on Admission Indicator 3	CHAR	1	х	х	х	See POA 1	153-154
1434 - 1440	Other Diagnosis Code 4	CHAR	7	х	Х	х	SEE Other Diagnosis Code 1	151-152
1441	Present on Admission Indicator 4	CHAR	1	х	х	х	See POA 1	153-154
1442 - 1448	Other Diagnosis Code 5	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1449	Present on Admission Indicator 5	CHAR	1	х	х	х	See POA 1	153-154
1450 - 1456	Other Diagnosis Code 6	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1457	Present on Admission Indicator 6	CHAR	1	х	х	x	See POA 1	153-154
1458 - 1464	Other Diagnosis Code 7	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1465	Present on Admission Indicator 7	CHAR	1	х	х	х	See POA 1	153-154
1466 - 1472	Other Diagnosis Code 8	CHAR	7	х	х	x	SEE Other Diagnosis Code 1	151-152
1473	Present on Admission Indicator 8	CHAR	1	х	х	х	See POA 1	153-154
1474 - 1480	Other Diagnosis Code 9	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1481	Present On Admission Indicator 9	CHAR	1	х	х	х	See POA 1	153-154
1482 - 1488	Other Diagnosis Code 10	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1489	Present On Admission Indicator 10	CHAR	1	х	х	х	See POA 1	153-154
1490 - 1496	Other Diagnosis Code 11	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1497	Present On Admission Indicator 11	CHAR	1	х	х	х	See POA 1	153-154
1498 - 1504	Other Diagnosis Code 12	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1505	Present On Admission Indicator 12	CHAR	1	х	х	х	See POA 1	153-154
1506 - 1512	Other Diagnosis Code 13	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1513	Present On Admission Indicator 13	CHAR	1	х	х	х	See POA 1	153-154
1514 - 1520	Other Diagnosis Code 14	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1521	Present On Admission Indicator 14	CHAR	1	х	х	х	See POA 1	153-154
1522 - 1528	Other Diagnosis Code 15	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1529	Present On Admission Indicator 15	CHAR	1	х	х	х	See POA 1	153-154
1530 - 1536	Other Diagnosis Code 16	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1537	Present On Admission Indicator 16	CHAR	1	х	х	х	See POA 1	153-154
1538 - 1544	Other Diagnosis Code 17	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1545	Present On Admission Indicator 17	CHAR	1	х	х	х	See POA 1	153-154
1546 - 1552	Other Diagnosis Code 18	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1553	Present On Admission Indicator 18	CHAR	1	х	х	х	See POA 1	153-154
1554 - 1560	Other Diagnosis Code 19	CHAR	7	х	Х	х	SEE Other Diagnosis Code 1	151-152
1561	Present On Admission Indicator 19	CHAR	1	х	Х	х	See POA 1	153-154
1562 - 1568	Other Diagnosis Code 20	CHAR	7	х	Х	X	SEE Other Diagnosis Code 1	151-152

December 1997	Data Element	<b>T</b>	0:		Data Se	ets	Per substitut	Davis Na
Record Positions	Data Element	Туре	Size	De-identifie	d Limited	Identifiable	Description	Page No.
1569	Present On Admission Indicator 20	CHAR	1	х	х	х	See POA 1	153-154
1570 - 1576	Other Diagnosis Code 21	CHAR	7	х	х	Х	SEE Other Diagnosis Code 1	151-152
1577	Present On Admission Indicator 21	CHAR	1	х	х	х	See POA 1	153-154
1578 - 1584	Other Diagnosis Code 22	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1585	Present On Admission Indicator 22	CHAR	1	х	х	х	See POA 1	153-154
1586 - 1592	Other Diagnosis Code 23	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	
1593	Present On Admission Indicator 23	CHAR	1	х	х	х	See POA 1	153-154
1594 - 1600	Other Diagnosis Code 24	CHAR	7	х	х	х	SEE Other Diagnosis Code 1	151-152
1601	Present On Admission Indicator 24	CHAR	1	х	х	х	See POA 1	153-154
1602 - 1604	Clinical Classification Software (CCS) Diagnosis Category	CHAR	3	х	х	х	CCS Diagnosis Category using the reported ICD-9-CM code	155
1605	After Anesthesia Indicator 1	CHAR	1	х	х	x	Collected 1994-1997. Indicates if corresponding Other Diagnosis Code occurred after administration of anesthesia.  "1" = Yes "2" = No "9" = Unknown / blank	156
1606	After Anesthesia Indicator 2	CHAR	1	х	х	X	SEE After Anesthesia Indicator 1	156
1607	After Anesthesia Indicator 3	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1608	After Anesthesia Indicator 4	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1609	After Anesthesia Indicator 5	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1610	After Anesthesia Indicator 6	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1611	After Anesthesia Indicator 7	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1612	After Anesthesia Indicator 8	CHAR	1	х	х	Х	SEE After Anesthesia Indicator 1	156

Record Positions	Data Element	Tomas	Size		Data Sets	;	Description	Down No.
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1613	After Anesthesia Indicator 9	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1614	After Anesthesia Indicator 10	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1615	After Anesthesia Indicator 11	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1616	After Anesthesia Indicator 12	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1617	After Anesthesia Indicator 13	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1618	After Anesthesia Indicator 14	CHAR	1	х	х	х	SEE After Anesthesia Indicator 1	156
1619 - 1620	Accident Related Code	CHAR	2	х	x	х	Identifies specific event relating to the bill that may affect payer processing "01"= Accident /Medical Coverage "02" No Fault Insurance Involved/ Including Auto Accident/Other "03"= Accident /Tort Liability "04"= Accident /Employment Related "05"= Accident /No Medical or Liability Coverage "06"= Crime Victim	157
1621 - 1628	ACCIDENT RELATED DATE		8		DAY BLANK (YYYYMM)			
(4725 - 4746)	ACCIDENT RELATED DATE Encrypted	NUM	(22)	DAY/MO. BLANK (YYYY)	x	х	Date corresponds to significant event related to bill that might affect payer processing (CCYYMMDD)	158
1629 - 1635	External Cause of Injury	CHAR	7	х	х	х	ICD-9-CM code for the external cause of an injury, poisoning, or adverse effect.	159
1636 - 1642	Place of Injury Code	CHAR	7	х	x	х	Identifies place where the corresponding injury was reported in External Cause-of-Injury Code	160

PROCEDURE SEGMENT - Primary Records

B 18 W	Data Element	_	۵.		Data Sets		Description	
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1643 - 1649	Principal Procedure Code	CHAR	4	х	х	х	Identifies the inpatient principal procedure performed at claim level during period covered by this event	161
1650 - 1657	PRINCIPAL PROCEDURE DATE	. NUM	8	DAY/MO.	DAY BLANK (YYYYMM)	х	Date Principal Procedure performed.	162
(4747 - 4768)	PRINCIPAL <b>PROCEDURE</b> DATE Encrypted	INOIVI	(22)	BLANK (YYYY)	х	*	·	102
1658	Pre-Admit Procedure Indicator 1	CHAR	1	X	x	x	Indicates if procedure was :  "-" = before Admission Date ,  "+" =on Admission Date , or  " = Blank if no procedure done.	163
1659 - 1662	Pre-Op Days 1	CHAR	4	x	X	х	Number of days between procedure and admission date	164
1663 - 1666	Post-Op Days 1	CHAR	4	x	X	х	Number of days between procedure and discharge date.	165
1667 - 1673	Other Procedure Code 1	CHAR	4	x	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
1674 - 1681	OTHER PROCEDURE DATE 1		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4769 - 4790)	OTHER PROCEDURE DATE 1 Encrypted	NUM	(22)	BLANK (YYYY)	Х	Х	Date Other Procedure performed.	167-168
1682	Pre-Admit Procedure Indicator 2	CHAR	1	x	x	x	See Pre-Admit Procedure Indicator 1	163
1683 - 1686	Pre-Op Days 2	CHAR	4	х	х	х	Number of days between procedure and admission date	164
1687 - 1690	Post-Op Days 2	CHAR	4	х	х	х	Number of days between procedure and discharge date.	165
1691 - 1697	Other Procedure Code 2	CHAR	4	х	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
1698 - 1705	OTHER PROCEDURE DATE 2	NUM	8	DAY/MO.	DAY BLANK (YYYYMM)	х	Date Other Procedure performed.	167-168
(4791 - 4812)	OTHER PROCEDURE DATE 2 Encrypted		(22)	BLANK (YYYY)	х		Later Carrott Toolstan of Portrolling	.07 .00
1706	Pre-Admit Procedure Indicator 3	CHAR	1	х	х	х	See Pre-Admit Procedure Indicator 1	163
1707 - 1710	Pre-Op Days 3	CHAR	4	х	х	х	Number of days between procedure and admission date	164
1711 - 1714	Post-Op Days 3	CHAR	4	х	х	х	Number of days between procedure and discharge date.	165

	B . El	_	o:		Data Sets		5	
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1715 - 1721	Other Procedure Code 3	CHAR	4	х	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
1722 - 1729	OTHER PROCEDURE DATE 3		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4813 - 4834)	OTHER PROCEDURE DATE 3 Encrypted	NUM	(22)	BLANK (YYYY)	Х	Х	Date Other Procedure performed.	167-168
1730	Pre-Admit Procedure Indicator 4	CHAR	1	х	х	х	See Pre-Admit Procedure Indicator 1	163
1731 - 1734	Pre-Op Days 4	CHAR	4	х	х	x	Number of days between procedure and admission date	164
1735 - 1738	Post-Op Days 4	CHAR	4	x	х	х	Number of days between procedure and discharge date.	165
1739 - 1745	Other Procedure Code 4	CHAR	4	x	х	x	ICD code identifying any significant procedure, other than Principal Procedure	166
1746 - 1753	OTHER PROCEDURE DATE 4		8	DAY/MO.	DAY BLANK (YYYYMM)			407 400
(4835 - 4856)	OTHER PROCEDURE DATE 4 Encrypted	NUM	(22)	BLANK (YYYY)	х	Х	Date Other Procedure performed.	167-168
1754	Pre-Admit Procedure Indicator 5	CHAR	1	х	x	x	See Pre-Admit Procedure Indicator 1	163
1755 - 1758	Pre-Op Days 5	CHAR	4	х	х	х	Number of days between procedure and admission date	164
1759 - 1762	Post-Op Days 5	CHAR	4	х	х	х	Number of days between procedure and discharge date.	165
1763 - 1769	Other Procedure Code 5	CHAR	4	x	х	x	ICD code identifying any significant procedure, other than Principal Procedure	166
1770 - 1777	OTHER PROCEDURE DATE 5	NII 184	8	DAY/MO.	DAY BLANK (YYYY)**		Date Other December and consider	107.100
(4857 - 4878)	OTHER PROCEDURE DATE 5 Encrypted	NUM	(22)	BLANK (YYYY)		Х	Date Other Procedure performed.	167-168
1778	Pre-Admit Procedure Indicator 6	CHAR	1	х	x	х	See Pre-Admit Procedure Indicator 1	163
1779 - 1782	Pre-Op Days 6	CHAR	4	х	х	x	Number of days between procedure and admission date	164
1783 - 1786	Post-Op Days 6	CHAR	4	х	х	х	Number of days between procedure and discharge date.	165
1787 - 1793	Other Procedure Code 6	CHAR	4	x	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
1794 - 1801	OTHER PROCEDURE DATE 6	NII 18 4	8	DAY/MO.	DAY BLANK (YYYYMM)		Data Other Broad are not	407.400
(4879 - 4900)	OTHER PROCEDURE DATE 6 Encrypted	NUM	(22)	BLANK (YYYY)	x	Х	Date Other Procedure performed.	167-168

Pre-Admit Procedure Indicator 7	B 15 W	D . El	_	٥.		Data Sets		2	
1803 - 1806	Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1807 - 1810	1802	Pre-Admit Procedure Indicator 7	CHAR	1	х	х	х	See Pre-Admit Procedure Indicator 1	163
1811 - 1817 Other Procedure Code 7 CHAR 4 X X X ICD code identifying any significant procedure, other than Principal Procedure performed.  1818 - 1825 OTHER PROCEDURE DATE 7 NUM (22) BLAINK (YYYY) X X Date Other Procedure Indicator 1 167-168  1826 Pre-Admit Procedure Indicator 8 CHAR 1 X X X X See Pre-Admit Procedure Indicator 1 163  1827 - 1830 Pre-Op Days 8 CHAR 4 X X X X Number of days between procedure and admission date of the Procedure Code 8 CHAR 4 X X X X ICD code identifying any significant procedure, other than Principal Procedure Indicator 1 163  1835 - 1841 Other Procedure Code 8 CHAR 4 X X X X Number of days between procedure and admission date of the Procedure Code 8 CHAR 4 X X X X ICD code identifying any significant procedure, other than Principal Procedure Indicator 1 163  1850 Pre-Admit Procedure DATE 8 Encrypted X X X X See Pre-Admit Procedure Indicator 1 163  1851 - 1854 Pre-Op Days 9 CHAR 4 X X X X See Pre-Admit Procedure and admission date of the Procedure Indicator 9 CHAR 4 X X X X X X X X X X X X X X X X X X	1803 - 1806	Pre-Op Days 7	CHAR	4	х	х	х		164
1816 - 1825	1807 - 1810	Post-Op Days 7	CHAR	4	х	х	х	, ,	165
Company   Comp	1811 - 1817	Other Procedure Code 7	CHAR	4	х	х	х		166
A	1818 - 1825	OTHER PROCEDURE DATE 7		8	DAY/MO				
1827 - 1830 Pre-Op Days 8 CHAR 4 X X X Number of days between procedure and admission date  1831 - 1834 Post-Op Days 8 CHAR 4 X X X Number of days between procedure and discharge date.  1835 - 1841 Other Procedure Code 8 CHAR 4 X X X X ICD code identifying any significant procedure, other than Principal Procedure  1842 - 1849 OTHER PROCEDURE DATE 8 Encrypted  1850 Pre-Admit Procedure Indicator 9 CHAR 1 X X X X See Pre-Admit Procedure Indicator 1 163  1851 - 1854 Pre-Op Days 9 CHAR 4 X X X X Number of days between procedure and admission date  1855 - 1858 Post-Op Days 9 CHAR 4 X X X X Number of days between procedure and admission date  1859 - 1865 Other Procedure Code 9 CHAR 4 X X X X Number of days between procedure and admission date  1850 OTHER PROCEDURE DATE 9 Encrypted  1866 - 1873 OTHER PROCEDURE DATE 9 Encrypted  1874 Pre-Admit Procedure Indicator 10 CHAR 1 X X X X See Pre-Admit Procedure Performed.  1874 Pre-Admit Procedure Indicator 10 CHAR 1 X X X X See Pre-Admit Procedure Performed.  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X See Pre-Admit Procedure Indicator 1 163  1876 - 1878 Pre-Op Days 10 CHAR 4 X X X X See Pre-Admit Procedure Indicator 1 163  1879 - 1880 Post-Op Days 10 CHAR 4 X X X X Number of days between procedure and admission date  1879 - 1880 Post-Op Days 10 CHAR 4 X X X X See Pre-Admit Procedure Indicator 1 163	(4901 - 4922)		NUM	(22)		x	Х	Date Other Procedure performed.	167-168
1831 - 1834	1826	Pre-Admit Procedure Indicator 8	CHAR	1	х	х	х	See Pre-Admit Procedure Indicator 1	163
1831 - 1834	1827 - 1830	Pre-Op Days 8	CHAR	4	х	х	х		164
1842 - 1849 OTHER PROCEDURE DATE 8 (4923 - 4944) OTHER PROCEDURE DATE 8 Encrypted  1850 Pre-Admit Procedure Indicator 9 CHAR 1 X X X X See Pre-Admit Procedure Indicator 1 163  1851 - 1854 Pre-Op Days 9 CHAR 4 X X X X Number of days between procedure and admission date  1855 - 1858 Post-Op Days 9 CHAR 4 X X X X Number of days between procedure and discharge date.  1859 - 1865 Other Procedure Code 9 CHAR 4 X X X X X Number of days between procedure and discharge date.  1866 - 1873 OTHER PROCEDURE DATE 9 Encrypted  1874 Pre-Admit Procedure Indicator 10 CHAR 1 X X X X See Pre-Admit Procedure Date 9 Encrypted  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X See Pre-Admit Procedure Indicator 1 163  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X X See Pre-Admit Procedure and damission date  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X X See Pre-Admit Procedure Indicator 1 163  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X X See Pre-Admit Procedure and admission date  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X X Number of days between procedure and admission date  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X X See Pre-Admit Procedure Indicator 1 163  1876 - 1878 Pre-Op Days 10 CHAR 4 X X X X X Number of days between procedure and admission date  1877 - 1878 Pre-Op Days 10 CHAR 4 X X X X X Number of days between procedure and discharge 165	1831 - 1834	Post-Op Days 8	CHAR	4	х	х	х	, ,	165
Columber	1835 - 1841	Other Procedure Code 8	CHAR	4	х	х	х		166
See Pre-Admit Procedure Indicator 9   CHAR   1   X   X   X   X   X   X   X   X   X	1842 - 1849	OTHER PROCEDURE DATE 8		8	DAY/MO				
1851 - 1854 Pre-Op Days 9 CHAR 4 X X X Number of days between procedure and admission date  1855 - 1858 Post-Op Days 9 CHAR 4 X X X Number of days between procedure and discharge date.  1859 - 1865 Other Procedure Code 9 CHAR 4 X X X ICD code identifying any significant procedure, other than Principal Procedure  1866 - 1873 OTHER PROCEDURE DATE 9 (A945 - 4966) OTHER PROCEDURE DATE 9 Encrypted  1874 Pre-Admit Procedure Indicator 10 CHAR 1 X X X X See Pre-Admit Procedure Indicator 1 163  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X Number of days between procedure and admission date  1879 - 1882 Post-Op Days 10 CHAR 4 X X X Number of days between procedure and discharge 1855	(4923 - 4944)		NUM	(22)		х	Х	Date Other Procedure performed.	167-168
1851 - 1854 Pre-Op Days 9 CHAR 4 X X X A date  1855 - 1858 Post-Op Days 9 CHAR 4 X X X X Number of days between procedure and discharge date.  1859 - 1865 Other Procedure Code 9 CHAR 4 X X X X ICD code identifying any significant procedure, other than Principal Procedure  1866 - 1873 OTHER PROCEDURE DATE 9 NUM (22) BLANK (YYYYY) X Date Other Procedure performed.  1874 Pre-Admit Procedure Indicator 10 CHAR 1 X X X X See Pre-Admit Procedure Indicator 1 163  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X Number of days between procedure and admission date  1879 - 1882 Post-Op Days 10 CHAR 4 X X X X Number of days between procedure and discharge 165	1850	Pre-Admit Procedure Indicator 9	CHAR	1	x	x	х	See Pre-Admit Procedure Indicator 1	163
1855 - 1858 Post-Op Days 9 CHAR 4 X X X date.  1859 - 1865 Other Procedure Code 9 CHAR 4 X X X X ICD code identifying any significant procedure, other than Principal Procedure  1866 - 1873 OTHER PROCEDURE DATE 9 NUM (22) DAY/MO. BLANK (YYYY) X Date Other Procedure performed.  1874 Pre-Admit Procedure Indicator 10 CHAR 1 X X X X See Pre-Admit Procedure Indicator 1 163  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X Number of days between procedure and admission date  1879 - 1882 Post-Op Days 10 CHAR 4 X X X X Number of days between procedure and discharge 165	1851 - 1854	Pre-Op Days 9	CHAR	4	х	х	х		164
1866 - 1873 OTHER PROCEDURE DATE 9 (4945 - 4966) OTHER PROCEDURE DATE 9 Encrypted  NUM  1874 Pre-Admit Procedure Indicator 10 CHAR 1 X X X X See Pre-Admit Procedure Indicator 1 163  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X X Number of days between procedure and admission date  1879 - 1882 Post-Op Days 10 CHAR 4 X X X X Number of days between procedure and discharge 165	1855 - 1858	Post-Op Days 9	CHAR	4	х	х	х	, ,	165
1879 - 1882  OTHER PROCEDURE DATE 9 Encrypted  NUM  OTHER PROCEDURE DATE 9 Encrypted  NUM  (22)  NUM  (23)  NUM  (24)  NUM  (25)  NUM  (26)  NUM  (27)  NUM  (28)  NUM  (29)  NUM  (20)  (20)  (20)  NUM  (20)  (20)  NUM  (20)  (20)  NUM  (20)  (2	1859 - 1865	Other Procedure Code 9	CHAR	4	х	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
(4945 - 4966)  OTHER PROCEDURE DATE 9 Encrypted  OTHER PROCEDURE DATE 9 Encrypted  NUM (22)  BLANK (YYYY) X  Date Other Procedure performed.  167-168  1874 Pre-Admit Procedure Indicator 10 CHAR 1 X X X See Pre-Admit Procedure Indicator 1 163  1875 - 1878 Pre-Op Days 10 CHAR 4 X X X Number of days between procedure and admission date  1879 - 1882 Post-Op Days 10 CHAR 4 X X X Number of days between procedure and discharge 165	1866 - 1873	OTHER PROCEDURE DATE 9		8	DAY/MO.				407.400
1875 - 1878 Pre-Op Days 10 CHAR 4 x x x Number of days between procedure and admission date  1879 - 1882 Post-Op Days 10 CHAR 4 x x x Number of days between procedure and discharge 165	(4945 - 4966)		NUM	(22)	BLANK (YYYY)	х	Х	Date Other Procedure performed.	167-168
1875 - 1878 Pre-Op Days 10 CHAR 4 X X A date  1879 - 1882 Post-Op Days 10 CHAR 4 X X X Number of days between procedure and discharge 165	1874	Pre-Admit Procedure Indicator 10	CHAR	1	x	х	x	See Pre-Admit Procedure Indicator 1	163
1879 - 1882   POST-UN DAVS 10   CHAR   4   X   X   X   Y ' ' ' ' ' ' 1 165	1875 - 1878	Pre-Op Days 10	CHAR	4	х	х	х	'	164
	1879 - 1882	Post-Op Days 10	CHAR	4	х	х	х	, ,	165

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Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1883 - 1889	Other Procedure Code 10	CHAR	4	x	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
1890 - 1897	OTHER PROCEDURE DATE 10		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4967 - 4988)	OTHER PROCEDURE DATE 10 Encrypted	NUM	(22)	BLANK (YYYY)	Х	Х	Date Other Procedure performed.	167-168
1898	Pre-Admit Procedure Indicator 11	CHAR	1	х	х	х	See Pre-Admit Procedure Indicator 1	163
1899 - 1902	Pre-Op Days 11	CHAR	4	x	х	x	Number of days between procedure and admission date	164
1903 - 1906	Post-Op Days 11	CHAR	4	x	х	х	Number of days between procedure and discharge date.	165
1907 - 1913	Other Procedure Code 11	CHAR	4	x	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
1914 - 1921	OTHER PROCEDURE DATE 11		8	DAY/MO.	DAY BLANK (YYYYMM)			
(4989 - 5010)	OTHER PROCEDURE DATE 11 Encrypted	NUM	(22)	BLANK (YYYY)	Х	Х	Date Other Procedure performed.	167-168
1922	Pre-Admit Procedure Indicator 12	CHAR	1	x	x	x	See Pre-Admit Procedure Indicator 1	163
1923 - 1926	Pre-Op Days 12	CHAR	4	x	х	х	Number of days between procedure and admission date	164
1927 - 1930	Post-Op Days 12	CHAR	4	х	х	х	Number of days between procedure and discharge date.	165
1931 - 1937	Other Procedure Code 12	CHAR	4	x	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
1938 - 1945	OTHER PROCEDURE DATE 12		8	DAY/MO.	DAY BLANK (YYYYMM)			407.400
(5011 - 5032)	OTHER PROCEDURE DATE 12 Encrypted	NUM	(22)	BLANK (YYYY)	х	X	Date Other Procedure performed.	167-168
1946	Pre-Admit Procedure Indicator 13	CHAR	1	х	x	х	See Pre-Admit Procedure Indicator 1	163
1947 - 1950	Pre-Op Days 13	CHAR	4	x	х	x	Number of days between procedure and admission date	164
1951 - 1954	Post-Op Days 13	CHAR	4	х	х	х	Number of days between procedure and discharge date.	165
1955 - 1961	Other Procedure Code 13	CHAR	4	х	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
1962 - 1969	OTHER PROCEDURE DATE 13		8	DAY/MO.	DAY BLANK (YYYYMM)			407.100
(5033 - 5054)	OTHER PROCEDURE DATE 13 Encrypted	NUM	(22)	BLANK (YYYY)	x	X	Date Other Procedure performed.	167-168

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Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1970	Pre-Admit Procedure Indicator 14	CHAR	1	х	х	х	See Pre-Admit Procedure Indicator 1	163
1971 - 1974	Pre-Op Days 14	CHAR	4	х	х	х	Number of days between procedure and admission date	164
1975 - 1978	Post-Op Days 14	CHAR	4	х	х	х	Number of days between procedure and discharge date.	165
1979 - 1985	Other Procedure Code 14	CHAR	4	х	х	х	ICD code identifying any significant procedure, other than Principal Procedure	166
1986 - 1993	OTHER PROCEDURE DATE 14		8		DAY BLANK (YYYYM)			
(5055 - 5076)	OTHER PROCEDURE DATE 14 Encrypted	NUM	(22)	DAY/MO. BLANK (YYYY)	x	х	Date Other Procedure performed.	167-168
1994	Pre-Admit Procedure Indicator 15	CHAR	1	х	х	х	See Pre-Admit Procedure Indicator 1	163
1995 - 1998	Pre-Op Days 15	CHAR	4	х	х	х	Number of days between procedure and admission date	164
1999 - 2002	Post-Op Days 15	CHAR	4	х	х	х	Number of days between procedure and discharge date.	165
2003 - 2005	Clinical Classification Software (CCS) Procedure Category	CHAR	3	х	х	х	CCS Procedure Category based on reported procedure code	169
2006 - 2007	Method of Anesthesia Used	NUM	2	х	х	x	Type of anesthesia administered during stay.  "00" = No Anesthesia  "10" = Local Anesthesia  "20" = General Anesthesia  "30" = Regional Anesthesia  "40" = Other	170
2008 - 2016	Blood Furnished Amount	NUM	9	x	х	х	The total number of pints of whole blood or units of packed red cells furnished	171
2017	Age Warning Flag	CHAR	1	х	х	х	Flags a conflict between reported diagnosis and ICD-9-CM reference file's age-specific edits. 1 = conflict, blank = no conflict	172
2018	Procedure Date Warning Flag	CHAR	1	х	х	x	Flags if procedure date conflicts with date of care "1" = Conflict / blank = No conflict	173
2019	Procedure Coding Method	CHAR	1	х	х	х	Identifies coding structure used	174

**DRG SEGMENT - Primary Records** 

December 1	Data Element	T	Ci		Data Set	s	Description	
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	- Description	Page No.
2020 - 2022	Federal Diagnostic Risk Grouper (DRG)	CHAR	3	х	х	х	Categorizes patient records for calendar year of date of discharge. Current Version of DRG. See Appendix Y.	175
2023 - 2024	Federal Major Diagnostic Category (MDC)	CHAR	2	х	x	х	Categorizes patient records for calendar year of date of discharge. Current Version of MDC See Appendix Y.	176
2025 - 2027	Past Federal Diagnosis Related Group (Past DRG)	CHAR	3	х	х	х	This DRG is specific to the past/prior calendar year of the date of discharge. See Appendix Y.	177
2028 - 2029	Past Federal Major Diagnostic Category (Past MDC)	CHAR	2	х	х	х	This MDC is specific to the past/prior calendar year of the date of discharge See Appendix Y.	178
2030 - 2032	New Federal Diagnosis Related Group (New DRG)	CHAR	3	х	х	х	This DRG is specific to the following (new) calendar year of the date of discharge. See Appendix Y.	179
2033 - 2034	New Federal Major Diagnostic Category (New MDC)	CHAR	2	х	х	х	This MDC is specific to the following (new) calendar year of the date of discharge.	180
2035 - 2037	All Patient Diagnosis Related Group (AP DRG)	CHAR	3	х	х	х	All Patient Diagnosis Related Group (AP DRG). This DRG is specific to the calendar year of the date of discharge.  See Appendix Y.	181
2038 - 2039	All Patient Major Diagnostic Category (AP MDC)	CHAR	2	х	х	х	The All Patient Major Diagnostic Category (AP MDC). This AP MDC is specific to the calendar year of the date of discharge. See Appendix Y.	182
2040 - 2042	Past All Patient Diagnostic Related Group (AP DRG)	CHAR	3	х	х	х	This DRG is specific to the prior calendar year of the date of discharge.  See Appendix Y.	183
2043 - 2044	Past All Patient Major Diagnostic Category (AP MDC)	CHAR	2	х	х	х	This AP MDC is specific to the past/prior calendar year of the date of service. See Appendix Y.	184
2045 - 2047	New All Patient Diagnosis Related Group (AP DRG)	CHAR	3	х	х	х	This AP DRG is specific to the following calendar year of the date of discharge. See Appendix Y.	185
2048 - 2049	New All Patient Major Diagnostic Category (AP MDC)	CHAR	2	х	х	х	This AP MDC is specific to the following year of the date of discharge. See Appendix Y.	186
2050 - 2052	All Patient Refined Diagnosis Related Group (APR DRG)	CHAR	3	х	х	х	All Patient Refined Diagnosis Related Group (APR DRG). This APR DRG is specific to the calendar year of the date of discharge. See Appendix Y.	187
2053 - 2054	All Patient Refined Major Diagnostic Category (APR MDC)	CHAR	2	х	х	х	All Patient Refined Major Diagnostic Category (APR MDC). This APR MDC is specific to the calendar year of the date of discharge.  See Appendix Y.	188
2055	All Patient Refined Risk of Mortality (APR ROM)	CHAR	1	х	х	х	All Patient Refined Risk of Mortality (APR ROM). This APR ROM is specific to the calendar year of the date of discharge. See Appendix Y.	189

Beaut Besitiens	Data Flamont	T	C:		Data Sets		Description	Dago No
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	- Description	Page No.
2056	All Patient Refined Severity of Illness (APR SOI)	CHAR	1	х	х	х	All Patient Refined Severity of Illness (APR SOI). This SOI is specific to the calendar year of the date of discharge. See Appendix Y.	190
2057 - 2059	Past All Patient Refined Diagnosis Related Group (APR DRG)	CHAR	3	х	х	х	This APR DRG is specific to the past/prior calendar year of the date of discharge. See Appendix Y.	191
2060 - 2061	Past All Patient Refined Major Diagnostic Category (APR MDC)	CHAR	2	х	х	х	This APR MDC is specific to the past/prior calendar year of the date of discharge.  See Appendix Y.	192
2062	Past All Patient Refined Risk of Mortality (APR ROM)	CHAR	1	х	х	х	This APR ROM is specific to the past/prior calendar year of the date of discharge.  See Appendix Y.	193
2063	Past All Patient Refined Severity of Illness (APR SOI)	CHAR	1	х	х	х	This APR SOI is specific to the past/prior calendar year of the date of discharge. See Appendix Y.	194
2064 - 2066	New All Patient Refined Diagnosis Related Group (APR DRG)	CHAR	3	х	х	х	This APR DRG is specific to the following calendar year of the date of discharge.  See Appendix Y.	195
2067 - 2068	New All Patient Refined Major Diagnostic Category (APR MDC)	CHAR	2	х	х	х	This APR MDC is specific to the following calendar year of the date of discharge.  See Appendix Y.	196
2069	New All Patient Refined Risk of Mortality (APR ROM)	CHAR	1	х	х	х	This APR ROM is specific to the following calendar year of the date of discharge.  See Appendix Y.	197
2070	New All Patient Refined Severity of Illness (APR SOI)	CHAR	1	х	х	х	This APR SOI is specific to the following calendar year of the date of discharge. See Appendix Y.	198
2071 - 2074	Diagnosis Related Group (DRG) Billed	CHAR	4	х	х	х	Collected from 1994-1997. Diagnosis Related Group (DRG) Billed obtained from grouping diagnoses and procedures	199

**AMI SEGMENT - Primary Records** 

Record Positions	Data Element	Time	Cima		Data Sets		Decayintian	Dave No.
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
2075	AMI Warning Flag	NUM	1	х	X	x	Acute Myocardial Infarction (AMI) Warning Indicator "1" = AMI code reported "0" = No AMI code reported. Data element for six months	200
2076 - 2078	Heart Rate on Arrival	NUM	3	x	x	x	Patient heart rate in beats per minute (bpm) taken at first patient contact after arrival with Principal/Primary Diagnosis of AMI. Reported value= Patient Heart Rate on Arrival. "888" = Undocumented in Medical Chart "999" = Unknown blank = Not applicable,	201

Record Positions	Data Element	Type	Size		Data Sets	;	Description	Page No.
Record Fositions	Data Element	Туре		De-identified	Limited	Identifiable	Description	r ago ito.
2079 - 2081	Systolic BP on Arrival	NUM	3	х	х	х	Systolic BP in mg/dl at first patient contact after arrival with Principal/Primary Diagnosis of AMI Reported value = Systolic Blood Pressure upon arrival.  "888" = Undocumented in Medical Chart "999" = Unknown blank = Not applicable	202
2082 - 2084	Diastolic BP on Arrival	NUM	3	x	x	x	Diastolic BP in mg/dl at first patient contact after arrival with Principal/Primary Diagnosis of AMI Reported value = Diastolic Blood Pressure upon arrival.  "888" = Undocumented in Medical Chart "999" = Unknown blank = Not applicable	203

**HIPAA SEGMENT - Primary Records** 

Record Positions	Data Element	Tyro	Size		Data Sets		Description	Page No.
	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
2085	AIDS / HIV Flag	CHAR	1	х	х	х	Indication of AIDS/HIV in record (Y or N)	204
2086	Abortion Flag	CHAR	1	х	х	х	Indication of abortion in record (Y or N)	205

**CHARGES SEGMENT - Primary Records** 

Record Positions	Data Element	Turna	Size		Data Sets	;	Description	Dogo No
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
2087 - 2098	Total Charges	NUM	12	x	x	х	Total charges	206
2099 - 2108	Total Accommodation Total Charges	CHAR	10	х	х	х	Sum of all Accommodations Days times Accommodations Rate.	207
2109 - 2118	Ancillary Total Charges	CHAR	10	х	x	х	Total of all Ancillary Charges incurred	208
2119 - 2130	Total Non-Covered Charges	NUM	12	x	X	х	Total charges not reimbursable by primary payer	209
2131 - 2140	Total Non-Covered Accommodation Charges	CHAR	10	х	х	х	Charges not reimbursable by the primary payer	210
2141 - 2150	Total Non-Covered Ancillary Charges	CHAR	10	х	х	х	Total of all Ancillary Non-Covered Charges	211

**SERVICE SEGMENT - Primary Records** 

	<b>-</b> . <b>-</b>				Data Sets	;		D N-
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	- Description	Page No.
2151 - 2154	Revenue Code 1	CHAR	4	х	х	х	Identifies specific accommodations, ancillary service or unique billing calculations or arrangements. (Revenue Code)	212 - 213
2155	Revenue Type 1	CHAR	1	х	х	х	Identifies the type of revenue code utilized and is grouped into two categories: accommodation codes and ancillary codes	214
2156 - 2165	Service Charge 1	NUM	10	х	х	х	The total amount/sum of revenue charges (accommodations charges and ancillary charges) of all submitted charges on each service line segment for this claim	215
2166 - 2167	Unit Type 1	CHAR	2	х	х	х	The measurement units in which a value is being expressed	216
2168 - 2175	Unit Quantity 1	NUM	8	х	х	х	The number of service units that occurred during the bill period for the patient (Days or Quantity of Units)	217-218
2176 - 2185	Non-Covered Charge 1	NUM	10	х	х	х	Non-covered charges for the primary payer as it pertains to the associated revenue code.	219
2186 - 2189	Revenue Code 2	CHAR	4	х	х	х	See Description for Revenue Code 1	212 - 213
2190	Revenue Type 2	CHAR	1	х	Х	х	See Description for Revenue Type 1	214
2191 - 2200	Service Charge 2	NUM	10	х	Х	х	See Description for Total Charge 1	215
2201 - 2202	Unit Type 2	CHAR	2	х	Х	х	See Description for Unit Type 1	216
2203 - 2210	Unit Quantity 2	NUM	8	Х	Х	Х	See Description for Unit Quantity 1	217-218
2211 - 2220	Non-Covered Charge 2	NUM	10	х	х	х	See Description for Non-Covered Charge 1	219
2221 - 2224	Revenue Code 3	CHAR	4	х	х	х	See Description for Revenue Code 1	212 - 213
2225	Revenue Type 3	CHAR	1	х	Х	х	See Description for Revenue Type 1	214
2226 - 2235	Service Charge 3	NUM	10	х	Х	х	See Description for Total Charge 1	215
2236 - 2237	Unit Type 3	CHAR	2	х	Х	х	See Description for Unit Type 1	216
2238 - 2245	Unit Quantity 3	NUM	8	х	Х	х	See Description for Unit Quantity 1	217-218
2246 - 2255	Non-Covered Charge 3	NUM	10	х	х	х	See Description for Non-Covered Charge 1	219
2256 - 2259	Revenue Code 4	CHAR	4	х	х	х	See Description for Revenue Code 1	212 - 213
2260	Revenue Type 4	CHAR	1	х	х	х	See Description for Revenue Type 1	214
2261 - 2270	Service Charge 4	NUM	10	х	Х	х	See Description for Total Charge 1	215
2271 - 2272	Unit Type 4	CHAR	2	х	Х	х	See Description for Unit Type 1	216
2273 - 2280	Unit Quantity 4	NUM	8	х	х	х	See Description for Unit Quantity 1	217-218
2281 - 2290	Non-Covered Charge 4	NUM	10	х	х	х	See Description for Non-Covered Charge 1	219

	·				Data Sets			
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	- Description	Page No.
2291 - 2294	Revenue Code 5	CHAR	4	х	х	х	See Description for Revenue Code 1	212 - 213
2295	Revenue Type 5	CHAR	1	х	х	х	See Description for Revenue Type 1	214
2296 - 2305	Service Charge 5	NUM	10	х	Х	х	See Description for Total Charge 1	215
2306 - 2307	Unit Type 5	CHAR	2	х	Х	х	See Description for Unit Type 1	216
2308 - 2315	Unit Quantity 5	NUM	8	х	Х	х	See Description for Unit Quantity 1	217-218
2316 - 2325	Non-Covered Charge 5	NUM	10	х	х	х	See Description for Non-Covered Charge 1	219
2326 - 2329	Revenue Code 6	CHAR	4	х	х	х	See Description for Revenue Code 1	212 - 213
2330	Revenue Type 6	CHAR	1	х	Х	х	See Description for Revenue Type 1	214
2331 - 2340	Service Charge 6	NUM	10	х	Х	х	See Description for Total Charge 1	215
2341 - 2342	Unit Type 6	CHAR	2	х	х	х	See Description for Unit Type 1	216
2343 - 2350	Unit Quantity 6	NUM	8	х	Х	х	See Description for Unit Quantity 1	217-218
2351 - 2360	Non-Covered Charge 6	NUM	10	х	х	х	See Description for Non-Covered Charge 1	219
2361 - 2364	Revenue Code 7	CHAR	4	х	х	х	See Description for Revenue Code 1	212 - 213
2365	Revenue Type 7	CHAR	1	х	х	х	See Description for Revenue Type 1	214
2366 - 2375	Service Charge 7	NUM	10	х	Х	х	See Description for Total Charge 1	215
2376 - 2377	Unit Type 7	CHAR	2	х	Х	х	See Description for Unit Type 1	216
2378 - 2385	Unit Quantity 7	NUM	8	х	х	х	See Description for Unit Quantity 1	217-218
2386 - 2395	Non-Covered Charge 7	NUM	10	х	х	х	See Description for Non-Covered Charge 1	219
2396 - 2399	Revenue Code 8	CHAR	4	х	х	х	See Description for Revenue Code 1	212 - 213
2400	Revenue Type 8	CHAR	1	х	х	х	See Description for Revenue Type 1	214
2401 - 2410	Service Charge 8	NUM	10	х	х	х	See Description for Total Charge 1	215
2411 - 2412	Unit Type 8	CHAR	2	х	х	х	See Description for Unit Type 1	216
2413 - 2420	Unit Quantity 8	NUM	8	х	х	х	See Description for Unit Quantity 1	217-218
2421 - 2430	Non-Covered Charge 8	NUM	10	х	х	х	See Description for Non-Covered Charge 1	219
2431 - 2434	Revenue Code 9	CHAR	4	х	х	х	See Description for Revenue Code 1	212 - 213
2435	Revenue Type 9	CHAR	1	х	х	х	See Description for Revenue Type 1	214
2436 - 2445	Service Charge 9	NUM	10	х	Х	х	See Description for Total Charge 1	215
2446 - 2447	Unit Type 9	CHAR	2	х	х	х	See Description for Unit Type 1	216
2448 - 2455	Unit Quantity 9	NUM	8	х	х	х	See Description for Unit Quantity 1	217-218

Record Positions	Data Element	Tymo	Size		Data Sets	<b>:</b>	Description	Dogo No
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
2456 - 2465	Non-Covered Charge 9	NUM	10	х	х	х	See Description for Non-Covered Charge 1	219
2466 - 2469	Revenue Code 10	CHAR	4	х	х	х	See Description for Revenue Code 1	212 - 213
2470	Revenue Type 10	CHAR	1	х	х	х	See Description for Revenue Type 1	214
2471 - 2480	Service Charge 10	NUM	10	х	Х	Х	See Description for Total Charge 1	215
2481 - 2482	Unit Type 10	CHAR	2	х	Х	х	See Description for Unit Type 1	216
2483 - 2490	Unit Quantity 10	NUM	8	х	Х	х	See Description for Unit Quantity 1	217-218
2491 - 2500	Non-Covered Charge 10	NUM	10	х	х	х	See Description for Non-Covered Charge 1	219

## CONTINUATION RECORDS - Common Detail

Record Positions	Data Element	Type	Size		Data Sets		Description	Page No.
Record Positions	Data Element	Туре	3126	De-identified	Limited	Identifiable	Description	raye No.
1-14	Discharge Sequential Number	NUM	14	х	х	х	The discharge year, plus an eight digit sequentially assigned number	221
15	Continuation Indicator	NUM	1	x	х	X	A code which indicates if continuation records exist for this discharge and what type of information caused this overflow	222
16-18	Record Sequential Number	NUM	3	х	х	X	The number assigned sequentially by SPARCS to indicate the record's position within a set of records for a particular patient stay/discharge	223
19-21	Record Sequence Count	NUM	3	х	x	х	The total number of records reported for a particular patient stay/discharge	224

CONTINUATION RECORDS - Service Segment

Record Positions	Data Element	Tyma	Size	Data Sets			Description	Dono No
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
22-50	Filler		29	х	Х	Х	No data	
51-54	Revenue Code 11	CHAR	4	x	х	х	Identifies specific accommodations, ancillary service or unique billing calculations or arrangements. (Revenue Code)	225-226
55	Revenue Type 11	CHAR	1	х	х	х	Identifies the type of revenue code utilized, and is grouped into two categories: accommodation codes and ancillary codes	227
56-65	Service Charge 11	NUM	10	х	х	х	The total amount/sum of revenue charges (accommodations charges and ancillary charges) of all submitted charges on each service line segment for this claim	228

					Data Se	ets		
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	- Description	Page No.
66-67	Unit Type 11	CHAR	2	х	x	x	The measurement units in which a value is being expressed. DA=Days UN=Units	229
68-75	Unit Quantity 11	NUM	8	х	x	х	The number of service units that occurred during the bill period for the patient	230-231
76-85	Non-Covered Charge 11	NUM	10	х	x	x	Non-covered charges for the primary payer as it pertains to the associated revenue code.	232-233
86-89	Revenue Code 12	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
90	Revenue Type 12	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
91-100	Total Charge 12	NUM	10	х	Х	Х	See Description for Total Charge 11	228
101-102	Unit Type 12	CHAR	2	х	х	Х	See Description for Unit Type 11	229
103-110	Unit Quantity 12	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
111-120	Non-Covered Charge 12	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
121-124	Revenue Code 13	CHAR	4	х	х	Х	See Description for Revenue Code 11	225-226
125	Revenue Type 13	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
126-135	Total Charge 13	NUM	10	х	Х	Х	See Description for Total Charge 11	228
136-137	Unit Type 13	CHAR	2	х	х	Х	See Description for Unit Type 11	229
138-145	Unit Quantity 13	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
146-155	Non-Covered Charge 13	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
156-159	Revenue Code 14	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
160	Revenue Type 14	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
161-170	Total Charge 14	NUM	10	х	Х	Х	See Description for Total Charge 11	228
171-172	Unit Type 14	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
173-180	Unit Quantity 14	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
181-190	Non-Covered Charge 14	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
191-194	Revenue Code 15	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
195	Revenue Type 15	CHAR	1	х	х	Х	See Description for Revenue Type 11	227
196-205	Total Charge 15	NUM	10	х	Х	Х	See Description for Total Charge 11	228
206-207	Unit Type 15	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
208-215	Unit Quantity 15	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
216-225	Non-Covered Charge 15	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
226-229	Revenue Code 16	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
230	Revenue Type 16	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
231-240	Total Charge 16	NUM	10	х	Х	х	See Description for Total Charge 11	228
241-242	Unit Type 16	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
243-250	Unit Quantity 16	NUM	8	х	х	х	See Description for Unit Quantity 11	230-231
251-260	Non-Covered Charge 16	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
261-264	Revenue Code 17	CHAR	4	х	х	х	See Description for Revenue Code 11	225-226
265	Revenue Type 17	CHAR	1	х	х	х	See Description for Revenue Type 11	227

					Data Se	ts		Dava Na
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	- Description	Page No.
266-275	Total Charge 17	NUM	10	х	Х	X	See Description for Total Charge 11	228
276-277	Unit Type 17	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
278-285	Unit Quantity 17	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
286-295	Non-Covered Charge 17	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
296-299	Revenue Code 18	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
300	Revenue Type 18	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
301-310	Total Charge 18	NUM	10	х	Х	Х	See Description for Total Charge 11	228
311-312	Unit Type 18	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
313-320	Unit Quantity 18	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
321-330	Non-Covered Charge 18	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
331-334	Revenue Code 19	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
335	Revenue Type 19	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
336-345	Total Charge 19	NUM	10	х	Х	Х	See Description for Total Charge 11	228
346-347	Unit Type 19	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
348-355	Unit Quantity 19	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
356-365	Non-Covered Charge 19	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
366-369	Revenue Code 20	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
370	Revenue Type 20	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
371-380	Total Charge 20	NUM	10	х	Х	Х	See Description for Total Charge 11	228
381-382	Unit Type 20	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
383-390	Unit Quantity 20	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
391-400	Non-Covered Charge 20	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
401-404	Revenue Code 21	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
405	Revenue Type 21	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
406-415	Total Charge 21	NUM	10	х	Х	Х	See Description for Total Charge 11	228
416-417	Unit Type 21	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
418-425	Unit Quantity 21	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
426-435	Non-Covered Charge 21	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
436-439	Revenue Code 22	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
440	Revenue Type 22	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
441-450	Total Charge 22	NUM	10	х	Х	Х	See Description for Total Charge 11	228
451-452	Unit Type 22	CHAR	2	х	х	Х	See Description for Unit Type 11	229
453-460	Unit Quantity 22	NUM	8	х	х	Х	See Description for Unit Quantity 11	230-231
461-470	Non-Covered Charge 22	NUM	10	х	х	Х	See Description for Non-Covered Charge 11	232-233
471-474	Revenue Code 23	CHAR	4	х	х	Х	See Description for Revenue Code 11	225-226
475	Revenue Type 23	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
476-485	Total Charge 23	NUM	10	х	х	Х	See Description for Total Charge 11	228
486-487	Unit Type 23	CHAR	2	х	х	Х	See Description for Unit Type 11	229
488-495	Unit Quantity 23	NUM	8	х	х	Х	See Description for Unit Quantity 11	230-231

	5 / <b>5</b> 1				Data Se	ets		
Record Positions	Data Element	Туре	Size	De-identified	l Limited	Identifiable	Description	Page No.
496-505	Non-Covered Charge 23	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
506-509	Revenue Code 24	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
510	Revenue Type 24	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
511-520	Total Charge 24	NUM	10	х	Х	Х	See Description for Total Charge 11	228
521-522	Unit Type 24	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
523-530	Unit Quantity 24	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
531-540	Non-Covered Charge 24	NUM	10	Х	Х	Х	See Description for Non-Covered Charge 11	232-233
541-544	Revenue Code 25	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
545	Revenue Type 25	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
546-555	Total Charge 25	NUM	10	х	Х	Х	See Description for Total Charge 11	228
556-557	Unit Type 25	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
558-565	Unit Quantity 25	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
566-575	Non-Covered Charge 25	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
576-579	Revenue Code 26	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
580	Revenue Type 26	CHAR	1	Х	Х	Х	See Description for Revenue Type 11	227
581-590	Total Charge 26	NUM	10	х	Х	Х	See Description for Total Charge 11	228
591-592	Unit Type 26	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
593-600	Unit Quantity 26	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
601-610	Non-Covered Charge 27	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
611-614	Revenue Code 27	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
615	Revenue Type 27	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
616-625	Total Charge 27	NUM	10	х	Х	Х	See Description for Total Charge 11	228
626-627	Unit Type 27	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
628-635	Unit Quantity 27	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
636-645	Non-Covered Charge 27	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
646-649	Revenue Code 28	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
650	Revenue Type 28	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
651-660	Total Charge 28	NUM	10	х	Х	Х	See Description for Total Charge 11	228
661-662	Unit Type 28	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
663-670	Unit Quantity 28	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
671-680	Non-Covered Charge 28	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
681-684	Revenue Code 29	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
685	Revenue Type 29	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
686-695	Total Charge 29	NUM	10	х	Х	Х	See Description for Total Charge 11	228
696-697	Unit Type 29	CHAR	2	х	х	Х	See Description for Unit Type 11	229
698-705	Unit Quantity 29	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
706-715	Non-Covered Charge 29	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
716-719	Revenue Code 30	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
720	Revenue Type 30	CHAR	1	х	х	х	See Description for Revenue Type 11	227

	·				Data Se	ts	Description.	
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
721-730	Total Charge 30	NUM	10	х	Х	х	See Description for Total Charge 11	228
731-732	Unit Type 30	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
733-740	Unit Quantity 30	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
741-750	Non-Covered Charge 30	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
751-754	Revenue Code 31	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
755	Revenue Type 31	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
756-765	Total Charge 31	NUM	10	х	Х	Х	See Description for Total Charge 11	228
766-767	Unit Type 31	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
768-775	Unit Quantity 31	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
776-785	Non-Covered Charge 31	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
786-789	Revenue Code 32	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
790	Revenue Type 32	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
791-800	Total Charge 32	NUM	10	х	Х	Х	See Description for Total Charge 11	228
801-802	Unit Type 32	CHAR	2	х	Х	х	See Description for Unit Type 11	229
803-810	Unit Quantity 32	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
811-820	Non-Covered Charge 32	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
821-824	Revenue Code 33	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
825	Revenue Type 33	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
826-835	Total Charge 33	NUM	10	х	Х	х	See Description for Total Charge 11	228
836-837	Unit Type 33	CHAR	2	х	Х	х	See Description for Unit Type 11	229
838-845	Unit Quantity 33	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
846-855	Non-Covered Charge 33	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
856-859	Revenue Code 34	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
860	Revenue Type 34	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
861-870	Total Charge 34	NUM	10	х	Х	х	See Description for Total Charge 11	228
871-872	Unit Type 34	CHAR	2	х	Х	х	See Description for Unit Type 11	229
873-880	Unit Quantity 34	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
881-890	Non-Covered Charge 34	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
891-894	Revenue Code 35	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
895	Revenue Type 35	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
896-905	Total Charge 35	NUM	10	х	Х	х	See Description for Total Charge 11	228
906-907	Unit Type 35	CHAR	2	х	Х	х	See Description for Unit Type 11	229
908-915	Unit Quantity 35	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
916-925	Non-Covered Charge 35	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
926-929	Revenue Code 36	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
930	Revenue Type 36	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
931-940	Total Charge 36	NUM	10	х	Х	х	See Description for Total Charge 11	228
941-942	Unit Type 36	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
943-950	Unit Quantity 36	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231

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Record Positions	Data Element	Туре	Size	De-identified	l Limited	Identifiable	- Description	Page No.
951-960	Non-Covered Charge 36	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
961-964	Revenue Code 37	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
965	Revenue Type 37	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
966-975	Total Charge 37	NUM	10	х	Х	Х	See Description for Total Charge 11	228
976-977	Unit Type 37	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
978-985	Unit Quantity 37	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
986-995	Non-Covered Charge 37	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
996-999	Revenue Code 38	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1000	Revenue Type 38	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1001-1010	Total Charge 38	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1011-1012	Unit Type 38	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1013-1020	Unit Quantity 38	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1021-1030	Non-Covered Charge 38	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1031-1034	Revenue Code 39	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1035	Revenue Type 39	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1036-1045	Total Charge 39	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1046-1047	Unit Type 39	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1048-1055	Unit Quantity 39	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1056-1065	Non-Covered Charge 39	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1066-1069	Revenue Code 40	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1070	Revenue Type 40	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1071-1080	Total Charge 40	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1081-1082	Unit Type 40	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1083-1090	Unit Quantity 40	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1091-1100	Non-Covered Charge 40	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1101-1104	Revenue Code 41	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1105	Revenue Type 41	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1106-1115	Total Charge 41	NUM	10	х	Х	Х	See Description for Total Charge 11	228
116-1117	Unit Type 41	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1118-1125	Unit Quantity 41	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1126-1135	Non-Covered Charge 41	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1136-1139	Revenue Code 42	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1140	Revenue Type 42	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1141-1150	Total Charge 42	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1151-1152	Unit Type 42	CHAR	2	х	х	Х	See Description for Unit Type 11	229
1153-1160	Unit Quantity 42	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1161-1170	Non-Covered Charge 42	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1171-1174	Revenue Code 43	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1175	Revenue Type 43	CHAR	1	х	х	х	See Description for Revenue Type 11	227

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Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	- Description	Page No.
1176-1185	Total Charge 43	NUM	10	х	Х	х	See Description for Total Charge 11	228
1186-1187	Unit Type 43	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1188-1195	Unit Quantity 43	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1196-1205	Non-Covered Charge 43	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1206-1209	Revenue Code 44	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1210	Revenue Type 44	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1211-1220	Total Charge 44	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1221-1222	Unit Type 44	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1223-1230	Unit Quantity 44	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1231-1240	Non-Covered Charge 44	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1241-1244	Revenue Code 45	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1245	Revenue Type 45	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1246-1255	Total Charge 45	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1256-1257	Unit Type 45	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1258-1265	Unit Quantity 45	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1266-1275	Non-Covered Charge 45	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1275-1279	Revenue Code 46	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1280	Revenue Type 46	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1281-1290	Total Charge 46	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1291-1292	Unit Type 46	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1293-1300	Unit Quantity 46	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
1301-1310	Non-Covered Charge 46	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1311-1314	Revenue Code 47	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1315	Revenue Type 47	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1316-1325	Total Charge 47	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1326-1327	Unit Type 47	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1328-1335	Unit Quantity 47	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1336-1345	Non-Covered Charge 47	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1346-1349	Revenue Code 48	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1350	Revenue Type 48	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
1351-1360	Total Charge 48	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1361-1362	Unit Type 48	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1363-1370	Unit Quantity 48	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1371-1380	Non-Covered Charge 48	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
1381-1384	Revenue Code 49	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
1385	Revenue Type 49	CHAR	1	х	х	Х	See Description for Revenue Type 11	227
1386-1395	Total Charge 49	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1396-1397	Unit Type 49	CHAR	2	х	х	Х	See Description for Unit Type 11	229
1398-1405	Unit Quantity 49	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231

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Record Positions	Data Element	Туре	Size	De-identified	l Limited	Identifiable	- Description	Page No.
1406-1415	Non-Covered Charge 49	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1416-1419	Revenue Code 50	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1420	Revenue Type 50	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1421-1430	Total Charge 50	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1431-1432	Unit Type 50	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1433-1440	Unit Quantity 50	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1441-1450	Non-Covered Charge 50	NUM	10	Х	Х	Х	See Description for Non-Covered Charge 11	232-233
1451-1454	Revenue Code 51	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1455	Revenue Type 51	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1456-1465	Total Charge 51	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1466-1467	Unit Type 51	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1468-1475	Unit Quantity 51	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1476-1485	Non-Covered Charge 51	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1486-1489	Revenue Code 52	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1490	Revenue Type 52	CHAR	1	Х	Х	х	See Description for Revenue Type 11	227
1491-1500	Total Charge 52	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1501-1502	Unit Type 52	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1503-1510	Unit Quantity 52	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1511-1520	Non-Covered Charge 52	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1521-1524	Revenue Code 53	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1525	Revenue Type 53	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1526-1535	Total Charge 53	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1536-1537	Unit Type 53	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1538-1545	Unit Quantity 53	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1546-1555	Non-Covered Charge 53	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1556-1559	Revenue Code 54	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1560	Revenue Type 54	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1561-1570	Total Charge 54	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1571-1572	Unit Type 54	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1573-1580	Unit Quantity 54	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1581-1590	Non-Covered Charge 54	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1591-1594	Revenue Code 55	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1595	Revenue Type 55	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1596-1605	Total Charge 55	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1606-1607	Unit Type 55	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1608-1615	Unit Quantity 55	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1616-1625	Non-Covered Charge 55	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1626-1629	Revenue Code 56	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1630	Revenue Type 56	CHAR	1	х	х	Х	See Description for Revenue Type 11	227

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Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	- Description	Page No.
1631-1640	Total Charge 56	NUM	10	х	х	х	See Description for Total Charge 11	228
1641-1642	Unit Type 56	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1643-1650	Unit Quantity 56	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1651-1660	Non-Covered Charge 56	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1661-1664	Revenue Code 57	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1665	Revenue Type 57	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1666-1675	Total Charge 57	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1676-1677	Unit Type 57	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1678-1685	Unit Quantity 57	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1686-1695	Non-Covered Charge 57	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1696-1699	Revenue Code 58	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1700	Revenue Type 58	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1701-1710	Total Charge 58	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1711-1712	Unit Type 58	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1713-1720	Unit Quantity 58	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1721-1730	Non-Covered Charge 58	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1731-1734	Revenue Code 59	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1735	Revenue Type 59	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1736-1745	Total Charge 59	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1746-1747	Unit Type 59	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1748-1755	Unit Quantity 59	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
1756-1765	Non-Covered Charge 59	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1766-1769	Revenue Code 60	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1770	Revenue Type 60	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1771-1780	Total Charge 60	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1781-1782	Unit Type 60	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1783-1790	Unit Quantity 60	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1791-1800	Non-Covered Charge 60	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1801-1804	Revenue Code 61	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1805	Revenue Type 61	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
1806-1815	Total Charge 61	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1816-1817	Unit Type 61	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1818-1825	Unit Quantity 61	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
1826-1835	Non-Covered Charge 61	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1836-1839	Revenue Code 62	CHAR	4	х	х	Х	See Description for Revenue Code 11	225-226
1840	Revenue Type 62	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1841-1850	Total Charge 62	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1851-1852	Unit Type 62	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1853-1860	Unit Quantity 62	NUM	8	х	х	Х	See Description for Unit Quantity 11	230-231

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Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	Description	Page No.
1861-1870	Non-Covered Charge 62	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1871-1874	Revenue Code 63	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1875	Revenue Type 63	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227
1876-1885	Total Charge 63	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1886-1887	Unit Type 63	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1888-1895	Unit Quantity 63	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
1896-1905	Non-Covered Charge 65	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
1906-1909	Revenue Code 64	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
1910	Revenue Type 64	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
1911-1920	Total Charge 64	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1921-1922	Unit Type 64	CHAR	2	х	Х	х	See Description for Unit Type 11	229
1923-1930	Unit Quantity 64	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
1931-1940	Non-Covered Charge 64	NUM	10	х	Х	Х	See Description for Non-Covered Charge 11	232-233
1941-1944	Revenue Code 65	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
1945	Revenue Type 65	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
1946-1955	Total Charge 65	NUM	10	х	Х	Х	See Description for Total Charge 11	228
1956-1957	Unit Type 65	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
1958-1965	Unit Quantity 65	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
1966-1975	Non-Covered Charge 65	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
1976-1979	Revenue Code 66	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
1980	Revenue Type 66	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
1981-1990	Total Charge 66	NUM	10	х	Х	х	See Description for Total Charge 11	228
1991-1992	Unit Type 66	CHAR	2	х	Х	х	See Description for Unit Type 11	229
1993-2000	Unit Quantity 66	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
2001-2010	Non-Covered Charge 66	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
2011-2014	Revenue Code 67	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
2015	Revenue Type 67	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
2016-2025	Total Charge 67	NUM	10	х	Х	х	See Description for Total Charge 11	228
2026-2027	Unit Type 67	CHAR	2	х	Х	х	See Description for Unit Type 11	229
2028-2035	Unit Quantity 67	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
2036-2045	Non-Covered Charge 67	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
2046-2049	Revenue Code 68	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
2050	Revenue Type 68	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
2051-2060	Total Charge 68	NUM	10	х	Х	х	See Description for Total Charge 11	228
2061-2062	Unit Type 68	CHAR	2	х	Х	Х	See Description for Unit Type 11	229
2063-2070	Unit Quantity 68	NUM	8	х	Х	Х	See Description for Unit Quantity 11	230-231
2071-2080	Non-Covered Charge 68	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
2081-2084	Revenue Code 69	CHAR	4	х	Х	Х	See Description for Revenue Code 11	225-226
2085	Revenue Type 69	CHAR	1	х	Х	Х	See Description for Revenue Type 11	227

					Data Sets	;		
Record Positions	Data Element	Туре	Size	De-identified	Limited	Identifiable	- Description	Page No.
2086-2095	Total Charge 69	NUM	10	х	Х	х	See Description for Total Charge 11	228
2096-2097	Unit Type 69	CHAR	2	х	Х	х	See Description for Unit Type 11	229
2098-2105	Unit Quantity 69	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
2106-2115	Non-Covered Charge 69	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
2116-2119	Revenue Code 70	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
2120	Revenue Type 70	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
2121-2130	Total Charge 70	NUM	10	х	Х	х	See Description for Total Charge 11	228
2131-2132	Unit Type 70	CHAR	2	х	Х	х	See Description for Unit Type 11	229
2133-2140	Unit Quantity 70	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
2141-2150	Non-Covered Charge 70	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
2151-2154	Revenue Code 71	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
2155	Revenue Type 71	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
2156-2165	Total Charge 71	NUM	10	х	Х	х	See Description for Total Charge 11	228
2166-2167	Unit Type 71	CHAR	2	х	Х	х	See Description for Unit Type 11	229
2168-2175	Unit Quantity 71	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
2176-2185	Non-Covered Charge 71	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
2186-2189	Revenue Code 72	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
2190	Revenue Type 72	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
2191-2200	Total Charge 72	NUM	10	х	Х	х	See Description for Total Charge 11	228
2201-2202	Unit Type 72	CHAR	2	х	Х	х	See Description for Unit Type 11	229
2203-2210	Unit Quantity 72	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
2211-2220	Non-Covered Charge 72	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
2221-2224	Revenue Code 73	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
2225	Revenue Type 73	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
2226-2235	Total Charge 73	NUM	10	х	Х	х	See Description for Total Charge 11	228
2236-2237	Unit Type 73	CHAR	2	х	Х	х	See Description for Unit Type 11	229
2238-2245	Unit Quantity 73	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
2246-2255	Non-Covered Charge 73	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
2256-2259	Revenue Code 74	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
2260	Revenue Type 74	CHAR	1	х	Х	х	See Description for Revenue Type 11	227
2261-2270	Total Charge 74	NUM	10	х	Х	х	See Description for Total Charge 11	228
2271-2272	Unit Type 74	CHAR	2	х	Х	х	See Description for Unit Type 11	229
2273-2280	Unit Quantity 74	NUM	8	х	Х	х	See Description for Unit Quantity 11	230-231
2281-2290	Non-Covered Charge 74	NUM	10	х	Х	х	See Description for Non-Covered Charge 11	232-233
2291-2294	Revenue Code 75	CHAR	4	х	Х	х	See Description for Revenue Code 11	225-226
2295	Revenue Type 75	CHAR	1	х	х	х	See Description for Revenue Type 11	227
2296-2305	Total Charge 75	NUM	10	х	Х	х	See Description for Total Charge 11	228
2306-2307	Unit Type 75	CHAR	2	х	х	х	See Description for Unit Type 11	229
2308-2315	Unit Quantity 75	NUM	8	х	х	х	See Description for Unit Quantity 11	230-231

Record Positions						Data S	Sets				
	Data Element T	Туре	Size	De- identified	Li	mited		denti	fiable	Description	Page No.
2316-2325	Non-Covered Charge 77		NUM	10	)	Х	Х	Х	See Des	cription for Non-Covered Charge 11	232-233
2326-2329	Revenue Code 76		CHAR	. 4	ļ	х	Х	Х	See Des	cription for Revenue Code 11	225-226
2330	Revenue Type 76		CHAR	. 1		Х	Х	Х	See Des	cription for Revenue Type 11	227
2331-2340	Total Charge 76		NUM	10	)	х	Х	Х	See Des	cription for Total Charge 11	228
2341-2342	Unit Type 76		CHAR	. 2	2	х	Х	Х	See Des	cription for Unit Type 11	229
2343-2350	Unit Quantity 76		NUM	8	3	х	Х	Х	See Des	cription for Unit Quantity 11	230-231
2351-2360	Non-Covered Charge 76		NUM	10	)	х	Х	Х	See Des	cription for Non-Covered Charge 11	232-233
2361-2364	Revenue Code 77		CHAR	. 4		х	Х	Х	See Des	cription for Revenue Code 11	225-226
2365	Revenue Type 77		CHAR	. 1		х	Х	Х	See Des	cription for Revenue Type 11	227
2366-2375	Total Charge 77		NUM	10	)	х	Х	Х	See Des	cription for Total Charge 11	228
2376-2377	Unit Type 77		CHAR	. 2		х	Х	Х	See Des	cription for Unit Type 11	229
2378-2385	Unit Quantity 77		NUM	8	}	х	Х	Х	See Des	cription for Unit Quantity 11	230-231
2386-2395	Non-Covered Charge 77		NUM	10	)	х	Х	Х	See Des	cription for Non-Covered Charge 11	232-233
2396-2399	Revenue Code 78		CHAR	. 4		х	Х	Х	See Des	cription for Revenue Code 11	225-226
2400	Revenue Type 78		CHAR	. 1		х	Х	Х	See Des	cription for Revenue Type 11	227
2401-2410	Total Charge 78		NUM	10	)	х	Х	Х	See Des	cription for Total Charge 11	228
2411-2412	Unit Type 78		CHAR	. 2	)	х	Х	Х	See Des	cription for Unit Type 11	229
2413-2420	Unit Quantity 78		NUM	8	}	х	Х	Х	See Des	cription for Unit Quantity 11	230-231
2421-2430	Non-Covered Charge 78		NUM	10	)	х	Х	Х	See Des	cription for Non-Covered Charge 11	232-233
2431-2434	Revenue Code 79		CHAR	. 4		х	Х	Х	See Des	cription for Revenue Code 11	225-226
2435	Revenue Type 79		CHAR	. 1		Х	Х	Х	See Des	cription for Revenue Type 11	227
2436-2445	Total Charge 79		NUM	10	)	х	Х	Х	See Des	cription for Total Charge 11	228
2446-2447	Unit Type 79		CHAR	. 2	)	х	Х	Х	See Des	cription for Unit Type 11	229
2448-2455	Unit Quantity 79		NUM	8	3	Х	Х	Х	See Des	cription for Unit Quantity 11	230-231
2456-2465	Non-Covered Charge 79		NUM	10	)	х	Х	Х	See Des	cription for Non-Covered Charge 11	232-233
2466-2469	Revenue Code 80		CHAR	. 4		Х	Х	х	See Des	cription for Revenue Code 11	225-226
2470	Revenue Type 80		CHAR	. 1		Х	х	х	See Des	cription for Revenue Type 11	227
2471-2480	Total Charge 80		NUM	10	)	Х	Х	х	See Des	cription for Total Charge 11	228
2481-2482	Unit Type 80		CHAR	. 2		Х	Х	х		cription for Unit Type 11	229
2483-2490	Unit Quantity 80		NUM	8	3	Х	Х	Х	See Des	cription for Unit Quantity 11	230-231
2491-2500	Non-Covered Charge 80		NUM	10	)	Х	Х	х		cription for Non-Covered Charge 11	232-233

## NOTE:

AIDS/HIV EDITS - all identifiable data elements are redacted (blank/zeroed out) leaving all other data elements intact when the HIV flag is equal to "Y". All exact dates are modified to give only month and year. Birth weights are truncated (rounded down to nearest 100 grams).

**ABORTION EDITS** - all identifiable data elements are redacted, including Physician license numbers, when the Abortion Indicator is equal to "Y".