



Open Payments Public Use Files: Methodology Overview & Data Dictionary

O P E N P A Y M E N T S

CREATING PUBLIC TRANSPARENCY
INTO INDUSTRY - PHYSICIAN
FINANCIAL RELATIONSHIPS

June 2015

Disclaimer: The Centers for Medicare & Medicaid Services (CMS) is providing this guidance document as informational material on Open Payments. Although every reasonable effort has been made to assure the accuracy of the information, it is the responsibility of the user to ensure adherence to the requirements of the Open Payments implementing regulations, the Medicare, Medicaid, Children's Health Insurance Programs; Transparency Reports and Reporting of Physician Ownership or Investment Interests Final Rule codified at 42 CFR Parts 402 and 403 [CMS-5060-F]. This document is not intended as a supplement or replacement of the Final Rule.

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1 Introduction

Open Payments, which is managed by the Centers for Medicare & Medicaid Services (CMS), is a national disclosure program created by the Affordable Care Act (ACA) that promotes transparency and accountability by helping consumers understand the financial relationships between pharmaceutical and medical device industries and physicians and teaching hospitals. These financial relationships may include consulting fees, research grants, travel reimbursements, and payments made from the industry to medical practitioners.

Financial ties between the health care industry and health care providers do not necessarily signal wrongdoing. CMS encourages patients to discuss these relationships with their health care providers.

This document, the Open Payments Methodology Overview and Data Dictionary, provides a guide to how CMS publishes the informational data gathered by Open Payments for public use. It explains the sources of the data, the data files that are available from CMS, and the fields contained in each data file. View the data and learn more about the program by visiting <http://www.cms.gov/openpayments>.

2 Methodology

Applicable manufacturers and applicable group purchasing organizations (GPOs) are required to submit data about payments or other transfers of value made to physicians and teaching hospitals, and ownership or investment interests held by physicians or their immediate family members, made between January 1 and December 31 of each program year.

The annual data publication cycle includes an initial publication by June 30 of each year, that contains the data records for the program year that precedes the year in which the data is published. For example, the 2015 initial data publication includes data submitted regarding all payments, other transfers of value, and ownership or investment interests that occurred in 2014. This is referred to as the 2014 program year. Data that were submitted and attested to by the data submission deadline are eligible for publication in the initial data publication. Data records not eligible for publication on the initial publication date will be included in that year's data refresh publication if they meet publication eligibility.

As part of the data submission process, applicable manufacturers and applicable GPOs must legally attest to the timeliness, accuracy, and completeness of their submitted data to confirm they have complied with the requirements of the final rule, and the submission must be made before the program year submission deadline. Applicable manufacturers and applicable GPOs who knowingly fail to accurately or completely report information in a timely manner to the Open Payments system may be subject to civil monetary penalties.

To accurately identify physicians and principal investigators cited in payment records and to correctly attribute those payments, the law requires applicable manufacturers and applicable GPOs to include the names of the physicians and principal investigators, along with other identifying information, in the payment records they submit. To further improve the accuracy of payment attribution, CMS also requires applicable manufacturers and applicable GPOs to submit the physician's state medical license number(s). Teaching hospitals are identified via the teaching hospital lists supplied by CMS, which are

available on the Resources page of the Open Payments website.

After the data has been submitted and attested to, the Open Payments system performs checks on the information to verify that the reported data matches to the correct physicians, principal investigators, and teaching hospitals. This initial system matching can result in some records being returned to the applicable manufacturer or applicable GPO for correction and re-submission.

Physicians, principal investigators, and teaching hospitals have the opportunity to review the data matched to them in the Open Payments system prior to its publication, and they may dispute any data they believe to be inaccurate.

CMS publishes the Open Payments data for public use at <https://openpaymentsdata.cms.gov>. It should be noted that not all data received by CMS is publicly published. A list of reporting conditions and exclusions is provided in Section 2.2 of this document.

2.1 Data Sources and Types

Applicable manufacturers and applicable GPOs enter detailed information about payments, other transfers of value, or investment interests into CMS's Open Payments system.

These payments, other transfers of value, and investment interests are categorized across three (3) payment types:

1. General Payments: Payments or other transfers of value not made in connection with a research agreement or research protocol.
2. Research Payments: Payments or other transfers of value made in connection with a research agreement or research protocol.
3. Physician Ownership or Investment Interest Information: Information about physicians who hold an ownership or investment interest in an applicable manufacturer or applicable GPO or who have an immediate family member holding such interest.

2.2 Reporting Limitations and Exclusions

The Open Payments data published by CMS is subject to the following limitations and exclusions:

1. Records not successfully validated in the Open Payments system and matched to the appropriate covered recipient(s) with a sufficient degree of confidence are not published.
2. Program year 2013 includes data on payments, other transfers of value, and ownership or investment interests made to physicians or teaching hospitals only for the period from August 1–December 31, 2013.
3. Data submitted after the submission deadline for the calendar year in which data is being published is not included in the initial data publication or the next data refresh publication. Data submitted and attested to after the submission deadline may be eligible for publication in the following year's data publication.

4. Data submitted before the submission deadline for a program year but attested to after the submission deadline is considered late, and will not be included in the initial data publication or the next data refresh publication. Data submitted and attested to after the submission deadline may be eligible for publication in the following year's data publication.
5. Certain payments or other transfers of value are excluded from reporting, such as product samples and educational materials intended for patient use. The exclusions are outlined in the Open Payments Final Rule, at 42 C.F.R. § 403.904(i).
6. Publication of research payment records may be delayed by submitter request if the records relate to research or development of a new drug, biological, device, or medical supply; a new application of an existing drug, biological, device, or medical supply; or clinical investigations regarding a new drug, biological, device, or medical supply. These payments will be published in later publications of Open Payments data as appropriate. See the Open Payments Final Rule, at 42 C.F.R. § 403.910.
7. Payment records that were deleted by the reporting applicable manufacturer or applicable GPO prior to the end of the correction period for that year are not published.
8. Payment records with the recipient type of "Physician" or "Teaching Hospital" that cannot be successfully matched to a valid physician or teaching hospital in the Open Payments system will be excluded from publication.
9. Research payment records with the recipient type "Non-Covered Recipient (NCR) Entity" or "Non-Covered Recipient Individual" that lack a valid principal investigator will be excluded from publication.
10. Payment records without any disputes that were resubmitted after the end of the submission period will not be published in the initial data publication but may be eligible to be published in the data refresh.

2.3 Publication Rules

Records submitted before the end of the data submission period will be published in that year's initial data publication, except for those ineligible for publication, as listed in Section 2.3.1, below. **The published records will contain the data that was attested to as of the end of the data correction period.**

NOTE: New records for program year 2013 that were submitted or edited before the 2015 submission deadline will be included in the June 2015 initial data publication.

2.3.1 June 2015 Publication: Ineligible Records

Records that meet the conditions below will not be published in the June 2015 data publication:

- Records deleted before the end of the 15-day correction period;

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- Records submitted or originally attested to after the end of the submission period;
- Records without disputes that were edited during the 45-day review and dispute period or subsequent 15-day correction period; and
- Records for which submitters requested a delay in publication or a renewal of a delay in publication, if the request was made prior to the end of the submission period.

Note: Undisputed records edited during the review and dispute period or correction period will be eligible for publication in the next publication of the data. Records that receive a delay in publication will be eligible for publication in the next year's publication, unless the delay in publication is renewed for another year. Records submitted or originally attested to after the end of the submission period will not be eligible for publication until the next calendar year.

2.3.2 June 2015: Records Identified as Under Dispute

Whether a record is identified as being under dispute in the data publication depends upon when the dispute was initiated and when it was resolved. Table 1, below, lists scenarios and how records are identified based upon those scenarios.

Table 1: Records Identified as Under Dispute

Scenario	Identified as Under Dispute?
Records without a dispute initiated against them within the 45-day review and dispute period	No
Records disputed within the 45-day review and dispute period whose disputes were resolved before the end of the 15-day correction period, either with or without changes to data	No
Records disputed within the 45-day review and dispute period whose disputes were withdrawn by the end of the review and dispute period	No
Records that were disputed within the 45-day review and dispute period and the dispute was not resolved by the end of the subsequent 15-day correction period	Yes
Records disputed within the 45-day review and dispute period whose disputes were resolved before the end of the 15-day correction period, either with or without changes to data, that are then again disputed during the 15-day correction period, and the new dispute was not resolved within that 15-day correction period	Yes

Disputes initiated after the end of the review and dispute period and by the end of the calendar year in which they were reported, as well as changes made to the data after the end of the correction period and by the end of the calendar year in which they were reported, will be reflected in the data refresh publication.

Note: If a record was initially disputed during the 45-day review and dispute period and more disputes are initiated on that same record during the 15-day correction period, then the data attested to as of the end of the 15-day correction period is published in the initial publication, including any changes made due to dispute resolution.

2.4 Data in Context

The context of the data is shown in two different ways. General contextual information about the program can be found on the Data in Context page on the Open Payments website. In addition, context at the individual payment level is also available when reported by the applicable manufacturer or applicable GPO. This data is posted exactly as it was submitted and was not altered by CMS. This may be viewed when exploring the data.

3 Available Files for Download

CMS has made the complete Open Payments data sets for all program years available for download. Data sets are available in downloadable ZIP files, each of which contains three (3) comma-delimited character-separated value (CSV) files and one (1) README text file (the program year is noted in the ZIP file name). In addition, CMS has also made available a supplement file containing more detailed information about physicians who were indicated as recipients of payments, other transfers of value, or ownership and investment interest in payment records that were published by Open Payments, as well as principal investigators who are associated with payments or other transfers of value. This file contains only physicians and principal investigators who have at least one payment record associated with them published by Open Payments. This list is in a downloadable ZIP file, which contains one (1) comma-delimited character-separated value (CSV) file.

A description of the CSV files is as follows:

- **General Payments Details**
 - General payment records provide the total value of general payments or other transfers of value to a particular recipient for a particular date.
 - Each record includes identifying information for the applicable manufacturer or applicable GPO who made the payment, and identifying information for the recipient.
 - Each record also lists, if applicable, up to five covered drugs or biologicals, or up to five covered devices or medical supplies, that were part of the payment or other transfer of value.
- **Research Payments Details**
 - Research payment records provide the total value of a payment or other transfer of value made for research purposes to a particular recipient for a particular date.
 - Each record includes identifying information for the applicable manufacturer or applicable GPO who made the payment, and identifying information for the recipient. Information is also provided for up to five principal investigators associated with the payment.

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- Each record also lists, if applicable, up to five covered drugs or biologicals, or up to five covered devices or medical supplies, that were part of the research payment or other transfers of value.
- **Physician Ownership Details** – The complete published data set for physician ownership or investment interest data. Physician ownership records provide information on physician ownership or investment interests in an applicable manufacturer or applicable GPO.
- **Physician Supplement Detail** – The physician supplemental file contains all of the identifying information for physicians who were indicated as recipients of payments, other transfers of value, or ownership and investment interest in Open Payments records as well as principal investigators who were associated with payments or other transfers of value.

The text file is:

- **README** – A text file that provides information about the files available for download, their formats, special handling considerations, and other alternatives for viewing the Open Payments data.

Details on the fields within the four CSV files are given in the tables in Appendices A through D. **The CSV data files may be too large for Microsoft Excel and other common spreadsheet programs.** Excel cannot display worksheets with more than 1,048,576 rows. To display the data in its entirety requires the use of programs capable of handling very large numbers of records.

3.1 2014 Program Year Files

The ZIP file PGYR14_P063015.zip contains the three (3) CSV files and one (1) text file as described above for program year 2014 data. The table below summarizes key information for each of the above referenced files.

Table 2: Program Year 2014 Data Files

File Name	Number of Rows	Number of Columns	Raw Data File Size
General Payments Details	10,818,054	63	5.3 GB
Research Payments Details	585,079	164	446 MB
Physician Ownership Details	4,785	28	1.8 MB

3.2 2013 Program Year Files

The ZIP file PGYR13_P063015.zip contains the three (3) CSV files and one (1) text file as described above for program year 2013 data. The table below summarizes key information for each of the above referenced files.

Table 3: Program Year 2013 Data Files

File Name	Number of Rows	Number of Columns	Raw Data File Size
General Payments Details	4,055,634	63	2 GB
Research Payments Details	240,868	164	178 MB
Physician Ownership Details	4,983	28	1.9 MB

3.3 Physician Profile Supplement Files

The Physician Profile Supplement File contains all of the identifying information for physicians who were indicated as recipients of payments, other transfers of value, or ownership and investment interest in records published by Open Payments, as well as principal investigators who were associated with payments or other transfers of value in records published by Open Payments.

Each record in the Physician Profile Supplement File includes demographic information, specialties, and license information, as well as a unique identification number (Physician Profile ID), for each physician and principal investigator. The Physician Profile ID can be used to search the data files to find payments made to that specific physician or records that are associated with a specific principal investigator.

The ZIP file PHPRFL_P063015.zip contains one (1) CSV file with the physician profile supplement file and one (1) text file, a README file that provides information about the file available for download, its format, special handling considerations, and other alternatives for viewing the data.

Physician Profile Supplement File

File Name	Number of Rows	Number of Columns	Raw Data File Size
Physician Profile Supplement	685,296	18	112 MB

4 Key Dates for the 2014 Program Year

The table below lists key program dates as it relates to the June 30, 2015 publication of the 2014 data.

Table 4: Key Dates for the 2014 Program Year

Program Activities	Program Timeline
Industry submits and attests to data in the Open Payments system	February 2 – April 3, 2015
Physicians and teaching hospitals review the reported data, and dispute any data they believe is inaccurate; industry makes corrections to the data	Review and dispute period: April 6 – May 20, 2015 Correction period: May 21 – June 5, 2015
2014 program year initial data publication 2013 program year data refresh publication	June 30, 2015
Physicians and teaching hospitals continue to review and dispute data; industry continues to make corrections to the data	June 5 – December 31, 2015
2014 program year data refresh	Early 2016

Appendix A: General Payments Detail

Table A.1: General Payment File Attributes

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Type	Indicator showing if recipient of the payment or other transfer of value is a physician covered recipient or a teaching hospital	Physician	VARCHAR2(50)	string	50
Teaching_Hospital_ID	System-generated unique identifier of the teaching hospital receiving the payment or other transfer of value	1000000999	NUMBER(38,0)	number	38
Teaching_Hospital_Name	The name of the teaching hospital receiving the payment or other transfer of value – the name displayed is as listed in the CMS teaching hospital list	Healthy Heart Hospital	VARCHAR2(100)	string	100
Physician_Profile_ID	System-generated unique identifier for physician profile receiving the payment or other transfer of value	1000000378	NUMBER(38,0)	number	38
Physician_First_Name	First name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	John	VARCHAR2(20)	string	20

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Middle_Name	Middle name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	A	VARCHAR2(20)	string	20
Physician_Last_Name	Last name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	Smith	VARCHAR2(35)	string	35
Physician_Name_Suffix	Name suffix of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	III	VARCHAR2(5)	string	5
Recipient_Primary_Business_Street_Address_Line1	The first line of the primary practice/business street address of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Recipient_Primary_Business_Street_Address_Line2	The second line of the primary practice/business street address of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Recipient_City	The primary practice/business city of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	Baltimore	VARCHAR2(40)	string	40

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_State	The primary practice/business state or territory abbreviation of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value, if the primary practice/business address is in the United States	MD	CHAR(2)	string	2
Recipient_Zip_Code	The 9-digit zip code for the primary practice/business location of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	21244	VARCHAR2(10)	number-number	10
Recipient_Country	The primary practice/business address country name of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	US	VARCHAR2(100)	string	100
Recipient_Province	The primary practice/business province name of the physician (covered recipient) receiving the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Postal_Code	The international postal code for the primary practice/business location of the physician (covered recipient) receiving the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Physician_Primary_Type	Primary type of medicine practiced by the physician (covered recipient)	Medical Doctor (MD)	VARCHAR2(100)	string	100
Physician_Specialty	Physician's single specialty chosen from the standardized "provider taxonomy" code list	208D00000X	VARCHAR2(300)	string	300
Physician_License_State_code1	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MA	CHAR(2)	string	2
Physician_License_State_code2	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	PA	CHAR(2)	string	2

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_License_State_code3	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Physician_License_State_code4	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MI	CHAR(2)	string	2
Physician_License_State_code5	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	WI	CHAR(2)	string	2
Submitting_Applicable_Manufacturer_or_Applicable_GPO_Name	Textual proper name of the submitting applicable manufacturer or applicable GPO	ABCDE Manufacturing	VARCHAR2(100)	string	100

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Applicable_Manufacturer_ or_Applicable_GPO_Makin g_Payment_ID	System-generated unique identifier of the applicable manufacturer or applicable GPO making payment or other transfer of value	1000000049	VARCHAR2(38)	Number	38
Applicable_Manufacturer_ or_Applicable_GPO_Makin g_Payment_Name	Textual proper name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_ or_Applicable_GPO_Makin g_Payment_State	State name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	VA	CHAR(2)	string	2
Applicable_Manufacturer_ or_Applicable_GPO_Makin g_Payment_Country	Country name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	United States	VARCHAR2(100)	string	100
Total_Amount_of_Payment _USDollars	US dollar amount of payment or other transfer of value to recipient (manufacturer must convert to dollar currency if necessary)	1978.00	NUMBER(12,2)	decimal	12

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Date_of_Payment	If a singular payment, then this is the actual date the payment was issued; if a series of payments or an aggregated set of payments, this is the date of the first payment to the covered recipient in this program year	04/01/2013	DATE	Date MM/DD /YYYY	12
Number_of_Payments_Included_in_Total_Amount	The number of discrete payments being reported in the "Total Amount of Payment"	1	NUMBER(3,0)	number	3
Form_of_Payment_or_Transfer_of_Value	The method of payment used to pay the covered recipient or to make the transfer of value	In-kind items and services	VARCHAR2(100)	string	100
Nature_of_Payment_or_Transfer_of_Value	The nature of payment used to pay the covered recipient or to make the transfer of value	Consulting Fee	VARCHAR2(200)	string	200
City_of_Travel	For "Travel and Lodging" payments, destination city where covered recipient traveled	San Diego	VARCHAR2(40)	string	40
State_of_Travel	For "Travel and Lodging" payments, destination state where covered recipient traveled	CA	CHAR(2)	string	2
Country_of_Travel	For "Travel and Lodging" payments, destination country where covered recipient traveled	United States	VARCHAR2(100)	string	100

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Ownership_Indicator	Indicates whether the physician holds ownership or investment interest in the applicable manufacturer; this indicator is limited to physician's ownership, not physician's family members' ownership	No	CHAR(3)	string	3
Third_Party_Payment_Recipient_Indicator	Indicates if a payment or other transfer of value was paid to a third party entity or individual at the request of or on behalf of a covered recipient (physician or teaching hospital)	Entity	VARCHAR2(50)	string	50
Name_of_Third_Party_Entity_Receiving_Payment_or_Transfer_of_Value	The name of the entity that received the payment or other transfer of value	EDCBA Manufacturing	VARCHAR2(50)	string	50
Charity_Indicator	Indicates the third party entity that received the payment or other transfer of value is a charity	No	CHAR(3)	string	3
Third_Party_Equals_Covered_Recipient_Indicator	Indicator showing the "Third Party" that received the payment or other transfer of value is a covered recipient	No	CHAR(3)	string	3
Contextual_Information	Any free text which the reporting entity deems helpful or appropriate regarding this payment or other transfer of value	Transfer made to promote use of product	VARCHAR2(500)	string	500

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Delay_in_Publication_Indicator	Indicator showing if an applicable manufacturer or applicable GPO is requesting a delay in publication of a payment or other transfer of value	No	CHAR(3)	string	3
Record_ID	System-assigned identifier to the general transaction at the time of submission	100000000241	NUMBER(38,0)	number	38
Dispute_Status_for_Publication	Indicates whether the payment or other transfer of value is disputed by the covered recipient or not	Yes	CHAR(3)	string	3
Product_Indicator	Indicator allows the applicable manufacturer or applicable GPO to select whether the payment or other transfer of value is associated with only covered drugs, devices, biologicals or medical supplies ("Covered"), or only non-covered drugs, devices, biologicals or medical supplies ("Non-covered"), or neither covered or non-covered drugs, devices, biologicals or medical supplies ("None"), or both covered and/or non-covered drugs, devices, biologicals or medical supplies ("Covered" or "Combination")	Covered	VARCHAR2(50)	string	50

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Drug_or_Biological1	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 1	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Drug_or_Biological2	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 2	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Drug_or_Biological3	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 3	VARCHAR2(100)	string	100

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Drug_or_Biological4	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 4	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Drug_or_Biological5	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 5	VARCHAR2(100)	string	100
NDC_of_Associated_Covered_Drug_or_Biological1	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological2	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
NDC_of_Associated_Covered_Drug_or_Biological3	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological4	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological5	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12
Name_of_Associated_Covered_Device_or_Medical_Supply1	The marketed name of the device or medical supply associated with this payment or other transfer of value; a record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 1	VARCHAR2(100)	string	100

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Device_or_Medical_Supply2	The marketed name of the device or medical supply associated with this payment or other transfer of value; a record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 2	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Device_or_Medical_Supply3	The marketed name of the device or medical supply associated with this payment or other transfer of value; a record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 3	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Device_or_Medical_Supply4	The marketed name of the device or medical supply associated with this payment or other transfer of value; a record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 4	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Device_or_Medical_Supply5	The marketed name of the device or medical supply associated with this payment or other transfer of value; a record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 5	VARCHAR2(100)	string	100
Program_Year	The year in which the payment occurred	2014	CHAR(4)	number	4

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Payment_Publication_Date	The predefined date when the payment or other transfer of value is scheduled to be published	06/30/2015	DATE	DATE MM/DD /YYYY	12

Appendix B: Research Payments Detail

Table B-1: Research Payment File Attributes

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Type	Indicator showing if recipient of the payment or other transfer of value is a physician covered recipient, teaching hospital covered recipient, non-covered recipient entity or non-covered recipient individual	Covered Recipient Teaching Hospital	VARCHAR2(50)	string	50
Noncovered_Recipient_Entity_Name	The name of the non-covered recipient entity receiving the payment or other transfer of value	EDCBA Corporation	VARCHAR2(50)	string	50
Teaching_Hospital_ID	System-generated unique identifier of the teaching hospital receiving the payment or other transfer of value	1000000999	NUMBER(38,0)	number	38
Teaching_Hospital_Name	The name of the teaching hospital receiving the payment or other transfer of value – the name displayed is as listed in the CMS teaching hospital list	Healthy Heart Hospital	VARCHAR2(100)	string	100
Physician_Profile_ID	System-generated unique identifier for physician profile receiving the payment or other transfer of value	1000000378	NUMBER(38,0)	number	38

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_First_Name	First name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	John	VARCHAR2(20)	string	20
Physician_Middle_Name	Middle name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	A	VARCHAR2(20)	string	20
Physician_Last_Name	Last name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	Smith	VARCHAR2(35)	string	35
Physician_Name_Suffix	Name suffix of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	III	VARCHAR2(5)	string	5
Recipient_Primary_Business_Street_Address_Line1	The first line of the primary business street address of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Primary_Business_Street_Address_Line2	The second line of the primary business street address of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Recipient_City	The primary practice/business address city of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value	Baltimore	VARCHAR2(40)	string	40
Recipient_State	The state or territory abbreviation of the primary business address of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary business address is in the United States	MD	CHAR(2)	string	2
Recipient_Zip_Code	The 9-digit zip code for the primary business location of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary practice address is in the United States	21244	VARCHAR2(10)	number-number	10

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Country	The primary practice/business address country of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary practice address is in the United States	US	VARCHAR2(100)	string	100
Recipient_Province	The primary practice/business province name of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20
Recipient_Postal_Code	The international postal code for the primary business location of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary business address is outside the United States	5600098	VARCHAR2(20)	string	20
Physician_Primary_Type	Primary type name of medicine practiced by the physician covered recipient	Doctor of Osteopathy (DO)	VARCHAR2(50)	string	50
Physician_Specialty	Physician's single specialty chosen from the standardized "provider taxonomy" code list	208D00000X	VARCHAR2(300)	string	300

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_License_State_code1	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Physician_License_State_code2	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	CA	CHAR(2)	string	2
Physician_License_State_code3	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	TX	CHAR(2)	string	2
Physician_License_State_code4	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	VA	CHAR(2)	string	2

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_License_State_code5	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MA	CHAR(2)	string	2
Principal_Investigator_1_Profile_ID	An identifier for principal investigator profile after validation	3843332	NUMBER(38,0)	number	38
Principal_Investigator_1_First_Name	First name of the principal investigator associated with the payment or other transfer of value	John	VARCHAR2(20)	string	20
Principal_Investigator_1_Middle_Name	Middle name of the principal investigator associated with the payment or other transfer of value	A	VARCHAR2(20)	string	20
Principal_Investigator_1_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value	Smith	VARCHAR2(35)	string	35

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_Name_Suffix_	Name suffix of the principal investigator associated with the payment or other transfer of value	III	VARCHAR2(5)	string	5
Principal_Investigator_1_Business_Street_Address_Line 1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Principal_Investigator_1_Business_Street_Address_Line 2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Principal_Investigator_1_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_1_State	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244	VARCHAR2(10)	number-number	10
Principal_Investigator_1_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_1_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_1_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_1_Specialty	Principal investigator's single specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_1_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MD	CHAR(2)	string	2

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_1_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	ME	CHAR(2)	string	2
Principal_Investigator_1_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	NY	CHAR(2)	string	2
Principal_Investigator_1_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MI	CHAR(2)	string	2
Principal_Investigator_2_Profile_ID	An identifier for principal investigator profile after validation	3843342	NUMBER(38,0)	number	38

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_First_Name	First name of the principal investigator associated with the payment or other transfer of value, as reported by the submitting entity	John	VARCHAR2(20)	string	20
Principal_Investigator_2_Middle_Name	Middle name of the principal investigator associated with the payment or other transfer of value, as reported by the submitting entity	A	VARCHAR2(20)	string	20
Principal_Investigator_2_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value, as reported by the submitting entity	Smith	VARCHAR2(35)	string	35
Principal_Investigator_2_Name_Suffix	Name suffix of the principal investigator associated with the payment or other transfer of value, as reported by the submitting entity	III	VARCHAR2(5)	string	5
Principal_Investigator_2_Business_Street_Address_Line 1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Principal_Investigator_2_Business_Street_Address_Line 2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_2_state	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2
Principal_Investigator_2_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244	VARCHAR2(10)	number-number	10
Principal_Investigator_2_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20
Principal_Investigator_2_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_2_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_2_Specialty	Principal investigator's single specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Principal_Investigator_2_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_2_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	TX	CHAR(2)	string	2
Principal_Investigator_2_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	CA	CHAR(2)	string	2

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	AL	CHAR(2)	string	2
Principal_Investigator_3_Profile_ID	An identifier for principal investigator profile after validation	3843347	NUMBER(38,0)	number	38
Principal_Investigator_3_First_Name	First name of the principal investigator associated with the payment or other transfer of value	John	VARCHAR2(20)	string	20
Principal_Investigator_3_Middle_Name	Middle name of the principal investigator associated with the payment or other transfer of value	A	VARCHAR2(20)	string	20
Principal_Investigator_3_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value	Smith	VARCHAR2(35)	string	35
Principal_Investigator_3_Name_Suffix	Name suffix of the principal investigator associated with the payment or other transfer of value	III	VARCHAR2(5)	string	5

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_Business_Street_Address_Line 1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Principal_Investigator_3_Business_Street_Address_Line 2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Principal_Investigator_3_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_3_State	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2
Principal_Investigator_3_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244	VARCHAR2(10)	number-number	10

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_3_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20
Principal_Investigator_3_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_3_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_3_Specialty	Principal investigator's single specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Principal_Investigator_3_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_3_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	CA	CHAR(2)	string	2

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	TX	CHAR(2)	string	2
Principal_Investigator_3_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	AL	CHAR(2)	string	2
Principal_Investigator_4_Profile_ID	An identifier for principal investigator profile after validation	3843347	NUMBER(38,0)	number	38
Principal_Investigator_4_First_Name	First name of the principal investigator associated with the payment or other transfer of value	John	VARCHAR2(20)	string	20
Principal_Investigator_4_Middle_Name	Middle name of the principal investigator associated with the payment or other transfer of value	A	VARCHAR2(20)	string	20
Principal_Investigator_4_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value	Smith	VARCHAR2(35)	string	35

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_Name_Suffix	Name suffix of the principal investigator associated with the payment or other transfer of value	III	VARCHAR2(5)	string	5
Principal_Investigator_4_Business_Street_Address_Line 1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Principal_Investigator_4_Business_Street_Address_Line 2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Principal_Investigator_4_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_4_State	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244	VARCHAR2(10)	number-number	10
Principal_Investigator_4_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_4_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20
Principal_Investigator_4_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_4_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_Specialty	Principal investigator's single specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_4_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Principal_Investigator_4_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_4_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	CA	CHAR(2)	string	2

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	TX	CHAR(2)	string	2
Principal_Investigator_4_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	AL	CHAR(2)	string	2
Principal_Investigator_5_Profile_ID	An identifier for principal investigator profile after validation	3843347	NUMBER(38,0)	number	38
Principal_Investigator_5_First_Name	First name of the principal investigator associated with the payment or other transfer of value	John	VARCHAR2(20)	string	20
Principal_Investigator_5_Middle_Name	Middle name of the principal investigator associated with the payment or other transfer of value	A	VARCHAR2(20)	string	20

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value	Smith	VARCHAR2(35)	string	35
Principal_Investigator_5_Name_Suffix	Name suffix of the principal investigator associated with the payment or other transfer of value	III	VARCHAR2(5)	string	5
Principal_Investigator_5_Business_Street_Address_Line_1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Principal_Investigator_5_Business_Street_Address_Line_2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Principal_Investigator_5_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_5_State	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244	VARCHAR2(10)	number-number	10
Principal_Investigator_5_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_5_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20
Principal_Investigator_5_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_5_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_Specialty	Principal investigator's single specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_5_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Principal_Investigator_5_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_5_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	CA	CHAR(2)	string	2

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	TX	CHAR(2)	string	2
Principal_Investigator_5_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician is licensed in multiple states	AL	CHAR(2)	string	2
Submitting_Applicable_Manufacturer_or_Applicable_GPO_Name	Textual proper name of either the submitting applicable manufacturer or applicable GPO	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_ID	System-generated unique identifier of the applicable manufacturer or applicable GPO making the payment or other transfer of value	1000000049	NUMBER(38,0)	number	38

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Applicable_Manufacturer_or _Applicable_GPO_Making_P ayment_Name	Textual proper name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_or _Applicable_GPO_Making_P ayment_State	State name of the submitting applicable manufacturer or applicable GPO	VA	CHAR(2)	string	2
Applicable_Manufacturer_or _Applicable_GPO_Making_P ayment_Country	Country name of the applicable manufacturer or applicable GPO	United States	VARCHAR2(100)	string	100
Product_Indicator	Indicator allows the applicable manufacturer or applicable GPO to select whether the payment or other transfer of value is associated with only covered drugs, devices, biologicals or medical supplies ("Covered"), only non-covered drugs, devices, biologicals, or medical supplies ("Non-covered"), neither covered or non-covered drugs, devices, biologicals or medical supplies ("None"), or both covered and/or non-covered drugs, devices, biologicals or medical supplies ("Covered" or "Combination")	Covered	VARCHAR2(50)	string	50

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Drug_or_Biological1	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 1	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Drug_or_Biological2	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 2	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Drug_or_Biological3	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 3	VARCHAR2(100)	string	100

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Drug_or_Biological4	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 4	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Drug_or_Biological5	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 5	VARCHAR2(100)	string	100
NDC_of_Associated_Covered_Drug_or_Biological1	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
NDC_of_Associated_Covered_Drug_or_Biological2	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological3	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological4	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological5	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698727262	VARCHAR2(12)	string	12

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Device_or_Medical_Supply1	The marketed name of the device or medical supply associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 1	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Device_or_Medical_Supply2	The marketed name of the device or medical supply associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 2	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Device_or_Medical_Supply3	The marketed name of the device or medical supply associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 3	VARCHAR2(100)	string	100

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Device_or_Medical_Supply4	The marketed name of the device or medical supply associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 4	VARCHAR2(100)	string	100
Name_of_Associated_Covered_Device_or_Medical_Supply5	The marketed name of the device or medical supply associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 5	VARCHAR2(100)	string	100
Total_Amount_of_Payment_USDollars	US dollar amount of payment or other transfer of value to recipient (manufacturer must convert to dollar currency if necessary)	1978.00	NUMBER(12,2)	decimal	12
Date_of_Payment	If a singular payment, then this is the actual date the payment was issued; if a series of payments or an aggregated set of payments, this is the date of the first payment to the covered recipient in this program year	04/01/2013	DATE	Date MM/DD /YYYY	12
Form_of_Payment_or_Transfer_of_Value	The method of payment used to pay the covered recipient or to make the transfer of value	In-kind items and services	VARCHAR2(100)	string	100

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Expenditure_Category1	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category2	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category3	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category4	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category5	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category6	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Preclinical_Research_Indicat or	Indicator showing if payment or other transfer of value is related to research, which is pre-clinical	Yes	CHAR(3)	string	3

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Delay_in_Publication_Indicator	Indicator showing if an applicable manufacturer or applicable GPO is requesting a delay in publication of a payment or other transfer of value when the payment or other transfer of value is made in connection with: (1) research on or development of a new product (drug, device, biological, or medical supply) or (2) clinical investigation regarding a new product (drug, device, biological, or medical supply)	No	CHAR(3)	string	3
Name_of_Study	The textual name of the study for which the covered recipient is receiving this payment or other transfer of value	A Comparison of the Heart	VARCHAR2(500)	string	500
Dispute_Status_for_Publication	Indicates whether the payment or other transfer of value is disputed by the covered recipient or not	Yes	CHAR(3)	string	3
Record_ID	System assigned identifier of the research transaction at the time of submission	100000000023	NUMBER(38,0)	number	38
Program_Year	The year in which the payment occurred, as reported by submitting entity	2014	CHAR(4)	number	4
Payment_Publication_Date	The predefined date when the payment or other transfer of value is scheduled to be published	06/30/2015	DATE	Date MM/DD/YYYY	12

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
ClinicalTrials_Gov_Identifier	Identifier assigned if research study is registered on clinicaltrials.gov	NCT21498631	VARCHAR2(11)	string	11
Research_Information_Link	Optional link to information relevant to the research study for which this payment or other transfer of value is being reported (there can be a maximum of five links reported)	Research	VARCHAR2(2083)	string	2083
Context_of_Research	Textual description of research context or research objectives	Objective is new designs for heart valve replacements	VARCHAR2(500)	string	500

Appendix C: Physician Ownership Information Detail

Table C-1: Physician Ownership Information File Attributes

Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Profile_ID	System-generated unique identifier for physician profile with the ownership or investment interest being reported	1000000378	NUMBER(38,0)	number	38
Physician_First_Name	First name of the physician (covered recipient) with the ownership or investment interest being reported	John	VARCHAR2(20)	string	20
Physician_Middle_Name	Middle name of the physician (covered recipient) with the ownership or investment interest being reported	A	VARCHAR2(20)	string	20
Physician_Last_Name	Last name of the physician (covered recipient) with the ownership or investment interest being reported	Smith	VARCHAR2(35)	string	35
Physician_Name_Suffix	Name suffix of the physician (covered recipient) with the ownership or investment interest being reported	Jr.	VARCHAR2(5)	string	5

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Primary_Business_Street_Address_Line1	The first line of the primary practice street address of the physician with the ownership or investment interest being reported	7500 Security Blvd.	VARCHAR2(55)	string	55
Recipient_Primary_Business_Street_Address_Line2	The second line of the primary practice street address of the physician with the ownership or investment interest being reported	Suite 100	VARCHAR2(55)	string	55
Recipient_City	The primary practice city of the physician with the ownership or investment interest being reported	Baltimore	VARCHAR2(40)	string	40
Recipient_State	The primary practice/business state or territory abbreviation of the of the physician with the ownership or investment interest being reported, if the primary practice/business address is in the United States	MD	CHAR(2)	string	2
Recipient_Zip_Code	The 9-digit zip code for the primary practice location of the physician with the ownership or investment interest being reported, if the primary practice address is in the United States	21244	VARCHAR2(10)	number-number	10
Recipient_Country	The primary practice/business address country name of the physician with the ownership or investment interest being reported	US	VARCHAR2(100)	string	100

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Province	The primary practice/business province name of the physician with the ownership or investment interest being reported, if the primary practice/business address is outside the United States, and if applicable	Ontario	VARCHAR2(20)	string	20
Recipient_Postal_Code	The international postal code for the primary practice/business location of the physician with the ownership or investment interest being reported, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Physician_Primary_Type	Primary type of medicine practiced by the physician covered recipient with the ownership or investment interest being reported	Doctor of Dentistry (DDS)	VARCHAR2(50)	string	50
Physician_Specialty	Physician's single specialty chosen from the standardized "provider taxonomy" code list	208D00000X	VARCHAR2(300)	string	300
Record_ID	Identifier for the ownership payment record		NUMBER(38,0)	number	38
Program_Year	The year in which the ownership/investment interest occurred	2014	CHAR(4)	number	4
Total_Amount_Invested_USDollars	The dollar amount the physician or immediate family member has invested in the applicable manufacturer or applicable GPO in US dollars (manufacturer must convert to dollar currency if necessary)	6000.22	NUMBER(12,2)	decimal	12

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Value_of_Interest	The value of ownership or investment interest held by the physician or immediate family member in the applicable manufacturer or applicable GPO in US dollars (manufacturer must convert to dollar currency if necessary)	6000.22	NUMBER(12,2)	decimal	12
Terms_of_Interest	Description of any applicable terms of the ownership or investment interest	Terms of interest are standard	VARCHAR2(500)	string	500
Submitting_Applicable_Manufacturer_or_Applicable_GPO_Name	Textual proper name of either the submitting applicable manufacturer or applicable GPO	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_ID	ID of either the submitting applicable manufacturer or applicable GPO	1000000049	NUMBER(38,0)	number	38
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Name	Textual proper name of either the submitting applicable manufacturer or applicable GPO	EDCBA Logistics	VARCHAR2(100)	string	100

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_State	State name of either the submitting applicable manufacturer or applicable GPO	VA	CHAR(2)	string	2
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Country	Country name of the submitting applicable manufacturer or applicable GPO	US	VARCHAR2(100)	string	100
Dispute_Status_for_Publication	Indicates whether the ownership or investment interest is disputed by the physician	Yes	CHAR(3)	string	3
Interest_Held_by_Physician_or_an_Immediate_Family_Member	Indicator showing if the ownership or investment interest is held by the physician themselves or by an immediate family member	Immediate family member	VARCHAR2(50)	string	50
Payment_Publication_Date	The predefined date when the ownership or investment interest is scheduled to be published	06/30/2015	DATE	Date MM/DD/YYYY	12

Appendix D: Physician Profile Supplement File

Table D-1: Physician Profile Supplement File

Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Profile_ID	System-generated unique identifier for physician profile receiving the payment or other transfer of value	3843322	NUMBER(38,0)	number	38
Physician_Profile_First_Name	The physician's first name as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the name associated with the NPI; for physicians without an NPI, the name is verified against an external data source	CONRAD	VARCHAR2(20)	string	20
Physician_Profile_Last_Name	The physician's last name as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the name associated with the NPI; for physicians without an NPI, the name is verified against an external data source	KELLY	VARCHAR2(35)	string	35
Physician_Profile_Alternate_First_Name	The physician's alternate first name as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the name associated with the NPI; for physicians without an NPI, the name is verified against an external data source	CONRAD	VARCHAR2(20)	string	20

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Profile_Alternate_Last_Name	The physician's alternate last name as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the name associated with the NPI; for physicians without an NPI, the name is verified against an external data source	KELL	VARCHAR2(35)	string	35
Physician_Profile_Address_Line_1	The first line of the latest provider business practice location address as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the address line associated with the NPI; for physicians without an NPI, the line is verified against an external data source	3106 Lord Baltimore Dr.	VARCHAR2(55)	string	55
Physician_Profile_Address_Line_2	The second line of the latest provider business practice location address as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the address line associated with the NPI; for physicians without an NPI, the line is verified against an external data source	Suite 209	VARCHAR2(55)	string	55

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Profile_City	The city of the latest provider business practice location address as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the city associated with the NPI; for physicians without an NPI, the city is verified against an external data source	Ellicott city	VARCHAR2(40)	string	40
Physician_Profile_State	The state of the latest provider business practice location address as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the state associated with the NPI; for physicians without an NPI, the state is verified against an external data source	MD	CHAR(2)	string	2
Physician_Profile_Zipcode	The 9-digit ZIP code of the latest provider business practice location address as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the 9-digit ZIP code associated with the NPI; for physicians without an NPI, the 9-digit ZIP code is verified against an external data source	21244-3339	VARCHAR2(10)	number-number	10

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Profile_Country_Name	The country of the latest provider business practice location address as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the country associated with the NPI; for physicians without an NPI, the country is verified against an external data source	United States	VARCHAR2(100)	string	100
Physician_Profile_Province_Name	The province of the latest provider business practice location address as given in the vetted physician list provided by CMS, if the primary practice/business address is outside the United States, and if applicable. For physicians with an NPI, this is the province associated with the NPI; for physicians without an NPI, the province is verified against an external data source		VARCHAR2(20)	string	20
Physician_Profile_Primary_Specialty	The single primary specialty as given in the vetted physician list provided by CMS. For physicians with an NPI, this is the primary specialty associated with the NPI; for physicians without an NPI, the primary specialty is verified against an external data source	Allopathic & Osteopathic Physicians/ Internal Medicine/ Rheumatology	VARCHAR2(300)	string	300

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Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Profile_License_State_Code_1	The state license number of the physician profile in the Open Payments system, which is a 2-letter state abbreviation; the physician may have up to 5 license states, if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Physician_Profile_License_State_Code_2	The state license number of the physician profile in the Open Payments system, which is a 2-letter state abbreviation; the physician may have up to 5 license states, if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Physician_Profile_License_State_Code_3	The state license number of the physician profile in the Open Payments system, which is a 2-letter state abbreviation; the physician may have up to 5 license states, if a physician is licensed in multiple states	MT	CHAR(2)	string	2

Open Payments Methodology Overview & Data Dictionary

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Profile_License_State_Code_4	The state license number of the physician profile in the Open Payments system, which is a 2-letter state abbreviation; the physician may have up to 5 license states, if a physician is licensed in multiple states	DC	CHAR(2)	string	2
Physician_Profile_License_State_Code_5	The state license number of the physician profile in the Open Payments system, which is a 2-letter state abbreviation; the physician may have up to 5 license states, if a physician is licensed in multiple states	MO	CHAR(2)	string	2