## PHD 2.0 Analytic Data Dictionaries Version 2

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#### Update Summary Version 2

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PHD Dataset	Changes	Notes
PHDAPCD.ME14_18	New dataset added – PHDAPCD.ME14_18	This is the standard member eligibility file that CHIA provides. Please note PHDAPCD.MHEE14_18 is the member eligibility file ONLY for Mass Health members
PHDCM.CM	New years added to dataset: 2011-2014	
Data Dictionary	Changes	Notes
Changes to SAS dataset names	<ul> <li>Dataset name revised from</li> <li>PHDAPCD.Dental_14_18 to PHDAPCD.Dental14_18</li> <li>PHDAPCD.MHEE_11_14 to PHDAPCD.MHEE14_18</li> <li>PHDAPCD.PHARM14_18 to PHDAPCD.PHARMACY14_18</li> <li>PHDAPCD.PROD14_18 to PHDAPCD.PRODUCT14_18</li> <li>PHDFETALDTH.FETALDEATH to PHDFETAL.FETALDEATH</li> <li>PHDMATRIS.MATRIS to PHDEMS.MATRIS</li> <li>PHDHIV.HCV_INC to PHDHIV.HCV_PRE to PHDHIV.HIV_PRE</li> <li>PMP_PMP_PHD to PHDPMP_PMP</li> </ul>	
PHDCM (CASEMIX)	PMP.PMP_PHD to PHDPMP.PMP Updated list for: ED_SITE, ED_FACILITY, ED_TRANSFERFROM, HD_SITE, HD_FACILITY, OO_SITE, OO_FACILITY OO_TRANSFERFROM New DD:     PHDCM.ED_ORG     PHDCM.HD_ORG     PHDCM.OO_ORG	

## PHD 2.0 Analytic Data Dictionaries Version 2

PHD Dataset	Changes	Notes
	Expanded list of values for several variables Corrected HD_ID and ED_ID from 11 to 12 digits Added ID to all procedure and diagnosis tables	
PHDDEATH.DEATH	Expanded list of literal terms used to create the OCME_SA flag	
PHDBIRTH.BIRTH_MOM	Added 9 variables: LAD_COMP_ARRIVE_EARLY LAD_COMP_SHORT_CERVIX LAD_COMP_OFFERED_PROG LAD_COMP_RECEIVED_PROG LAD_COMP_DENTAL_COND LAD_COMP_DENTAL_REFER LAD_ELECTIVE_CONVENIENCE LAD_PROC_FLU_VAC LAD_PROC_TDAP_VAC	These variables started being collected in 07/16/2018
PHDBIRTH.BIRTH_INFANTS	Added 4 variables: ANOMALY_MICROCEPH NAS_BC_NEW HEAR_FOLLOW_UP_BC HEAR_RISK_BC	ANOMALY_MICROCEPH started being collected in 08/01/2017 The rest have been collected since 11/20/2019
PHDDTA.DTA	Renamed YEAR_DTA BENEFIT_EFF_YEAR_DTA Renamed MONTH_DTA to BENEFIT_EFF_MONTH_DTA Deleted CASE_NUMBER_DTA	
PHDSPINE.DEMO	Updated the last run date to 10/18/21 for LANGUAGE Updated the last run date to 11/08/21 for DISABILITY_DD, DISABILITY_HEAR, DISABILITY_ID, DISABILITY_MENTAL, DISABILITY_MOBILITY, DISABILITY_VISION, DISABILITY_UNCAT, DISABILITY_COMBO, RACEETH_MANY, RACEETH_NEVER, SELF_FUNDED, SEX_MANY, SEX_NEVER, VETERAN Updated the last run date to 11/12/21 for NON_MA, also revised the definition to include all datasets (before it excluded APCD) Last run date to 10/26/21 for ever_incarcerated	

## PHD 2.0 Analytic Data Dictionaries Version 2

PHD Dataset	Changes	Notes
	Last run date updated for HOMELESS HOMELESS_HISTORY INDUSTRY_FLAG OCCUPATION_FLAG INDUSTRY_MANY OCCUPATION_MANY	
PHDBSAS.BSAS	New fields added to PDM_PRV_SERV_TYPE 82 BSAS-STR-HOC was merged with 88 Medication Assisted Re-Entry Initiative	

#### <u>All Payer's Claims Data – Dental</u> (PHDAPCD.DENTAL14\_18)

\*\*\*For details on how to link PHDAPCD.DENTAL with other PHD APCD datasets, please see <u>Appendix 1</u> in the PHD\_Key Facts for working with the data documentation. \*\*\*

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
DENT_AGE	Member age at service	Age in years, ages greater than 89 set to 999	Num
DENT_CDT	HCPCS/CDT Code	5-character CDT code	Char
DENT_CHARGED	Amount of provider charges for the claim line	0=services rendered in conjunction with other services on the claim. Negative amounts mean there could have been involved cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
DENT_CLAIM_STATUS	Claim status	0= This value is as is submitted by the insurance carrier (with unknown translation) 1=Processed as primary 2=Processed as secondary 3=Processed as tertiary 4=Denied 5=Processed as primary, forwarded to additional payers(s) 6=Processed as secondary, forwarded to additional payers(s) 7=Processed as tertiary, forwarded to additional payer(s) 8=Reversal of previous payment 9=Not our claim, forwarded to additional payer(s) 10=Predetermination pricing only - no payment 11=Missing	Num

		/	1
Variable Name	Variable Description	Meta Data	Format
DENT_COINSURANCE	Amount of Coinsurance member/patient is responsible to pay	0=services rendered in conjunction with other services on the claim. Negative amounts mean there could have been involved cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
DENT_COPAY	Amount of Copay member/patient is responsible to pay	0=services rendered in conjunction with other services on the claim. Negative amounts mean there could have been involved cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
DENT_CSUMID	Carrier Specific Unique Member ID	Integer	Char
DENT_DEDUCTIBLE	Amount of Deductible member/patient is responsible to pay	0=services rendered in conjunction with other services on the claim. Negative amounts mean there could have been involved cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
DENT_DENIED	Denied flag	1=Yes 2=No 3=Unknown 4=Other 5=Not Applicable	Num

Variable Name	Variable Description	Meta Data	Format
DENT_ENROLL_TYPE	Member enrollment type	1= FIG - Fully-Insured Commercial Group Enrollee 2= SIG - Self-Insured Group Enrollee 3= GIC - Group Insurance Commission Enrollee 4= MCO - MassHealth Managed Care Organization Enrollee 5= Supplemental Policy Enrollee 6 = ICO - Integrated Care Organization or SCO– Senior Care Option 7 = ACO – Accountable Care Organization Enrollee (MassHealth only – unless approved by CHIA) 9= Unknown / Not Applicable	Num
DENT_ENTITY	Service Provider Entity Identifier Code	1=Person 2=Non-person entity 3=Unknown	Num
DENT_INSURANCE_TYPE	Insurance Type Code/Product	09=Self pay 10=Central certification 11=Other non-federal programs 12=PPO 13=POS 14=EPO 15=Indemnity insurance 16=HMO Medicare risk 17=DMO AM=Automobile medical BL=Blue cross / Blue shield CC=Commonwealth Care CE=Commonwealth Care CE=Commercial Insurance Co. DS=Disability HM=HMO LI=Liability Medical MA=Medicare part A MB=Medicare part B MC=Medicaid OF=Other federal program TF=HSN trust fund TV=Title V VA=Veterans Administration Plan WC=Workers' Compensation ZZ=Other (blank) = missing ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char

Variable Name	Variable Description	Meta Data	Format
	Description		
DENT_LINE	Line Counter	Integer	Num
DENT_LINKORGIDPR	Linkage variable to connect dental claim to product file (PROD_ORGID)	Links dental claims at the Insurance Carrier Level	Char
DENT_LINKORGIDPV	Linkage variable to connect dental claim to APCD provider file (PROV_ORGID)	Links dental claims at the Insurance Carrier Level	Char
DENT_MEDICAID	Medicaid/HSN	0=No	Num
	Indicator	1=Yes	
DENT_MONTH	CHIA Incurred Date (Year and Month only)	Months, 1-12	Num
DENT_NPI	National provider ID	10-digit NPI	Char
DENT_ORGID	CHIA defined and maintained unique carrier identifier	3-5 digit numeric	Char
DENT_PAID	Amount paid by the carrier for the claim line	0=services rendered in conjunction with other services on the claim. Negative amounts mean there could have been involved cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
DENT_PAY_TYPE	Payment arrangement type	1=Capitation 2=FFS 3=Percent of charges 4=DRG 5=P4P 6=Global payment 7=Other 8=Bundled payment 9=Payment amount per episode (MassHealth) (blank) = missing	Num

Variable Name	Variable Description	Meta Data	Format
DENT_PRODUCT_LINKID	Linkage variable for dental claims to product (in APCD product file, PROD_PRODUCT_LI NKID)	Links dental claims at the claims row level	Char
DENT_PROV_CITY	City name of the provider	<ul> <li>1-351 for valid MA city/towns</li> <li>999=Out of state or unknown</li> <li>*Please note, there is a risk of misclassification as APCD covers the entire US. Cities without a corresponding state or zip code will be grouped as MA cities but actually are located outside of MA (in the cases of cities with the same name – ex. Palmer, MA vs Palmer, AK)</li> </ul>	Num
DENT_PROV_STATE	State of the service provider	2-character abbreviation	Char
DENT_PROV_ZIP	Zip code of the provider	5-digit zip code	Char
DENT_RELATION	Individual Relationship Code	01=Spouse 04=Grandfather or grandmother 05=Grandson or granddaughter 07=Nephew or niece 10=Foster child 15=Ward 17=Stepson or stepdaughter 19=Child 20=Self/employee 21=Unknown 22=Handicapped dependent 23=Sponsored dependent 24=Dependent of a minor dependent 29=Significant other 32=Mother 33=Father 36=Emancipated minor 39=Organ donor 40=Cadaver donor 41=Injured plaintiff 43=Child where insured has no financial responsibility 53=Life partner 76=Dependent ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char

Variable Name	Variable Description	Meta Data	Format
DENT_SERVICEPROVIDER_LIN KID	Linkage variable for dental claims to service provider (in APCD provider file, PROV_PROVIDER_LI NKID)	Links dental claims at the claims row level	Char
DENT_SEX	Member Sex	1=Male 2=Female 9=Unknown	Num
DENT_SITE	Place of service code	See Table Dent_site ***For any other value not contained in the list below– those values are as is submitted by the insurance carrier (with unknown translation)***	Char
DENT_START_DATE	Date of service - start	Date Proxy – count of days between service start date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
DENT_START_MONTH	N/A	Months, 1-12 Calculated from start date of service	Num
DENT_START_YEAR	N/A	Years, YYYY format Calculated from start date of service	Num
DENT_TAXONOMY	Taxonomy code	See_Dent_Taxonomy Taxonomy values are from the National Uniform Claim Committee's taxonomy code values; please see <u>https://www.cms.gov/Medicare/provider</u> <u>-enrollment-and-</u> <u>certification/medicareprovidersupenroll/</u> <u>downloads/taxonomycrosswalk.pdf</u> for a crosswalk between taxonomy and CMS specialty codes)	Char
DENT_VERSION	Version Number	Integer	Num
DENT_YEAR	CHIA Incurred Date (Year and Month only)	Years, YYYY format	Num
RES_ZIP_APCD_DENTAL	Member ZIP Code (first 5 digits)	5-digit zip code	Char

Den	it site
01	Pharmacy
02	Telehealth
03	School
04	Homeless Shelter
05	Indian Health Service (Free-standing or Provider-based Facility)
06	Tribal 638 (Free-Standing or Provider-Base Facilit)y
07	Prison/Correctional Facility
08	Office
09	Home
11	Assisted Living Facility
12	Group Home
13	Mobile Unit
14	Temporary Lodging
15	Walk-in Retail Health Clinic
16	Place of Employment/Worksite
17	Outpatient Hospital (On or Off Campus)
18	Urgent Care Facility
19	Inpatient Hospital
20	Emergency Room-Hospital
21	Ambulatory Surgical Center
22	Birthing Center
23	Military Treatment Facility
24	Skilled Nursing Facility
25	Nursing Facility
26	Custodial Care Facility
31	Hospice
32	Ambulance (Land, Air, or Water)
33	Independent Clinic
34	Federally Qualified Health Center
41	Inpatient Psychiatric Facility
42	Psychiatric Facility-Partial Hospitalization
49	Community Mental Health Center
50	Intermediate Care Facility/Individuals with Intellectual Disabilities
51	Residential Substance Abuse Treatment Facility
52	Psychiatric Residential Treatment Center
53	Non-residential Substance Abuse Treatment Facility
54	Mass Immunization Center
55	Comprehensive Inpatient Rehabilitation Facility
56	Comprehensive Outpatient Rehabilitation Facility
57	End-Stage Renal Disease Treatment Facility
60	State or Local Public Health Clinic
61	Rural Health Clinic
62	Independent Laboratory
88	Other Place of Service

Dent_Taxonomy	Code
Multi-Specialty	193200000X
Single Specialty	193400000X
Allergy & Immunology	207K00000X
Allergy	207KA0200X
Clinical & Laboratory Immunology	207KI0005X
Anesthesiology	207L00000X
Addiction Medicine	207LA0401X
Critical Care Medicine	207LC0200X
Hospice and Palliative Medicine	207LH0002X
Pain Medicine	207LP2900X
Pediatric Anesthesiology	207LP3000X
Clinical Pharmacology	208U00000X
Colon & Rectal Surgery	208C00000X
Dermatology	207N00000X
Clinical & Laboratory Dermatological Immunology	207NI0002X
Dermatopathology	207ND0900X
MOHS-Micrographic Surgery	207ND0101X
Pediatric Dermatology	207NP0225X
Procedural Dermatology	207NS0135X
Electrodiagnostic Medicine	204R00000X
Emergency Medicine	207P00000X
Emergency Medical Services	207PE0004X
Hospice and Palliative Medicine	207PH0002X
Medical Toxicology	207PT0002X
Pediatric Emergency Medicine	207PP0204X
Sports Medicine	207PS0010X
Undersea and Hyperbaric Medicine	207PE0005X
Family Medicine	207Q00000X
Addiction Medicine	207QA0401X
Adolescent Medicine	207QA0000X
Adult Medicine	207QA0505X
Geriatric Medicine	207QG0300X
Hospice and Palliative Medicine	207QH0002X
Obesity Medicine	207QB0002X
Sleep Medicine	207QS1201X
Sports Medicine	207QS0010X
General Practice	208D00000X
Hospitalist	208M00000X
Independent Medical Examiner	202C00000X
Internal Medicine	207R00000X
Addiction Medicine	207RA0401X
Adolescent Medicine	207RA0000X
Adult Congenital Heart Disease	207RA0002X
Advanced Heart Failure and Transplant Cardiology	207RA0001X
Allergy & Immunology	207RA0201X
Cardiovascular Disease	207RC0000X
Clinical & Laboratory Immunology	207RI0001X

Dent_Taxonomy	Code
Clinical Cardiac Electrophysiology	207RC0001X
Critical Care Medicine	207RC0200X
Endocrinology, Diabetes & Metabolism	207RE0101X
Gastroenterology	207RG0100X
Geriatric Medicine	207RG0300X
Hematology	207RH0000X
Hematology & Oncology	207RH0003X
Hepatology	207RI0008X
Hospice and Palliative Medicine	207RH0002X
Hypertension Specialist	207RH0005X
Infectious Disease	207RI0200X
Interventional Cardiology	207RI0011X
Magnetic Resonance Imaging (MRI)	207RM1200X
Medical Oncology	207RX0202X
Nephrology	207RN0300X
Obesity Medicine	207RB0002X
Pulmonary Disease	207RP1001X
Rheumatology	207RR0500X
Sleep Medicine	207RS0012X
Sports Medicine	207RS0010X
Transplant Hepatology	207RT0003X
Legal Medicine	209800000X
Clinical Biochemical Genetics	207SG0202X
Clinical Cytogenetics	207SC0300X
Clinical Genetics (M.D.)	207SG0201X
Clinical Molecular Genetics	207SG0203X
Molecular Genetic Pathology	207SM0001X
Ph.D. Medical Genetics	207SG0205X
Neurological Surgery	207T00000X
Neuromusculoskeletal Medicine & OMM	204D00000X
Neuromusculoskeletal Medicine, Sports Medicine	204C00000X
Nuclear Medicine	207U00000X
In Vivo & In Vitro Nuclear Medicine	207UN0903X
Nuclear Cardiology	207UN0901X
Nuclear Imaging & Therapy	207UN0902X
Obstetrics & Gynecology	207V00000X
Critical Care Medicine	207VC0200X
Female Pelvic Medicine and Reconstructive Surgery	207VF0040X
Gynecologic Oncology	207VX0201X
Gynecology	207VG0400X
Hospice and Palliative Medicine	207VH0002X
Maternal & Fetal Medicine	207VM0101X
Obesity Medicine	207VB0002X
Obstetrics	207VX0000X
Reproductive Endocrinology	207VE0102X
Ophthalmology	207W00000X
Cornea and External Diseases Specialist	207WX0120X
Glaucoma Specialist	207WX0009X
Neuro-ophthalmology	207WX0109X

Dent_Taxonomy	Code
Ophthalmic Plastic and Reconstructive Surgery	207WX0200X
Pediatric Ophthalmology and Strabismus Specialist	207WX0110X
Retina Specialist	207WX0107X
Uveitis and Ocular Inflammatory Disease	207WX0108X
Oral & Maxillofacial Surgery	204E00000X
Orthopaedic Surgery	207X00000X
Adult Reconstructive Orthopaedic Surgery	207XS0114X
Foot and Ankle Surgery	207XX0004X
Hand Surgery	207XS0106X
Orthopaedic Surgery of the Spine	207XS0117X
Orthopaedic Trauma	207XX0801X
Pediatric Orthopaedic Surgery	207XP3100X
Sports Medicine	207XX0005X
Otolaryngology	207Y00000X
Facial Plastic Surgery	207YS0123X
Otolaryngic Allergy	207YX0602X
Otolaryngology/Facial Plastic Surgery	207YX0905X
Otology & Neurotology	207YX0901X
Pediatric Otolaryngology	207YP0228X
Plastic Surgery within the Head & Neck	207YX0007X
Sleep Medicine	207YS0012X
Interventional Pain Medicine	208VP0014X
Pain Medicine	208VP0000X
Anatomic Pathology	207ZP0101X
Anatomic Pathology & Clinical Pathology	207ZP0102X
Blood Banking & Transfusion Medicine	207ZB0001X
Chemical Pathology	207ZP0104X
Clinical Informatics	207ZC0008X
Clinical Pathology	207ZC0006X
Clinical Pathology/Laboratory Medicine	207ZP0105X
Cytopathology	207ZC0500X
Dermatopathology	207ZD0900X
Forensic Pathology	207ZF0201X
Hematology	207ZH0000X
Immunopathology	207ZI0100X
Medical Microbiology	207ZM0300X
Molecular Genetic Pathology	207ZP0007X
Neuropathology	207ZN0500X
Pediatric Pathology	207ZP0213X
Pediatrics	20800000X
Adolescent Medicine	2080A0000X
Child Abuse Pediatrics	2080C0008X
Clinical & Laboratory Immunology	2080I0007X
Developmental- Behavioral Pediatrics	2080P0006X
Hospice and Palliative Medicine	2080H0002X
Medical Toxicology	2080T0002X
Neonatal-Perinatal Medicine	2080N0001X
Neurodevelopmental Disabilities	2080P0008X
Obesity Medicine	2080B0002X

Dent_Taxonomy	Code
Pediatric Allergy/Immunology	2080P0201X
Pediatric Cardiology	2080P0202X
Pediatric Critical Care Medicine	2080P0203X
Pediatric Emergency Medicine	2080P0204X
Pediatric Endocrinology	2080P0205X
Pediatric Gastroenterology	2080P0206X
Pediatric Hematology-Oncology	2080P0207X
Pediatric Infectious Diseases	2080P0208X
Pediatric Nephrology	2080P0210X
Pediatric Pulmonology	2080P0214X
Pediatric Rheumatology	2080P0216X
Pediatric Transplant Hepatology	2080T0004X
Sleep Medicine	2080S0012X
Sports Medicine	2080S0010X
Phlebology	202K00000X
Physical Medicine & Rehabilitation	208100000X
Brain Injury Medicine	2081P0301X
Hospice and Palliative Medicine	2081H0002X
Neuromuscular Medicine	2081N0008X
Pain Medicine	2081P2900X
Pediatric Rehabilitation Medicine	2081P0010X
Spinal Cord Injury Medicine	2081P0004X
Sports Medicine	2081S0010X
Plastic Surgery	208200000X
Plastic Surgery Within the Head and Neck	2082S0099X
Surgery of the Hand	2082S0105X
Addiction Medicine	2083A0300X
Aerospace Medicine	2083A0100X
Clinical Informatics	2083C0008X
Medical Toxicology	2083T0002X
Obesity Medicine	2083B0002X
Occupational Medicine	2083X0100X
Preventive Medicine/Occupational Environmental Medicine	2083P0500X
Public Health & General Preventive Medicine	2083P0901X
Sports Medicine	2083S0010X
Undersea and Hyperbaric Medicine	2083P0011X
Addiction Medicine	2084A0401X
Addiction Psychiatry	2084P0802X
Behavioral Neurology & Neuropsychiatry	2084B0040X
Brain Injury Medicine	2084P0301X
Child & Adolescent Psychiatry	2084P0804X
Clinical Neurophysiology	2084N0600X
Diagnostic Neuroimaging	2084D0003X
Forensic Psychiatry	2084F0202X
Geriatric Psychiatry	2084P0805X
Hospice and Palliative Medicine	2084H0002X
Neurocritical Care	2084A2900X
Neurodevelopmental Disabilities	2084P0005X
Neurology	2084N0400X

Dent_Taxonomy	Code
Neurology with Special Qualifications in Child Neurology	2084N0402X
Neuromuscular Medicine	2084N0008X
Obesity Medicine	2084B0002X
Pain Medicine	2084P2900X
Psychiatry	2084P0800X
Psychosomatic Medicine	2084P0015X
Sleep Medicine	2084S0012X
Sports Medicine	2084S0010X
Vascular Neurology	2084V0102X
Body Imaging	2085B0100X
Diagnostic Neuroimaging	2085D0003X
Diagnostic Radiology	2085R0202X
Diagnostic Ultrasound	2085U0001X
Hospice and Palliative Medicine	2085H0002X
Neuroradiology	2085N0700X
Nuclear Radiology	2085N0904X
Pediatric Radiology	2085P0229X
Radiation Oncology	2085R0001X
Radiological Physics	2085R0205X
Therapeutic Radiology	2085R0203X
Vascular & Interventional Radiology	2085R0204X
Surgery	208600000X
Hospice and Palliative Medicine	2086H0002X
Pediatric Surgery	2086S0120X
Plastic and Reconstructive Surgery	2086S0122X
Surgery of the Hand	2086S0105X
Surgical Critical Care	2086S0102X
Surgical Oncology	2086X0206X
Trauma Surgery	2086S0127X
Vascular Surgery	2086S0129X
Thoracic Surgery (Cardiothoracic Vascular Surgery)	208G00000X
Transplant Surgery	204F00000X
Urology	208800000X
Female Pelvic Medicine and Reconstructive Surgery	2088F0040X
Pediatric Urology	2088P0231X
Assistant Behavior Analyst	106E00000X
Behavior Analyst	103K00000X
Behavior Technician	106S00000X
Clinical Neuropsychologist	103G00000X
Clinical	103GC0700X
Counselor	101Y00000X
Addiction (Substance Use Disorder)	101YA0400X
Mental Health	101YM0800X
Pastoral	101YP1600X
Professional	101YP2500X
School	101YS0200X
Marriage & Family Therapist	106H00000X
Poetry Therapist	102X00000X
Psychoanalyst	102L00000X

Dent Taxonomy	Code
Psychologist	103T00000X
Addiction (Substance Use Disorder)	103TA0400X
Adult Development & Aging	103TA0700X
Clinical	103TC0700X
Clinical Child & Adolescent	103TC2200X
Cognitive & Behavioral	103TB0200X
Counseling	103TC1900X
Educational	103TE1000X
Exercise & Sports	103TE1100X
Family	103TF0000X
Forensic	103TF0200X
Group Psychotherapy	103TP2701X
Health	103TH0004X
Health Service	103TH0100X
Men & Masculinity	103TM1700X
Mental Retardation & Developmental Disabilities	103TM1800X
Prescribing (Medical)	103TP0016X
Psychoanalysis	103TP0814X
Psychotherapy	103TP2700X
Rehabilitation	103TR0400X
School	103TS0200X
Women	103TW0100X
Social Worker	104100000X
Clinical	1041C0700X
School	1041S0200X
Chiropractor	111N00000X
Independent Medical Examiner	111NI0013X
Internist	111NI0900X
Neurology	111NN0400X
Nutrition	111NN1001X
Occupational Health	111NX0100X
Orthopedic	111NX0800X
Pediatric Chiropractor	111NP0017X
Radiology	111NR0200X
Rehabilitation	111NR0400X
Sports Physician	111NS0005X
Thermography	111NT0100X
Advanced Practice Dental Therapist	125K00000X
Dental Assistant	126800000X
Dental Hygienist	124Q00000X
Dental Laboratory Technician	12690000X
Dental Therapist	125J00000X
Dentist	122300000X
Dental Public Health	1223D0001X
Dentist Anesthesiologist	1223D0001X 1223D0004X
Endodontics	1223E0200X
General Practice	1223E0200X 1223G0001X
Oral and Maxillofacial Pathology	
	1223P0106X
Oral and Maxillofacial Radiology	1223X0008X

Dent_Taxonomy	Code
Oral and Maxillofacial Surgery	1223S0112X
Orofacial Pain	1223X2210X
Orthodontics and Dentofacial Orthopedics	1223X0400X
Pediatric Dentistry	1223P0221X
Periodontics	1223P0300X
Prosthodontics	1223P0700X
Denturist	122400000X
Oral Medicinist	125Q00000X
Dietary Manager	132700000X
Dietetic Technician, Registered	136A00000X
Dietitian, Registered	133V00000X
Nutrition, Gerontological	133VN1101X
Nutrition, Metabolic	133VN1006X
Nutrition, Obesity and Weight Management	133VN1201X
Nutrition, Oncology	133VN1301X
Nutrition, Pediatric	133VN1004X
Nutrition, Pediatric Critical Care	133VN1401X
Nutrition, Renal	133VN1005X
Nutrition, Sports Dietetics	133VN1501X
Nutritionist	133N00000X
Nutrition, Education	133NN1002X
Emergency Medical Technician, Basic	146N00000X
Emergency Medical Technician, Intermediate	146M00000X
Emergency Medical Technician, Paramedic	146L00000X
Personal Emergency Response Attendant	146D00000X
Optometrist	152W00000X
Corneal and Contact Management	152WC0802X
Low Vision Rehabilitation	152WL0500X
Occupational Vision	152WX0102X
Pediatrics	152WP0200X
Sports Vision	152WS0006X
Vision Therapy	152WV0400X
Technician/Technologist	156F00000X
Contact Lens	156FC0800X
Contact Lens Fitter	156FC0801X
Ocularist	156FX1700X
Ophthalmic	156FX1100X
Ophthalmic Assistant	156FX1101X
Optician	156FX1800X
Optometric Assistant	156FX1201X
Optometric Technician	156FX1202X
Orthoptist	156FX1900X
Licensed Practical Nurse	164W00000X
Licensed Psychiatric Technician	167G00000X
Licensed Vocational Nurse	164X00000X
Registered Nurse	163W00000X
Addiction (Substance Use Disorder)	163WA0400X
Administrator	163WA2000X
Ambulatory Care	163WP2201X

Dent_Taxonomy	Code
Cardiac Rehabilitation	163WC3500X
Case Management	163WC0400X
College Health	163WC1400X
Community Health	163WC1500X
Continence Care	163WC2100X
Continuing Education/Staff Development	163WC1600X
Critical Care Medicine	163WC0200X
Diabetes Educator	163WD0400X
Dialysis, Peritoneal	163WD1100X
Emergency	163WE0003X
Enterostomal Therapy	163WE0900X
Flight	163WF0300X
Gastroenterology	163WG0100X
General Practice	163WG0000X
Gerontology	163WG0600X
Hemodialysis	163WH0500X
Home Health	163WH0200X
Hospice	163WH0200X
Infection Control	163W11000X
Infusion Therapy	163W10500X
Lactation Consultant	163W10500X
Maternal Newborn	163WL0100X
Medical-Surgical	163WM0102X
Neonatal Intensive Care	163WN0002X
Neonatal, Low-Risk	163WN0002X
Nephrology	163WN0300X
Neuroscience	163WN0800X
Nurse Massage Therapist (NMT)	163WM1400X
Nutrition Support Obstetric, High-Risk	163WN1003X
, ,	163WX0002X
Obstetric, Inpatient	163WX0003X
Occupational Health	163WX0106X
Oncology	163WX0200X
Ophthalmic	163WX1100X
Orthopedic	163WX0800X
Ostomy Care	163WX1500X
Otorhinolaryngology & Head-Neck	163WX0601X
Pain Management	163WP0000X
Pediatric Oncology	163WP0218X
Pediatrics	163WP0200X
Perinatal	163WP1700X
Plastic Surgery	163WS0121X
Psychiatric/Mental Health	163WP0808X
Psychiatric/Mental Health, Adult	163WP0809X
Psychiatric/Mental Health, Child & Adolescent	163WP0807X
Registered Nurse First Assistant	163WR0006X
Rehabilitation	163WR0400X
Reproductive Endocrinology/Infertility	163WR1000X
School	163WS0200X

Dent_Taxonomy	Code
Urology	163WU0100X
Women's Health Care, Ambulatory	163WW0101X
Wound Care	163WW0000X
Adult Companion	372600000X
Chore Provider	372500000X
Day Training/Habilitation Specialist	373H00000X
Doula	374J00000X
Home Health Aide	374U00000X
Homemaker	376J00000X
Nurse's Aide	376K00000X
Nursing Home Administrator	376G00000X
Religious Nonmedical Nursing Personnel	374T00000X
Religious Nonmedical Practitioner	374K00000X
Technician	374700000X
Attendant Care Provider	374700000X 3747A0650X
Personal Care Attendant	3747P1801X
Acupuncturist	17110000X
Case Manager/Care Coordinator	171N00000X
Clinical Ethicist	171V00000X
Community Health Worker	174V00000X
Contractor	172V00000X
Home Modifications	171WH0202X
Vehicle Modifications	171W10202X
Driver	171WV0202X 172A00000X
Funeral Director	176P00000X
Genetic Counselor, MS	17030000X
Health Educator	174H00000X
Homeopath	175L00000X
Interpreter	171R00000X
Lactation Consultant, Non-RN	174N00000X
Legal Medicine	17300000X
Mechanotherapist	172M00000X
Medical Genetics, Ph.D. Medical Genetics	17010000X
Midwife	176B00000X
Midwife, Lay	175M00000X
Military Health Care Provider	17100000X
Independent Duty Corpsman	1710I1002X
Independent Duty Medical Technicians	1710I1003X
Naprapath	172P00000X
Naturopath	175F00000X
Peer Specialist	175T00000X
Prevention Professional	405300000X
Reflexologist	173C00000X
Sleep Specialist, PhD	173F00000X
Specialist	174400000X
Graphics Designer	1744G0900X
Prosthetics Case Management	1744P3200X
Research Data Abstracter/Coder	1744R1103X
Research Study	1744R1102X

Dent_Taxonomy	Code
Veterinarian	
Medical Research	174M00000X
	174MM1900X
Pharmacist	183500000X
Ambulatory Care	1835P2201X
Critical Care	1835C0205X
General Practice	1835G0000X
Geriatric	1835G0303X
Nuclear	1835N0905X
Nutrition Support	1835N1003X
Oncology	1835X0200X
Pediatrics	1835P0200X
Pharmacist Clinician (PhC)/ Clinical Pharmacy Specialist	1835P0018X
Pharmacotherapy	1835P1200X
Psychiatric	1835P1300X
Pharmacy Technician	183700000X
Advanced Practice Midwife	367A00000X
Anesthesiologist Assistant	367H00000X
Clinical Nurse Specialist	364S00000X
Acute Care	364SA2100X
Adult Health	364SA2200X
Chronic Care	364SC2300X
Community Health/Public Health	364SC1501X
Critical Care Medicine	364SC0200X
Emergency	364SE0003X
Ethics	364SE1400X
Family Health	364SF0001X
Gerontology	364SG0600X
Holistic	364SH1100X
Home Health	364SH0200X
Informatics	364SI0800X
Long-Term Care	364SL0600X
Medical-Surgical	364SM0705X
Neonatal	364SN0000X
Neuroscience	364SN0800X
Occupational Health	364SX0106X
Oncology	364SX0200X
Oncology, Pediatrics	364SX0200X
Pediatrics Perinatal	364SP0200X 364SP1700X
Perioperative Psychiatria/Montal Health	364SP2800X
Psychiatric/Mental Health	364SP0808X
Psychiatric/Mental Health, Adult	364SP0809X
Psychiatric/Mental Health, Child & Adolescent	364SP0807X
Psychiatric/Mental Health, Child & Family	364SP0810X
Psychiatric/Mental Health, Chronically III	364SP0811X
Psychiatric/Mental Health, Community	364SP0812X
Psychiatric/Mental Health, Geropsychiatric	364SP0813X
Rehabilitation	364SR0400X
School	364SS0200X

Dent_Taxonomy	Code
Transplantation	364ST0500X
Women's Health	364SW0102X
Nurse Anesthetist, Certified Registered	36750000X
Nurse Practitioner	363L00000X
Acute Care	363LA2100X
Adult Health	363LA2200X
Community Health	363LC1500X
Critical Care Medicine	363LC0200X
Family	363LF0000X
Gerontology	363LG0600X
Neonatal	363LN0000X
Neonatal, Critical Care	363LN0005X
Obstetrics & Gynecology	363LX0001X
Occupational Health	363LX0106X
Pediatrics	363LP0200X
Pediatrics, Critical Care	363LP0222X
Perinatal	363LP1700X
Primary Care	363LP2300X
Psychiatric/Mental Health	363LP0808X
School	363LS0200X
Women's Health	363LW0102X
Physician Assistant	363A00000X
Medical	363AM0700X
Surgical	363AS0400X
Assistant, Podiatric	
Podiatrist	211D00000X 213E00000X
Foot & Ankle Surgery	213ES0103X
Foot Surgery	213ES0131X
General Practice	213EG0000X
Primary Podiatric Medicine	213EP1101X
Public Medicine	213EP0504X
Radiology	213ER0200X
Sports Medicine	213ES0000X
Anaplastologist	229N00000X
Art Therapist	221700000X
Clinical Exercise Physiologist	224Y00000X
Dance Therapist	22560000X
Developmental Therapist	222Q00000X
Kinesiotherapist	226300000X
Massage Therapist	225700000X
Mastectomy Fitter	22490000X
Music Therapist	225A00000X
Occupational Therapist	225X00000X
Driving and Community Mobility	225XR0403X
Environmental Modification	225XE0001X
Ergonomics	225XE1200X
Feeding, Eating & Swallowing	225XF0002X
Gerontology	225XG0600X
Hand	225XH1200X

Dent_Taxonomy	Code
Human Factors	225XH1300X
Low Vision	225XL0004X
Mental Health	225XM0800X
Neurorehabilitation	225XN1300X
Pediatrics	225XP0200X
Physical Rehabilitation	225XP0019X
Occupational Therapy Assistant	224Z00000X
Driving and Community Mobility	224ZR0403X
Environmental Modification	224ZE0001X
Feeding, Eating & Swallowing	224ZF0002X
Low Vision	224ZL0004X
Orthotic Fitter	22500000X
Orthotist	222Z00000X
Pedorthist	224L00000X
Physical Therapist	225100000X
Cardiopulmonary	2251C2600X
Electrophysiology, Clinical	2251E1300X
Ergonomics	2251E1300X
Geriatrics	2251G0304X
Hand	2251H1200X
Human Factors	2251H1200X
Neurology	2251N0400X
Orthopedic	2251X0800X
Pediatrics	2251P0200X
Sports	2251S0007X
Physical Therapy Assistant	225200000X
Prosthetist	224P00000X
Pulmonary Function Technologist	225B00000X
Recreation Therapist	225800000X
Recreational Therapist Assistant	22600000X
Rehabilitation Counselor	225C00000X
Assistive Technology Practitioner	225CA2400X
Assistive Technology Supplier	225CA2500X
Orientation and Mobility Training Provider	225CX0006X
Rehabilitation Practitioner	225400000X
Respiratory Therapist, Certified	227800000X
Critical Care	2278C0205X
Educational	2278E1000X
Emergency Care	2278E0002X
General Care	2278G1100X
Geriatric Care	2278G0305X
Home Health	2278H0200X
Neonatal/Pediatrics	2278P3900X
Palliative/Hospice	2278P3800X
Patient Transport	2278P4000X
Pulmonary Diagnostics	2278P1004X
Pulmonary Function Technologist	2278P1006X
Pulmonary Rehabilitation	2278P1005X
SNF/Subacute Care	2278S1500X

Dent_Taxonomy	Code
Respiratory Therapist, Registered	227900000X
Critical Care	2279C0205X
Educational	2279E1000X
Emergency Care	2279E0002X
General Care	2279G1100X
Geriatric Care	2279G0305X
Home Health	2279H0200X
Neonatal/Pediatrics	2279P3900X
Palliative/Hospice	2279P3800X
Patient Transport	2279P4000X
Pulmonary Diagnostics	2279P1004X
Pulmonary Function Technologist	2279P1006X
Pulmonary Rehabilitation	2279P1005X
SNF/Subacute Care	2279S1500X
Specialist/Technologist	225500000X
Athletic Trainer	2255A2300X
Rehabilitation, Blind	2255R0406X
Audiologist	231H00000X
Assistive Technology Practitioner	231HA2400X
Assistive Technology Supplier	231HA2500X
Audiologist-Hearing Aid Fitter	237600000X
Hearing Instrument Specialist	237700000X
Specialist/Technologist	235500000X
Audiology Assistant	2355A2700X
Speech-Language Assistant	2355S0801X
Speech-Language Pathologist	235Z00000X
Student in an Organized Health Care Education/Training Program	390200000X
Perfusionist	242T00000X
Radiologic Technologist	247100000X
Bone Densitometry	2471B0102X
Cardiac-Interventional Technology	2471C1106X
Cardiovascular-Interventional Technology	2471C1101X
Computed Tomography	2471C3401X
Magnetic Resonance Imaging	2471M1202X
Mammography	2471M2300X
Nuclear Medicine Technology	2471N0900X
Quality Management	2471Q0001X
Radiation Therapy	2471R0002X
Radiography	2471C3402X
Sonography	2471S1302X
Vascular Sonography	2471V0105X
Vascular-Interventional Technology	2471V0106X
Radiology Practitioner Assistant	243U00000X
Specialist/Technologist Cardiovascular	246X00000X
Cardiovascular Invasive Specialist	246XC2901X
Sonography	246XS1301X
Vascular Specialist	246XC2903X
Specialist/Technologist, Health Information	246Y00000X
Coding Specialist, Hospital Based	246YC3301X

Dent_Taxonomy	Code
Coding Specialist, Physician Office Based	246YC3302X
Registered Record Administrator	246YR1600X
Specialist/Technologist, Other	246Z00000X
Art, Medical	246ZA2600X
Biochemist	246ZB0500X
Biomedical Engineering	246ZB0301X
Biomedical Photographer	246ZB0302X
Biostatistician	246ZB0600X
EEG	246ZE0500X
Electroneurodiagnostic	246ZE0600X
Geneticist, Medical (PhD)	246ZG1000X
Graphics Methods	246ZG0701X
Illustration, Medical	246ZI1000X
Nephrology	246ZN0300X
Orthopedic Assistant	246ZX2200X
Surgical Assistant	246ZC0007X
Surgical Technologist	246ZS0410X
Specialist/Technologist, Pathology	246Q00000X
Blood Banking	246QB0000X
Chemistry	246QC1000X
Cytotechnology	246QC2700X
Hemapheresis Practitioner	246QH0401X
Hematology	246QH0000X
Histology	246QH0600X
Immunology	246QI0000X
Laboratory Management	246QL0900X
Laboratory Management, Diplomate	246QL0901X
Medical Technologist	246QM0706X
Microbiology	246QM0900X
Technician, Cardiology	246W00000X
Technician, Health Information	24700000X
Assistant Record Technician	2470A2800X
Technician, Other	247200000X
Biomedical Engineering	2472B0301X
Darkroom	2472D0500X
EEG	2472E0500X
Renal Dialysis	2472R0900X
Veterinary	2472V0600X
Technician, Pathology	246R00000X
Histology	246RH0600X
Medical Laboratory	246RM2200X
Phlebotomy	246RP1900X
Local Education Agency (LEA)	25130000X
Case Management	251B00000X
Community/Behavioral Health	251S0000X
Day Training, Developmentally Disabled Services	251C00000X
Early Intervention Provider Agency	252Y00000X
Foster Care Agency	253J00000X
Home Health	251E00000X

Dent_Taxonomy	Code
Home Infusion	251F00000X
Hospice Care, Community Based	251G00000X
In Home Supportive Care	253Z00000X
Nursing Care	251J00000X
Program of All-Inclusive Care for the Elderly (PACE) Provider Organization	
Public Health or Welfare	251T00000X
	251K00000X
Supports Brokerage	251X00000X
Voluntary or Charitable	251V00000X
Clinic/Center	261Q00000X
Adolescent and Children Mental Health	261QM0855X
Adult Day Care	261QA0600X
Adult Mental Health	261QM0850X
Ambulatory Family Planning Facility	261QA0005X
Ambulatory Fertility Facility	261QA0006X
Ambulatory Surgical	261QA1903X
Amputee	261QA0900X
Augmentative Communication	261QA3000X
Birthing	261QB0400X
Community Health	261QC1500X
Corporate Health	261QC1800X
Critical Access Hospital	261QC0050X
Dental	261QD0000X
Developmental Disabilities	261QD1600X
Emergency Care	261QE0002X
Endoscopy	261QE0800X
End-Stage Renal Disease (ESRD) Treatment	261QE0700X
Family Planning, Non-Surgical	261QF0050X
Federally Qualified Health Center (FQHC)	261QF0400X
Genetics	261QG0250X
Health Service	261QH0100X
Hearing and Speech	261QH0700X
Infusion Therapy	261QI0500X
Lithotripsy	261QL0400X
Magnetic Resonance Imaging (MRI)	261QM1200X
Medical Specialty	261QM2500X
Medically Fragile Infants and Children Day Care	261QM3000X
Mental Health (Including Community Mental Health Center)	261QM0801X
Methadone	261QM0801X 261QM2800X
Migrant Health	
Military Ambulatory Procedure Visits Operational (Transportable)	261QM1000X
	261QM1103X
Military and U.S. Coast Guard Ambulatory Procedure	261QM1101X
Military Outpatient Operational (Transportable) Component	261QM1102X
Military/U.S. Coast Guard Outpatient	261QM1100X
Multi-Specialty	261QM1300X
Occupational Medicine	261QX0100X
Oncology	261QX0200X
Oncology, Radiation	261QX0203X
Ophthalmologic Surgery	261QS0132X
Oral and Maxillofacial Surgery	261QS0112X

Dent_Taxonomy	Code
Pain	261QP3300X
Physical Therapy	261QP2000X
Podiatric	261QP1100X
Primary Care	261QP2300X
Prison Health	261QP2400X
Public Health, Federal	261QP0904X
Public Health, State or Local	261QP0905X
Radiology	261QR0200X
Radiology, Mammography	261QR0206X
Radiology, Mobile	261QR0208X
Radiology, Mobile Mammography	261QR0207X
Recovery Care	261QR0800X
Rehabilitation	261QR0400X
Rehabilitation, Cardiac Facilities	261QR0404X
Rehabilitation, Comprehensive Outpatient Rehabilitation Facility (CORF)	261QR0401X
Rehabilitation, Substance Use Disorder	261QR0405X
Research	261QR1100X
Rural Health	261QR1300X
Sleep Disorder Diagnostic	261Q\$1200X
Student Health	261Q51200X
Urgent Care	261QU0200X
VA	261QV0200X
Epilepsy Unit Modisara Dafined Swing Pod Linit	273100000X 275N00000X
Medicare Defined Swing Bed Unit	
Psychiatric Unit	273R00000X
Rehabilitation Unit	273Y00000X
Rehabilitation, Substance Use Disorder Unit	276400000X
Christian Science Sanitorium	287300000X
Chronic Disease Hospital	281P00000X
Children	281PC2000X
General Acute Care Hospital	282N00000X
Children	282NC2000X
Critical Access	282NC0060X
Rural	282NR1301X
Women	282NW0100X
Long Term Care Hospital	282E00000X
Military Hospital	286500000X
Community Health	2865C1500X
Military General Acute Care Hospital	2865M2000X
Military General Acute Care Hospital. Operational (Transportable)	2865X1600X
Psychiatric Hospital	283Q00000X
Rehabilitation Hospital	283X00000X
Children	283XC2000X
Religious Nonmedical Health Care Institution	282J00000X
Special Hospital	284300000X
Clinical Medical Laboratory	291U00000X
Dental Laboratory	292200000X
Military Clinical Medical Laboratory	291900000X
Physiological Laboratory	293D00000X

Dent_Taxonomy	Code
Exclusive Provider Organization	302F00000X
Health Maintenance Organization	302R00000X
Point of Service	305S00000X
Preferred Provider Organization	305R00000X
Alzheimer Center (Dementia Center)	311500000X
Assisted Living Facility	310400000X
Assisted Living, Behavioral Disturbances	3104A0630X
Assisted Living, Mental Illness	3104A0625X
Christian Science Facility	317400000X
Custodial Care Facility	311Z00000X
Adult Care Home	311ZA0620X
Hospice, Inpatient	315D00000X
Intermediate Care Facility, Mental Illness	310500000X
Intermediate Care Facility, Mentally Retarded	315P00000X
Nursing Facility/Intermediate Care Facility	313M00000X
Skilled Nursing Facility	314000000X
Nursing Care, Pediatric	314000000X 3140N1450X
Lodging	177F00000X
Meals	174200000X
Community Based Residential Treatment Facility, Mental Illness	320800000X
Community Based Residential Treatment Facility, Mental Inness	320900000X
and/or Developmental Disabilities	52090000X
Psychiatric Residential Treatment Facility	323P00000X
Residential Treatment Facility, Emotionally Disturbed Children	
Residential Treatment Facility, Mental Retardation and/or Developmental	322D00000X 320600000X
Disabilities	320800000X
Residential Treatment Facility, Physical Disabilities	320700000X
Substance Abuse Rehabilitation Facility	324500000X
Substance Abuse Treatment, Children	3245S0500X
Respite Care	385H00000X
Respite Care Camp	385HR2050X
Respite Care, Mental Illness, Child	385HR2055X
Respite Care, Mental Retardation and/or Developmental Disabilities	385HR2060X
Respite Care, Physical Disabilities, Child	385HR2065X
Blood Bank	331L00000X
Department of Veterans Affairs (VA) Pharmacy	332100000X
Durable Medical Equipment & Medical Supplies	332B00000X
Customized Equipment	332BC3200X
Dialysis Equipment & Supplies	332BD1200X
Nursing Facility Supplies	332BN1400X
Oxygen Equipment & Supplies	332BX2000X
Parenteral & Enteral Nutrition	332BP3500X
Emergency Response System Companies	333300000X
Eye Bank	332G00000X
Eyewear Supplier	332H00000X
Hearing Aid Equipment	332S00000X
Home Delivered Meals	332U00000X
Indian Health Service/Tribal/Urban Indian Health (I/T/U) Pharmacy	332800000X

Dent_Taxonomy	Code
Military/U.S. Coast Guard Pharmacy	33200000X
Non-Pharmacy Dispensing Site	332900000X
Organ Procurement Organization	335U00000X
Pharmacy	333600000X
Clinic Pharmacy	3336C0002X
Community/Retail Pharmacy	3336C0003X
Compounding Pharmacy	3336C0004X
Home Infusion Therapy Pharmacy	3336H0001X
Institutional Pharmacy	3336I0012X
Long Term Care Pharmacy	3336L0003X
Mail Order Pharmacy	3336M0002X
Managed Care Organization Pharmacy	3336M0003X
Nuclear Pharmacy	3336N0007X
Specialty Pharmacy	3336S0011X
Portable X-ray and/or Other Portable Diagnostic Imaging Supplier	335V00000X
Prosthetic/Orthotic Supplier	335E00000X
Air Carrier	344800000X
Ambulance	341600000X
Air Transport	3416A0800X
Land Transport	3416L0300X
Water Transport	3416S0300X
Bus	347B00000X
Military/U.S. Coast Guard Transport	341800000X
Military or U.S. Coast Guard Ambulance, Air Transport	3418M1120X
Military or U.S. Coast Guard Ambulance, Ground Transport	3418M1110X
Military or U.S. Coast Guard Ambulance, Water Transport	3418M1130X
Non-emergency Medical Transport (VAN)	343900000X
Private Vehicle	347C00000X
Secured Medical Transport (VAN)	343800000X
Taxi	344600000X
Train	347D00000X
Transportation Broker	347E00000X

All Payer's Claims Data - MassHealth Member Eligibility (PHDAPCD.MHEE14\_18)

\*\*For details on how to link PHDAPCD.MHEE with other PHD APCD datasets, please see Appendix 1: <u>APCD</u> Files Linkage Table

Variable Name	Variable Description	Meta Data	Format
ID	N/A	9-character alphanumeric ID	Char
MHEE_3rdPartyLiabilityCov	MassHealth members can have both MassHealth and private health insurance at the same time. If you have both types of insurance, the private health insurance is considered a liable third party or "TPL". This means the private health insurance is billed as the primary insurer and MassHealth is the secondary coverage.	1= Commercial 2= HMO 3= Medicare HMO 4= Medigap 5= Partial 8= Missing, Error 9= N/A	Num
MHEE_BEGINDATE	Effective date enrollment (of segment)	Date Proxy – count of days between service to date and randomly chosen date in the past NOTE: The larger the date proxy, the later in time the event occurred	Num
MHEE_BEGINDATE_MONT H	Effective date enrollment (of segment) - MONTH	1-12	Num
MHEE_BEGINDATE_YEAR	Effective date enrollment (of segment) - YEAR	ΥΥΥΥ	Num
MHEE_BehavHlthPlan		1= BHOnlyMC 2= Exception 3= FFS 4= ICO 5= MCO-CommCare 6= MCO-MassHealth 7= PACE 8= PCC 9= SCO 10=ACOA-MassHealth 11=ACOB-MassHealth 99 = (missing)	Num

Variable Name	Variable Description	Meta Data	Format
MHEE_BehavHlthPlan2		1= BH 2= CBHI1 3= CBHI2 4= CommCare-Unenrolled 5= ICO 6= MassHealth Eligible 7= MCO-CommCare 8= MCO-MassHealth 9= Non-MassHealth Eligible 10= Other Exception 11= PACE 12= PCC 13= PCC-NoBH 14= QHP 15= SCO 16=ACOA-MassHealth 17=ACOB+PCCB+BH 18=ACOB+PCCB+BH 18=ACOB+PCCB-NoBH 20=ACOB-NoPCCB+BH 21=ACOB-NoPCCB-NoBH 22=CBHI 23=CPBH 99= (missing)	Num
MHEE_BehavHlthProvider_L INKID	Provider ID that links into CHIA's Provider file to PHD variable PROV_PROVIDER_LINKID	Links MHEE data to provider data	Char
MHEE_DisabilityAidCatFlag		0=No 1=Yes 9=Unknown	Num
MHEE_DisabilityCat	Indicates whether the aid category reflects eligibility due to a disability.	0=No 1=Yes 8=N/A 9=Unknown (Covered MassHealth Plans listed below)	Num

Variable Name	Variable Description	Meta Data	Format
MHEE_DisabilityCode		1= Federally Certified Blind 2= Blind 3= CommonHealth 4= SSA Determined Disability 5= Kaileigh Mulligan 6= DES Determined Disability 7= Disability Determination done, Not disabled 8= Missing, Error 9= N/A	Num
MHEE_ELIGIBLE_DAYS	Integer values 1 to 31 represents days pertaining to the referenced month	Integer values 1 to 31 represents days pertaining to the referenced month	Num
MHEE_ELIGIBLE_DAYS_Y YYYMM	The month and year associated with the eligible days for MHEE_ELIGIBLE DAYS	ҮҮҮҮММ	Char
MHEE_ENDDATE	End date enrollment (of segment)	Date Proxy – count of days between service to date and randomly chosen date in the past NOTE: The larger the date proxy, the later in time the event occurred	Num
MHEE_ENDDATE_MONTH	End date enrollment (of segment) - MONTH	1-12	Num
MHEE_ENDDATE_YEAR	End date enrollment (of segment) - YEAR	ΥΥΥΥ	Num
MHEE_KaleighMulliganAidFl ag		0=No 1=Yes 9=Unknown	Num
MHEE_LongTermEligFlag		0=No 1=Yes 9=Unknown	Num
MHEE_LTCProvider_LINKID	Provider ID that links into CHIA's Provider file to PHD variable PROV_PROVIDER_LINKID	Links MHEE data to provider data	Char

Variable Name	Variable Description	Meta Data	Format
MHEE_ManagedCareProvid er_LINKID	Provider ID that links into CHIA's Provider file to PHD variable PROV_PROVIDER_LINKID	Links MHEE data to provider data	Char
MHEE_MedicareAdvantageF lag		0=No 1=Yes 9=Unknown	Num
MHEE_MedicarePtAFlag		0=No 1=Yes 9=Unknown	Num
MHEE_MedicarePtBFlag		0=No 1=Yes 9=Unknown	Num
MHEE_PopCategoryCat	Population applicable to the aid category, identifying MassHealth vs other non- MassHealth populations that are maintained in MassHealth systems.	1= MassHealth 2= CMSP 3= Commonwealth Care 4= DMH Only 5= HSN 6=QHP 8=Not Applicable 9=Missing	Num
MHEE_PremiumAssistCat	The MassHealth Premium Assistance program is for MassHealth members who have access to employer- sponsored health insurance (ESI) from a job or from another source, such as members of your household. The MassHealth Premium Assistance program reimburses eligible MassHealth members for some or all the premium cost of eligible private insurance.	0=No 1=Yes 8=N/A 9=Unknown (Covered MassHealth Plans listed below)	Num
MHEE_PrimaryCareProvider _LINKID	Provider ID that links into CHIA's Provider file to PHD variable PROV_PROVIDER_LINKID	Links MHEE data to provider data	Char

Variable Name	Variable Description	Meta Data	Format
MHEE_SSIAidFlag		0=No 1=Yes 9=Unknown	Num

#### MHEE\_DisabilityCat covers the following plans under Yes:

SSI Disabled, Disabled, CommonHealth Basic, CommonHealth Disabled Working Adult, CommonHealth Disabled Child, CommonHealth Plus, MCB SSI, MCB MA, SF MCB, MCB MA with QMB, TMA Disabled QMB Parents, MCB MA QMB Only, Disabled with QMB, Disabled QMB Only, Disabled SLMB Only, Disabled Emergency Services Only, Disabled, Disabled with QMB, SF Disabled, SF Disabled with QMB. CommonHealth Disabled Child. SF CommonHealth Disabled Child. CommonHealth Disabled Working Adult, CommonHealth Disabled Non Working Adult, SF CommonHealth Disabled Working Adult, SF CommonHealth Disabled Non Working Adult, Temporary Family Assistance, Time Limited HIV Fam Assist, Undocumented Disabled Aliens, HIV Family Assistance, SF HIV Family Assistance, HIV Family Assistance, SF HIV Family Assistance, HIV Family Assistance-Prem Assist w/Wrap, SF HIV Fam Assist Prem Assist w/Wrap, Disab Alien Special Status(ESS if in Managed Care), Disab Alien Special Status age 19 - 64 with TPL, Limited Plus Healthy Start (disabled), NQP Child SF CommonHealth - Direct Coverage, NQP Child SF CommonHealth self-dec/access invest, NQP child SF CommonHealth confirmed access enroll, NQP child SF CommonHealth Premium Assistance, Time Limited CommonHealth/ESI investigation, SF Time Limited CommonHealth/ESI investigation, Time Limited CommonHealth/ESI enrollment, SF Time Limited CommonHealth/ESI enrollment, ESI Premium Payment plus CommonHealth Wrap, ESI Premium Payment plus CommonHealth Wrap, SF ESI Premium Payment plus CommonHealth Wrap, ESI Premium Payment plus Standard Wrap Disabled, HIV Benchmark 1 Direct coverage, HIV Benchmark 1 self-declared access investigation, HIV Benchmark 1 confirmed access enrollment period, HIV Benchmark 1 Premium Assistance, NQP Disabled SF Family Assistance, NQP Disabled SF FA self-declrd access invstigation, NQP Disabled SF FA Premium Assistance, NQP Disabled Adults SF Family Assistance, Disabled - LE 100% FPL, Disabled QI Only - GE 120% LT 135% FPL, Disabled - Met Deductible, Disabled with Medicare GT 100% LT 120% -FPL, Disabled with Medicare GE 120% - LT 135% FPL, Disabled GE 135% FPL, Disabled Adult Child with Medicare, Disabled Adult Child, Disabled Widow, Barred/PRUCOL Aliens Disab, Barred or PRUCOL Aliens – Disabled, NQP Elder Disabled SF FA + Limited, Kaileigh Mulligan with Medicare LE \$60, Kaileigh Mulligan LE \$60, Kaileigh Mulligan GT \$60, Kaileigh Mulligan with Medicare GT 100% LT 120%FPL, Kaileigh Mulligan with Medicare GE 120% LT 135%FPL, Kaileigh Mulligan GT 135% FPL, Kaileigh Mulligan with Medicare GT 100% LT 120% FPL, Kaileigh Mulligan with Medicare GE 120% LT 135%FPL, Pickle - Disabled with Medicare, Pickle – Disabled, Kaileigh Mulligan with Medicare LE 100% FPL, Kaileigh Mulligan LE 100% FPL, Kaileigh Mulligan with Medicare, Kaileigh Mulligan with Medicare GT 100% LT 120% FPL, Kaileigh Mulligan GE 120% LT 135% FPL, Disabled with Medicare GE 120% LT 135% FPL, Disabled with Medicare GT 100% LT 120% FPL, HIV FA PE Benefit, Disabled Limited without HSN, Elder Disabled Limited without HSN

#### MHEE\_PremiumAssistCat covers the following plans under Yes:

MCB MA QMB Only, Aged QMB Only, Disabled QMB Only, Aged SLMB Only, Disabled SLMB Only, SF Fam Assist - Prem Assist with Limited, Basic Health Insurance Premium Assistance, SF Basic Health Insurance Prem Assist with Limited, Family Assistance Premium Assistance, SF Family Assistance Premium Assistance, Expansion Fam Assist Prem Assist Plus, Expansion Fam Assist Prem Assist Plus-

#### **APCD – MassHealth Member Eligibility**

#### **Analytic Data Dictionary**

#### (PHDAPCD.MHEE14\_18)

Met Cap, MCB MA SLMB Only, Family Assistance Premium Assistance Plus, Fam Assist Prem Assist Plus-Met Cap, HIV Family Assistance-Prem Assist w/Wrap, SF HIV Fam Assist Prem Assist w/Wrap, Medicare Buy In Qualified Individual 1 (QI 1), Medicare Buy In Qualified Individual 2 (QI 2), SF Adult Fam Assist Prem Assist(IRP), Adult Fam Assist Prem Assist (IRP), Benchmark 1 Premium Assistance, TMA Premium Assistance, Essential Health Insurance Premium Payment, Disab Alien Special Status age 19 - 64 with TPL, Former Foster Children Premium Assistance, CarePlus Premium Assistance, NQP child SF CommonHealth Premium Assistance, ESI Premium Payment plus Standard Wrap, ESI Premium Payment plus Standard Wrap, ESI Premium Payment plus CommonHealth Wrap, ESI Premium Payment plus CommonHealth Wrap, SF ESI Premium Payment plus CommonHealth Wrap, ESI Premium Payment plus Standard Wrap Disabled, NQP Preg Premium Assistance, UND Preg Premium Assistance, Small Business Employee Premium Assistance Program, BCCTP Benchmark 1 Premium Assistance, HIV Benchmark 1 Premium Assistance, NQP Disabled SF FA Premium Assistance, Medically Frail Standard – PA, Standard SHIP Premium Assist, SF Family Assist SHIP Premium Assist, Standard SHIP Premium Assist, CommonHealth SHIP Premium Assist, SF Fam Assist SHIP Prem Assist w/Limited, Family Assist SHIP Premium Assist, CarePlus SHIP Premium Assist, Family Assist SHIP Premium Assist, SF CommonHealth SHIP Premium Assist, SF Fam Assist SHIP Prem Assist w/Limited, SF CommonHealth SHIP Prem Assist w/Limited, Standard SHIP Premium Assist, 19-20 Standard – PA, Aged QI Only - GE 120% LT 135% FPL, Disabled QI Only - GE 120% LT 135% FPL, Hermanson Aged with Medicare LE 135% FPL, Kaileigh Mulligan with Medicare GT 100% LT 120% FPL, Kaileigh Mulligan with Medicare GE 120% LT 135% FPL, Kaileigh Mulligan LE 100% FPL, SF FA PA Plus not meet Cap, SF FA PA Plus Met Cap, Kaileigh Mulligan with Medicare, Aged Hermanson with Medicare GT 100% LT 120% FPL, Kaileigh Mulligan with Medicare GT 100% LT 120%FPL, Aged Hermanson with Medicare GE 120% LT 135% FPL, Kaileigh Mulligan GE 120% LT 135% FPL, Aged with Medicare GE 120% LT 135% FPL, Disabled with Medicare GE 120% LT 135% FPL, Aged with Medicare GT 100% LT 120% FPL, Disabled with Medicare GT 100% LT 120% FPL

#### All Payer's Claims Data – Medical (PHDAPCD.MEDICAL14\_18)

\*\*For details on how to link PHDAPCD.Medical with other PHD APCD datasets, please see Appendix 1: APCD Files Linkage Table

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
MED_ADM_DATE	Admission Date	Date Proxy – count of days between admission date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
MED_ADM_DATE_MONT H	Admission Date - month	1-12	Num
MED_ADM_DATE_YEAR	Admission Date - year	YYYY	Num
MED_ADM_DIAGNOSIS	Admitting Diagnosis	ICD9/ICD10 code	Char
MED_ADM_SOURCE	Admission Source	For Inpatient/SNF Claims: 0=ANOMALY: invalid value, if present, translate to '9' 1=Non-Health Care Facility Point of Origin (Physician Referral) - The patient was admitted to this facility upon an order of a physician. 2=Clinical referral - The patient was admitted upon the recommendation of this facility's clinic physician. 3=HMO referral - Reserved for national assignment. (eff. 3/08) Prior to 3/08, HMO referral - The patient was admitted upon the recommendation of a health maintenance organization (HMO) physician. 4=Transfer from hospital (Different Facility) - The patient was admitted to this facility as a hospital transfer from an acute care facility where he or she was an inpatient. 5=Transfer from a skilled nursing facility (SNF) or Intermediate Care Facility (ICF) - The patient was admitted to this facility as a transfer from a SNF or ICF where he or she was a resident. 6=Transfer from another health care facility - The patient was admitted to this facility as a transfer from another type of health care facility not defined elsewhere in this code list where he or she was an inpatient.	Char

Variable Name	Variable Description	Meta Data	Format
		7=Emergency room - The patient was admitted to this facility after receiving services in this facility's emergency room department. (Obsolete - eff. 7/1/10) 8=Court/law enforcement - The patient was admitted upon the direction of a court of law or upon the request of a law enforcement agency's representative. Includes transfers from incarceration facilities. 9=Information not available - The means by which the patient was admitted is not known. A=Reserved for National Assignment. (eff. 3/08) Prior to 3/08 defined as: Transfer from a Critical Access Hospital - patient was admitted/referred to this facility as a transfer from a Critical Access Hospital. B=Transfer from Another Home Health Agency - The patient was admitted to this home health agency as a transfer from another home health agency. (Discontinued July 1, 2010 - See Condition Code 47) C=Readmission to Same Home Health Agency - The patient was readmitted to this home health agency within the same home health episode period. (Discontinued July 1, 2010) D=Transfer from hospital inpatient in the same facility resulting in a separate claim to the payer - The patient was admitted to this facility as a transfer from hospital inpatient within this facility resulting in a separate claim to the payer. E=Transfer from Ambulatory Surgery Center - The patient was admitted to this facility as a transfer from nospital inpatient within this facility resulting in a separate claim to the payer. E=Transfer from Hospice and is under a Hospice Plan of Care or Enrolled in a Hospice Plan of Care or Enrolled in a Hospice. (eff. 10/1/2007) F=Transfer from Hospice and is under a Hospice. (eff. 10/1/2007) For Newborn Type of Admission: 5= Born Inside this Hospital (eff. 10/1/07) 6=Born Outside of This Hospital (eff. 10/1/07)	

Variable Name	Variable Description	Meta Data	Format
		For up-to-date values & for all other values, please refer to the Official UB- 04 Data Specifications Manual released by the National Uniform Billing Committee	
MED_ADM_TYPE	Admission Type	<ul> <li>1 = Emergency - The patient required immediate medical intervention as a result of severe, life threatening, or potentially disabling conditions. Generally, the patient was admitted through the emergency room.</li> <li>2 = Urgent - The patient required immediate attention for the care and treatment of a physical or mental disorder. Generally, the patient was admitted to the first available and suitable accommodation.</li> <li>3 = Elective - The patient's condition permitted adequate time to schedule the availability of suitable accommodations.</li> <li>4 = Newborn - Necessitates the use of special source of admission codes.</li> <li>5 = Trauma Center - visits to a trauma center/hospital as licensed or designated by the State or local government authority authorized to do so, or as verified by the American College of Surgeons and involving a trauma activation.</li> <li>9 = Unknown - Information not available.</li> <li>For up-to-date values &amp; for all other values, please refer to the Official UB- 04 Data Specifications Manual released by the National Uniform Billing Committee</li> </ul>	Char
MED_AGE	Member age at service	Age in years, ages greater than 89 set to 999	Num
MED_ALLOWED_AMOUN T	Allowed amount	0=claim line is denied. Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
MED_AMOUNT_DUE_OT HER	Amount paid by other	0=Prior Payer paid 0 towards this claim line	Num

Variable Name	Variable Description	Meta Data	Format
		Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	
MED_AMOUNT_DUE_SE CONDARY	Amount due from a Secondary Carrier when known	0=no COB / TPL amount. Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
MED_BILLINGPROVIDER_LI NKID	Linkage variable for medical claims to billing provider (in APCD provider file, PROV_PROVIDER_LINKID)	Links medical claims at the claims row level	Char
MED_BILLINGPROVIDER_N PI	National Service Provider		Char
MED_CAPITATED	Capitated Encounter Flag	1 =Yes 2 =No 3 =Unknown 4 =Other 5 =Not Applicable	Num
MED_CHARGED	Charge Amount	0=services rendered in conjunction with other services on the claim. Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
MED_CLAIM_STATUS	Claim status	0= This value is as is submitted by the insurance carrier (with unknown translation) 1=Processed as primary 2=Processed as secondary 3=Processed as tertiary	Num

Variable Name	Variable Description	Meta Data	Format
		4=Denied 5=Processed as primary, forwarded to additional payers(s) 6=Processed as secondary, forwarded to additional payers(s) 7=Processed as tertiary, forwarded to additional payer(s) 8=Reversal of previous payment 9=Not our claim, forwarded to additional payer(s) 10=Predetermination pricing only - no payment 11=Missing	
MED_CLAIM_TYPE	Type of Claim	1=Professional 2=Facility 3=Reimbursement form (blank) = missing	Num
MED_CLAIM_TYPE_MAS SHEALTH	MassHealth Claim Type Indicator	1= INPATIENT PART A CROSSOVER UB92 2= PROFESSIONAL PART B CROSSOVER 3= OUTPATIENT PART B CROSSOVER UB-04 4= DENTAL 5= HOME HEALTH AND COMMUNITY HEALTH 6= HOSPITAL INPATIENT 7= LONG TERM CARE 8= PHYSICIAN CLAIM 9= HOSPITAL OUTPATIENT 10= PHARMACY 11= COMPOUND DRUG CLAIMS (blank) = missing	Num
MED_COINSURANCE	Coinsurance Amount	0=services rendered in conjunction with other services on the claim. Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
MED_COPAY	Copay Amount	0=services rendered in conjunction w/other services on claim. Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar	Num

Variable Name	Variable Description	Meta Data	Format
		amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	
MED_COVERAGE_BH	Behavioral Health Benefit Flag	1 =Yes 2 =No 4 =Other 8 =Not Applicable 9 =Unknown	Num
MED_CSUMID	Carrier Specific Unique Member ID	Integer	Char
MED_DEDUCTIBLE	Deductible Amount	0=services rendered in conjunction w/other services on claim. Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
MED_DIS_DATE	Discharge Date	Date Proxy – count of days between service to date and randomly chosen date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
MED_DIS_DATE_MONTH	Discharge Date - Month	1-12	Num
MED_DIS_DATE_YEAR	Discharge Date - Year	YYYY	Num
MED_DIS_DIAGNOSIS	Discharge Diagnosis	ICD9/ICD10 code	Char
MED_DISCHARGE	Discharge Status; applies to any facility not just acute care	0=Unknown Value (but present in data) 01=Discharged to home/self care (routine charge). 02=Discharged/transferred to other short term general hospital for inpatient care. 03=Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation of covered skilled care (For hospitals with an approved swing bed arrangement, use Code 61 - swing bed. For reporting discharges/transfers to a non-certified SNF, the hospital must use Code 04 - ICF. 04=Discharged/transferred to intermediate care facility (ICF).	Char

Variable Name	Variable Description	Meta Data	Format
Variable Name		Meta Data05=Discharged/transferred to another type of institution for inpatient care (including distinct parts). NOTE: Effective 1/2005, psychiatric hospital or psychiatric distinct part unit of a hospital will no longer be identified by this code. New code is '65'06=Discharged/transferred to home care of organized home health service organization.07=Left against medical advice or discontinued care.08=Discharged/transferred to home under care of a home IV drug therapy provider. (discontinued effective 10/1/05); now reserved for assignment by NUBC 09=Admitted as an inpatient to this hospital (effective 3/1/91). In situations where a patient is admitted before midnight of the third day following the day of an outpatient service, the outpatient services are considered inpatient.20=Expired (did not recover - Christian Science patient).21=Discharged/transferred to Court/Law Enforcement30=Still patient 40=Expired at home (hospice claims only)41=Expired in a medical facility such as hospital (eff. 10/103)50=Hospice - home (eff. 10/96) 51=Hospice - medical facility (eff. 10/96) 61=Discharged/transferred to an institution to a hospital-based Medicare approved swing bed (eff. 9/01) 62=Discharged/transferred to an inpatient rehabilitation facility including distinct parts units of a hospital. (eff.	Format
		1/2002) 63=Discharged/transferred to a long term care hospitals. (eff. 1/2002) 64=Discharged/transferred to a nursing facility certified under Medicaid but not	

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Variable Name	Variable Description	Meta Data	Format
Variable Name	Variable Description	Meta Data65=Discharged/Transferred to a psychiatric hospital or psychiatric distinct unit of a hospital (these types of hospitals were pulled from patient/discharge status code '05' and given their own code). (eff. 1/2005).66=Discharged/transferred to a Critical Access Hospital (CAH) (eff. 1/1/06)69=Discharged/transferred to a designated disaster alternative care site (eff. 10/2013)70=Discharged/transferred to another type of health care institution not defined elsewhere in code list.81=Discharged/transferred to a designated cancer center or children's hospital inpatient readmission.85=Discharged/transferred to a designated cancer center or children's hospital inpatient readmission.86=Discharged/transferred to home under care of organized home health service organization with a planned acute care hospital inpatient readmission.87=Discharged/transferred to a federal health care facility with a planned acute care hospital inpatient readmission.88=Discharged/transferred to a federal health care facility with a planned acute care hospital inpatient readmission.89=Discharged/transferred to a federal health care facility with a planned acute care hospital inpatient readmission.89=Discharged/transferred to an inpatient readmission.90=Discharged/transferred to an inpatient readmission.90=Discharged/transferred to an inpatient readmission.91=Discharged/transferred to an inpatient readmission.91=Discharged/transferred to an inpatient readmission.91=Discharged/transferred to an inpatient readmission.92=Discharged/transferred to an inpatient readmission.91=Discharged/transfer	Format
		acute care hospital inpatient readmission. 93=Discharged/transferred to a psychiatric distinct part unit of a hospital	

Variable Name	Variable Description	Meta Data	Format
		<ul> <li>with a planned acute care hospital inpatient readmission.</li> <li>94=Discharged/transferred to a critical access hospital (CAH) with a planned acute care hospital inpatient readmission.</li> <li>95=Discharged/transferred to another type of health care institution not defined elsewhere in this code list with a planned acute care hospital inpatient readmission.</li> <li>280=Acute Myocardial Infarction, Discharged Alive with MCC</li> <li>281=Acute Myocardial Infarction, Discharged Alive with CC</li> <li>282=Acute Myocardial Infarction, Discharged Alive without CC/MCC</li> <li>789=Neonates, Died or Transferred to Another Acute Care Facility</li> <li>For up-to-date values &amp; for all other values, please refer to the Official UB-</li> </ul>	
		04 Data Specifications Manual released by the National Uniform Billing Committee	
MED_ECODE	E-Code	ICD9/ICD10 code May contain non-e-codes, and e-codes may be located in other ICD variable fields (MED_ADM_DIAGNOSIS, MED_DIS_DIAGNOSIS, MED_ICD1- MED_ICD25)	Char
MED_EMP_RELATED	Employment Related Indicator	0= No 1= Yes 2= Other 8= Not Applicable 9= Unknown	Num
MED_ENROLL_TYPE	Member enrollment type	<ul> <li>1= FIG - Fully-Insured Commercial Group Enrollee</li> <li>2= SIG - Self-Insured Group Enrollee</li> <li>3= GIC - Group Insurance Commission Enrollee</li> <li>4= MCO - MassHealth Managed Care Organization Enrollee</li> <li>5= Supplemental Policy Enrollee</li> <li>6 = ICO - Integrated Care Organization or SCO- Senior Care Option</li> <li>7 =ACO - Accountable Care Organization Enrollee (MassHealth only - unless approved by CHIA)</li> <li>9= Unknown / Not Applicable</li> </ul>	Num

Variable Name	Variable Description	Meta Data	Format
MED_ENTITY	Service Provider Entity Type Qualifier	1= Person 2= Non-person entity 3=Missing	Num
MED_FACILITY_TYPE	Type of Facility	1= General Acute Care Facility 2= Skilled Nursing Facility/Long Term Care Facility 3= Intermediate Care Facility 4= Hospice Facility 5= Designated Cancer Center 6= Designated Inpatient Children's Hospital 7= Inpatient Rehabilitation Facility 8= Inpatient Psychiatric Hospital 9= Critical Access Hospital 10= VNA/Home Care 99= Other Type of Facility (blank)=missing	Num
MED_FROM_DATE	Date of Service - From	Date Proxy – count of days between service from date and randomly chosen date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
MED_FROM_DATE_MON TH	Date of Service – From - MONTH	1-12	Num
MED_FROM_DATE_YEAR	Date of Service – From - YEAR	YYYY	Num
MED_GLOBAL_PAY	Global Payment Flag	0= No 1= Yes 2= Other 8= Not Applicable 9= Unknown	Num
MED_HIGHESTVERSION	Flags if this claim line is the highest version	1= Highest Version Claim Line 0=Not Highest Version Claim Line 9=Versioning Not Applied	Num
MED_HIGHESTVERSION_ DENIED	Flags if this claim is the highest version and if it was denied (must also be considered with MED_HIGHESTVERSION_ PAID)	1= Is Highest Version Denied 0=Is Not Highest Version Denied 9=Highest Version Denied Flag Not Applied	Num
MED_HIGHESTVERSION_ PAID	Flags if this claim is the highest version and if it was paid (must also be considered with MED_HIGHESTVERSION_ DENIED)	1= Highest Version Paid 0=Not Highest Version Paid 9=Versioning Not Applied	Num
MED_ICD_PROC1	ICD-CM Procedure Code	ICD CM procedure code, no decimal	Char

Variable Name	Variable Description	Meta Data	Format
MED_ICD_PROC2	Other ICD-CM Procedure Code -1	ICD9/ICD10 code	Char
MED_ICD_PROC3	Other ICD-CM Procedure Code -2	ICD9/ICD10 code	Char
MED_ICD_PROC4	Other ICD-CM Procedure Code -3	ICD9/ICD10 code	Char
MED_ICD_PROC5	Other ICD-CM Procedure Code -4	ICD9/ICD10 code	Char
MED_ICD_PROC6	Other ICD-CM Procedure Code -5	ICD9/ICD10 code	Char
MED_ICD_PROC7	Other ICD-CM Procedure Code -6	ICD9/ICD10 code	Char
MED_ICD1	Principal Diagnosis	ICD9/ICD10 code	Char
MED_ICD10	Other Diagnosis - 9	ICD9/ICD10 code	Char
MED_ICD11	Other Diagnosis-10	ICD9/ICD10 code	Char
MED_ICD12	Other Diagnosis 11	ICD9/ICD10 code	Char
MED_ICD13	Other Diagnosis -12	ICD9/ICD10 code	Char
MED_ICD14	Other Diagnosis-13	ICD9/ICD10 code	Char
MED_ICD15	Other Diagnosis-14	ICD9/ICD10 code	Char
MED_ICD16	Other Diagnosis-15	ICD9/ICD10 code	Char
MED_ICD17	Other Diagnosis-16	ICD9/ICD10 code	Char
MED_ICD18	Other Diagnosis-17	ICD9/ICD10 code	Char
MED_ICD19	Other Diagnosis-18	ICD9/ICD10 code	Char
MED_ICD2	Other Diagnosis - 1	ICD9/ICD10 code	Char
MED_ICD20	Other Diagnosis-19	ICD9/ICD10 code	Char
MED_ICD21	Other Diagnosis-20	ICD9/ICD10 code	Char
MED_ICD22	Other Diagnosis-21	ICD9/ICD10 code	Char
MED_ICD23	Other Diagnosis-22	ICD9/ICD10 code	Char
MED_ICD24	Other Diagnosis-23	ICD9/ICD10 code	Char
MED_ICD25	Other Diagnosis-24	ICD9/ICD10 code	char
MED_ICD3	Other Diagnosis - 2	ICD9/ICD10 code	Char
MED_ICD4	Other Diagnosis - 3	ICD9/ICD10 code	Char
MED_ICD5	Other Diagnosis - 4	ICD9/ICD10 code	Char
MED_ICD6	Other Diagnosis - 5	ICD9/ICD10 code	Char
MED_ICD7	Other Diagnosis - 6	ICD9/ICD10 code	Char
MED_ICD8	Other Diagnosis - 7	ICD9/ICD10 code	Char
MED_ICD9	Other Diagnosis - 8	ICD9/ICD10 code	Char
MED_INSURANCE_TYPE	Insurance Type Code/Product	09=Self pay 10=Central certification 11=Other non-federal programs	Char

Variable Name	Variable Description	Meta Data	Format
		12=PPO 13=POS 14=EPO 15=Indemnity insurance 16=HMO Medicare risk 17=DMO AM=Automobile medical BL=Blue cross / Blue shield CC=Commonwealth Care CE=Commonwealth Care CE=Commonwealth CH=Campus CI=Commercial Insurance Co. DS=Disability HM=HMO LI=Liability Medical MA=Medicare part A MB=Medicare part B MC=Medicaid OF=Other federal program TF=HSN trust fund TV=Title V VA=Veterans Administration Plan WC=Workers' Compensation ZZ=Other (blank) = missing ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_LINE	Line Counter	Integer	Num
MED_LINKORGIDPR	Linkage variable to connect medical claim to product file (PROD_ORGID)		Char
MED_LINKORGIDPV	Linkage variable to connect medical claim to APCD provider file (PROV_ORGID)	Links medical claims at the Insurance Carrier Level	Char
Med_MassHealth_RateCod e	MassHealth Rate Code	1= CHRONIC HOSPITAL PER DIEM 2= CHRONIC HOSPITAL PER DIEM ADMIN DAY RATE 3= PSYCHIATRIC PER DIEM 4= PSYCHIATRIC ADMINISTRATIVE DAY RATE 5= ALCOHOL / DRUG DETOX PER DIEM 6= DRG ACUTE INPATIENT PAYMENT 7= DRG ACUTE INPATIENT TRANSFER PER DIEM	Num

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Variable Name	Variable Description	Meta Data	Format
		8= DRG ACUTE INPATIENT INTERIM PER	
		9= DRG ACUTE INPATIENT FINAL PER DIEM	
		10= ACUTE OUTPATIENT HOSPITAL RATE	
		11= STANDARD PAYMENT AMOUNT	
		12= PEDIATRIC PAYMENT AMOUNT	
		13= STANDARD OUTLIER	
		14= PEDIATRIC OUTLIER	
		15= AOH PRICING	
		16= CHRONIC LEVEL I AD	
		17= CHRONIC LEVEL I AD	
		18= HEBREW REHAB 19= DRG ACUTE INPATIENT PEDIATRIC	
		PAYMENT	
		20= DRG ACUTE INPATIENT PEDIATRIC	
		TRANSFER PER DIEM	
		21= DRG ACUTE INPATIENT PEDIATRIC	
		INTERIM PER DIEM	
		22= DRG ACUTE INPATIENT PEDIATRIC	
		23= STANDARD TRANSFER 24= PEDIATRIC TRANSFER AMOUNT	
		25= 66 - XOVER PART A AS PART B (DO	
		NOT USE FOR RATES)	
		26= ACUTE INPATIENT-BMC & CHRONIC-	
		BAYSTATE & IRTP/DIEM	
		27= ZERO PAY BILLED DAYS RFA 93	
		28= DMH REPLACEMENT UNIT	
		29= OUTPATIENT ZERO/NON-PAYMENT	
		30= INTENSIVE RESIDENTIAL	
		TREATMENT PROGRAM (IRTP) 31= PSYCH	
		32= INPATIENT PERCENT OF CHARGE	
		33= ADMINISTRATIVE DAY PERCENT OF	
		CHARGE	
		34= SNF/ICF AD PART B OR A/B	
		35= SNF/ICF AD WO PART B A/NONE	
		36= CHRONIC OPD	
		37= PSYCH PER DIEM - ACUTE INPT	
		38= STATE FACILITY	
		39= IP Chronic Percent Of Charge	
		99=Missing	

Variable Name	Variable Description	Meta Data	Format
		(This variable became available starting in 2015)	
MED_MEDICAID	Medicaid/HSN Indicator	0=No 1=Yes	Num
MED_MEDICARE_AMOUN T	claim	Blank = Medicare did not pay towards this claim 0=Medicare paid 0 Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
MED_MONTH	CHIA Incurred Date (Year and Month only)	Months, 1-12	Num
MED_NDC	Drug Code	11-digit format (5-4-2) without hyphenation Report the NDC code used only when a medication is paid for as part of a medical claim or when a DME device has an NDC code. Rarely populated	Char
MED_NOT_COVERED_A MOUNT	Amount of claim line charge not covered	0= all charges are covered or fall into other categories. Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
MED_ORGID	CHIA defined and maintained unique carrier identifier	3-5 digit Numeric	Char
MED_PAID	Paid Amount	0=services rendered in conjunction with other services on the claim. Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually	Num

Variable Name	Variable Description	Meta Data	Format
		allowable benefit or that the carrier had made a duplicate payment.	
MED_PAY_TYPE	Payment Arrangement Type	1=Capitation 2=FFS 3=Percent of charges 4=DRG 5=P4P 6=Global payment 7=Other 8=Bundled payment 9=Payment amount per episode (MassHealth) 10=Enhanced Ambulatory Patient Grouping (EAPG, MassHealth) (blank) = missing	Num
MED_POA1	Present on Admission code (POA) -1	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with	Char
MED_POA10	Present on Admission code (POA) -10	unknown translation)*** Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission,	Char
MED_POA11	Present on Admission code (POA) -11	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission,	Char

Variable Name	Variable Description	Meta Data	Format
		1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_POA12	Present on Admission code (POA) -12	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is	Char
		submitted by the insurance carrier (with unknown translation)*** Y = present at time of admission	Char
MED_POA13	Present on Admission code (POA) -13	N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_POA14	Present on Admission code (POA) -14	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	Char
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	

Variable Name	Variable Description	Meta Data	Format
MED_POA15	Present on Admission code (POA) -15	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char
MED_POA16	Present on Admission code (POA) -16	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with	Char
MED_POA17	Present on Admission code (POA) -17	unknown translation)*** Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char
MED_POA18	Present on Admission code (POA) -18	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	Char

Variable Name	Variable Description	Meta Data	Format
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_POA19	Present on Admission code (POA) -19	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	Char
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_POA2	Present on Admission code (POA) -2	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with	Char
MED_POA20	Present on Admission code (POA) -20	<ul> <li>unknown translation)***</li> <li>Y = present at time of admission</li> <li>N = not present at time of admission</li> <li>U = documentation insufficient to</li> <li>determine if present at time of admission</li> <li>W = Unable to clinically determine if</li> <li>present at time of admission,</li> <li>1 = Unreported/Not used. Exempt from</li> <li>POA reporting. This code is equivalent to</li> <li>a blank in UB04</li> <li>***For any other value not contained in</li> <li>the list above – those values are as is</li> <li>submitted by the insurance carrier (with</li> </ul>	Char
MED_POA21	Present on Admission code (POA) -21	unknown translation)*** Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission	Char

Variable Name	Variable Description	Meta Data	Format
		W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_POA22	Present on Admission code (POA) -22	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	Char
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_POA23	Present on Admission code (POA) -23	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	Char
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_POA24	Present on Admission code (POA) -24	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	Char
		***For any other value not contained in the list above – those values are as is	

Variable Name	Variable Description	Meta Data	Format
		submitted by the insurance carrier (with unknown translation)***	
MED_POA25	Present on Admission code (POA) -25	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	Char
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_POA3	Present on Admission code (POA) -3	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with	Char
MED_POA4	Present on Admission code (POA) -4	unknown translation)*** Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with	Char
MED_POA5	Present on Admission code (POA) -5	unknown translation)*** Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission,	Char

Variable Name	Variable Description	Meta Data	Format
		1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04	
		***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
MED_POA6	Present on Admission code (POA) -6	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with	Char
MED_POA7	Present on Admission code (POA) -7	unknown translation)*** Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with	Char
MED_POA8	Present on Admission code (POA) -8	unknown translation)*** Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char

Variable Name	Variable Description	Meta Data	Format
MED_POA9	Present on Admission code (POA) -9	Y = present at time of admission N = not present at time of admission U = documentation insufficient to determine if present at time of admission W = Unable to clinically determine if present at time of admission, 1 = Unreported/Not used. Exempt from POA reporting. This code is equivalent to a blank in UB04 ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char
MED_PREPAID	Prepaid Amount	0 =services rendered in conjunction with other services on the claim. Covers capitated claims only Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
MED_PROC_CODE	Procedure code	CPTs & HCPCS	Char
MED_PROC_MOD1	Procedure Modifier-1	HCPCS / CPT Code Modifier	Char
MED_PROC_MOD2	Procedure Modifier-2	HCPCS / CPT Code Modifier	Char
MED_PROC_MOD3	Procedure Modifier - 3	HCPCS / CPT Code Modifier	Char
MED_PROC_MOD4	Procedure Modifier - 4	HCPCS / CPT Code Modifier	Char
MED_PRODUCT_LINKID	Linkage variable for medical claims to product (in APCD product file, PROD_PRODUCT_LINKID)	Links medical claims at the claims row level	Char
MED_PROV_CITY	Service Provider City Name	<ul> <li>1-351 for valid MA city/towns</li> <li>999=Out of state or unknown</li> <li>*Please note, there is a risk of</li> <li>misclassification as APCD covers the</li> <li>entire US. Cities without a corresponding</li> <li>state or zip code will be grouped as MA</li> <li>cities but actually are located outside of</li> </ul>	Num

Variable Name	Variable Description	Meta Data	Format
		MA (in the cases of cities with the same name – ex. Palmer, MA vs Palmer, AK)	
MED_PROV_ZIP	Service Provider Zip Code	5-digit zip code	Char
MED_RELATION	Individual Relationship Code	01=Spouse 04=Grandfather or grandmother 05=Grandson or granddaughter 07=Nephew or niece 10=Foster child 15=Ward 17=Stepson or stepdaughter 19=Child 20=Self/employee 21=Unknown 22=Handicapped dependent 23=Sponsored dependent 24=Dependent of a minor dependent 29=Significant other 32=Mother 33=Father 36=Emancipated minor 39=Organ donor 40=Cadaver donor 41=Injured plaintiff 43=Child where insured has no financial responsibility 53=Life partner 76=Dependent ***For any other value not contained in the list above– those values are as is submitted by the insurance carrier (with unknown translation)***	Char
MED_RENDERINGPROVI DER_LINKID	Linkage variable for medical claims to rendering provider (in APCD provider file, PROV_PROVIDER_LINKI D)	Links medical claims at the claims row level	Char
MED_RENDERINGPROVI DER_NPI	National Service Provider		Char
MED_REVENUE_CODE	Revenue code	Code using leading zeroes, left-justified, and four digits.	Char
MED_SERVICEPROVIDE R_LINKID	Linkage variable for medical claims to service provider (in APCD provider file, PROV_PROVIDER_LINKI D)	Links medical claims at the claims row level	Char

Variable Name	Variable Description	Meta Data	Format
MED_SERVICEPROVIDE	National Service Provider ID		Char
MED_SEX	Member Sex	1=Male 2=Female 9=Unknown	Num
MED_SITE	Site of Service - on MSF/CMS 1500 claims	See " <u>MED_SITE</u> " below ***For any other value not contained in the list below– those values are as is submitted by the insurance carrier (with unknown translation)***	Char
MED_TAXONOMY	Service Provider Specialty (Standard/Carrier-Specific)	See "MED TAXONOMY" below Taxonomy values are from the National Uniform Claim Committee's taxonomy code values; please see <u>https://www.cms.gov/Medicare/provide</u> <u>r-enrollment-and-</u> <u>certification/medicareprovidersupenroll/</u> <u>downloads/taxonomycrosswalk.pdf</u> for a crosswalk between taxonomy and CMS specialty codes)	Char
MED_TO_DATE	Date of Service - To	Date Proxy – count of days between service to date and randomly chosen date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
MED_TO_DATE_MONTH	Date of Service – To – MONTH	1-12	Num
MED_TO_DATE_YEAR	Date of Service – To - YEAR	YYYY	Num
MED_TOT_OutOfPOCKET	Total Amount Paid Out Of Pocket by Patient	Report the total amount patient / member is responsible to pay to the provider as part of their costs for services. Report 0 if there are no Out of Pocket expenses. Negative amounts could mean there was cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment.	Num
MED_VERSION	Version Number	Integer	Num
MED_YEAR	CHIA Incurred Date (Year and Month only)	Years, YYYY format	Num
RES_ZIP_APCD_MED	Member ZIP Code (first 5 digits)	5-digit zip code	Char

N.4.		
	d site	
01	Pharmacy	
02	Telehealth	
03	School	
04	Homeless Shelter	
05	Indian Health Service (Free-standing or Provider-based Facility)	
06	Tribal 638 (Free-Standing or Provider-Base Facilit)y	
07	Prison/Correctional Facility	
08	Office	
09	Home	
11	Assisted Living Facility	
12	Group Home	
13	Mobile Unit	
14	Temporary Lodging	
15	Walk-in Retail Health Clinic	
16	Place of Employment/Worksite	
17	Outpatient Hospital (On or Off Campus)	
18	Urgent Care Facility	
19	Inpatient Hospital	
20	Emergency Room-Hospital	
21	Ambulatory Surgical Center	
22	Birthing Center	
23	Military Treatment Facility	
24	Skilled Nursing Facility	
25	Nursing Facility	
26	Custodial Care Facility	
31	Hospice	
32	Ambulance (Land, Air, or Water)	
33	Independent Clinic	
34	Federally Qualified Health Center	
41	Inpatient Psychiatric Facility	
42	Psychiatric Facility-Partial Hospitalization	
49	Community Mental Health Center	
50	Intermediate Care Facility/Individuals with Intellectual Disabilities	
51	Residential Substance Abuse Treatment Facility	
52	Psychiatric Residential Treatment Center	
53	Non-residential Substance Abuse Treatment Facility	
54	Mass Immunization Center	
55	Comprehensive Inpatient Rehabilitation Facility	
56	Comprehensive Outpatient Rehabilitation Facility	
57	End-Stage Renal Disease Treatment Facility	
60	State or Local Public Health Clinic	
61	Rural Health Clinic	
62	Independent Laboratory	
88	Other Place of Service	

MED_TAXONOMY	Code
Multi-Specialty	193200000X
Single Specialty	193400000X
Allergy & Immunology	207K00000X
Allergy	207KA0200X
Clinical & Laboratory Immunology	207KI0005X
Anesthesiology	207L00000X
Addiction Medicine	207LA0401X
Critical Care Medicine	207LC0200X
Hospice and Palliative Medicine	207LH0002X
Pain Medicine	207LP2900X
Pediatric Anesthesiology	207LP3000X
Clinical Pharmacology	208U00000X
Colon & Rectal Surgery	208C00000X
Dermatology	207N00000X
Clinical & Laboratory Dermatological Immunology	207NI0002X
Dermatopathology	207ND0900X
MOHS-Micrographic Surgery	207ND0101X
Pediatric Dermatology	207NP0225X
Procedural Dermatology	207NS0135X
Electrodiagnostic Medicine	204R00000X
Emergency Medicine	207P00000X
Emergency Medical Services	207PE0004X
Hospice and Palliative Medicine	207PH0002X
Medical Toxicology	207PT0002X
Pediatric Emergency Medicine	207PP0204X
Sports Medicine	207PS0010X
Undersea and Hyperbaric Medicine	207PE0005X
Family Medicine	207Q00000X
Addiction Medicine	207QA0401X
Adolescent Medicine	207QA0000X
Adult Medicine	207QA0505X
Geriatric Medicine	207QG0300X
Hospice and Palliative Medicine	207QH0002X
Obesity Medicine	207QB0002X
Sleep Medicine	207QS1201X
Sports Medicine	207QS0010X
General Practice	208D00000X
Hospitalist	208M00000X
Independent Medical Examiner	202C00000X
Internal Medicine	207R00000X
Addiction Medicine	207RA0401X
Adolescent Medicine	207RA0000X
Adult Congenital Heart Disease	207RA0002X
Advanced Heart Failure and Transplant Cardiology	207RA0001X
Allergy & Immunology	207RA0201X
Cardiovascular Disease	207RC0000X
Clinical & Laboratory Immunology	207RI0001X
Clinical Cardiac Electrophysiology	207RC0001X

MED_TAXONOMY	Code
Critical Care Medicine	207RC0200X
Endocrinology, Diabetes & Metabolism	207RE0101X
Gastroenterology	207RG0100X
Geriatric Medicine	207RG0300X
Hematology	207RH0000X
Hematology & Oncology	207RH0003X
Hepatology	207RI0008X
Hospice and Palliative Medicine	207RH0002X
Hypertension Specialist	207RH0005X
Infectious Disease	207RI0200X
Interventional Cardiology	207RI0011X
Magnetic Resonance Imaging (MRI)	207RM1200X
Medical Oncology	207RX0202X
Nephrology	207RN0300X
Obesity Medicine	207RB0002X
Pulmonary Disease	207RP1001X
Rheumatology	207RR0500X
Sleep Medicine	207RS0012X
Sports Medicine	207RS0010X
Transplant Hepatology	207RT0003X
Legal Medicine	209800000X
Clinical Biochemical Genetics	207SG0202X
Clinical Cytogenetics	207SC0300X
Clinical Genetics (M.D.)	207SG0201X
Clinical Molecular Genetics	207SG0203X
Molecular Genetic Pathology	207SM0001X
Ph.D. Medical Genetics	207SG0205X
Neurological Surgery	207T00000X
Neuromusculoskeletal Medicine & OMM	204D00000X
Neuromusculoskeletal Medicine, Sports Medicine	204C00000X
Nuclear Medicine	207U00000X
In Vivo & In Vitro Nuclear Medicine	207UN0903X
Nuclear Cardiology	207UN0901X
Nuclear Imaging & Therapy	207UN0902X
Obstetrics & Gynecology	207V00000X
Critical Care Medicine	207VC0200X
Female Pelvic Medicine and Reconstructive Surgery	207VF0040X
Gynecologic Oncology	207VX0201X
Gynecology	207VG0400X
Hospice and Palliative Medicine	207VH0002X
Maternal & Fetal Medicine	207VM0101X
Obesity Medicine	207VB0002X
Obstetrics	207VX0000X
Reproductive Endocrinology	207VE0102X
Ophthalmology	207W00000X
Cornea and External Diseases Specialist	207WX00000X 207WX0120X
Glaucoma Specialist	207WX0120X 207WX0009X
Neuro-ophthalmology	207WX0009X 207WX0109X

MED_TAXONOMY	Code
Ophthalmic Plastic and Reconstructive Surgery	207WX0200X
Pediatric Ophthalmology and Strabismus Specialist	207WX0110X
Retina Specialist	207WX0107X
Uveitis and Ocular Inflammatory Disease	207WX0108X
Oral & Maxillofacial Surgery	204E00000X
Orthopaedic Surgery	207X00000X
Adult Reconstructive Orthopaedic Surgery	207XS0114X
Foot and Ankle Surgery	207XX0004X
Hand Surgery	207XS0106X
Orthopaedic Surgery of the Spine	207XS0117X
Orthopaedic Trauma	207XX0801X
Pediatric Orthopaedic Surgery	207XP3100X
Sports Medicine	207XX0005X
Otolaryngology	207Y00000X
Facial Plastic Surgery	207YS0123X
Otolaryngic Allergy	207YX0602X
Otolaryngology/Facial Plastic Surgery	207YX0905X
Otology & Neurotology	207YX0901X
Pediatric Otolaryngology	207YP0228X
Plastic Surgery within the Head & Neck	207YX0007X
Sleep Medicine	207YS0012X
Interventional Pain Medicine	208VP0014X
Pain Medicine	208VP0000X
Anatomic Pathology	207ZP0101X
Anatomic Pathology & Clinical Pathology	207ZP0102X
Blood Banking & Transfusion Medicine	207ZB0001X
Chemical Pathology	207ZP0104X
Clinical Informatics	207ZC0008X
Clinical Pathology	207ZC0006X
Clinical Pathology/Laboratory Medicine	207ZP0105X
Cytopathology	207ZC0500X
Dermatopathology	207ZD0900X
Forensic Pathology	207ZF0201X
Hematology	207ZH0000X
Immunopathology	207ZI0100X
Medical Microbiology	207ZM0300X
Molecular Genetic Pathology	207ZP0007X
Neuropathology	207ZN0500X
Pediatric Pathology	207ZP0213X
Pediatrics	20800000X
Adolescent Medicine	2080A0000X
Child Abuse Pediatrics	2080C0008X
Clinical & Laboratory Immunology	2080I0007X
Developmental- Behavioral Pediatrics	2080P0006X
Hospice and Palliative Medicine	2080H0002X
Medical Toxicology	2080T0002X
Neonatal-Perinatal Medicine	2080N0001X
Neurodevelopmental Disabilities	2080P0008X

MED_TAXONOMY	Code
Obesity Medicine	2080B0002X
Pediatric Allergy/Immunology	2080P0201X
Pediatric Cardiology	2080P0202X
Pediatric Critical Care Medicine	2080P0203X
Pediatric Emergency Medicine	2080P0204X
Pediatric Endocrinology	2080P0205X
Pediatric Gastroenterology	2080P0206X
Pediatric Hematology-Oncology	2080P0207X
Pediatric Infectious Diseases	2080P0208X
Pediatric Nephrology	2080P0210X
Pediatric Pulmonology	2080P0214X
Pediatric Rheumatology	2080P0216X
Pediatric Transplant Hepatology	2080T0004X
Sleep Medicine	2080S0012X
Sports Medicine	2080S0010X
Phlebology	202K00000X
Physical Medicine & Rehabilitation	208100000X
Brain Injury Medicine	2081P0301X
Hospice and Palliative Medicine	2081H0002X
Neuromuscular Medicine	2081N0008X
Pain Medicine	2081P2900X
Pediatric Rehabilitation Medicine	2081P0010X
Spinal Cord Injury Medicine	2081P0004X
Sports Medicine	2081S0010X
Plastic Surgery	208200000X
Plastic Surgery Within the Head and Neck	2082S0099X
Surgery of the Hand	2082S0105X
Addiction Medicine	2083A0300X
Aerospace Medicine	2083A0100X
Clinical Informatics	2083C0008X
Medical Toxicology	2083T0002X
Obesity Medicine	2083B0002X
Occupational Medicine	2083X0100X
Preventive Medicine/Occupational Environmental Medicine	2083P0500X
Public Health & General Preventive Medicine	2083P0901X
Sports Medicine	2083S0010X
Undersea and Hyperbaric Medicine	2083P0011X
Addiction Medicine	2084A0401X
Addiction Psychiatry	2084P0802X
Behavioral Neurology & Neuropsychiatry	2084B0040X
Brain Injury Medicine	2084P0301X
Child & Adolescent Psychiatry	2084P0804X
Clinical Neurophysiology	2084N0600X
Diagnostic Neuroimaging	2084D0003X
Forensic Psychiatry	2084F0202X
Geriatric Psychiatry	2084P0805X
Hospice and Palliative Medicine	2084H0002X
Neurocritical Care	2084A2900X

MED_TAXONOMY	Code
Neurodevelopmental Disabilities	2084P0005X
Neurology	2084N0400X
Neurology with Special Qualifications in Child Neurology	2084N0402X
Neuromuscular Medicine	2084N0008X
Obesity Medicine	2084B0002X
Pain Medicine	2084P2900X
Psychiatry	2084P0800X
Psychosomatic Medicine	2084P0015X
Sleep Medicine	2084S0012X
Sports Medicine	2084S0010X
Vascular Neurology	2084V0102X
Body Imaging	2085B0100X
Diagnostic Neuroimaging	2085D0003X
Diagnostic Radiology	2085R0202X
Diagnostic Ultrasound	2085U0001X
Hospice and Palliative Medicine	2085H0002X
Neuroradiology	2085N0700X
Nuclear Radiology	2085N0904X
Pediatric Radiology	2085P0229X
Radiation Oncology	2085R0001X
Radiological Physics	2085R0205X
Therapeutic Radiology	2085R0203X
Vascular & Interventional Radiology	2085R0204X
Surgery	208600000X
Hospice and Palliative Medicine	2086H0002X
Pediatric Surgery	2086S0120X
Plastic and Reconstructive Surgery	2086S0122X
Surgery of the Hand	2086S0105X
Surgical Critical Care	2086S0102X
Surgical Oncology	2086X0206X
Trauma Surgery	2086S0127X
Vascular Surgery	2086S0129X
Thoracic Surgery (Cardiothoracic Vascular Surgery)	208G00000X
Transplant Surgery	204F00000X
Urology	208800000X
Female Pelvic Medicine and Reconstructive Surgery	2088F0040X
Pediatric Urology	2088P0231X
Assistant Behavior Analyst	106E00000X
Behavior Analyst	103K00000X
Behavior Technician	106S00000X
Clinical Neuropsychologist	103G00000X
Clinical	103GC0700X
Counselor	101Y00000X
Addiction (Substance Use Disorder)	101YA0400X
Mental Health	101YM0800X
Pastoral	101YP1600X
Professional	101YP2500X
School	1011YS0200X

MED_TAXONOMY	Code
Marriage & Family Therapist	106H00000X
Poetry Therapist	102X00000X
Psychoanalyst	102L00000X
Psychologist	103T00000X
Addiction (Substance Use Disorder)	103TA0400X
Adult Development & Aging	103TA0700X
Clinical	103TC0700X
Clinical Child & Adolescent	103TC2200X
Cognitive & Behavioral	103TB0200X
Counseling	103TC1900X
Educational	103TE1000X
Exercise & Sports	103TE1100X
Family	103TF0000X
Forensic	103TF0200X
Group Psychotherapy	103TP2701X
Health	103TH0004X
Health Service	103TH0100X
Men & Masculinity	103TM1700X
Mental Retardation & Developmental Disabilities	103TM1800X
Prescribing (Medical)	103TP0016X
Psychoanalysis	103TP0814X
Psychotherapy	103TP2700X
Rehabilitation	103TR0400X
School	103TS0200X
Women	103TW0100X
Social Worker	104100000X
Clinical	1041C0700X
School	1041S0200X
Chiropractor	111N00000X
Independent Medical Examiner	111NI0013X
Internist	111NI0900X
Neurology	111NN0400X
Nutrition	111NN1001X
Occupational Health	111NX0100X
Orthopedic	111NX0800X
Pediatric Chiropractor	111NP0017X
Radiology	111NR0200X
Rehabilitation	111NR0400X
Sports Physician	111NS0005X
Thermography	111NT0100X
Advanced Practice Dental Therapist	125K00000X
Dental Assistant	126800000X
Dental Hygienist	124Q00000X
Dental Laboratory Technician	126900000X
Dental Therapist	125J00000X
Dentist	122300000X
Dental Public Health	1223D0001X
Dental i ubile ricalti	1223000017

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MED_TAXONOMY	Code
Endodontics	1223E0200X
General Practice	1223G0001X
Oral and Maxillofacial Pathology	1223P0106X
Oral and Maxillofacial Radiology	1223X0008X
Oral and Maxillofacial Surgery	1223S0112X
Orofacial Pain	1223X2210X
Orthodontics and Dentofacial Orthopedics	1223X0400X
Pediatric Dentistry	1223P0221X
Periodontics	1223P0300X
Prosthodontics	1223P0700X
Denturist	122400000X
Oral Medicinist	125Q00000X
Dietary Manager	132700000X
Dietetic Technician, Registered	136A00000X
Dietitian, Registered	133V00000X
Nutrition, Gerontological	133VN1101X
Nutrition, Metabolic	133VN1006X
Nutrition, Obesity and Weight Management	133VN1201X
Nutrition, Oncology	133VN1301X
Nutrition, Pediatric	133VN1004X
Nutrition, Pediatric Critical Care	133VN1401X
Nutrition, Renal	133VN1005X
Nutrition, Sports Dietetics	133VN1501X
Nutritionist	133N00000X
Nutrition, Education	133NN1002X
Emergency Medical Technician, Basic	146N00000X
Emergency Medical Technician, Intermediate	146M00000X
Emergency Medical Technician, Paramedic	146L00000X
Personal Emergency Response Attendant	146D00000X
Optometrist	152W00000X
Corneal and Contact Management	152WC0802X
Low Vision Rehabilitation	152WL0500X
Occupational Vision	152WX0102X
Pediatrics	152WP0200X
Sports Vision	152WS0006X
Vision Therapy	152WV0400X
Technician/Technologist	156F00000X
Contact Lens	156FC0800X
Contact Lens Fitter	156FC0801X
Ocularist	156FX1700X
Ophthalmic	156FX1100X
Ophthalmic Assistant	156FX1101X
Optician	156FX1800X
Optometric Assistant	156FX1201X
Optometric Technician	156FX1202X
Orthoptist	156FX1202X
Licensed Practical Nurse	164W00000X
Licensed Psychiatric Technician	167G00000X

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164X00000X
163W00000X
163WA0400X
163WA2000X
163WP2201X
163WC3500X
163WC0400X
163WC1400X
163WC1500X
163WC2100X
163WC1600X
163WC0200X
163WD0400X
163WD1100X
163WE0003X
163WE0900X
163WF0300X
163WG0100X
163WG0000X
163WG0600X
163WH0500X
163WH0200X
163WH1000X
163WI0600X
163WI0500X
163WL0100X
163WM0102X
163WM0705X
163WN0002X
163WN0003X
163WN0300X
163WN0800X
163WM1400X
163WN1003X
163WX0002X
163WX0003X
163WX0106X
163WX0100X
163WX0200X
163WX1100X
163WX1500X
163WX1500X
163WP0000X
163WP0218X
163WP0210X
163WP1700X
163WS0121X
163WP0808X

MED_TAXONOMY	Code
Psychiatric/Mental Health, Adult	163WP0809X
Psychiatric/Mental Health, Child & Adolescent	163WP0807X
Registered Nurse First Assistant	163WR0006X
Rehabilitation	163WR0400X
Reproductive Endocrinology/Infertility	163WR1000X
School	163WS0200X
Urology	163WU0100X
Women's Health Care, Ambulatory	163WW0101X
Wound Care	163WW0000X
Adult Companion	372600000X
Chore Provider	372500000X
Day Training/Habilitation Specialist	373H00000X
Doula	374J00000X
Home Health Aide	374U00000X
Homemaker	376J00000X
Nurse's Aide	376K00000X
Nursing Home Administrator	376G00000X
Religious Nonmedical Nursing Personnel	374T00000X
Religious Nonmedical Practitioner	374K00000X
Technician	37470000X
Attendant Care Provider	3747A0650X
Personal Care Attendant	3747P1801X
Acupuncturist	171100000X
Case Manager/Care Coordinator	171M00000X
Clinical Ethicist	174V00000X
Community Health Worker	172V00000X
Contractor	171W00000X
Home Modifications	171WH0202X
Vehicle Modifications	171WV0202X
Driver	172A00000X
Funeral Director	176P00000X
Genetic Counselor, MS	170300000X
Health Educator	174H00000X
Homeopath	175L00000X
Interpreter	171R00000X
Lactation Consultant, Non-RN	174N00000X
Legal Medicine	17300000X
Mechanotherapist	172M00000X
Medical Genetics, Ph.D. Medical Genetics	17010000X
Midwife	176B00000X
Midwife, Lay	175M00000X
Military Health Care Provider	17100000X
Independent Duty Corpsman	1710I1002X
Independent Duty Medical Technicians	1710I1003X
Naprapath	172P00000X
Naturopath	175F00000X
Peer Specialist	175T00000X
Prevention Professional	405300000X

MED_TAXONOMY	Code
Reflexologist	173C00000X
Sleep Specialist, PhD	173F00000X
Specialist	174400000X
Graphics Designer	1744G0900X
Prosthetics Case Management	1744P3200X
Research Data Abstracter/Coder	1744R1103X
Research Study	1744R1102X
Veterinarian	174M00000X
Medical Research	174MM1900X
Pharmacist	183500000X
Ambulatory Care	1835P2201X
Critical Care	1835C0205X
General Practice	1835G0000X
Geriatric	1835G0303X
Nuclear	1835N0905X
Nutrition Support	1835N1003X
Oncology	1835X0200X
Pediatrics	1835P0200X
Pharmacist Clinician (PhC)/ Clinical Pharmacy Specialist	1835P0018X
Pharmacotherapy	1835P1200X
Psychiatric	1835P1300X
Pharmacy Technician	183700000X
Advanced Practice Midwife	367A00000X
Anesthesiologist Assistant	367H00000X
Clinical Nurse Specialist	364S00000X
Acute Care	364SA2100X
Adult Health	364SA2200X
Chronic Care	364SC2300X
Community Health/Public Health	364SC1501X
Critical Care Medicine	364SC0200X
Emergency	364SE0003X
Ethics	364SE1400X
Family Health	364SF0001X
Gerontology	364SG0600X
Holistic	364SH1100X
Home Health	364SH0200X
Informatics	364SI0800X
Long-Term Care	364SL0600X
Medical-Surgical	364SM0705X
Neonatal	364SN0000X
Neuroscience	364SN0800X
Occupational Health	364SX0106X
Oncology	364SX0200X
Oncology, Pediatrics	364SX0204X
Pediatrics	364SP0200X
Perinatal	364SP1700X
Perioperative	364SP2800X
Psychiatric/Mental Health	364SP0808X

MED_TAXONOMY	Code
Psychiatric/Mental Health, Adult	364SP0809X
Psychiatric/Mental Health, Child & Adolescent	364SP0807X
Psychiatric/Mental Health, Child & Family	364SP0810X
Psychiatric/Mental Health, Chronically III	364SP0811X
Psychiatric/Mental Health, Community	364SP0812X
Psychiatric/Mental Health, Geropsychiatric	364SP0813X
Rehabilitation	364SR0400X
School	364SS0200X
Transplantation	364ST0500X
Women's Health	364SW0102X
Nurse Anesthetist, Certified Registered	36750000X
Nurse Practitioner	363L00000X
Acute Care	363LA2100X
Adult Health	363LA2200X
Community Health	363LC1500X
Critical Care Medicine	363LC0200X
Family	363LF0000X
Gerontology	363LG0600X
Neonatal	363LN0000X
Neonatal, Critical Care	363LN0005X
Obstetrics & Gynecology	363LX0001X
Occupational Health	363LX0106X
Pediatrics	363LP0200X
Pediatrics, Critical Care	363LP0222X
Perinatal	363LP1700X
Primary Care	363LP2300X
Psychiatric/Mental Health	363LP0808X
School	363LS0200X
Women's Health	363LW0102X
Physician Assistant	363A00000X
Medical	363AM0700X
Surgical	363AS0400X
Assistant, Podiatric	211D00000X
Podiatrist	213E00000X
	213E00000X 213ES0103X
Foot & Ankle Surgery	213ES0105X 213ES0131X
Foot Surgery	
General Practice	213EG0000X
Primary Podiatric Medicine	213EP1101X
Public Medicine Radiology	213EP0504X
Radiology	213ER0200X
Sports Medicine	213ES0000X
Anaplastologist	229N00000X
Art Therapist	221700000X
Clinical Exercise Physiologist	224Y00000X
Dance Therapist	225600000X
Developmental Therapist	222Q00000X
Kinesiotherapist	226300000X
Massage Therapist	225700000X

MED_TAXONOMY	Code
Mastectomy Fitter	224900000X
Music Therapist	225A00000X
Occupational Therapist	225X00000X
Driving and Community Mobility	225XR0403X
Environmental Modification	225XE0001X
Ergonomics	225XE1200X
Feeding, Eating & Swallowing	225XF0002X
Gerontology	225XG0600X
Hand	225XH1200X
Human Factors	225XH1300X
Low Vision	225XL0004X
Mental Health	225XM0800X
Neurorehabilitation	225XN1300X
Pediatrics	225XP0200X
Physical Rehabilitation	225XP0019X
Occupational Therapy Assistant	224Z00000X
Driving and Community Mobility	224ZR0403X
Environmental Modification	224ZE0001X
Feeding, Eating & Swallowing	224ZF0002X
Low Vision	224ZL0004X
Orthotic Fitter	22500000X
Orthotist	222Z00000X
Pedorthist	224L00000X
Physical Therapist	225100000X
Cardiopulmonary	2251C2600X
Electrophysiology, Clinical	2251E1300X
Ergonomics	2251E1200X
Geriatrics	2251G0304X
Hand	2251H1200X
Human Factors	2251H1300X
Neurology	2251N0400X
Orthopedic	2251X0800X
Pediatrics	2251P0200X
Sports	2251S0007X
Physical Therapy Assistant	225200000X
Prosthetist	224P00000X
Pulmonary Function Technologist	225B00000X
Recreation Therapist	225800000X
Recreational Therapist Assistant	22600000X
Rehabilitation Counselor	225C00000X
Assistive Technology Practitioner	225CA2400X
Assistive Technology Supplier	225CA2500X
Orientation and Mobility Training Provider	225CX2500X
Rehabilitation Practitioner	22540000X
Respiratory Therapist, Certified	22780000X
Critical Care	22780000X 2278C0205X
Educational	2278E1000X
	2278E1000X 2278E0002X
Emergency Care	2276EUUU2X

MED_TAXONOMY	Code
General Care	2278G1100X
Geriatric Care	2278G0305X
Home Health	2278H0200X
Neonatal/Pediatrics	2278P3900X
Palliative/Hospice	2278P3800X
Patient Transport	2278P4000X
Pulmonary Diagnostics	2278P1004X
Pulmonary Function Technologist	2278P1006X
Pulmonary Rehabilitation	2278P1005X
SNF/Subacute Care	2278S1500X
Respiratory Therapist, Registered	227900000X
Critical Care	2279C0205X
Educational	2279E1000X
Emergency Care	2279E0002X
General Care	2279G1100X
Geriatric Care	2279G0305X
Home Health	2279H0200X
Neonatal/Pediatrics	2279P3900X
Palliative/Hospice	2279P3800X
Patient Transport	2279P4000X
Pulmonary Diagnostics	2279P1004X
Pulmonary Function Technologist	2279P1006X
Pulmonary Rehabilitation	2279P1005X
SNF/Subacute Care	2279S1500X
Specialist/Technologist	225500000X
Athletic Trainer	2255A2300X
Rehabilitation, Blind	2255R0406X
Audiologist	231H00000X
Assistive Technology Practitioner	231HA2400X
Assistive Technology Supplier	231HA2500X
Audiologist-Hearing Aid Fitter	237600000X
Hearing Instrument Specialist	237700000X
Specialist/Technologist	235500000X
Audiology Assistant	2355A2700X
Speech-Language Assistant	2355S0801X
Speech-Language Pathologist	235Z00000X
Student in an Organized Health Care Education/Training Program	390200000X
Perfusionist	242T00000X
Radiologic Technologist	247100000X
Bone Densitometry	2471B0102X
Cardiac-Interventional Technology	2471C1106X
Cardiovascular-Interventional Technology	2471C1101X
Computed Tomography	2471C3401X
Magnetic Resonance Imaging	2471M1202X
Mammography	2471M2300X
Nuclear Medicine Technology	2471N0900X
Quality Management	2471Q0001X
Radiation Therapy	2471R0002X

MED_TAXONOMY	Code
Radiography	2471C3402X
Sonography	2471S1302X
Vascular Sonography	2471V0105X
Vascular-Interventional Technology	2471V0106X
Radiology Practitioner Assistant	243U00000X
Specialist/Technologist Cardiovascular	246X00000X
Cardiovascular Invasive Specialist	246XC2901X
Sonography	246XS1301X
Vascular Specialist	246XC2903X
Specialist/Technologist, Health Information	246Y00000X
Coding Specialist, Hospital Based	246YC3301X
Coding Specialist, Physician Office Based	246YC3302X
Registered Record Administrator	246YR1600X
Specialist/Technologist, Other	246Z00000X
Art, Medical	246ZA2600X
Biochemist	246ZB0500X
Biomedical Engineering	246ZB0301X
Biomedical Photographer	246ZB0302X
Biostatistician	246ZB0600X
EEG	246ZE0500X
Electroneurodiagnostic	246ZE0600X
Geneticist, Medical (PhD)	246ZG1000X
Graphics Methods	246ZG0701X
Illustration, Medical	246ZI1000X
Nephrology	246ZN0300X
Orthopedic Assistant	246ZX2200X
Surgical Assistant	246ZC0007X
Surgical Technologist	246ZS0410X
Specialist/Technologist, Pathology	246Q00000X
Blood Banking	246QB0000X
Chemistry	246QC1000X
Cytotechnology	246QC2700X
Hemapheresis Practitioner	246QH0401X
Hematology	246QH0000X
Histology	246QH0600X
Immunology	246QI0000X
Laboratory Management	246QL0900X
Laboratory Management, Diplomate	246QL0901X
Medical Technologist	246QM0706X
Microbiology	246QM0900X
Technician, Cardiology	246W00000X
Technician, Health Information	24700000X
Assistant Record Technician	2470A2800X
Technician, Other	24720000X
Biomedical Engineering	2472B0301X
Darkroom	2472D0500X
EEG	2472E0500X
Renal Dialysis	2472R0900X

MED_TAXONOMY	Code
Veterinary	2472V0600X
Technician, Pathology	246R00000X
Histology	246RH0600X
Medical Laboratory	246RM2200X
Phlebotomy	246RP1900X
Local Education Agency (LEA)	251300000X
Case Management	251B00000X
Community/Behavioral Health	251S00000X
Day Training, Developmentally Disabled Services	251C00000X
Early Intervention Provider Agency	252Y00000X
Foster Care Agency	253J00000X
Home Health	251E00000X
Home Infusion	251F00000X
Hospice Care, Community Based	251G00000X
In Home Supportive Care	253Z00000X
Nursing Care	251J00000X
Program of All-Inclusive Care for the Elderly (PACE) Provider Organization	251T00000X
Public Health or Welfare	251K00000X
Supports Brokerage	251X00000X
Voluntary or Charitable	251V00000X
Clinic/Center	261Q00000X
Adolescent and Children Mental Health	261QM0855X
Adult Day Care	261QA0600X
Adult Mental Health	261QM0850X
Ambulatory Family Planning Facility	261QA0005X
Ambulatory Fertility Facility	261QA0006X
Ambulatory Surgical	261QA1903X
Amputee	261QA0900X
Augmentative Communication	261QA3000X
Birthing	261QB0400X
Community Health	261QC1500X
Corporate Health	261QC1800X
Critical Access Hospital	261QC0050X
Dental	261QD0000X
Developmental Disabilities	261QD1600X
Emergency Care	261QE0002X
Endoscopy	261QE0800X
End-Stage Renal Disease (ESRD) Treatment	261QE0700X
Family Planning, Non-Surgical	261QF0050X
Federally Qualified Health Center (FQHC)	261QF0400X
Genetics	261QG0250X
Health Service	261QH0100X
Hearing and Speech	261QH0700X
Infusion Therapy	261QI0500X
Lithotripsy	261QL0400X
Magnetic Resonance Imaging (MRI)	261QM1200X
Medical Specialty	261QM2500X
Medically Fragile Infants and Children Day Care	261QM3000X

MED_TAXONOMY	Code
Mental Health (Including Community Mental Health Center)	261QM0801X
Methadone	261QM2800X
Migrant Health	261QM1000X
Military Ambulatory Procedure Visits Operational (Transportable)	261QM1103X
Military and U.S. Coast Guard Ambulatory Procedure	261QM1101X
Military Outpatient Operational (Transportable) Component	261QM1102X
Military/U.S. Coast Guard Outpatient	261QM1100X
Multi-Specialty	261QM1300X
Occupational Medicine	261QX0100X
Oncology	261QX0200X
Oncology, Radiation	261QX0203X
Ophthalmologic Surgery	261QS0132X
Oral and Maxillofacial Surgery	261QS0112X
Pain	261QP3300X
Physical Therapy	261QP2000X
Podiatric	261QP1100X
Primary Care	261QP2300X
Prison Health	261QP2400X
Public Health, Federal	261QP0904X
Public Health, State or Local	261QP0905X
Radiology	261QP0903X
Radiology Mammography	261QR0206X
Radiology, Mobile	261QR0208X
Radiology, Mobile Mammography Recovery Care	261QR0207X
	261QR0800X
Rehabilitation	261QR0400X
Rehabilitation, Cardiac Facilities	261QR0404X
Rehabilitation, Comprehensive Outpatient Rehabilitation Facility (CORF)	261QR0401X
Rehabilitation, Substance Use Disorder	261QR0405X
Research	261QR1100X
Rural Health	261QR1300X
Sleep Disorder Diagnostic	261QS1200X
Student Health	261QS1000X
Urgent Care	261QU0200X
VA	261QV0200X
Epilepsy Unit	273100000X
Medicare Defined Swing Bed Unit	275N00000X
Psychiatric Unit	273R00000X
Rehabilitation Unit	273Y00000X
Rehabilitation, Substance Use Disorder Unit	276400000X
Christian Science Sanitorium	287300000X
Chronic Disease Hospital	281P00000X
Children	281PC2000X
General Acute Care Hospital	282N00000X
Children	282NC2000X
Critical Access	282NC0060X
Rural	282NR1301X
Women	282NW0100X

MED_TAXONOMY	Code
Long Term Care Hospital	282E00000X
Military Hospital	286500000X
Community Health	2865C1500X
Military General Acute Care Hospital	2865M2000X
Military General Acute Care Hospital. Operational (Transportable)	2865X1600X
Psychiatric Hospital	283Q00000X
Rehabilitation Hospital	283X00000X
Children	283XC2000X
Religious Nonmedical Health Care Institution	282J00000X
Special Hospital	284300000X
Clinical Medical Laboratory	291U00000X
Dental Laboratory	292200000X
Military Clinical Medical Laboratory	29190000X
Physiological Laboratory	293D00000X
Exclusive Provider Organization	302F00000X
Health Maintenance Organization	302R00000X
Point of Service	305S00000X
Preferred Provider Organization	305R00000X
Alzheimer Center (Dementia Center)	311500000X
Assisted Living Facility	310400000X
Assisted Living, Behavioral Disturbances	3104A0630X
Assisted Living, Mental Illness	3104A0625X
Christian Science Facility	317400000X
Custodial Care Facility	311Z00000X
Adult Care Home	311ZA0620X
Hospice, Inpatient	315D00000X
Intermediate Care Facility, Mental Illness	310500000X
Intermediate Care Facility, Mentally Retarded	315P00000X
Nursing Facility/Intermediate Care Facility	313M00000X
Skilled Nursing Facility	314000000X
Nursing Care, Pediatric	314000000X
Lodging	177F00000X
Meals	174200000X
Community Based Residential Treatment Facility, Mental Illness	320800000X
Community Based Residential Treatment Facility, Mental Inness	320900000X
and/or Developmental Disabilities	320900000
Psychiatric Residential Treatment Facility	323P00000X
Residential Treatment Facility, Emotionally Disturbed Children	322D00000X
Residential Treatment Facility, Mental Retardation and/or Developmental	320600000X
Disabilities	32000000X
Residential Treatment Facility, Physical Disabilities	320700000X
Substance Abuse Rehabilitation Facility	324500000X
Substance Abuse Treatment, Children	3245S0500X
Respite Care	385H00000X
Respite Care Camp	385HR2050X
Respite Care, Mental Illness, Child	385HR2055X
Respite Care, Mental Retardation and/or Developmental Disabilities	385HR2060X
	385HR2065X

MED_TAXONOMY	Code
Blood Bank	331L00000X
Department of Veterans Affairs (VA) Pharmacy	332100000X
Durable Medical Equipment & Medical Supplies	332B00000X
Customized Equipment	332BC3200X
Dialysis Equipment & Supplies	332BD1200X
Nursing Facility Supplies	332BN1400X
Oxygen Equipment & Supplies	332BX2000X
Parenteral & Enteral Nutrition	332BP3500X
Emergency Response System Companies	333300000X
Eye Bank	332G00000X
Eyewear Supplier	332H00000X
Hearing Aid Equipment	332S00000X
Home Delivered Meals	332U00000X
Indian Health Service/Tribal/Urban Indian Health (I/T/U) Pharmacy	332800000X
Medical Foods Supplier	335G00000X
Military/U.S. Coast Guard Pharmacy	33200000X
Non-Pharmacy Dispensing Site	332900000X
Organ Procurement Organization	335U00000X
Pharmacy	333600000X
Clinic Pharmacy	3336C0002X
Community/Retail Pharmacy	3336C0003X
Compounding Pharmacy	3336C0004X
Home Infusion Therapy Pharmacy	3336H0001X
Institutional Pharmacy	3336I0012X
Long Term Care Pharmacy	3336L0003X
Mail Order Pharmacy	3336M0002X
Managed Care Organization Pharmacy	3336M0003X
Nuclear Pharmacy	3336N0007X
Specialty Pharmacy	3336S0011X
Portable X-ray and/or Other Portable Diagnostic Imaging Supplier	335V00000X
Prosthetic/Orthotic Supplier	335E00000X
Air Carrier	344800000X
Ambulance	341600000X
Air Transport	3416A0800X
Land Transport	3416L0300X
Water Transport	3416S0300X
Bus	347B00000X
Military/U.S. Coast Guard Transport	341800000X
Military or U.S. Coast Guard Ambulance, Air Transport	3418M1120X
Military or U.S. Coast Guard Ambulance, Ground Transport	3418M1110X
Military or U.S. Coast Guard Ambulance, Water Transport	3418M1130X
Non-emergency Medical Transport (VAN)	343900000X
Private Vehicle	347C00000X
Secured Medical Transport (VAN)	343800000X
Taxi	344600000X
Train	347D00000X
Transportation Broker	347E00000X

#### APCD – Member Eligibility Analytic File Data Dictionary (PHDAPCD.ME14\_18)

#### All Payer's Claims Data - Member Eligibility (PHDAPCD.ME14\_18)

\*\*\*For details on how to link PHDAPCD.ME with other PHD APCD datasets, please see Appendix 1 in the PHD\_Key Facts for working with the data documentation. \*\*\*

Variable Name	Variable Description	Meta Data	Format
ID	N/A	9-character alphanumeric ID	Char
ME_MONTH	CHIA Incurred Date (Month only)	Months, 1-12	Num
ME_YEAR	CHIA Incurred Date (Year only)	Years, YYYY format	Num
ME_PRODUCT_LINKID	Linkage variable to connect member eligibility file to product file (PROD_PRODUCT_LINKID )	Links at the product level	Char
ME_ORGID	CHIA defined and maintained unique carrier identifier	3-5 digit numeric	Char
ME_PROD_STARTDATE	Product enrollment start date	Date Proxy – count of days between admission date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
ME_PROD_STARTDATE_M ONTH	Product enrollment start date - Month	ММ	Num
ME_PROD_STARTDATE_Y EAR	Product enrollment start date - Year	YYYY	Num
ME_PROD_ENDDATE	Product enrollment end date	Date Proxy – count of days between admission date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
ME_PROD_ENDDATE_MO NTH	Product enrollment end date - Month	ММ	Num
ME_PROD_ENDDATE_YEA R	Product enrollment end date - Year	ΥΥΥΥ	Num

# APCD – Member Eligibility Analytic File Data Dictionary (PHDAPCD.ME14\_18)

***For details on how to link PHDAPCD.ME with other PHD APCD datasets, please see Appendix 1 in the PHD_Key Facts for working with the data documentation. ***			
Variable Name	Variable Description	Meta Data	Format
ME_COVERAGE_BH	Behavioral Health Benefit Flag	1 =Yes 2 =No 4 =Other 8 =Not Applicable 9 =Unknown	Num
ME_CSUMID	Carrier Specific Unique Member ID	Integer	Char
ME_ENROLL_TYPE	Member enrollment type	<ul> <li>1= FIG - Fully-Insured Commercial Group Enrollee</li> <li>2= SIG - Self-Insured Group Enrollee</li> <li>3= GIC - Group Insurance Commission Enrollee</li> <li>4= MCO - MassHealth Managed Care Organization Enrollee</li> <li>5= Supplemental Policy Enrollee</li> <li>6 = ICO - Integrated Care Organization or SCO- Senior Care Option</li> <li>7 =ACO - Accountable Care Organization Enrollee (MassHealth only – unless approved by CHIA)</li> <li>9= Unknown / Not Applicable</li> </ul>	Num

#### All Payer's Claims Data – Pharmacy (PHDAPCD.PHARMACY14\_18)

\*\*\*For details on how to link PHDAPCD.PHARMACY with other PHD APCD datasets, please see Appendix 1 in the PHD\_Key Facts for working with the data documentation. \*\*\*

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
PHARM_AGE	Member Age At Service	Age in years, ages greater than 89 set to 999 (blank) = missing	Num
PHARM_CITY	Pharmacy Location City	1-351 for valid MA city/towns 999=Out of state or unknown *Please note, there is a risk of misclassification as APCD covers the entire US. Cities without a corresponding state or zip code will be grouped as MA cities but actually are located outside of MA (in the cases of cities with the same name – ex. Palmer, MA vs Palmer, AK)	Num
PHARM_CLAIM_STATUS	Status of claim line	0= This value is as is submitted by the insurance carrier (with unknown translation) 1=Processed as primary 2=Processed as secondary 3=Processed as tertiary 4=Denied 5=Processed as primary, forwarded to additional payers(s) 6=Processed as secondary, forwarded to additional payers(s) 7=Processed as tertiary, forwarded to additional payers(s) 8=Reversal of previous payment 9=Not our claim, forwarded to additional payer(s) 10=Predetermination pricing only - no payment 11=Missing	Num
PHARM_COMPOUND	Compound Drug Indicator	1 =Yes 2 =No 3 =Unknown 4 =Other 5 =Not Applicable	Num
PHARM_COVERAGE_BH	Behavioral Health Benefit Flag	1 =Yes 2 =No 4 =Other 8 =Not Applicable 9 =Unknown	Num

Variable Name	Variable Description	Meta Data	Format
PHARM_CSUMID	Carrier Specific Unique Member ID	Integer	Char
PHARM_ENROLL_TYPE	Member enrollment type	Enrollee 2= SIG - Self-Insured Group Enrollee 3= GIC - Group Insurance Commission Enrollee 4= MCO - MassHealth Managed Care Organization Enrollee 5= Supplemental Policy Enrollee 6 = ICO - Integrated Care Organization or SCO– Senior Care Option 7 =ACO – Accountable Care Organization Enrollee (MassHealth only – unless approved by CHIA) 9= Unknown / Not Applicable	Num
PHARM_FILL_DATE	Date Prescription Filled	Date Proxy – count of days between admission date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
PHARM_FILL_DATE_MONT H	Date Prescription Filled - Month	1-12	Num
PHARM_FILL_DATE_YEAR	Date Prescription Filled - Year	YYYY	Num
PHARM_FORMULARY	Formulary Code	1 =Yes 2 =No 3 =Unknown 4 =Other 5 =Not Applicable	Num
PHARM_GENERIC	Generic Drug Indicator	1 =Yes 2 =No 3 =Unknown 4 =Other 5 =Not Applicable	Num
PHARM_HIGHESTVERSIO N_PAID	Flags if this claim is the highest version and if it was paid	1= Highest Version Paid 0=Not Highest Version Paid 9=Versioning Not Applied	Num
PHARM_ICD	Diagnosis Code	ICD9/ICD10 code	Char

Variable Name	Variable Description	Meta Data	Format
PHARM_INSURANCE_TYP	Insurance Type Code/Product	09=Self pay 10=Central certification 11=Other non-federal programs 12=PPO 13=POS 14=EPO 15=Indemnity insurance 16=HMO Medicare risk 17=DMO AM=Automobile medical BL=Blue cross / Blue shield CC=Commonwealth Care CE=Commonwealth CH=Campus CI=Commercial Insurance Co. DS=Disability HM=HMO LI=Liability LM=Liability Medical MA=Medicare part A MB=Medicare part B MC=Medicaid OF=Other federal program TF=HSN trust fund TV=Title V VA=Veterans Administration Plan WC=Workers' Compensation ZZ=Other (blank) = missing ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char
PHARM_LINE	Line Counter	Integer	Num
PHARM_LINKORGIDPR	Linkage variable to connect pharmacy claim to APCD product file (PROV ORGID)	Links pharmacy claims at the Insurance Carrier Level	Char
PHARM_LINKORGIDPV	Linkage variable to connect pharmacy claim to APCD provider file (PROV_ORGID)	Links pharmacy claims at the Insurance Carrier Level	Char
PHARM_MAIL_ORDER	Mail Order pharmacy	1 =Yes 2 =No 3 =Unknown 4 =Other 5 =Not Applicable	Num
PHARM_MONTH	CHIA Incurred Date (Year and Month only)	Months, 1-12	Num

Variable Name	Variable Description	Meta Data	Format
PHARM_NDC	Drug Code	NDC Code as defined by the FDA in 11 digit format (5-4-2) without hyphenation.	Char
PHARM_NPI	National Pharmacy ID Number	10 digit NPI	Char
PHARM_ORGID	CHIA defined and maintained unique carrier identifier	3-5 digit numeric	Char
PHARM_PAID	Paid Amount	0 = line is paid as part of another procedure / claim line. Do not report any value if the line is denied. (Negative amounts mean the prescription could have been a pickup that involved cost sharing where the patient paid an amount which rendered the dollar amount owed by the carrier negative, or the carrier's internal audit discovered that payment exceeded the contractually allowable benefit or that the carrier had made a duplicate payment. They could also mean that the pharmaceutical was returned to supply for any number of reasons, failure to receive prior authorization, correction to prescription, no pick-up, pick-up attempt but the lower- than-expected coverage amount made the co-pay cost prohibitive, etc)	Num
PHARM_PREGNANCY	Pregnancy Indicator	1 =Yes 2 =No 3 =Unknown 4 =Other 5 =Not Applicable	Num
PHARM_PRESCRIBER_CIT Y PHARM_PRESCRIBER_LIN	Prescribing Physician City Linkage variable for	1-351 for valid MA city/towns 999=Out of state or unknown *Please note, there is a risk of misclassification as APCD covers the entire US. Cities without a corresponding state or zip code will be grouped as MA cities but actually are located outside of MA (in the cases of cities with the same name – ex. Palmer, MA vs Palmer, AK) Links pharmacy claims at the claims row	Num Char
KID	pharmacy claims to prescribing provider (in APCD provider file, PROV_PROVIDER_LINKID)	level	
PHARM_PRESCRIBER_NPI	Prescribing Physician NPI - National Provider ID	10 digit NPI	Char

Variable Name	Variable Description	Meta Data	Format
PHARM_PRESCRIBER_ZIP	Prescribing Physician Zip	5 digit zip code 99999=Unknown	Char
PHARM_PRODUCT_LINKID	Linkage variable for pharmacy claims to product (in APCD product file, PROD PRODUCT LINKID)	Links pharmacy claims at the claims row level	Char
PHARM_QUANT	Number of metric units of medication dispensed	Integer (Negative amounts mean that the pharmaceutical was returned to supply for any number of reasons, failure to receive prior authorization, correction to prescription, no pick-up, pick-up attempt but the lower-than-expected coverage amount made the co-pay cost prohibitive, etc.)	Num
PHARM_RECIPIENTPCP_LINK ID	Linkage variable for pharmacy claims to recipient pcp (in APCD provider file, PROV_PROVIDER_LINKID)	Links pharmacy claims at the claims row level	Char
PHARM_REFILL	New Prescription or Refill	0 = new prescription 1 = First Refill 2 = Second refill 3-98 = that number refill 99= 99 or more refills (blank) = missing (Negative amounts mean that the pharmaceutical was returned to supply for any number of reasons, failure to receive prior authorization, correction to prescription, no pick-up, pick-up attempt but the lower-than-expected coverage amount made the co-pay cost prohibitive, etc.)	Num

Variable Name	Variable Description	Meta Data	Format
PHARM_RELATION	Individual Relationship Code	01=Spouse 04=Grandfather or grandmother 05=Grandson or granddaughter 07=Nephew or niece 10=Foster child 15=Ward 17=Stepson or stepdaughter 19=Child 20=Self/employee 21=Unknown 22=Handicapped dependent 23=Sponsored dependent 24=Dependent of a minor dependent 29=Significant other 32=Mother 33=Father 36=Emancipated minor 39=Organ donor 40=Cadaver donor 41=Injured plaintiff 43=Child where insured has no financial responsibility 53=Life partner 76=Dependent ****For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char

Variable Name	Variable Description	Meta Data	Format
PHARM_ROA	Route of Administration	01=Buccal 02=Dental 03=Inhalation 04=Injection 05=Intraperitoneal 06=Irrigation 07=Mouth / Throat 08=Mucous Membrane 09=Nasal 10=Ophthalmic 11=Oral 12=Other / Misc. 13=Otic 14=Perfusion 15=Rectal 16=Sublingual 17=Topical 18=Transdermal 19=Translingual 20=Urethral 21=Vaginal 22=Enteral 00=Not Specified ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char
PHARM_SEX	Member Sex	1=Male 2=Female 9=Unknown	Num
PHARM_STATE	Pharmacy Location State	2-character abbreviation	Char
PHARM_SUPPLY	The number of days the prescription will last if taken as prescribed.	Integer (Negative amounts mean that the pharmaceutical was returned to supply for any number of reasons, failure to receive prior authorization, correction to prescription, no pick-up, pick-up attempt but the lower-than-expected coverage amount made the co-pay cost prohibitive, etc.)	Num

Variable Name	Variable Description	Meta Data	Format
PHARM_UOM	Drug Unit of Measure	EA= Each F2 =International Units GM =Grams ML =Milliliters MG =Milligram MEQ =Milliequivalent MM =Millimeter UG =Microgram UU =Unit ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	Char
PHARM_VERSION	Version Number	Integer	Num
PHARM_YEAR	CHIA Incurred Date (Year and Month only)	Years, YYYY format	Num
		5 digit zip 99999=Unknown	Char
RES_ZIP_APCD_PHARM	Member ZIP Code (first 5 digits)	5 digit zip code 99999=Unknown	Char

Pha	Pharm_PV_Specialty		
1	General Practice		
2	General Surgery		
3	Allergy/Immunology		
4	Otolaryngology		
5	Anesthesiology		
6	Cardiology		
7	Dermatology		
8	Family Practice		
9	Interventional Pain Management		
10	Gastroenterology		
11	Internal Medicine		
12	Osteopathic Manipulative Medicine		
13	Neurology		
14	Neurosurgery		
15	Speech Language Pathologists		
16	Obstetrics/Gynecology		
17	Hospice and Palliative Care		
18	Ophthalmology		
19	Oral Surgery (dentists only)		
20	Orthopedic Surgery		
21	Cardiac Electrophysiology		

Pha	rm_PV_Specialty
22	Pathology
23	Sports Medicine
24	Plastic and Reconstructive Surgery
25	Physical Medicine and Rehabilitation
26	Psychiatry
27	Geriatric Psychiatry
28	Colorectal Surgery (formerly proctology)
29	Pulmonary Disease
30	Diagnostic Radiology
31	Intensive Cardiac Rehabilitation
32	Anesthesiologist Assistant
33	Thoracic Surgery
34	Thoracic Surgery
35	Thoracic Surgery
36	Nuclear Medicine
37	Pediatric Medicine
38	Pediatric Medicine
39	Nephrology
40	Hand Surgery
41	Hand Surgery
42	Certified Nurse Midwife (effective July 1, 1988)
43	Certified Registered Nurse Anesthetist (CRNA)
44	Infectious Disease
45	Mammography Screening Center
46	Endocrinology
47	Independent Diagnostic Testing Facility (IDTF)
48	Podiatry
49	Ambulatory Surgical Center
50	Nurse Practitioner
	Medical supply company with orthotic personnel
51	certified by an accrediting organization
52	Medical supply company with prosthetic personnel
52	certified by an accrediting organization
	Medical supply company with prosthetic/orthotic
53	personnel certified by an accrediting organization
54	Medical supply company not included in 51, 52, or 53
	Individual orthotic personnel certified by an
55	accrediting organization
	Individual prosthetic personnel certified by an
56	accrediting organization
	Individual prosthetic/orthotic personnel certified by
57	an accrediting organization
58	Medical Supply Company with registered pharmacies
59	Ambulance Service Supplier, e.g., private ambulance
	companies, funeral homes Public Health or Welfare Agencies (Federal, State,
60	and local)
	Voluntary Health or Charitable Agencies (e.g.,
61	National Cancer Society, National Heart Association,
	Catholic Charities)
62	Psychologist (Billing Independently)
63	Portable X-Ray Supplier (Billing Independently)
55	· ····································

Pha	rm_PV_Specialty
64	Audiologist (Billing Independently)
65	Physical Therapist in Private Practice
66	Podiatry
67	Occupational Therapist in Private Practice
68	Clinical Psychologist
69	Clinical Laboratory (Billing Independently)
	Single or Multispecialty Clinic or Group Practice
70 71	Registered Dietician/Nutrition Professional
72	Pain Management Mass Immunization Roster Billers (Mass Immunizers
73	have to roster bill assigned claims and can only bill
75	for immunizations)
74	
74	Radiation Therapy Centers
	Slide Preparation Facilities
76	Peripheral Vascular Disease
77	Vascular Surgery
78	Cardiac Surgery
79	Addiction Medicine
80	Licensed Clinical Social Worker
81	Critical Care (Intensivists)
82	Hematology
83	Hematology/Oncology
84	Preventive Medicine
85	Maxillofacial Surgery
86	Neuropsychiatry
87	All other suppliers, e.g., Drug Stores
88	Unknown Provider
89	Certified Clinical Nurse Specialist
90	Medical Oncology
91	Surgical Oncology
92	Radiation Oncology
93	Emergency Medicine
94	Interventional Radiology
95	Unknown Supplier
96	Optician
97	Physician Assistant
98	Gynecological/Oncology
99	Unknown Physician Specialty
A0	Hospital
A1	Skilled Nursing Facility
A2	Intermediate Care Nursing Facility
A3	Nursing Facility, Other
A4	Home Health Agency
A5	Pharmacy Medical Supply Company with Respiratory Therapist
A6	Medical Supply Company with Respiratory Therapist
A7	Department Store
A8	Grocery Store
B1	Oxygen/Oxygen Related Equipment
B2	Pedorthic Personnel
B3	Medical Supply Company with Pedorthic Personnel
B4	Rehabilitation Agency
B5	Ocularist

Pha	Pharm_PV_Specialty		
C0	Sleep Medicine		
C1	Centralized Flu		
C2	Indirect Payment Procedure		
C3	Interventional Cardiology		
C5	Dentist		
C6	Hospitalist		
C7	Advanced Heart Failure and Transplant Cardiology		
C8	Medical Toxicology		
	Hematopoietic Cell Transplantation and Cellular		
C9	Therapy		
D1	Medicare Diabetes Preventive Program		
D3	Medical Genetics and Genomics		
D4	Undersea and Hyperbaric Medicine		

PHARM_PV_TAXONOMY	Code
Multi-Specialty	193200000X
Single Specialty	193400000X
Allergy & Immunology	207K00000X
Allergy	207KA0200X
Clinical & Laboratory Immunology	207KI0005X
Anesthesiology	207L00000X
Addiction Medicine	207LA0401X
Critical Care Medicine	207LC0200X
Hospice and Palliative Medicine	207LH0002X
Pain Medicine	207LP2900X
Pediatric Anesthesiology	207LP3000X
Clinical Pharmacology	208U00000X
Colon & Rectal Surgery	208C00000X
Dermatology	207N00000X
Clinical & Laboratory Dermatological	207NI0002X
Immunology	
Dermatopathology	207ND0900X
MOHS-Micrographic Surgery	207ND0101X
Pediatric Dermatology	207NP0225X
Procedural Dermatology	207NS0135X
Electrodiagnostic Medicine	204R00000X
Emergency Medicine	207P00000X
Emergency Medical Services	207PE0004X
Hospice and Palliative Medicine	207PH0002X
Medical Toxicology	207PT0002X
Pediatric Emergency Medicine	207PP0204X
Sports Medicine	207PS0010X
Undersea and Hyperbaric Medicine	207PE0005X

PHARM_PV_TAXONOMY	Code
Family Medicine	207Q00000X
Addiction Medicine	207QA0401X
Adolescent Medicine	207QA0000X
Adult Medicine	207QA0505X
Geriatric Medicine	207QG0300X
Hospice and Palliative Medicine	207QH0002X
Obesity Medicine	207QB0002X
Sleep Medicine	207QS1201X
Sports Medicine	207QS0010X
General Practice	208D00000X
Hospitalist	208M00000X
Independent Medical Examiner	202C00000X
Internal Medicine	207R00000X
Addiction Medicine	207RA0401X
Adolescent Medicine	207RA0000X
Adult Congenital Heart Disease	207RA0002X
Advanced Heart Failure and Transplant	207RA0001X
Cardiology	
Allergy & Immunology	207RA0201X
Cardiovascular Disease	207RC0000X
Clinical & Laboratory Immunology	207RI0001X
Clinical Cardiac Electrophysiology	207RC0001X
Critical Care Medicine	207RC0200X
Endocrinology, Diabetes & Metabolism	207RE0101X
Gastroenterology	207RG0100X
Geriatric Medicine	207RG0300X
Hematology	207RH0000X
Hematology & Oncology	207RH0003X
Hepatology	207RI0008X
Hospice and Palliative Medicine	207RH0002X
Hypertension Specialist	207RH0005X
Infectious Disease	207RI0200X
Interventional Cardiology	207RI0011X
Magnetic Resonance Imaging (MRI)	207RM1200X
Medical Oncology	207RX0202X
Nephrology	207RN0300X
Obesity Medicine	207RB0002X
Pulmonary Disease	207RP1001X
Rheumatology	207RR0500X
Sleep Medicine	207RS0012X
Sports Medicine	207RS0010X

PHARM PV TAXONOMY	Code
Transplant Hepatology	207RT0003X
Legal Medicine	209800000X
Clinical Biochemical Genetics	207SG0202X
Clinical Cytogenetics	207SC0300X
Clinical Genetics (M.D.)	207SG0201X
Clinical Molecular Genetics	207SG0203X
Molecular Genetic Pathology	207SM0001X
Ph.D. Medical Genetics	207SG0205X
Neurological Surgery	207T00000X
Neuromusculoskeletal Medicine & OMM	204D00000X
Neuromusculoskeletal Medicine, Sports	204C00000X
Medicine	
Nuclear Medicine	207U00000X
In Vivo & In Vitro Nuclear Medicine	207UN0903X
Nuclear Cardiology	207UN0901X
Nuclear Imaging & Therapy	207UN0902X
Obstetrics & Gynecology	207V00000X
Critical Care Medicine	207VC0200X
Female Pelvic Medicine and Reconstructive	207VF0040X
Surgery	
Gynecologic Oncology	207VX0201X
Gynecology	207VG0400X
Hospice and Palliative Medicine	207VH0002X
Maternal & Fetal Medicine	207VM0101X
Obesity Medicine	207VB0002X
Obstetrics	207VX0000X
Reproductive Endocrinology	207VE0102X
Ophthalmology	207W00000X
Cornea and External Diseases Specialist	207WX0120X
Glaucoma Specialist	207WX0009X
Neuro-ophthalmology	207WX0109X
Ophthalmic Plastic and Reconstructive Surgery	207WX0200X
Pediatric Ophthalmology and Strabismus	207WX0110X
Specialist	
Retina Specialist	207WX0107X
Uveitis and Ocular Inflammatory Disease	207WX0108X
Oral & Maxillofacial Surgery	204E00000X
Orthopaedic Surgery	207X00000X
Adult Reconstructive Orthopaedic Surgery	207XS0114X
Foot and Ankle Surgery	207XX0004X
Hand Surgery	207XS0106X

PHARM_PV_TAXONOMY	Code
Orthopaedic Surgery of the Spine	207XS0117X
Orthopaedic Trauma	207XX0801X
Pediatric Orthopaedic Surgery	207XP3100X
Sports Medicine	207XX0005X
Otolaryngology	207Y00000X
Facial Plastic Surgery	207YS0123X
Otolaryngic Allergy	207YX0602X
Otolaryngology/Facial Plastic Surgery	207YX0905X
Otology & Neurotology	207YX0901X
Pediatric Otolaryngology	207YP0228X
Plastic Surgery within the Head & Neck	207YX0007X
Sleep Medicine	207YS0012X
Interventional Pain Medicine	208VP0014X
Pain Medicine	208VP0000X
Anatomic Pathology	207ZP0101X
Anatomic Pathology & Clinical Pathology	207ZP0102X
Blood Banking & Transfusion Medicine	207ZB0001X
Chemical Pathology	207ZP0104X
Clinical Informatics	207ZC0008X
Clinical Pathology	207ZC0006X
Clinical Pathology/Laboratory Medicine	207ZP0105X
Cytopathology	207ZC0500X
Dermatopathology	207ZD0900X
Forensic Pathology	207ZF0201X
Hematology	207ZH0000X
Immunopathology	207ZI0100X
Medical Microbiology	207ZM0300X
Molecular Genetic Pathology	207ZP0007X
Neuropathology	207ZN0500X
Pediatric Pathology	207ZP0213X
Pediatrics	20800000X
Adolescent Medicine	2080A0000X
Child Abuse Pediatrics	2080C0008X
Clinical & Laboratory Immunology	208010007X
Developmental- Behavioral Pediatrics	2080P0006X
Hospice and Palliative Medicine	2080H0002X
Medical Toxicology	2080T0002X
Neonatal-Perinatal Medicine	2080N0001X
Neurodevelopmental Disabilities	2080P0008X
Obesity Medicine	2080B0002X
Pediatric Allergy/Immunology	2080P0201X

PHARM_PV_TAXONOMY	Code
Pediatric Cardiology	2080P0202X
Pediatric Critical Care Medicine	2080P0203X
Pediatric Emergency Medicine	2080P0204X
Pediatric Endocrinology	2080P0205X
Pediatric Gastroenterology	2080P0206X
Pediatric Hematology-Oncology	2080P0207X
Pediatric Infectious Diseases	2080P0208X
Pediatric Nephrology	2080P0210X
Pediatric Pulmonology	2080P0214X
Pediatric Rheumatology	2080P0216X
Pediatric Transplant Hepatology	2080T0004X
Sleep Medicine	2080S0012X
Sports Medicine	2080S0010X
Phlebology	202K00000X
Physical Medicine & Rehabilitation	208100000X
Brain Injury Medicine	2081P0301X
Hospice and Palliative Medicine	2081H0002X
Neuromuscular Medicine	2081N0008X
Pain Medicine	2081P2900X
Pediatric Rehabilitation Medicine	2081P0010X
Spinal Cord Injury Medicine	2081P0004X
Sports Medicine	2081S0010X
Plastic Surgery	208200000X
Plastic Surgery Within the Head and Neck	2082S0099X
Surgery of the Hand	2082S0105X
Addiction Medicine	2083A0300X
Aerospace Medicine	2083A0100X
Clinical Informatics	2083C0008X
Medical Toxicology	2083T0002X
Obesity Medicine	2083B0002X
Occupational Medicine	2083X0100X
Preventive Medicine/Occupational	2083P0500X
Environmental Medicine	
Public Health & General Preventive Medicine	2083P0901X
Sports Medicine	2083S0010X
Undersea and Hyperbaric Medicine	2083P0011X
Addiction Medicine	2084A0401X
Addiction Psychiatry	2084P0802X
Behavioral Neurology & Neuropsychiatry	2084B0040X
Brain Injury Medicine	2084P0301X
Child & Adolescent Psychiatry	2084P0804X

PHARM_PV_TAXONOMY	Code
Clinical Neurophysiology	2084N0600X
Diagnostic Neuroimaging	2084D0003X
Forensic Psychiatry	2084F0202X
Geriatric Psychiatry	2084P0805X
Hospice and Palliative Medicine	2084H0002X
Neurocritical Care	2084A2900X
Neurodevelopmental Disabilities	2084P0005X
Neurology	2084N0400X
Neurology with Special Qualifications in Child	2084N0402X
Neurology	
Neuromuscular Medicine	2084N0008X
Obesity Medicine	2084B0002X
Pain Medicine	2084P2900X
Psychiatry	2084P0800X
Psychosomatic Medicine	2084P0015X
Sleep Medicine	2084S0012X
Sports Medicine	2084S0010X
Vascular Neurology	2084V0102X
Body Imaging	2085B0100X
Diagnostic Neuroimaging	2085D0003X
Diagnostic Radiology	2085R0202X
Diagnostic Ultrasound	2085U0001X
Hospice and Palliative Medicine	2085H0002X
Neuroradiology	2085N0700X
Nuclear Radiology	2085N0904X
Pediatric Radiology	2085P0229X
Radiation Oncology	2085R0001X
Radiological Physics	2085R0205X
Therapeutic Radiology	2085R0203X
Vascular & Interventional Radiology	2085R0204X
Surgery	208600000X
Hospice and Palliative Medicine	2086H0002X
Pediatric Surgery	2086S0120X
Plastic and Reconstructive Surgery	2086S0122X
Surgery of the Hand	2086S0105X
Surgical Critical Care	2086S0102X
Surgical Oncology	2086X0206X
Trauma Surgery	2086S0127X
Vascular Surgery	2086S0129X
Thoracic Surgery (Cardiothoracic Vascular	208G00000X
Surgery)	

PHARM_PV_TAXONOMY	Code
Transplant Surgery	204F00000X
Urology	208800000X
Female Pelvic Medicine and Reconstructive	2088F0040X
Surgery	
Pediatric Urology	2088P0231X
Assistant Behavior Analyst	106E00000X
Behavior Analyst	103K00000X
Behavior Technician	106S00000X
Clinical Neuropsychologist	103G00000X
Clinical	103GC0700X
Counselor	101Y00000X
Addiction (Substance Use Disorder)	101YA0400X
Mental Health	101YM0800X
Pastoral	101YP1600X
Professional	101YP2500X
School	101YS0200X
Marriage & Family Therapist	106H00000X
Poetry Therapist	102X00000X
Psychoanalyst	102L00000X
Psychologist	103T00000X
Addiction (Substance Use Disorder)	103TA0400X
Adult Development & Aging	103TA0700X
Clinical	103TC0700X
Clinical Child & Adolescent	103TC2200X
Cognitive & Behavioral	103TB0200X
Counseling	103TC1900X
Educational	103TE1000X
Exercise & Sports	103TE1100X
Family	103TF0000X
Forensic	103TF0200X
Group Psychotherapy	103TP2701X
Health	103TH0004X
Health Service	103TH0100X
Men & Masculinity	103TM1700X
Mental Retardation & Developmental	103TM1800X
Disabilities	
Prescribing (Medical)	103TP0016X
Psychoanalysis	103TP0814X
Psychotherapy	103TP2700X
Rehabilitation	103TR0400X
School	103TS0200X

PHARM_PV_TAXONOMY	Code
Women	103TW0100X
Social Worker	104100000X
Clinical	1041C0700X
School	1041S0200X
Chiropractor	111N00000X
Independent Medical Examiner	111NI0013X
Internist	111NI0900X
Neurology	111NN0400X
Nutrition	111NN1001X
Occupational Health	111NX0100X
Orthopedic	111NX0800X
Pediatric Chiropractor	111NP0017X
Radiology	111NR0200X
Rehabilitation	111NR0400X
Sports Physician	111NS0005X
Thermography	111NT0100X
Advanced Practice Dental Therapist	125K00000X
Dental Assistant	126800000X
Dental Hygienist	124Q00000X
Dental Laboratory Technician	12690000X
Dental Therapist	125J00000X
Dentist	122300000X
Dental Public Health	1223D0001X
Dentist Anesthesiologist	1223D0004X
Endodontics	1223E0200X
General Practice	1223G0001X
Oral and Maxillofacial Pathology	1223P0106X
Oral and Maxillofacial Radiology	1223X0008X
Oral and Maxillofacial Surgery	1223S0112X
Orofacial Pain	1223X2210X
Orthodontics and Dentofacial Orthopedics	1223X0400X
Pediatric Dentistry	1223P0221X
Periodontics	1223P0300X
Prosthodontics	1223P0700X
Denturist	122400000X
Oral Medicinist	125Q00000X
Dietary Manager	132700000X
Dietetic Technician, Registered	136A00000X
Dietitian, Registered	133V00000X
Nutrition, Gerontological	133VN1101X
Nutrition, Metabolic	133VN1006X

PHARM_PV_TAXONOMY	Code
Nutrition, Obesity and Weight Management	133VN1201X
Nutrition, Oncology	133VN1301X
Nutrition, Pediatric	133VN1004X
Nutrition, Pediatric Critical Care	133VN1401X
Nutrition, Renal	133VN1005X
Nutrition, Sports Dietetics	133VN1501X
Nutritionist	133N00000X
Nutrition, Education	133NN1002X
Emergency Medical Technician, Basic	146N00000X
Emergency Medical Technician, Intermediate	146M00000X
Emergency Medical Technician, Paramedic	146L00000X
Personal Emergency Response Attendant	146D00000X
Optometrist	152W00000X
Corneal and Contact Management	152WC0802X
Low Vision Rehabilitation	152WL0500X
Occupational Vision	152WX0102X
Pediatrics	152WP0200X
Sports Vision	152WS0006X
Vision Therapy	152WV0400X
Technician/Technologist	156F00000X
Contact Lens	156FC0800X
Contact Lens Fitter	156FC0801X
Ocularist	156FX1700X
Ophthalmic	156FX1100X
Ophthalmic Assistant	156FX1101X
Optician	156FX1800X
Optometric Assistant	156FX1201X
Optometric Technician	156FX1202X
Orthoptist	156FX1900X
Licensed Practical Nurse	164W00000X
Licensed Psychiatric Technician	167G00000X
Licensed Vocational Nurse	164X00000X
Registered Nurse	163W00000X
Addiction (Substance Use Disorder)	163WA0400X
Administrator	163WA2000X
Ambulatory Care	163WP2201X
Cardiac Rehabilitation	163WC3500X
Case Management	163WC0400X
College Health	163WC1400X
Community Health	163WC1500X
Continence Care	163WC2100X

PHARM PV_TAXONOMY	Code
Continuing Education/Staff Development	163WC1600X
Critical Care Medicine	163WC0200X
Diabetes Educator	163WD0400X
Dialysis, Peritoneal	163WD1100X
Emergency	163WE0003X
Enterostomal Therapy	163WE0900X
Flight	163WF0300X
Gastroenterology	163WG0100X
General Practice	163WG0000X
Gerontology	163WG0600X
Hemodialysis	163WH0500X
Home Health	163WH0200X
Hospice	163WH1000X
Infection Control	163WI0600X
Infusion Therapy	163WI0500X
Lactation Consultant	163WL0100X
Maternal Newborn	163WM0102X
Medical-Surgical	163WM0705X
Neonatal Intensive Care	163WN0002X
Neonatal, Low-Risk	163WN0003X
Nephrology	163WN0300X
Neuroscience	163WN0800X
Nurse Massage Therapist (NMT)	163WM1400X
Nutrition Support	163WN1003X
Obstetric, High-Risk	163WX0002X
Obstetric, Inpatient	163WX0003X
Occupational Health	163WX0106X
Oncology	163WX0200X
Ophthalmic	163WX1100X
Orthopedic	163WX0800X
Ostomy Care	163WX1500X
Otorhinolaryngology & Head-Neck	163WX0601X
Pain Management	163WP0000X
Pediatric Oncology	163WP0218X
Pediatrics	163WP0200X
Perinatal	163WP1700X
Plastic Surgery	163WS0121X
Psychiatric/Mental Health	163WP0808X
Psychiatric/Mental Health, Adult	163WP0809X
Psychiatric/Mental Health, Child & Adolescent	163WP0807X
Registered Nurse First Assistant	163WR0006X

PHARM_PV_TAXONOMY	Code
Rehabilitation	163WR0400X
Reproductive Endocrinology/Infertility	163WR1000X
School	163WS0200X
Urology	163WU0100X
Women's Health Care, Ambulatory	163WW0101X
Wound Care	163WW0000X
Adult Companion	372600000X
Chore Provider	372500000X
Day Training/Habilitation Specialist	373H00000X
Doula	374J00000X
Home Health Aide	374U00000X
Homemaker	376J00000X
Nurse's Aide	376K00000X
Nursing Home Administrator	376G00000X
Religious Nonmedical Nursing Personnel	374T00000X
Religious Nonmedical Practitioner	374K00000X
Technician	374700000X
Attendant Care Provider	3747A0650X
Personal Care Attendant	3747P1801X
Acupuncturist	171100000X
Case Manager/Care Coordinator	171M00000X
Clinical Ethicist	174V00000X
Community Health Worker	172V00000X
Contractor	171W00000X
Home Modifications	171WH0202X
Vehicle Modifications	171WV0202X
Driver	172A00000X
Funeral Director	176P00000X
Genetic Counselor, MS	170300000X
Health Educator	174H00000X
Homeopath	175L00000X
Interpreter	171R00000X
Lactation Consultant, Non-RN	174N00000X
Legal Medicine	17300000X
Mechanotherapist	172M00000X
Medical Genetics, Ph.D. Medical Genetics	17010000X
Midwife	176B00000X
Midwife, Lay	175M00000X
Military Health Care Provider	17100000X
Independent Duty Corpsman	1710I1002X
Independent Duty Medical Technicians	1710I1003X

Naprapath172P0000XNaturopath175F0000XPeer Specialist175T0000XPrevention Professional40530000XReflexologist173C0000XSleep Specialist, PhD173F0000XSpecialist17440000XGraphics Designer174460900XProsthetics Case Management1744P3200XResearch Data Abstracter/Coder1744R1103XResearch Data Abstracter/Coder1744R1102XVeterinarian174M0000XMedical Research174MM1900XPharmacist18350000XAmbulatory Care1835P2201XCritical Care1835C0205XGeneral Practice1835G0303XNuclear1835N0005XNutrition Support1835N1003XOncology1835N200XPediatrics1835P1200XPsychiatric1835P1200XPsychiatric1835P1200XPharmacotherapy1835P1200XPharmacy Technician367A0000XAnesthesiologist Assistant367A0000XActure Care36450000XActure Care36450000XActure Care3645C200XCinical Nurse Specialist36450000XChronic Care3645C200XCommunity Health/Public Health3645C101XCritical Care Medicine3645C000XEmergency3645C000XFamily Health3645F0001XGerontology3645G000XHolistic3645H100XHolistic3645H100X	PHARM_PV_TAXONOMY	Code
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Psychiatric1835P1300XPharmacy Technician183700000XAdvanced Practice Midwife367A00000XAnesthesiologist Assistant367H00000XClinical Nurse Specialist364S00000XAcute Care364SA2100XAdult Health364SA2200XChronic Care364SC2300XCommunity Health/Public Health364SC1501XCritical Care Medicine364SC0200XEmergency364SE0003XEthics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X	Specialist	
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Pharmacy Technician183700000XAdvanced Practice Midwife367A00000XAnesthesiologist Assistant367H00000XClinical Nurse Specialist364S00000XAcute Care364SA2100XAdult Health364SA2200XChronic Care364SC2300XCommunity Health/Public Health364SC1501XCritical Care Medicine364SE00003XEmergency364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X		1835P1300X
Anesthesiologist Assistant367H00000XClinical Nurse Specialist364S00000XAcute Care364SA2100XAdult Health364SA2200XChronic Care364SC2300XCommunity Health/Public Health364SC1501XCritical Care Medicine364SC0200XEmergency364SE0003XEthics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X		183700000X
Clinical Nurse Specialist364S00000XAcute Care364SA2100XAdult Health364SA2200XChronic Care364SC2300XCommunity Health/Public Health364SC1501XCritical Care Medicine364SC0200XEmergency364SE0003XEthics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X	Advanced Practice Midwife	367A00000X
Acute Care364SA2100XAdult Health364SA2200XChronic Care364SC2300XCommunity Health/Public Health364SC1501XCritical Care Medicine364SC0200XEmergency364SE0003XEthics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X	Anesthesiologist Assistant	367H00000X
Adult Health364SA2200XChronic Care364SC2300XCommunity Health/Public Health364SC1501XCritical Care Medicine364SC0200XEmergency364SE0003XEthics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X	Clinical Nurse Specialist	364S00000X
Chronic Care364SC2300XCommunity Health/Public Health364SC1501XCritical Care Medicine364SC0200XEmergency364SE0003XEthics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X		364SA2100X
Community Health/Public Health364SC1501XCritical Care Medicine364SC0200XEmergency364SE0003XEthics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X	Adult Health	364SA2200X
Critical Care Medicine364SC0200XEmergency364SE0003XEthics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X	Chronic Care	364SC2300X
Emergency364SE0003XEthics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X	Community Health/Public Health	364SC1501X
Ethics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X	Critical Care Medicine	364SC0200X
Ethics364SE1400XFamily Health364SF0001XGerontology364SG0600XHolistic364SH1100X	Emergency	364SE0003X
Gerontology364SG0600XHolistic364SH1100X		364SE1400X
Holistic 364SH1100X	Family Health	364SF0001X
Holistic 364SH1100X	Gerontology	364SG0600X
Home Health 364SH0200X	Holistic	364SH1100X
	Home Health	364SH0200X

PHARM_PV_TAXONOMY	Code
Informatics	364SI0800X
Long-Term Care	364SL0600X
Medical-Surgical	364SM0705X
Neonatal	364SN0000X
Neuroscience	364SN0800X
Occupational Health	364SX0106X
Oncology	364SX0200X
Oncology, Pediatrics	364SX0204X
Pediatrics	364SP0200X
Perinatal	364SP1700X
Perioperative	364SP2800X
Psychiatric/Mental Health	364SP0808X
Psychiatric/Mental Health, Adult	364SP0809X
Psychiatric/Mental Health, Child & Adolescent	364SP0807X
Psychiatric/Mental Health, Child & Family	364SP0810X
Psychiatric/Mental Health, Chronically III	364SP0811X
Psychiatric/Mental Health, Community	364SP0812X
Psychiatric/Mental Health, Geropsychiatric	364SP0813X
Rehabilitation	364SR0400X
School	364SS0200X
Transplantation	364ST0500X
Women's Health	364SW0102X
Nurse Anesthetist, Certified Registered	367500000X
Nurse Practitioner	363L00000X
Acute Care	363LA2100X
Adult Health	363LA2200X
Community Health	363LC1500X
Critical Care Medicine	363LC0200X
Family	363LF0000X
Gerontology	363LG0600X
Neonatal	363LN0000X
Neonatal, Critical Care	363LN0005X
Obstetrics & Gynecology	363LX0001X
Occupational Health	363LX0106X
Pediatrics	363LP0200X
Pediatrics, Critical Care	363LP0222X
Perinatal	363LP1700X
Primary Care	363LP2300X
Psychiatric/Mental Health	363LP0808X
School	363LS0200X
Women's Health	363LW0102X

PHARM_PV_TAXONOMY	Code
Physician Assistant	363A00000X
Medical	363AM0700X
Surgical	363AS0400X
Assistant, Podiatric	211D00000X
Podiatrist	213E00000X
Foot & Ankle Surgery	213ES0103X
Foot Surgery	213ES0131X
General Practice	213EG0000X
Primary Podiatric Medicine	213EP1101X
Public Medicine	213EP0504X
Radiology	213ER0200X
Sports Medicine	213ES0000X
Anaplastologist	229N00000X
Art Therapist	221700000X
Clinical Exercise Physiologist	224Y00000X
Dance Therapist	225600000X
Developmental Therapist	222Q00000X
Kinesiotherapist	226300000X
Massage Therapist	225700000X
Mastectomy Fitter	224900000X
Music Therapist	225A00000X
Occupational Therapist	225X00000X
Driving and Community Mobility	225XR0403X
Environmental Modification	225XE0001X
Ergonomics	225XE1200X
Feeding, Eating & Swallowing	225XF0002X
Gerontology	225XG0600X
Hand	225XH1200X
Human Factors	225XH1300X
Low Vision	225XL0004X
Mental Health	225XM0800X
Neurorehabilitation	225XN1300X
Pediatrics	225XP0200X
Physical Rehabilitation	225XP0019X
Occupational Therapy Assistant	224Z00000X
Driving and Community Mobility	224ZR0403X
Environmental Modification	224ZE0001X
Feeding, Eating & Swallowing	224ZF0002X
Low Vision	224ZL0004X
Orthotic Fitter	22500000X
Orthotist	222Z00000X

PHARM_PV_TAXONOMY	Code
Pedorthist	224L00000X
Physical Therapist	225100000X
Cardiopulmonary	2251C2600X
Electrophysiology, Clinical	2251E1300X
Ergonomics	2251E1200X
Geriatrics	2251G0304X
Hand	2251H1200X
Human Factors	2251H1300X
Neurology	2251N0400X
Orthopedic	2251X0800X
Pediatrics	2251P0200X
Sports	2251S0007X
Physical Therapy Assistant	225200000X
Prosthetist	224P00000X
Pulmonary Function Technologist	225B00000X
Recreation Therapist	225800000X
Recreational Therapist Assistant	22600000X
Rehabilitation Counselor	225C00000X
Assistive Technology Practitioner	225CA2400X
Assistive Technology Supplier	225CA2500X
Orientation and Mobility Training Provider	225CX0006X
Rehabilitation Practitioner	225400000X
Respiratory Therapist, Certified	227800000X
Critical Care	2278C0205X
Educational	2278E1000X
Emergency Care	2278E0002X
General Care	2278G1100X
Geriatric Care	2278G0305X
Home Health	2278H0200X
Neonatal/Pediatrics	2278P3900X
Palliative/Hospice	2278P3800X
Patient Transport	2278P4000X
Pulmonary Diagnostics	2278P1004X
Pulmonary Function Technologist	2278P1006X
Pulmonary Rehabilitation	2278P1005X
SNF/Subacute Care	2278S1500X
Respiratory Therapist, Registered	227900000X
Critical Care	2279C0205X
Educational	2279E1000X
Emergency Care	2279E0002X
General Care	2279G1100X

PHARM_PV_TAXONOMY	Code
Geriatric Care	2279G0305X
Home Health	2279H0200X
Neonatal/Pediatrics	2279P3900X
Palliative/Hospice	2279P3800X
Patient Transport	2279P4000X
Pulmonary Diagnostics	2279P1004X
Pulmonary Function Technologist	2279P1006X
Pulmonary Rehabilitation	2279P1005X
SNF/Subacute Care	2279S1500X
Specialist/Technologist	225500000X
Athletic Trainer	2255A2300X
Rehabilitation, Blind	2255R0406X
Audiologist	231H00000X
Assistive Technology Practitioner	231HA2400X
Assistive Technology Supplier	231HA2500X
Audiologist-Hearing Aid Fitter	237600000X
Hearing Instrument Specialist	237700000X
Specialist/Technologist	235500000X
Audiology Assistant	2355A2700X
Speech-Language Assistant	2355S0801X
Speech-Language Pathologist	235Z00000X
Student in an Organized Health Care	390200000X
Education/Training Program	
Perfusionist	242T00000X
Radiologic Technologist	247100000X
Bone Densitometry	2471B0102X
Cardiac-Interventional Technology	2471C1106X
Cardiovascular-Interventional Technology	2471C1101X
Computed Tomography	2471C3401X
Magnetic Resonance Imaging	2471M1202X
Mammography	2471M2300X
Nuclear Medicine Technology	2471N0900X
Quality Management	2471Q0001X
Radiation Therapy	2471R0002X
Radiography	2471C3402X
Sonography	2471S1302X
Vascular Sonography	2471V0105X
Vascular-Interventional Technology	2471V0106X
Radiology Practitioner Assistant	243U00000X
Specialist/Technologist Cardiovascular	246X00000X
Cardiovascular Invasive Specialist	246XC2901X

PHARM PV_TAXONOMY	Code
Sonography	246XS1301X
Vascular Specialist	246XC2903X
Specialist/Technologist, Health Information	246Y00000X
Coding Specialist, Hospital Based	246YC3301X
Coding Specialist, Physician Office Based	246YC3302X
Registered Record Administrator	246YR1600X
Specialist/Technologist, Other	246Z00000X
Art, Medical	246ZA2600X
Biochemist	246ZB0500X
Biomedical Engineering	246ZB0301X
Biomedical Photographer	246ZB0302X
Biostatistician	246ZB0600X
EEG	246ZE0500X
Electroneurodiagnostic	246ZE0600X
Geneticist, Medical (PhD)	246ZG1000X
Graphics Methods	246ZG0701X
Illustration, Medical	246ZI1000X
Nephrology	246ZN0300X
Orthopedic Assistant	246ZX2200X
Surgical Assistant	246ZC0007X
Surgical Technologist	246ZS0410X
Specialist/Technologist, Pathology	246Q00000X
Blood Banking	246QB0000X
Chemistry	246QC1000X
Cytotechnology	246QC2700X
Hemapheresis Practitioner	246QH0401X
Hematology	246QH0000X
Histology	246QH0600X
Immunology	246Q10000X
Laboratory Management	246QL0900X
Laboratory Management, Diplomate	246QL0901X
Medical Technologist	246QM0706X
Microbiology	246QM0900X
Technician, Cardiology	246W00000X
Technician, Health Information	247000000X
Assistant Record Technician	2470A2800X
Technician, Other	247200000X
Biomedical Engineering	2472B0301X
Darkroom	2472D0500X
EEG	2472E0500X
Renal Dialysis	2472R0900X

PHARM_PV_TAXONOMY	Code
Veterinary	2472V0600X
Technician, Pathology	246R00000X
Histology	246RH0600X
Medical Laboratory	246RM2200X
Phlebotomy	246RP1900X
Local Education Agency (LEA)	251300000X
Case Management	251B00000X
Community/Behavioral Health	251S00000X
Day Training, Developmentally Disabled	251C00000X
Services	
Early Intervention Provider Agency	252Y00000X
Foster Care Agency	253J00000X
Home Health	251E00000X
Home Infusion	251F00000X
Hospice Care, Community Based	251G00000X
In Home Supportive Care	253Z00000X
Nursing Care	251J00000X
Program of All-Inclusive Care for the Elderly	251T00000X
(PACE) Provider Organization	
Public Health or Welfare	251K00000X
Supports Brokerage	251X00000X
Voluntary or Charitable	251V00000X
Clinic/Center	261Q00000X
Adolescent and Children Mental Health	261QM0855X
Adult Day Care	261QA0600X
Adult Mental Health	261QM0850X
Ambulatory Family Planning Facility	261QA0005X
Ambulatory Fertility Facility	261QA0006X
Ambulatory Surgical	261QA1903X
Amputee	261QA0900X
Augmentative Communication	261QA3000X
Birthing	261QB0400X
Community Health	261QC1500X
Corporate Health	261QC1800X
Critical Access Hospital	261QC0050X
Dental	261QD0000X
Developmental Disabilities	261QD1600X
Emergency Care	261QE0002X
Endoscopy	261QE0800X
End-Stage Renal Disease (ESRD) Treatment	261QE0700X
Family Planning, Non-Surgical	261QF0050X

PHARM_PV_TAXONOMY	Code
Federally Qualified Health Center (FQHC)	261QF0400X
Genetics	261QG0250X
Health Service	261QH0100X
Hearing and Speech	261QH0700X
Infusion Therapy	261QI0500X
Lithotripsy	261QL0400X
Magnetic Resonance Imaging (MRI)	261QM1200X
Medical Specialty	261QM2500X
Medically Fragile Infants and Children Day Care	261QM3000X
Mental Health (Including Community Mental	261QM0801X
Health Center)	
Methadone	261QM2800X
Migrant Health	261QM1000X
Military Ambulatory Procedure Visits	261QM1103X
Operational (Transportable)	
Military and U.S. Coast Guard Ambulatory	261QM1101X
Procedure	
Military Outpatient Operational (Transportable)	261QM1102X
Component	
Military/U.S. Coast Guard Outpatient	261QM1100X
Multi-Specialty	261QM1300X
Occupational Medicine	261QX0100X
Oncology	261QX0200X
Oncology, Radiation	261QX0203X
Ophthalmologic Surgery	261QS0132X
Oral and Maxillofacial Surgery	261QS0112X
Pain	261QP3300X
Physical Therapy	261QP2000X
Podiatric	261QP1100X
Primary Care	261QP2300X
Prison Health	261QP2400X
Public Health, Federal	261QP0904X
Public Health, State or Local	261QP0905X
Radiology	261QR0200X
Radiology, Mammography	261QR0206X
Radiology, Mobile	261QR0208X
Radiology, Mobile Mammography	261QR0207X
Recovery Care	261QR0800X
Rehabilitation	261QR0400X
Rehabilitation, Cardiac Facilities	261QR0404X

PHARM_PV_TAXONOMY	Code
Rehabilitation, Comprehensive Outpatient	261QR0401X
Rehabilitation Facility (CORF)	
Rehabilitation, Substance Use Disorder	261QR0405X
Research	261QR1100X
Rural Health	261QR1300X
Sleep Disorder Diagnostic	261QS1200X
Student Health	261QS1000X
Urgent Care	261QU0200X
VA	261QV0200X
Epilepsy Unit	273100000X
Medicare Defined Swing Bed Unit	275N00000X
Psychiatric Unit	273R00000X
Rehabilitation Unit	273Y00000X
Rehabilitation, Substance Use Disorder Unit	276400000X
Christian Science Sanitorium	287300000X
Chronic Disease Hospital	281P00000X
Children	281PC2000X
General Acute Care Hospital	282N00000X
Children	282NC2000X
Critical Access	282NC0060X
Rural	282NR1301X
Women	282NW0100X
Long Term Care Hospital	282E00000X
Military Hospital	286500000X
Community Health	2865C1500X
Military General Acute Care Hospital	2865M2000X
Military General Acute Care Hospital.	2865X1600X
Operational (Transportable)	
Psychiatric Hospital	283Q00000X
Rehabilitation Hospital	283X00000X
Children	283XC2000X
Religious Nonmedical Health Care Institution	282J00000X
Special Hospital	284300000X
Clinical Medical Laboratory	291U00000X
Dental Laboratory	292200000X
Military Clinical Medical Laboratory	291900000X
Physiological Laboratory	293D00000X
Exclusive Provider Organization	302F00000X
Health Maintenance Organization	302R00000X
Point of Service	305S00000X
Preferred Provider Organization	305R00000X

PHARM_PV_TAXONOMY	Code
Alzheimer Center (Dementia Center)	311500000X
Assisted Living Facility	310400000X
Assisted Living, Behavioral Disturbances	3104A0630X
Assisted Living, Mental Illness	3104A0625X
Christian Science Facility	317400000X
Custodial Care Facility	311Z00000X
Adult Care Home	311ZA0620X
Hospice, Inpatient	315D00000X
Intermediate Care Facility, Mental Illness	310500000X
Intermediate Care Facility, Mentally Retarded	315P00000X
Nursing Facility/Intermediate Care Facility	313M00000X
Skilled Nursing Facility	31400000X
Nursing Care, Pediatric	3140N1450X
Lodging	177F00000X
Meals	174200000X
Community Based Residential Treatment	320800000X
Facility, Mental Illness	
Community Based Residential Treatment	320900000X
Facility, Mental Retardation and/or	
Developmental Disabilities	
Psychiatric Residential Treatment Facility	323P00000X
Residential Treatment Facility, Emotionally	322D00000X
Disturbed Children	
Residential Treatment Facility, Mental	320600000X
Retardation and/or Developmental Disabilities	
Residential Treatment Facility, Physical	320700000X
Disabilities	
Substance Abuse Rehabilitation Facility	324500000X
Substance Abuse Treatment, Children	3245S0500X
Respite Care	385H00000X
Respite Care Camp	385HR2050X
Respite Care, Mental Illness, Child	385HR2055X
Respite Care, Mental Retardation and/or	385HR2060X
Developmental Disabilities	
Respite Care, Physical Disabilities, Child	385HR2065X
Blood Bank	331L00000X
Department of Veterans Affairs (VA) Pharmacy	332100000X
Durable Medical Equipment & Medical Supplies	332B00000X
Customized Equipment	332BC3200X
Dialysis Equipment & Supplies	332BD1200X
Nursing Facility Supplies	332BN1400X

PHARM PV TAXONOMY	Code
Oxygen Equipment & Supplies	332BX2000X
Parenteral & Enteral Nutrition	332BP3500X
Emergency Response System Companies	333300000X
Eye Bank	332G00000X
Eyewear Supplier	332H00000X
Hearing Aid Equipment	332S00000X
Home Delivered Meals	332U00000X
Indian Health Service/Tribal/Urban Indian Health (I/T/U) Pharmacy	332800000X
Medical Foods Supplier	335G00000X
Military/U.S. Coast Guard Pharmacy	332000000X
Non-Pharmacy Dispensing Site	332900000X
Organ Procurement Organization	335U00000X
Pharmacy	333600000X
Clinic Pharmacy	3336C0002X
Community/Retail Pharmacy	3336C0003X
Compounding Pharmacy	3336C0004X
Home Infusion Therapy Pharmacy	3336H0001X
Institutional Pharmacy	3336I0012X
Long Term Care Pharmacy	3336L0003X
Mail Order Pharmacy	3336M0002X
Managed Care Organization Pharmacy	3336M0003X
Nuclear Pharmacy	3336N0007X
Specialty Pharmacy	3336S0011X
Portable X-ray and/or Other Portable Diagnostic Imaging Supplier	335V00000X
Prosthetic/Orthotic Supplier	335E00000X
Air Carrier	344800000X
Ambulance	341600000X
Air Transport	3416A0800X
Land Transport	3416L0300X
Water Transport	3416S0300X
Bus	347B00000X
Military/U.S. Coast Guard Transport	341800000X
Military or U.S. Coast Guard Ambulance, Air	3418M1120X
Transport	
Military or U.S. Coast Guard Ambulance,	3418M1110X
Ground Transport	24101411201
Military or U.S. Coast Guard Ambulance, Water	3418M1130X
Transport Non-emergency Medical Transport (VAN)	343900000X
Private Vehicle	347C00000X
	5-7 C00000A

PHARM_PV_TAXONOMY	Code
Secured Medical Transport (VAN)	343800000X
Taxi	344600000X
Train	347D00000X
Transportation Broker	347E00000X

#### All Payer's Claims Data - Product (PHDAPCD.PRODUCT14\_18)

\*\*\*For details on how to link PHDAPCD.PRODUCT with other PHD APCD datasets, please see <u>Appendix 1</u> in the PHD\_Key Facts for working with the data documentation. \*\*\*

Variable Name	Variable Description	Meta Data	Format
PROD_ACTIVE	Product Active Flag	0= No 1= Yes 2= Other 8= Not Applicable 9= Unknown	Num
PROD_BENEFIT_TYPE	Product Benefit Type	1= Medical Only 2= Pharmacy Only 3= Medical and Pharmacy bundled 4= Dental 5= Behavioral Health 6= Vision 7= Accident Only 8= Medical Comprehensive 9= Other	Num
PROD_CARRIER_LICENSE	Carrier License Type	<ul> <li>1= Blue Cross and Blue Shield Licensee</li> <li>2= Commercial Carrier</li> <li>3= Health Maintenance Organization</li> <li>4= Medicare Advantage Organization</li> <li>5= Pharmacy Benefit Manager</li> <li>6= Senior Care Option</li> <li>7= Third Party Administrator</li> <li>8= Chapter 176</li> <li>9= Other License Type</li> <li>(blank) = missing</li> </ul>	Num
PROD_COORD_CARE	Coordinated Care Model	1= Yes, member's care is clinically coordinated/managed 2= No 3= Unknown 4= Other 5= Not Applicable	Num
PROD_END_DATE	Product End Date	SAS Date	Num

\*\*\*For details on how to link PHDAPCD.PRODUCT with other PHD APCD datasets, please see <u>Appendix 1</u> in the PHD\_Key Facts for working with the data documentation. \*\*\*

Variable Name	Variable Description	Meta Data	Format
PROD_MARKET	Insurance Plan Market	1= Group - POS 2= Group COBRA 3= Group-Commonwealth Choice 4= Group-Employer 5= Group-Federal 6= Group-GIC 7= Group-Merged Market 8= Group-Municipality 9= Group-Retiree 10= Group-Senior Care Option 11= Group-Union 12= Health Exchange 13= Individual - Commonwealth Care 14= Individual - Commonwealth Choice 15= Individual Closed 16= Individual COBRA 17= Individual Senior Care Option 18= Individual Senior Care Option 18= Individual Young Adult 19= Medicare Part A 20= Medicare Part B 21= Medicare Part D 23= MediGap/Medicare Supplemental/Medex 24= Other 25= Other Medicare 26= Student 27= COBRA 28= Group	Num
PROD_ORGID	Variable to link product file into medical (MED_LINKORGIDPR), dental (DENT_LINKORGIDPR), and pharmacy (PHARM_LINKORGIDPR)		Char

\*\*\*For details on how to link PHDAPCD.PRODUCT with other PHD APCD datasets, please see <u>Appendix 1</u> in the PHD\_Key Facts for working with the data documentation. \*\*\*

Variable Name	Variable Description	Meta Data	Format
PROD_PRODUCT_LINE	Product Line of Business Model	<ul> <li>1= Preferred Provider Organization (PPO)</li> <li>2= Point of Service (POS)</li> <li>3= Exclusive Provider Organization (EPO)</li> <li>4= Indemnity Insurance</li> <li>5= Health Maintenance Organization (HMO) Medicare Advantage</li> <li>6= Medicare Advantage PPO</li> <li>7= Medicare Advantage PPO</li> <li>7= Medicare Advantage Private Fee for Service</li> <li>8= Accident Only</li> <li>9= Basic Hospital</li> <li>10= CHAMPUS</li> <li>11= Dental Maintenance Organization</li> <li>12= Disability</li> <li>13= HMO - Closed</li> <li>14= HMO - Open</li> <li>15= Individual</li> <li>16= Liability Medical</li> <li>17= Medicare Primary</li> <li>20= Medicare Primary</li> <li>20= Medicare Primary</li> <li>20= Medicare Secondary Plan</li> <li>22= Other Federal Program (e.g. Black Lung)</li> <li>23= Medicaid Primary Care Clinician Plan</li> <li>24= Preferred Provider Organization</li> <li>(PPO)</li> <li>25= Qualified Health Plan</li> <li>26= Qualified Medicare Beneficiary/SLMB</li> <li>27= Self-Administered Group</li> <li>28= Senior Care Option</li> <li>29= Supplemental Policy</li> <li>30= HSN Trust Fund</li> <li>31= Title V</li> <li>32= Unemployment</li> <li>33= Veterans Administration Plan</li> <li>34= Vision</li> <li>35= Workers' Compensation</li> <li>36= Accountable Care Organizations (ACOs) MassHealth</li> </ul>	Num

\*\*\*For details on how to link PHDAPCD.PRODUCT with other PHD APCD datasets, please see <u>Appendix 1</u> <u>in the PHD\_Key Facts</u> for working with the data documentation. \*\*\*

Variable Name	Variable Description	Meta Data	Format
PROD_PRODUCT_LINKID	Variable to link product file into medical (MED_PRODUCT_LINKID), dental (DENT_PRODUCT_LINKID) , and pharmacy (PHARM_PRODUCT_LINKI D)		Char
PROD_RISK	Risk Type	1= Fully Insured 2= Self-Insured 3= Product available to risk and self- insured accounts 9= Other	Num
PROD_START_DATE	Product Start Date	SAS Date	Num

# All Payer's Claims Database – Provider (PHDAPCD.PROVIDER14\_18)

\*\*\*For details on how to link PHDAPCD.PROVIDER with other PHD APCD datasets, please see Appendix 1 in the PHD Key Facts for working with the data documentation. \*\*

Variable Name	Variable Description	Meta Data	Format
PROV_ENTITY	Entity Code	01 =Academic Institution 02 =Adult Foster CareCondition 03 =Ambulance Services 04 =Hospital Based Clinic 05 =Stand-Alone, Walk-In/Urgent Care Clinic 06 =Other Clinic 07 =Community Health Center - General 08 =Community Health Center - Urgent Care 09 =Government Agency 10 =Health Care Corporation 11 =Home Health Agency 12 =Acute Hospital 13 =Chronic Hospital 14 =Rehabilitation Hospital 15 =Psychiatric Hospital 16 =DPH Hospital 17 =State Hospital 18 =Veterans Hospital 19 =DMH Hospital 20 =Sub-Acute Hospital 21 =Licensed Hospital Satellite Emergency Facility 22 =Hospital Emergency Center 23 =Nursing Home 24 =Freestanding Ambulatory Surgery Center 25 =Hospital Licensed Ambulatory Surgery Center 26 =Non-Health Corporation 27 =School Based Health Center 28 =Rest Home 29 =Licensed Hospital Satellite Facility 30 =Hospital Licensed Health Center 31 =Other Facility 40 =Physician (PV034 = 1) 50 =Physician (PV034 = 1) 50 =Pharmacy / Site or Mail Order	Char

Variable Name	Variable Description	Meta Data	Format
		99 =Other Individual or Group (PV034 = 1 or 3) ***For any other value not contained in the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	
PROV_NPI	National Provider ID	10-character NPI	Char
PROV_NPI2	National Provider2 ID	10-character NPI	Char
PROV_OFFICE_TYPE	Office Type	1 =Facility 2 =Doctors office 3 =Clinic 4 =Walk in Clinic 5 =Laboratory 8 =Other (blank) = missing	Num
PROV_ORGID	Variable to link provider file into medical (MED_LINKORGIDPV), dental (DENT_LINKORGIDPV), and pharmacy (PHARM_LINKORGIDPV)		Char
PROV_PRESCRIBING	Prescribing Provider	1 =Yes 2 =No 4 =Other 8 =Not Applicable 9 =Unknown	Num
PROV_PROVIDER_LINKID	Variable to link provider file into medical (MED_SERVICEPROVIDER _LINKID, MED_BILLINGPROVIDER_ LINKID, MED_RENDERINGPROVID ER_LINKID), dental (DENT_SERVICEPROVIDE R_LINKID), pharmacy (PHARM_PRESCRIBER_LI NKID, PHARM_RECIPIENTPCP_L INKID, and MassHealth's (MHEE_ManagedCareProvi der_LINKID, MHEE_PrimaryCareProvider _LINKID, MHEE_BehavHlthProvider_ LINKID,		Char

Variable Name	Variable Description	Meta Data	Format
	MHEE_LTCProvider_LINKI		
	D) Provider	See code list below Specialty code values are from CMS; please see <u>https://www.cms.gov/Medicare/provider</u> <u>-enrollment-and-</u> <u>certification/medicareprovidersupenroll/</u> <u>downloads/taxonomycrosswalk.pdf</u> for a crosswalk between taxonomy and CMS specialty codes) ***For any other value not contained in the code list – those values are as is	
PROV_SPECIALTY		submitted by the insurance carrier (with unknown translation)***	Char
PROV_TAXONOMY	Taxonomy	See code list below Taxonomy values are from the National Uniform Claim Committee's taxonomy code values; please see <u>https://www.cms.gov/Medicare/provider</u> <u>-enrollment-and-</u> <u>certification/medicareprovidersupenroll/</u> <u>downloads/taxonomycrosswalk.pdf</u> for a crosswalk between taxonomy and CMS specialty codes)	Char
		the list above – those values are as is submitted by the insurance carrier (with unknown translation)***	

PROV Specialty		
01	General Practice	
02	General Surgery	
02	Allergy/Immunology	
04	Otolaryngology	
05	Anesthesiology	
06	Cardiology	
07	Dermatology	
08	Family Practice	
09	Interventional Pain Management	
10	Gastroenterology	
11	Internal Medicine	
12	Osteopathic Manipulative Medicine	
13	Neurology	
14	Neurosurgery	
15	Speech Language Pathologists	
16	Obstetrics/Gynecology	
17	Hospice and Palliative Care	
18	Ophthalmology	
19	Oral Surgery (dentists only)	
20	Orthopedic Surgery	
21	Cardiac Electrophysiology	
22	Pathology	
23	Sports Medicine	
24	Plastic and Reconstructive Surgery	
25	Physical Medicine and Rehabilitation	
26	Psychiatry	
27	Geriatric Psychiatry	
28	Colorectal Surgery (formerly proctology)	
29	Pulmonary Disease	
30	Diagnostic Radiology	
31	Intensive Cardiac Rehabilitation	
32	Anesthesiologist Assistant	
33	Thoracic Surgery	
34	Thoracic Surgery	
35	Thoracic Surgery	
36	Nuclear Medicine	
37	Pediatric Medicine	
38	Pediatric Medicine	
39	Nephrology	
40	Hand Surgery	

PRO	PROV_Specialty		
41	Hand Surgery		
42	Certified Nurse Midwife (effective July 1, 1988)		
43	Certified Registered Nurse Anesthetist (CRNA)		
44	Infectious Disease		
45	Mammography Screening Center		
46	Endocrinology		
47	Independent Diagnostic Testing Facility (IDTF)		
48	Podiatry		
49	Ambulatory Surgical Center		
50	Nurse Practitioner		
51	Medical supply company with orthotic personnel certified by an accrediting organization		
52	Medical supply company with prosthetic personnel certified by an accrediting organization		
53	Medical supply company with prosthetic/orthotic personnel certified by an accrediting organization		
54	Medical supply company not included in 51, 52, or 53		
55	Individual orthotic personnel certified by an accrediting organization		
56	Individual prosthetic personnel certified by an accrediting organization		
57	Individual prosthetic/orthotic personnel certified by an accrediting organization		
58	Medical Supply Company with registered pharmacies		
59	Ambulance Service Supplier, e.g., private ambulance companies, funeral homes		
60	Public Health or Welfare Agencies (Federal, State, and local)		
61	Voluntary Health or Charitable Agencies (e.g., National Cancer Society, National Heart Association, Catholic Charities)		
62	Psychologist (Billing Independently)		
63	Portable X-Ray Supplier (Billing Independently)		
64	Audiologist (Billing Independently)		
65	Physical Therapist in Private Practice		
66	Podiatry		
67	Occupational Therapist in Private Practice		
68	Clinical Psychologist		
69	Clinical Laboratory (Billing Independently)		
70	Single or Multispecialty Clinic or Group Practice		
71	Registered Dietician/Nutrition Professional		
72	Pain Management		

PRC	DV_Specialty
<u>-                                    </u>	Mass Immunization Roster Billers (Mass Immunizers have to
73	roster bill assigned claims and can only bill for immunizations)
74	Radiation Therapy Centers
75	Slide Preparation Facilities
76	Peripheral Vascular Disease
77	Vascular Surgery
78	Cardiac Surgery
79	Addiction Medicine
80	Licensed Clinical Social Worker
81	Critical Care (Intensivists)
82	Hematology
83	Hematology/Oncology
84	Preventive Medicine
85	Maxillofacial Surgery
86	Neuropsychiatry
87	All other suppliers, e.g., Drug Stores
88	Unknown Provider
89	Certified Clinical Nurse Specialist
90	Medical Oncology
91	Surgical Oncology
92	Radiation Oncology
93	Emergency Medicine
94	Interventional Radiology
95	Unknown Supplier
96	Optician
97	Physician Assistant
98	Gynecological/Oncology
99	Unknown Physician Specialty
A0	Hospital
A1	Skilled Nursing Facility
A2	Intermediate Care Nursing Facility
A3	Nursing Facility, Other
A4	Home Health Agency
A5	Pharmacy
A6	Medical Supply Company with Respiratory Therapist
A7	Department Store
A8	Grocery Store
B1	Oxygen/Oxygen Related Equipment
B2	Pedorthic Personnel
В3	Medical Supply Company with Pedorthic Personnel

PRC	PROV_Specialty	
B4	Rehabilitation Agency	
B5	Ocularist	
CO	Sleep Medicine	
C1	Centralized Flu	
C2	Indirect Payment Procedure	
C3	Interventional Cardiology	
C5	Dentist	
C6	Hospitalist	
C7	Advanced Heart Failure and Transplant Cardiology	
C8	Medical Toxicology	
С9	Hematopoietic Cell Transplantation and Cellular Therapy	
D1	Medicare Diabetes Preventive Program	
D2	Restricted Use	
D3	Medical Genetics and Genomics	
D4	Undersea and Hyperbaric Medicine	
D5	Opioid Treatment Program	
D6	Home Infusion Therapy Services	

PROV_TAXONOMY	Code
Multi-Specialty	193200000X
Single Specialty	193400000X
Allergy & Immunology	207K00000X
Allergy	207KA0200X
Clinical & Laboratory Immunology	207KI0005X
Anesthesiology	207L00000X
Addiction Medicine	207LA0401X
Critical Care Medicine	207LC0200X
Hospice and Palliative Medicine	207LH0002X
Pain Medicine	207LP2900X
Pediatric Anesthesiology	207LP3000X
Clinical Pharmacology	208U00000X
Colon & Rectal Surgery	208C00000X
Dermatology	207N00000X
Clinical & Laboratory Dermatological Immunology	207NI0002X
Dermatopathology	207ND0900X
MOHS-Micrographic Surgery	207ND0101X
Pediatric Dermatology	207NP0225X
Procedural Dermatology	207NS0135X
Electrodiagnostic Medicine	204R00000X
Emergency Medicine	207P00000X
Emergency Medical Services	207PE0004X

PROV_TAXONOMY	Code
Hospice and Palliative Medicine	207PH0002X
Medical Toxicology	207PT0002X
Pediatric Emergency Medicine	207PP0204X
Sports Medicine	207PS0010X
Undersea and Hyperbaric Medicine	207PE0005X
Family Medicine	207Q00000X
Addiction Medicine	207QA0401X
Adolescent Medicine	207QA0000X
Adult Medicine	207QA0505X
Geriatric Medicine	207QG0300X
Hospice and Palliative Medicine	207QH0002X
Obesity Medicine	207QB0002X
Sleep Medicine	207QS1201X
Sports Medicine	207QS0010X
General Practice	208D00000X
Hospitalist	208M00000X
Independent Medical Examiner	202C00000X
Internal Medicine	207R00000X
Addiction Medicine	207RA0401X
Adolescent Medicine	207RA0000X
Adult Congenital Heart Disease	207RA0002X
Advanced Heart Failure and Transplant Cardiology	207RA0001X
Allergy & Immunology	207RA0201X
Cardiovascular Disease	207RC0000X
Clinical & Laboratory Immunology	207RI0001X
Clinical Cardiac Electrophysiology	207RC0001X
Critical Care Medicine	207RC0200X
Endocrinology, Diabetes & Metabolism	207RE0101X
Gastroenterology	207RG0100X
Geriatric Medicine	207RG0300X
Hematology	207R00300X 207RH0000X
Hematology & Oncology	
Hepatology	207RH0003X 207RI0008X
Hospice and Palliative Medicine Hypertension Specialist	207RH0002X
Infectious Disease	207RH0005X 207RI0200X
Interventional Cardiology	
	207RI0011X 207RM1200X
Magnetic Resonance Imaging (MRI)	207RM1200X 207RX0202X
Medical Oncology	
Nephrology Obosity Medicine	207RN0300X
Obesity Medicine	207RB0002X
Pulmonary Disease	207RP1001X
Rheumatology	207RR0500X
Sleep Medicine	207RS0012X
Sports Medicine	207RS0010X
Transplant Hepatology	207RT0003X
Legal Medicine	209800000X

PROV_TAXONOMY	Code
Clinical Biochemical Genetics	207SG0202X
Clinical Cytogenetics	207SC0300X
Clinical Genetics (M.D.)	207SG0201X
Clinical Molecular Genetics	207SG0203X
Molecular Genetic Pathology	207SM0001X
Ph.D. Medical Genetics	207SG0205X
Neurological Surgery	207T00000X
Neuromusculoskeletal Medicine & OMM	204D00000X
Neuromusculoskeletal Medicine, Sports Medicine	204C00000X
Nuclear Medicine	207U00000X
In Vivo & In Vitro Nuclear Medicine	207UN0903X
Nuclear Cardiology	207UN0901X
Nuclear Imaging & Therapy	207UN0902X
Obstetrics & Gynecology	207V00000X
Critical Care Medicine	207VC0200X
Female Pelvic Medicine and Reconstructive Surgery	207VF0040X
Gynecologic Oncology	207VX0201X
Gynecology	207VG0400X
Hospice and Palliative Medicine	207VH0002X
Maternal & Fetal Medicine	207VM0101X
Obesity Medicine	207VB0002X
Obstetrics	207VX0000X
Reproductive Endocrinology	207VE0102X
Ophthalmology	207W00000X
Cornea and External Diseases Specialist	207WX0120X
Glaucoma Specialist	207WX0009X
Neuro-ophthalmology	207WX0109X
Ophthalmic Plastic and Reconstructive Surgery	207WX0200X
Pediatric Ophthalmology and Strabismus Specialist	207WX0110X
Retina Specialist	207WX0107X
Uveitis and Ocular Inflammatory Disease	207WX0108X
Oral & Maxillofacial Surgery	204E00000X
Orthopaedic Surgery	207X00000X
Adult Reconstructive Orthopaedic Surgery	207XS0114X
Foot and Ankle Surgery	207XX0004X
Hand Surgery	207XS0106X
Orthopaedic Surgery of the Spine	207XS0117X
Orthopaedic Trauma	207XX0801X
Pediatric Orthopaedic Surgery	207XP3100X
Sports Medicine	207XX0005X
Otolaryngology	207Y00000X
Facial Plastic Surgery	207YS0123X
Otolaryngic Allergy	207YX0602X
Otolaryngology/Facial Plastic Surgery	207YX0905X
Otology & Neurotology	207YX0901X
Pediatric Otolaryngology	207YP0228X
Plastic Surgery within the Head & Neck	207YX0007X

PROV_TAXONOMY	Code
Sleep Medicine	207YS0012X
Interventional Pain Medicine	208VP0014X
Pain Medicine	208VP0000X
Anatomic Pathology	207ZP0101X
Anatomic Pathology & Clinical Pathology	207ZP0102X
Blood Banking & Transfusion Medicine	207ZB0001X
Chemical Pathology	207ZP0104X
Clinical Informatics	207ZC0008X
Clinical Pathology	207ZC0006X
Clinical Pathology/Laboratory Medicine	207ZP0105X
Cytopathology	207ZC0500X
Dermatopathology	207ZD0900X
Forensic Pathology	207ZF0201X
Hematology	207ZH0000X
Immunopathology	207ZI0100X
Medical Microbiology	207ZM0300X
Molecular Genetic Pathology	207ZP0007X
Neuropathology	207ZN0500X
Pediatric Pathology	207ZP0213X
Pediatrics	20800000X
Adolescent Medicine	2080A0000X
Child Abuse Pediatrics	2080C0008X
Clinical & Laboratory Immunology	2080I0007X
Developmental- Behavioral Pediatrics	2080P0006X
Hospice and Palliative Medicine	2080H0002X
Medical Toxicology	2080T0002X
Neonatal-Perinatal Medicine	2080N0001X
Neurodevelopmental Disabilities	2080P0008X
Obesity Medicine	2080B0002X
Pediatric Allergy/Immunology	2080P0201X
Pediatric Cardiology	2080P0202X
Pediatric Critical Care Medicine	2080P0203X
Pediatric Emergency Medicine	2080P0204X
Pediatric Endocrinology	2080P0205X
Pediatric Gastroenterology	2080P0206X
Pediatric Hematology-Oncology	2080P0207X
Pediatric Infectious Diseases	2080P0208X
Pediatric Nephrology	2080P0210X
Pediatric Pulmonology	2080P0214X
Pediatric Rheumatology	2080P0216X
Pediatric Transplant Hepatology	2080T0004X
Sleep Medicine	2080S0012X
Sports Medicine	208050010X
Phlebology	202K00000X
Physical Medicine & Rehabilitation	208100000X
Brain Injury Medicine	2081P0301X
Hospice and Palliative Medicine	2081H0002X

PROV_TAXONOMY	Code
Neuromuscular Medicine	2081N0008X
Pain Medicine	2081P2900X
Pediatric Rehabilitation Medicine	2081P0010X
Spinal Cord Injury Medicine	2081P0004X
Sports Medicine	2081S0010X
Plastic Surgery	208200000X
Plastic Surgery Within the Head and Neck	2082S0099X
Surgery of the Hand	2082S0105X
Addiction Medicine	2083A0300X
Aerospace Medicine	2083A0100X
Clinical Informatics	2083C0008X
Medical Toxicology	2083T0002X
Obesity Medicine	2083B0002X
Occupational Medicine	2083X0100X
Preventive Medicine/Occupational Environmental Medicine	2083P0500X
Public Health & General Preventive Medicine	2083P0901X
Sports Medicine	2083S0010X
Undersea and Hyperbaric Medicine	2083P0011X
Addiction Medicine	2084A0401X
Addiction Psychiatry	2084P0802X
Behavioral Neurology & Neuropsychiatry	2084B0040X
Brain Injury Medicine	2084P0301X
Child & Adolescent Psychiatry	2084P0804X
Clinical Neurophysiology	2084N0600X
Diagnostic Neuroimaging	2084D0003X
Forensic Psychiatry	2084F0202X
Geriatric Psychiatry	2084P0805X
Hospice and Palliative Medicine	2084H0002X
Neurocritical Care	2084A2900X
Neurodevelopmental Disabilities	2084P0005X
Neurology	2084N0400X
Neurology with Special Qualifications in Child Neurology	2084N0402X
Neuromuscular Medicine	2084N0008X
Obesity Medicine	2084B0002X
Pain Medicine	2084P2900X
Psychiatry	2084P0800X
Psychosomatic Medicine	2084P0015X
Sleep Medicine	2084S0012X
Sports Medicine	2084S0010X
Vascular Neurology	2084V0102X
Body Imaging	2085B0100X
Diagnostic Neuroimaging	2085D0003X
Diagnostic Radiology	2085R0202X
Diagnostic Ultrasound	2085U0001X
Hospice and Palliative Medicine	2085H0002X
Neuroradiology	2085N0700X
Nuclear Radiology	2085N0904X

PROV_TAXONOMY	Code
Pediatric Radiology	2085P0229X
Radiation Oncology	2085R0001X
Radiological Physics	2085R0205X
Therapeutic Radiology	2085R0203X
Vascular & Interventional Radiology	2085R0204X
Surgery	208600000X
Hospice and Palliative Medicine	2086H0002X
Pediatric Surgery	2086S0120X
Plastic and Reconstructive Surgery	2086S0122X
Surgery of the Hand	2086S0105X
Surgical Critical Care	2086S0102X
Surgical Oncology	2086X0206X
Trauma Surgery	2086S0127X
Vascular Surgery	2086S0129X
Thoracic Surgery (Cardiothoracic Vascular Surgery)	208G00000X
Transplant Surgery	204F00000X
Urology	208800000X
Female Pelvic Medicine and Reconstructive Surgery	2088F0040X
Pediatric Urology	2088P0231X
Assistant Behavior Analyst	106E00000X
Behavior Analyst	103K00000X
Behavior Technician	106S00000X
Clinical Neuropsychologist	103G00000X
Clinical	103GC0700X
Counselor	101Y00000X
Addiction (Substance Use Disorder)	101YA0400X
Mental Health	101YM0800X
Pastoral	101YP1600X
Professional	101YP2500X
School	101YS0200X
Marriage & Family Therapist	106H00000X
Poetry Therapist	102X00000X
Psychoanalyst	102L00000X
Psychologist	103T00000X
Addiction (Substance Use Disorder)	103TA0400X
Adult Development & Aging	103TA0700X
Clinical	103TC0700X
Clinical Child & Adolescent	103TC2200X
Cognitive & Behavioral	103TB0200X
Counseling	103TC1900X
Educational	103TE1000X
Exercise & Sports	103TE1100X
Family	103TF0000X
Forensic	103TF0200X
Group Psychotherapy	103TP2701X
Health	103TH0004X
Health Service	103TH0100X

PROV_TAXONOMY	Code
Men & Masculinity	103TM1700X
Mental Retardation & Developmental Disabilities	103TM1800X
Prescribing (Medical)	103TP0016X
Psychoanalysis	103TP0814X
Psychotherapy	103TP2700X
Rehabilitation	103TR0400X
School	103TS0200X
Women	103TW0100X
Social Worker	104100000X
Clinical	1041C0700X
School	1041S0200X
Chiropractor	111N00000X
Independent Medical Examiner	111NI0013X
Internist	111NI0900X
Neurology	111NN0400X
Nutrition	111NN1001X
Occupational Health	111NX0100X
Orthopedic	111NX0800X
Pediatric Chiropractor	111NP0017X
Radiology	111NR0200X
Rehabilitation	111NR0400X
Sports Physician	111NS0005X
Thermography	111NT0100X
Advanced Practice Dental Therapist	125K00000X
Dental Assistant	126800000X
Dental Hygienist	124Q00000X
Dental Laboratory Technician	12690000X
Dental Therapist	125J00000X
Dentist	122300000X
Dental Public Health	1223D0001X
Dentist Anesthesiologist	1223D0004X
Endodontics	1223E0200X
General Practice	1223G0001X
Oral and Maxillofacial Pathology	1223P0106X
Oral and Maxillofacial Radiology	1223X0008X
Oral and Maxillofacial Surgery	1223S0112X
Orofacial Pain	1223X2210X
Orthodontics and Dentofacial Orthopedics	1223X0400X
Pediatric Dentistry	1223P0221X
Periodontics	1223P0300X
Prosthodontics	1223P0700X
Denturist	122400000X
Oral Medicinist	125Q00000X
Dietary Manager	132700000X
Dietetic Technician, Registered	136A00000X
Dietitian, Registered	133V00000X
Nutrition, Gerontological	133VN1101X

PROV_TAXONOMY	Code
Nutrition, Metabolic	133VN1006X
Nutrition, Obesity and Weight Management	133VN1201X
Nutrition, Oncology	133VN1301X
Nutrition, Pediatric	133VN1004X
Nutrition, Pediatric Critical Care	133VN1401X
Nutrition, Renal	133VN1005X
Nutrition, Sports Dietetics	133VN1501X
Nutritionist	133N00000X
Nutrition, Education	133NN1002X
Emergency Medical Technician, Basic	146N00000X
Emergency Medical Technician, Intermediate	146M00000X
Emergency Medical Technician, Paramedic	146L00000X
Personal Emergency Response Attendant	146D00000X
Optometrist	152W00000X
Corneal and Contact Management	152WC0802X
Low Vision Rehabilitation	152WL0500X
Occupational Vision	152WX0102X
Pediatrics	152WP0200X
Sports Vision	152WS0006X
Vision Therapy	152WV0400X
Technician/Technologist	156F00000X
Contact Lens	156FC0800X
Contact Lens Fitter	156FC0801X
Ocularist	156FX1700X
Ophthalmic	156FX1100X
Ophthalmic Assistant	156FX1101X
Optician	156FX1800X
Optometric Assistant	156FX1201X
Optometric Technician	156FX1202X
Orthoptist	156FX1900X
Licensed Practical Nurse	164W00000X
Licensed Psychiatric Technician	167G00000X
Licensed Vocational Nurse	164X00000X
Registered Nurse	163W00000X
Addiction (Substance Use Disorder)	163WA0400X
Administrator	163WA2000X
Ambulatory Care	163WP2201X
Cardiac Rehabilitation	163WC3500X
Case Management	163WC0400X
College Health	163WC1400X
Community Health	163WC1500X
Continence Care	163WC2100X
Continuing Education/Staff Development	163WC1600X
Critical Care Medicine	163WC0200X
Diabetes Educator	163WD0400X
Dialysis, Peritoneal	163WD1100X
Emergency	163WE0003X

PROV_TAXONOMY	Code
Enterostomal Therapy	163WE0900X
Flight	163WF0300X
Gastroenterology	163WG0100X
General Practice	163WG0000X
Gerontology	163WG0600X
Hemodialysis	163WH0500X
Home Health	163WH0200X
Hospice	163WH1000X
Infection Control	163WI0600X
Infusion Therapy	163WI0500X
Lactation Consultant	163WL0100X
Maternal Newborn	163WM0102X
Medical-Surgical	163WM0705X
Neonatal Intensive Care	163WN0002X
Neonatal, Low-Risk	163WN0003X
Nephrology	163WN0300X
Neuroscience	163WN0800X
Nurse Massage Therapist (NMT)	163WM1400X
Nutrition Support	163WN1003X
Obstetric, High-Risk	163WX0002X
Obstetric, Inpatient	163WX0003X
Occupational Health	163WX0106X
Oncology	163WX0200X
Ophthalmic	163WX1100X
Orthopedic	163WX0800X
Ostomy Care	163WX1500X
Otorhinolaryngology & Head-Neck	163WX0601X
Pain Management	163WP0000X
Pediatric Oncology	163WP0218X
Pediatrics	163WP0200X
Perinatal	163WP1700X
Plastic Surgery	163WS0121X
Psychiatric/Mental Health	163WP0808X
Psychiatric/Mental Health, Adult	163WP0809X
Psychiatric/Mental Health, Child & Adolescent	163WP0807X
Registered Nurse First Assistant	163WR0006X
Rehabilitation	163WR0400X
Reproductive Endocrinology/Infertility	163WR1000X
School	163WS0200X
Urology	163WU0100X
Women's Health Care, Ambulatory	163WW0101X
Wound Care	163WW0000X
Adult Companion	372600000X
Chore Provider	372500000X
Day Training/Habilitation Specialist	373H00000X
Doula	374J00000X
Home Health Aide	374U00000X

PROV_TAXONOMY	Code
Homemaker	376J00000X
Nurse's Aide	376K00000X
Nursing Home Administrator	376G00000X
Religious Nonmedical Nursing Personnel	374T00000X
Religious Nonmedical Practitioner	374K00000X
Technician	374700000X
Attendant Care Provider	3747A0650X
Personal Care Attendant	3747P1801X
Acupuncturist	171100000X
Case Manager/Care Coordinator	171M00000X
Clinical Ethicist	174V00000X
Community Health Worker	172V00000X
Contractor	171W00000X
Home Modifications	171WH0202X
Vehicle Modifications	171WV0202X
Driver	172A00000X
Funeral Director	176P00000X
Genetic Counselor, MS	170300000X
Health Educator	174H00000X
Homeopath	175L00000X
Interpreter	171R00000X
Lactation Consultant, Non-RN	174N00000X
Legal Medicine	17300000X
Mechanotherapist	172M00000X
Medical Genetics, Ph.D. Medical Genetics	170100000X
Midwife	176B00000X
Midwife, Lay	175M00000X
Military Health Care Provider	17100000X
Independent Duty Corpsman	1710I1002X
Independent Duty Medical Technicians	1710I1003X
Naprapath	172P00000X
Naturopath	175F00000X
Peer Specialist	175T00000X
Prevention Professional	405300000X
Reflexologist	173C0000X
Sleep Specialist, PhD	173F00000X
Specialist	17440000X
Graphics Designer	1744G0900X
Prosthetics Case Management	1744P3200X
Research Data Abstracter/Coder	1744R1103X
Research Study	1744R1103X
Veterinarian	174M00000X
Medical Research	174MM1900X
Pharmacist	18350000X
Ambulatory Care	1835P2201X
Critical Care	1835C0205X
General Practice	1835G0000X

PROV_TAXONOMY	Code
Geriatric	1835G0303X
Nuclear	1835N0905X
Nutrition Support	1835N1003X
Oncology	1835X0200X
Pediatrics	1835P0200X
Pharmacist Clinician (PhC)/ Clinical Pharmacy Specialist	1835P0018X
Pharmacotherapy	1835P1200X
Psychiatric	1835P1300X
Pharmacy Technician	183700000X
Advanced Practice Midwife	367A00000X
Anesthesiologist Assistant	367H00000X
Clinical Nurse Specialist	364S00000X
Acute Care	364SA2100X
Adult Health	364SA2200X
Chronic Care	364SC2300X
Community Health/Public Health	364SC1501X
Critical Care Medicine	364SC0200X
Emergency	364SE0003X
Ethics	364SE1400X
Family Health	364SF0001X
Gerontology	364SG0600X
Holistic	364SH1100X
Home Health	364SH0200X
Informatics	364SI0800X
Long-Term Care	364SL0600X
Medical-Surgical	364SM0705X
Neonatal	364SN0000X
Neuroscience	364SN0800X
Occupational Health	364SX0106X
Oncology	364SX0200X
Oncology, Pediatrics	364SX0204X
Pediatrics	364SP0200X
Perinatal	364SP1700X
Perioperative	364SP2800X
Psychiatric/Mental Health	364SP0808X
Psychiatric/Mental Health, Adult	364SP0809X
Psychiatric/Mental Health, Child & Adolescent	364SP0807X
Psychiatric/Mental Health, Child & Family	364SP0810X
Psychiatric/Mental Health, Chronically III	364SP0811X
Psychiatric/Mental Health, Community	364SP0812X
Psychiatric/Mental Health, Geropsychiatric	364SP0813X
Rehabilitation	364SR0400X
School	364SS0200X
Transplantation	364ST0500X
Women's Health	364SW0102X
Nurse Anesthetist, Certified Registered	367500000X
Nurse Practitioner	363L00000X

PROV_TAXONOMY	Code
Acute Care	363LA2100X
Adult Health	363LA2200X
Community Health	363LC1500X
Critical Care Medicine	363LC0200X
Family	363LF0000X
Gerontology	363LG0600X
Neonatal	363LN0000X
Neonatal, Critical Care	363LN0005X
Obstetrics & Gynecology	363LX0001X
Occupational Health	363LX0106X
Pediatrics	363LP0200X
Pediatrics, Critical Care	363LP0222X
Perinatal	363LP1700X
Primary Care	363LP2300X
Psychiatric/Mental Health	363LP0808X
School	363LS0200X
Women's Health	363LW0102X
Physician Assistant	363A00000X
Medical	363AM0700X
Surgical	363AS0400X
Assistant, Podiatric	211D00000X
Podiatrist	213E00000X
Foot & Ankle Surgery	213ES0103X
Foot Surgery	213ES0131X
General Practice	213EG0000X
Primary Podiatric Medicine	213EP1101X
Public Medicine	213EP0504X
Radiology	213ER0200X
Sports Medicine	213ES0000X
Anaplastologist	229N00000X
Art Therapist	221700000X
Clinical Exercise Physiologist	224Y00000X
Dance Therapist	22560000X
Developmental Therapist	222Q00000X
Kinesiotherapist	226300000X
Massage Therapist	225700000X
Mastectomy Fitter	224900000X
Music Therapist	225A00000X
Occupational Therapist	225X00000X
Driving and Community Mobility	225XR0403X
Environmental Modification	225XE0001X
Ergonomics	225XE1200X
Feeding, Eating & Swallowing	225XF0002X
Gerontology	225XG0600X
Hand	225XH1200X
Human Factors	225XH1300X
Low Vision	225XL0004X

PROV_TAXONOMY	Code
Mental Health	225XM0800X
Neurorehabilitation	225XN1300X
Pediatrics	225XP0200X
Physical Rehabilitation	225XP0019X
Occupational Therapy Assistant	224Z00000X
Driving and Community Mobility	224ZR0403X
Environmental Modification	224ZE0001X
Feeding, Eating & Swallowing	224ZF0002X
Low Vision	224ZL0004X
Orthotic Fitter	22500000X
Orthotist	222Z00000X
Pedorthist	224L00000X
Physical Therapist	225100000X
Cardiopulmonary	2251C2600X
Electrophysiology, Clinical	2251E1300X
Ergonomics	2251E1200X
Geriatrics	2251G0304X
Hand	2251H1200X
Human Factors	2251H1300X
Neurology	2251N0400X
Orthopedic	2251X0800X
Pediatrics	2251P0200X
Sports	2251S0007X
Physical Therapy Assistant	225200000X
Prosthetist	224P00000X
Pulmonary Function Technologist	225B00000X
Recreation Therapist	225800000X
Recreational Therapist Assistant	22600000X
Rehabilitation Counselor	225C00000X
Assistive Technology Practitioner	225CA2400X
Assistive Technology Supplier	225CA2500X
Orientation and Mobility Training Provider	225CX0006X
Rehabilitation Practitioner	225400000X
Respiratory Therapist, Certified	227800000X
Critical Care	2278C0205X
Educational	2278E1000X
Emergency Care	2278E0002X
General Care	2278G1100X
Geriatric Care	2278G0305X
Home Health	2278H0200X
Neonatal/Pediatrics	2278P3900X
Palliative/Hospice	2278P3800X
Patient Transport	2278P4000X
Pulmonary Diagnostics	2278P1004X
Pulmonary Function Technologist	2278P1006X
Pulmonary Rehabilitation	2278P1005X
SNF/Subacute Care	2278S1500X

PROV_TAXONOMY	Code
Respiratory Therapist, Registered	227900000X
Critical Care	2279C0205X
Educational	2279E1000X
Emergency Care	2279E0002X
General Care	2279G1100X
Geriatric Care	2279G0305X
Home Health	2279H0200X
Neonatal/Pediatrics	2279P3900X
Palliative/Hospice	2279P3800X
Patient Transport	2279P4000X
Pulmonary Diagnostics	2279P1004X
Pulmonary Function Technologist	2279P1006X
Pulmonary Rehabilitation	2279P1005X
SNF/Subacute Care	2279S1500X
Specialist/Technologist	225500000X
Athletic Trainer	2255A2300X
Rehabilitation, Blind	2255R0406X
Audiologist	231H00000X
Assistive Technology Practitioner	231HA2400X
Assistive Technology Supplier	231HA2500X
Audiologist-Hearing Aid Fitter	237600000X
Hearing Instrument Specialist	237700000X
Specialist/Technologist	235500000X
Audiology Assistant	2355A2700X
Speech-Language Assistant	2355S0801X
Speech-Language Pathologist	235Z00000X
Student in an Organized Health Care Education/Training Program	390200000X
Perfusionist	242T00000X
Radiologic Technologist	247100000X
Bone Densitometry	2471B0102X
Cardiac-Interventional Technology	2471C1106X
Cardiovascular-Interventional Technology	2471C1101X
Computed Tomography	2471C3401X
Magnetic Resonance Imaging	2471M1202X
Mammography	2471M2300X
Nuclear Medicine Technology	2471N0900X
Quality Management	2471Q0001X
Radiation Therapy	2471R0002X
Radiography	2471C3402X
Sonography	2471S1302X
Vascular Sonography	2471V0105X
Vascular-Interventional Technology	2471V0106X
Radiology Practitioner Assistant	243U00000X
Specialist/Technologist Cardiovascular	246X00000X
Cardiovascular Invasive Specialist	246XC2901X
Sonography	246XS1301X
Vascular Specialist	246XC2903X

PROV_TAXONOMY	Code
Specialist/Technologist, Health Information	246Y00000X
Coding Specialist, Hospital Based	246YC3301X
Coding Specialist, Physician Office Based	246YC3302X
Registered Record Administrator	246YR1600X
Specialist/Technologist, Other	246Z00000X
Art, Medical	246ZA2600X
Biochemist	246ZB0500X
Biomedical Engineering	246ZB0301X
Biomedical Photographer	246ZB0302X
Biostatistician	246ZB0600X
EEG	246ZE0500X
Electroneurodiagnostic	246ZE0600X
Geneticist, Medical (PhD)	246ZG1000X
Graphics Methods	246ZG0701X
Illustration, Medical	246ZI1000X
Nephrology	246ZN0300X
Orthopedic Assistant	246ZX2200X
Surgical Assistant	246ZC0007X
Surgical Technologist	246ZS0410X
Specialist/Technologist, Pathology	246Q00000X
Blood Banking	246QB0000X
Chemistry	246QC1000X
Cytotechnology	246QC2700X
Hemapheresis Practitioner	246QH0401X
Hematology	246QH0000X
Histology	246QH0600X
Immunology	246Q10000X
Laboratory Management	246QL0900X
Laboratory Management, Diplomate	246QL0901X
Medical Technologist	246QM0706X
Microbiology	246QM0900X
Technician, Cardiology	246W00000X
Technician, Health Information	24700000X
Assistant Record Technician	2470A2800X
Technician, Other	247200000X
Biomedical Engineering	2472B0301X
Darkroom	2472D0500X
EEG	2472E0500X
Renal Dialysis	2472R0900X
Veterinary	2472V0600X
Technician, Pathology	246R00000X
Histology	246RH0600X
Medical Laboratory	246RM2200X
Phlebotomy	246RP1900X
Local Education Agency (LEA)	251300000X
Case Management	251B00000X
Community/Behavioral Health	251S00000X

PROV_TAXONOMY	Code
Day Training, Developmentally Disabled Services	251C00000X
Early Intervention Provider Agency	252Y00000X
Foster Care Agency	253J00000X
Home Health	251E00000X
Home Infusion	251F00000X
Hospice Care, Community Based	251G00000X
In Home Supportive Care	253Z00000X
Nursing Care	251J00000X
Program of All-Inclusive Care for the Elderly (PACE) Provider Organization	251T00000X
Public Health or Welfare	251K00000X
Supports Brokerage	251X00000X
Voluntary or Charitable	251V00000X
Clinic/Center	261Q00000X
Adolescent and Children Mental Health	261QM0855X
Adult Day Care	261QA0600X
Adult Mental Health	261QM0850X
Ambulatory Family Planning Facility	261QA0005X
Ambulatory Fertility Facility	261QA0006X
Ambulatory Surgical	261QA1903X
Amputee	261QA0900X
Augmentative Communication	261QA3000X
Birthing	261QB0400X
Community Health	261QC1500X
Corporate Health	261QC1800X
Critical Access Hospital	261QC0050X
Dental	261QD0000X
Developmental Disabilities	261QD1600X
Emergency Care	261QE0002X
Endoscopy	261QE0800X
End-Stage Renal Disease (ESRD) Treatment	261QE0700X
Family Planning, Non-Surgical	261QF0050X
Federally Qualified Health Center (FQHC)	261QF0400X
Genetics	261QG0250X
Health Service	261QH0100X
Hearing and Speech	261QH0700X
Infusion Therapy	261QI0500X
Lithotripsy	261QL0400X
Magnetic Resonance Imaging (MRI)	261QM1200X
Medical Specialty	261QM2500X
Medically Fragile Infants and Children Day Care	261QM3000X
Mental Health (Including Community Mental Health Center)	261QM0801X
Methadone	261QM2800X
Migrant Health	261QM1000X
Military Ambulatory Procedure Visits Operational (Transportable)	261QM1103X
Military and U.S. Coast Guard Ambulatory Procedure	261QM1101X
Military Outpatient Operational (Transportable) Component	261QM1102X
Military/U.S. Coast Guard Outpatient	261QM1100X

PROV_TAXONOMY	Code
Multi-Specialty	261QM1300X
Occupational Medicine	261QX0100X
Oncology	261QX0200X
Oncology, Radiation	261QX0203X
Ophthalmologic Surgery	261QS0132X
Oral and Maxillofacial Surgery	261QS0112X
Pain	261QP3300X
Physical Therapy	261QP2000X
Podiatric	261QP1100X
Primary Care	261QP2300X
Prison Health	261QP2400X
Public Health, Federal	261QP0904X
Public Health, State or Local	261QP0905X
Radiology	261QR0200X
Radiology, Mammography	261QR0206X
Radiology, Mobile	261QR0208X
Radiology, Mobile Mammography	261QR0207X
Recovery Care	261QR0800X
Rehabilitation	261QR0400X
Rehabilitation, Cardiac Facilities	261QR0404X
Rehabilitation, Comprehensive Outpatient Rehabilitation Facility (CORF)	261QR0401X
Rehabilitation, Substance Use Disorder	261QR0405X
Research	261QR1100X
Rural Health	261QR1300X
Sleep Disorder Diagnostic	261QS1200X
Student Health	261QS1000X
Urgent Care	261QU0200X
VA	261QV0200X
Epilepsy Unit	273100000X
Medicare Defined Swing Bed Unit	275N00000X
Psychiatric Unit	273R00000X
Rehabilitation Unit	273Y00000X
Rehabilitation, Substance Use Disorder Unit	276400000X
Christian Science Sanitorium	287300000X
Chronic Disease Hospital	281P00000X
Children	281PC2000X
General Acute Care Hospital	282N00000X
Children	282NC2000X
Critical Access	282NC0060X
Rural	282NR1301X
Women	282NW0100X
Long Term Care Hospital	282E00000X
Military Hospital	286500000X
Community Health	2865C1500X
Military General Acute Care Hospital	2865M2000X
Military General Acute Care Hospital. Operational (Transportable)	2865X1600X
Psychiatric Hospital	283Q00000X

PROV_TAXONOMY	Code
Rehabilitation Hospital	283X00000X
Children	283XC2000X
Religious Nonmedical Health Care Institution	282J00000X
Special Hospital	284300000X
Clinical Medical Laboratory	291U00000X
Dental Laboratory	292200000X
Military Clinical Medical Laboratory	291900000X
Physiological Laboratory	293D00000X
Exclusive Provider Organization	302F00000X
Health Maintenance Organization	302R00000X
Point of Service	305S00000X
Preferred Provider Organization	305R00000X
Alzheimer Center (Dementia Center)	311500000X
Assisted Living Facility	310400000X
Assisted Living, Behavioral Disturbances	3104A0630X
Assisted Living, Mental Illness	3104A0625X
Christian Science Facility	317400000X
Custodial Care Facility	311Z00000X
Adult Care Home	311ZA0620X
Hospice, Inpatient	315D00000X
Intermediate Care Facility, Mental Illness	310500000X
Intermediate Care Facility, Mentally Retarded	315P00000X
Nursing Facility/Intermediate Care Facility	313M00000X
Skilled Nursing Facility	314000000X
Nursing Care, Pediatric	3140N1450X
Lodging	177F00000X
Meals	174200000X
Community Based Residential Treatment Facility, Mental Illness	320800000X
Community Based Residential Treatment Facility, Mental Retardation	320900000X
and/or Developmental Disabilities	
Psychiatric Residential Treatment Facility	323P00000X
Residential Treatment Facility, Emotionally Disturbed Children	322D00000X
Residential Treatment Facility, Mental Retardation and/or Developmental	320600000X
Disabilities	
Residential Treatment Facility, Physical Disabilities	320700000X
Substance Abuse Rehabilitation Facility	324500000X
Substance Abuse Treatment, Children	3245S0500X
Respite Care	385H00000X
Respite Care Camp	385HR2050X
Respite Care, Mental Illness, Child	385HR2055X
Respite Care, Mental Retardation and/or Developmental Disabilities	385HR2060X
Respite Care, Physical Disabilities, Child	385HR2065X
Blood Bank	331L00000X
Department of Veterans Affairs (VA) Pharmacy	332100000X
Durable Medical Equipment & Medical Supplies	332B00000X
Customized Equipment	332BC3200X
Dialysis Equipment & Supplies	332BD1200X

PROV_TAXONOMY	Code
Nursing Facility Supplies	332BN1400X
Oxygen Equipment & Supplies	332BX2000X
Parenteral & Enteral Nutrition	332BP3500X
Emergency Response System Companies	333300000X
Eye Bank	332G00000X
Eyewear Supplier	332H00000X
Hearing Aid Equipment	332S00000X
Home Delivered Meals	332U00000X
Indian Health Service/Tribal/Urban Indian Health (I/T/U) Pharmacy	332800000X
Medical Foods Supplier	335G00000X
Military/U.S. Coast Guard Pharmacy	332000000X
Non-Pharmacy Dispensing Site	332900000X
Organ Procurement Organization	335U00000X
Pharmacy	333600000X
Clinic Pharmacy	3336C0002X
Community/Retail Pharmacy	3336C0003X
Compounding Pharmacy	3336C0004X
Home Infusion Therapy Pharmacy	3336H0001X
Institutional Pharmacy	3336I0012X
Long Term Care Pharmacy	3336L0003X
Mail Order Pharmacy	3336M0002X
Managed Care Organization Pharmacy	3336M0003X
Nuclear Pharmacy	3336N0007X
Specialty Pharmacy	3336S0011X
Portable X-ray and/or Other Portable Diagnostic Imaging Supplier	335V00000X
Prosthetic/Orthotic Supplier	335E00000X
Air Carrier	344800000X
Ambulance	341600000X
Air Transport	3416A0800X
Land Transport	3416L0300X
Water Transport	3416S0300X
Bus	347B00000X
Military/U.S. Coast Guard Transport	341800000X
Military or U.S. Coast Guard Ambulance, Air Transport	3418M1120X
Military or U.S. Coast Guard Ambulance, Ground Transport	3418M1110X
Military or U.S. Coast Guard Ambulance, Water Transport	3418M1130X
Non-emergency Medical Transport (VAN)	343900000X
Private Vehicle	347C00000X
Secured Medical Transport (VAN)	343800000X
Taxi	344600000X
Train	347D00000X
Transportation Broker	347E00000X

#### BIRTH RECORDS INFANT/CHILD - REGISTRY OF VITAL RECORDS AND STATISTICS Analytic Data Dictionary (PHDBIRTH.BIRTH\_INFANT)

#### Birth Records Infant/Child: Registry of Vital Records and Statistics (PHDBIRTH.BIRTH\_INFANT)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_Birth	CHIA Match level	<ul> <li>1= These are members within the APCD that received a high score against the DPH input record.</li> <li>Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.</li> <li>2=This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches.</li> <li>Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for completeness.</li> </ul>	Num
BIRTH_LINK_ID	Project specific ID that links a mother and infant	ID linking mother and infant for each delivery	Num
ANOMALY_ADACTY LY	Congenital anomalies - Adactyly	0=No 1=Yes 9=Unknown	Num
ANOMALY_ANENCE PHALY	Congenital anomalies - Anencephaly	0=No 1=Yes 9=Unknown	Num
ANOMALY_CHD_CY ANOTIC	Congenital anomalies - Cyanotic congenital heart disease	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_CHROM_ DISORDER	Congenital anomalies - Suspected chromosomal disorder	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_CHROM_ DISORDER_CONFIR MED	Congenital anomalies - suspected chromosomal disorder: Karyotype confirmed (chromosomal disorder)	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
ANOMALY_CHROM_ DISORDER_PENDIN G	Congenital anomalies - suspected chromosomal disorder: Karyotype pending (chromosomal disorder)	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_CLEFT	Congenital anomalies - Cleft lip with or without cleft palate	0=No 1=Yes 9=Unknown	Num
ANOMALY_CLUB_F T	Congenital anomalies - Club foot	0=No 1=Yes 9=Unknown	Num
ANOMALY_DIAPHR AGMATIC_HERNIA	Congenital anomalies - Congenital diaphragmatic hernia	0=No 1=Yes 9=Unknown	Num
ANOMALY_DOWN	Congenital anomalies - Down syndrome	0=No 1=Yes 9=Unknown	Num
ANOMALY_DOWN_ CONFIRMED	Congenital anomalies - Down syndrome: Karyotype confirmed	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_DOWN_ PENDING	Congenital anomalies - Down syndrome: Karyotype pending	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_CLEFT_ P	Congenital anomalies - Cleft palate alone	0=No 1=Yes 9=Unknown	Num
ANOMALY_GASTRO	Congenital anomalies - Gastroschisis	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_HYDROC EPH	Congenital anomalies - Hydrocephaly	0=No 1=Yes 9=Unknown	Num
ANOMALY_HYPO	Congenital anomalies - Hypospadias	0=No 1=Yes 9=Unknown	Num
ANOMALY_LIMB_RE DUCTION	Congenital anomalies - Limb reduction defect (excluding dwarfing syndrome)	0=No 1=Yes 9=Unknown	Num
ANOMALY_MENI_S B	Congenital anomalies - Meningomyelocele/Spina bifida	0=No 1=Yes 9=Unknown	Num
ANOMALY_NONE	Congenital anomalies - None of the above	0=No 1=Yes 9=Unknown	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
ANOMALY_OMPH	Congenital anomalies - Omphalocele	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_OTHER_ HEART	Congenital anomalies - Other heart malformations	0=No 1=Yes 9=Unknown	Num
ANOMALY_OTHER_ MUSC	Congenital anomalies - Other musculoskeletal anomalies	0=No 1=Yes 9=Unknown	Num
ANOMALY_POLYDA C	Congenital anomalies - Polydactyly	0=No 1=Yes 9=Unknown	Num
ANOMALY_RECTAL _ATRESIA	Congenital anomalies - Rectal atresia/stenosis	0=No 1=Yes 9=Unknown	Num
ANOMALY_RENAL_ AGENESIS	Congenital anomalies Renal agenesis	0=No 1=Yes 9=Unknown	Num
ANOMALY_SYNDAC TYLY	Congenital anomalies - Syndactyly	0=No 1=Yes 9=Unknown	Num
ANOMALY_TEF_EA	Congenital anomalies - Tracheoesophageal fistula/esophageal atresia	0=No 1=Yes 9=Unknown	Num
APGAR1	Apgar at 1 minute	1-10 99=unknown	Num
APGAR10	Apgar at 10 minutes	1-10 99=unknown	Num
APGAR5	Apgar at 5 minutes	1-10 99=unknown	Num
BIRTH_LENGTH	Birth length (inches)	XX.XX 99.99=Unknown Blank=N/A (MF Record)	Num
BIRTH_ORDER	Birth order of this infant	0= Singleton 1= First 2= Second 3= Third, etc. 9= Unknown	Num
BIRTH_WEIGHT	Infant birthweight in grams	Grams 9999=Unknown	Num
CERT_TITLE_BIRTH	Certifier Title	1=MD 2=DO 3=CNM 4=OTHER MIDWIFE 5=OTHER 6=HOSPITAL ADMIN 8=NONE 9=Missing	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
DISCH_DATE_BIRT H	Infant Discharge date	Date Proxy – count of days between discharge date and randomly chosen date in the past NOTE: The smaller the date proxy, the more recently the event occurred	Num
DISCH_YEAR_BIRT H	Year of Discharge	Years (2011-2019)	Num
DISCH_MONTH_BIR TH	Month of Discharge	Month (1-12)	Num
DISCH_WITH_MOM	Is child being discharged home with mother?	0=No 1=Yes 9=Unknown	Num
DOB	Infant Date of birth	Date Proxy – count of days between birth date and randomly chosen date in the past NOTE: The smaller the date proxy, the more recently the event occurred	Num
MONTH_BIRTH	Month of birth (1-12)	Months 1-12	Num
YEAR_BIRTH	Year of birth	Years, YYYY format (starts 2011)	Num
FACILITY_ID_BIRTH	Facility I.D.	4 digit number 0000-9999 2000s = Massachusetts hospitals 3000s = birthing centers 0000 = home births 0050 = doctor's office/clinic 0070 = enroute 0090 = other facility 9999 = unknown	Char
FACILITY_TYPE_BIR TH	Type of birthing facility	1=MA hospital 2=Birthing center 3=Home birth 4=Doctor's office/clinic 5=En route 6=Other facility 9=Unknown 10=Out of state hospital	Num
FATHER_ETH_AFRI CAN	Father's Ethnicity - African	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_AFRI CAN_AMER	Father's Ethnicity - African American	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_AME R	Father's Ethnicity - American	0=No 1=Yes 9=Unknown	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
FATHER_ETH_AME R_NATIVE	Father's Ethnicity - Native American/American Indian/Alaskan Native	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_ASIA N_INDIAN	Father's Ethnicity - Asian Indian	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_BRAZ ILIAN	Father's Ethnicity - Brazilian	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_CAM BODIAN	Father's Ethnicity - Cambodian	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_CAP E_VERDEAN	Father's Ethnicity - Cape Verdean	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_CARI BBEAN	Father's Ethnicity - Caribbean Islander	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_CEN_ AMER	Father's Ethnicity - Other Central American	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_CHIN ESE	Father's Ethnicity - Chinese	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_COL OMBIAN	Father's Ethnicity - Colombian	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_CUB AN	Father's Ethnicity - Cuban	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_DOMI NICAN	Father's Ethnicity - Dominican	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_EUR OPEAN	Father's Ethnicity - European	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_FILIPI NO	Father's Ethnicity - Filipino	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_GUA TEMALAN	Father's Ethnicity - Guatemalan	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FATHER_ETH_HAITI AN	Father's Ethnicity - Haitian	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_HISP _OTH	Father's Ethnicity - Hispanic/Latino/Other	0=No 1=Yes 9=Unknown	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
FATHER_ETH_HON DURAN	Father's Ethnicity - Honduran	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FATHER_ETH_JAPA NESE	Father's Ethnicity - Japanese	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_KOR EAN	Father's Ethnicity - Korean	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_LAOT	Father's Ethnicity - Laotian	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_MEX	Father's Ethnicity - Mexican, Mexican American, Chicano	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_MID_ EASTERN	Father's Ethnicity - Middle Eastern	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_OTH ER	Father's Ethnicity - Other	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_PAC_ ISL_OT	Father's Ethnicity - Other Pacific Islander	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_POR TUGUESE	Father's Ethnicity - Portuguese	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_POR TUGUESE_OTH	Father's Ethnicity - Other Portuguese	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_PR	Father's Ethnicity - Puerto Rican	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_REF USED	Father's Ethnicity - Refused	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_RUS SIAN	Father's Ethnicity - Russian	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FATHER_ETH_S_A MER_OTH	Father's Ethnicity - Other South American	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_SAL	Father's Ethnicity - Salvadoran	0=No 1=Yes 9=Unknown	Num
FATHER_ETH_UNK	Father's Ethnicity - Unknown	0=No 1=Yes 9=Unknown	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
FATHER_ETH_VIET	Father's Ethnicity - Vietnamese	0=No 1=Yes 9=Unknown	Num
FATHER_RACE_AM ER_NATIVE	Father's Race - American Indian/Alaska Native/Native American	0=No 1=Yes 9=Unknown	Num
FATHER_RACE_ASI AN	Father's Race - Asian	0=No 1=Yes 9=Unknown	Num
FATHER_RACE_ASI AN_OTH	Father's Race - Other Asian	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FATHER_RACE_BIR TH	Single race/Hispanic ethnicity for father	<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = unknown</li> </ol>	Num
FATHER_RACE_BLA CK	Father's Race - Black or African American	0=No 1=Yes 9=Unknown	Num
FATHER_RACE_BLA CK_HISP	Father's Race - Hispanic/Latino/Black	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FATHER_RACE_GU AM_CHAM	Father's Race - Guamanian or Chamorro	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FATHER_RACE_HA WAIIAN	Father's Race - Native Hawaiian	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FATHER_RACE_OT H	Father's Race - Other	0=No 1=Yes 9=Unknown	Num
FATHER_RACE_PI_ OTH	Father's Race - Other Pacific Islander	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FATHER_RACE_RE FUSED	Father's Race - Refused	0=No 1=Yes 9=Unknown	Num
FATHER_RACE_SA MOAN	Father's Race - Samoan	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

## BIRTH RECORDS INFANT/CHILD - REGISTRY OF VITAL RECORDS AND STATISTICS Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
FATHER_RACE_UN K	Father's Race - Unknown	0=No 1=Yes 9=Unknown	Num
FATHER_RACE_WH	Father's Race - White	0=No 1=Yes 9=Unknown	Num
FATHER_RACE_WH ITE_HISP	Father's Race - Hispanic/Latino/White	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FETAL_PRESENTAT	Fetal presentation at delivery	1=Cephalic 2=Breech 3=Other 9=Unknown	Num
GESTATIONAL_AGE	Obstetric estimate of gestation at delivery (completed weeks)	Age in weeks 99.99=unknown	Num
HEAD_CIRC	Head circumference (centimeters)	99=Unknown Blank=N/A (MF Record)	Num
HEARING_NOT_SC REENED	Hearing not screened because	1=DECEASED 2=MISSED 3=PARENTS REFUSED 4=TRANSFERRED 5=OTHER (SPECIFY) Blank=N/A (MF Record)	Num
HEARING_RESULTS	Hearing screening results	1=BOTH EARS DID NOT PASS 2=LEFT EAR DID NOT PASS 3=PASSED BOTH EARS 4=RIGHT EAR DID NOT PASS 5=SCREENED, RESULTS INCONCLUSIVE 6=NOT SCREENED	Num
ICOND_ACID	Abnormal conditions of the newborn - Acidosis	0=No 1=Yes 9=Unknown	Num
ICOND_ANEMIA	Abnormal conditions of the newborn -Anemia	0=No 1=Yes 9=Unknown	Num
ICOND_ANTIBIO	Abnormal conditions of the newborn -Antibiotics received by newborn for suspected neonatal sepsis	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICOND_CYAN	Abnormal conditions of the newborn - Cyanosis	0=No 1=Yes 9=Unknown	Num
ICOND_FAS	Abnormal conditions of the newborn - Fetal alcohol syndrome	0=No 1=Yes 9=Unknown	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
ICOND_HYPOT	Abnormal conditions of the newborn - Hypotonia	0=No 1=Yes 9=Unknown	Num
ICOND_HYPOX	Abnormal conditions of the newborn - Hypoxia	0=No 1=Yes 9=Unknown	Num
ICOND_INFECT	Abnormal conditions of the newborn - Congenital infection	0=No 1=Yes 9=Unknown	Num
ICOND_INTRA_HEM	Abnormal conditions of the newborn - Intracranial hemorrhage	0=No 1=Yes 9=Unknown	Num
ICOND_INTUB	Abnormal conditions of the newborn - Intubation	0=No 1=Yes 9=Unknown	Num
ICOND_JAUND	Infant condition - Jaundice (bilirubin>10)	0=No 1=Yes 9=Unknown	Num
ICOND_MAS	Abnormal conditions of the newborn - Meconium aspiration syndrome	0=No 1=Yes 9=Unknown	Num
ICOND_NONE	Abnormal conditions of the newborn - None of the above	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICOND_OTHER	Abnormal conditions of the newborn - Other	0=No 1=Yes 9=Unknown	Num
ICOND_RDS	Abnormal conditions of the newborn - Hyaline membrane disease/RDS	0=No 1=Yes 9=Unknown	Num
ICOND_SEIZ	Abnormal conditions of the newborn - Seizure or serious neurologic dysfunction	0=No 1=Yes 9=Unknown	Num
ICOND_TACH	Abnormal conditions of the newborn - Tachypnea	0=No 1=Yes 9=Unknown	Num
ICOND_TOX	Abnormal conditions of the newborn - Positive toxicology screen	0=No 1=Yes 9=Unknown	Num
INC_CODE_BIRTH	City/town that birth occurred	1-351 999=Unknown	Num
INF_BREAST_FED	Was infant breastfed during hospital stay?	0=No 1=Yes 9=Unknown	Num
INF_VAC_HBIG	HBIG vaccine given	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

## Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
INF_VAC_HEPB	HEPB vaccine given	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
INF_VAC_NONE	No vaccines given	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
INTERNAL_TRANSF ER_BIRTH	Was infant transferred internally?	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
INTERNAL_TRANSF ER_TO_BIRTH	Transferred internally to?	1=NICU 2=SCN 3=SCU 8=N/A (not transferred) Blank=N/A (MF Record)	Num
NAS_BC	NAS indicated on birth certificate?	0=No 1=Yes	Num
NEONAT_AVEN1	Neonatal procedures - Assisted ventilation required immediately following delivery	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
NEONAT_AVEN6	Neonatal procedures - Assisted ventilation required for more than six hours	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
NEONAT_PROC_NO NE	Neonatal procedures - None of the above	0=No 1=Yes 9=Unknown	Num
NEONAT_PROC_OT HER	Neonatal procedures - Other	0=No 1=Yes 9=Unknown	Num
NEONAT_PROC_PH OTO	Neonatal procedures - Phototherapy	0=No 1=Yes 9=Unknown	Num
NEONAT_PROC_SU RF	Neonatal procedures - Newborn given surfactant replacement therapy	0=No 1=Yes 9=Unknown	Num
PLURALITY	Plurality	Count 99=Unknown	Num
Res_Code_Birth	City/town	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num
RES_ZIP_BIRTH	Zip code	5 digit zip code 99999=Unknown	Char
SEX_BIRTH	Infant Sex	1=M 2=F 9=Unknown	Num

#### Birth Records MOM: Registry of Vital Records and Statistics (PHDBIRTH.BIRTH\_MOM)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_Birth	CHIA Match level	<ul> <li>1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.</li> <li>2=This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches. Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for completeness.</li> </ul>	Num
BIRTH_LINK_ID	Project specific ID that links a mother and infant	ID linking mother and infant for each delivery	Num
AGE_BIRTH	Maternal age in years	Age in years 9999=Unknown	Num
ALC_BEFORE	Did mother drink three months before or during pregnancy?	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ALC_DURING	Any alcohol consumption during pregnancy?	0=No 1=Yes 9=Unknown	Num
ALC_NUM_TRI1	First three months of pregnancy - number of drinks	# of drinks 99=Unknown Blank=N/A (MF Record)	Num
ALC_NUM_TRI2	Second three months of pregnancy - number of drinks	# of drinks 99=Unknown Blank=N/A (MF Record)	Num
ALC_NUM_TRI3	Third trimester of pregnancy - number of drinks	# of drinks 99=Unknown Blank=N/A (MF Record)	Num
BMI_BIRTH	Mother's pre-pregnancy BMI	XX.X 99.9 = Unknown	Num
CENSUS_IND_BIRTH	Bureau of census industry code (mother)	4 digit bureau of census industry code	Num
CENSUS_OCC_BIRTH	Bureau of census occupation code (mother)	4 digit bureau of census industry code	Num

Variable Name	Variable Description	Meta Data	Format
CIG_DURING_PREG	Any tobacco use during pregnancy?	0=No 1=Yes 9=Unknown	Num
CIG_NUM_TRI1	First three months of pregnancy - # of cigarettes	0-98 99=Unknown Blank=N/A (MF Record)	Num
CIG_NUM_TRI2	Second three months of pregnancy - # of cigarettes	0-98 99=Unknown Blank=N/A (MF Record)	Num
CIG_NUM_TRI3	Third trimester of pregnancy - # of cigarettes	0-98 99=Unknown Blank=N/A (MF Record)	Num
DELIV_METHOD	Final route and method of delivery	1= Vaginal 2= VBAC 3= Primary CS 4= Repeated CS 9= Unknown	Num
DENTAL_CLEANING	Teeth cleaned by a dentist or dental hygienist during this pregnancy?	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_AI_HOSP	Pregnancy resulted from Artificial insemination	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_AI_MOM	Mother reported artificial insemination during month of conception	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_ART_HOSP	Pregnancy resulted from Assisted reproductive technology	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_ART_MOM	Mother reported use of Assisted Reproductive Technology during month of conception	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_DRUG_HOSP	Pregnancy resulted from Fertility-enhancing drugs	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_DRUG_MOM	Mother reported use of fertility enhancing drugs during month of conception	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_EGG_MOM	Mother reported that "anonymous egg donor" applied during this pregnancy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

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Variable Name	Variable Description	Meta Data	Format
FERT_HOSP	Did this pregnancy result from infertility treatment	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_IUI_HOSP	Pregnancy resulted from Intrauterine insemination	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_IUI_MOM	Mother reported intrauterine insemination durin1g month of conception	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_MOM	Mother reported fertility drugs/medical procedures	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_MONTH_MOM	Mother checked the box, "I was not using fertility treatment during the month that I got pregnant	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_NONE_MOM	Mother reported "None of these" (anonymous egg donor, anonymous sperm donor, surrogacy) apply during this pregnancy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_OTHER_MOM	Mother reported Other fertility-related medical treatment during month of conception	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_SPERM_MOM	Mother reported that "anonymous sperm donor" applied during this pregnancy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_SURROGATE_ MOM	Mother reported that "surrogacy" applied during this pregnancy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FETAL_PRESENTATIO	Fetal presentation at delivery	1=Cephalic 2=Breech 3=Other 9=Unknown	Num
FIRST_PRENATAL_DA TE	Date of first prenatal care	<b>Proxy Date</b> – count of days between first prenatal visit date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred Blank = No PNC	Num

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Variable Name	Variable Description	Meta Data	Format
FIRST_PRENATAL_YE AR	Year of first prenatal care	YYYY	Num
FIRST_PRENATAL_M ONTH	Month of first prenatal care	Months (1-12)	Num
FOREIGN_BORN_BIR TH	Mother's country of birth	0=US born 1=Foreign born 9=Unknown	Num
GRAVIDITY	Total number of times a woman has been pregnant, including the index birth. GRAVIDITY CALCULATION IS NUMBER OF LIVE BIRTHS LIVING + NUMBER OF LIVE BIRTHS NOW DEAD + NUMBER OF TERMINATIONS + 1.	Count 99=Unknown/Blanks	Num
HOME_BIRTH_PLANN ED	Planned to deliver at home?	0=No 1=Yes 8=N/A 9=Unknown	Num
KOTELCHUCK	Adequacy of Prenatal Care Utilization Index	0=Missing/Unknown 1= Inadequate 2= Intermediate 3= Adequate 4=Intensive	Num
LAD_COMP_ABRUPTI O	Complications of Labor & Delivery - Abruptio placenta	0=No 1=Yes 9=Unknown	Num
LAD_COMP_ANESTH ETIC	Complications of Labor & Delivery - Anesthetic complications	0=No 1=Yes 9=Unknown	Num
LAD_COMP_ANTIBIOT	Complications of Labor & Delivery - Antibiotics received by the mother during labor	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_COMP_BLEED	Complications of labor & delivery - Other excessive bleeding	0=No 1=Yes 9=Unknown	Num
LAD_COMP_CEPHAL OPELVIC_DISP	Complications of Labor & Delivery - Cephalo pelvic disproportion	0=No 1=Yes 9=Unknown	Num
LAD_COMP_CHORIOA MNIONITIS	Complications of Labor & Delivery - Clinical chorioamnionitis/maternal temp.>= 38C (100.4F)	0=No 1=Yes 9=Unknown	Num
LAD_COMP_CORD_P ROLAPSE	Complications of Labor & Delivery - Cord prolapse	0=No 1=Yes 9=Unknown	Num

Variable Name	Variable Description	Meta Data	Format
LAD_COMP_DYSFUN C	Complications of Labor & Delivery - Dysfunctional labor	0=No 1=Yes 9=Unknown	Num
LAD_COMP_LONGST AGE2	Complications of labor & delivery - Prolonged 2nd stage	0=No 1=Yes 9=Unknown	Num
LAD_COMP_NONE	Complications of labor & delivery - None of the above	0=No 1=Yes 9=Unknown	Num
LAD_COMP_OTHER	Complications of labor & delivery - Other	0=No 1=Yes 9=Unknown	Num
LAD_COMP_PLAC_PR EV	Complications of labor & delivery - Placenta previa	0=No 1=Yes 9=Unknown	Num
LAD_COMP_RUPT_PR OLONG	Complications of labor & delivery - Rupture of membrane - prolonged (>24 hours)	0=No 1=Yes 9=Unknown	Num
LAD_COMP_SEIZURE	Complications of labor & delivery - Seizures during labor	0=No 1=Yes 9=Unknown	Num
LAD_PROCECV_F	Labor and delivery procedures - External cephalic version: Failed	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_PROCECV_S	Labor and delivery procedures - External cephalic version: Successful	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_PROC_ECV	Labor and delivery procedures - External cephalic version	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_PROC_ESAN	Labor & Delivery procedures - Epidural or spinal anesthesia during labor	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_PROC_FETAL_M ON_E	Labor & Delivery procedures - Electronic fetal monitoring (external)	0=No 1=Yes 9=Unknown	Num
LAD_PROC_FETAL_M ON_I	Labor & Delivery procedures - Electronic fetal monitoring (internal)	0=No 1=Yes 9=Unknown	Num
LAD_PROC_HYS	Labor & Delivery procedures - Unplanned hysterectomy	0=No 1=Yes 9=Unknown	Num

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Variable Name	Variable Description	Meta Data	Format
LAD_PROC_ICU	Labor & Delivery procedures - Admission to intensive care unit	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_PROC_INDUCTI ON	Labor & Delivery procedures - Induction of labor	0=No 1=Yes 9=Unknown	Num
LAD_PROC_LACERAT E	Labor & Delivery procedures - Third or fourth degree perineal laceration	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_PROC_MATERN AL_TRANFUSION	Labor & Delivery procedures - Maternal transfusion	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_PROC_NONE	Labor & Delivery procedures - None of the above	0=No 1=Yes 9=Unknown	Num
LAD_PROC_OTHER	Labor & Delivery procedures - Other	0=No 1=Yes 9=Unknown	Num
LAD_PROC_RUPT_UT ERUS	Labor & Delivery procedures - Ruptured uterus	0=No 1=Yes 9=Unknown	Num
LAD_PROC_STEROID	Labor & Delivery procedures - Steroids (glucocorticoids)	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_PROC_STIM_LA BOR	Labor & Delivery Procedures Stimulation/augmentation of labor	0=No 1=Yes 9=Unknown	Num
LANGUAGE_SPOKEN	Language preferred for speaking about health	1=English 2=Spanish 3=Portuguese 4=Cape Verdean Creole 5=Haitian Creole 6=Khmer, 7=Vietnamese 8=Cambodian 9=Somali 10=Arabic 11=Albanian 12=Chinese 13=Russian 14=American Sign Language 15=Other 88=Refused 99=Unknown Blank=N/A (MF Record)	Num

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Variable Name	Variable Description	Meta Data	Format
LANGUAGE_WRITTEN	Language preferred for reading about health	1=English 2=Spanish 3=Portuguese 4=Cape Verdean Creole 5=Haitian Creole 6=Khmer, 7=Vietnamese 8=Cambodian 9=Somali 10=Arabic 11=Albanian 12=Chinese 13=Russian 14=Other 88=Refused 99=Unknown Blank=N/A (MF Record)	Num
LAST_LIVE_BIRTH_DA TE	Date of last live birth	<b>Date Proxy</b> – count of days between last live birth date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
LAST_LIVE_BIRTH_YE AR	Year of last live birth	YYYY	Num
LAST_LIVE_BIRTH_M ONTH	Month of last live birth	Months (1-12)	Num
LAST_MENSES_DATE	Date last normal menses began	<b>Date Proxy</b> – count of days between last menses date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
LAST_MENSES_YEAR	Year of last normal menses	YYYY	Num
LAST_MENSES_MON TH	Month of last normal menses	Months (1-12)	Num
LAST_OTHER_OUTCO ME_DATE	Date of last other pregnancy outcome	<b>Date Proxy</b> – count of days between last menses date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred Blank = No other birth outcomes	Num
LAST_OTHER_OUTCO ME_YEAR	Year of last other pregnancy outcome	YYYY	Num
LAST_OTHER_OUTCO ME_MONTH	Month of last other pregnancy outcome	Months (1-12)	Num

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Variable Name	Variable Description	Meta Data	Format
LD_PAY	N/A	1=Public 2=Private 9=Unknown	Num
MARITAL_BIRTH	Marital status at time of birth	1 = Unmarried 2 = Married 9 = Missing/Unknown	Num
MATINF_CHLAM	Maternal infections - Chlamydia	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_GON	Maternal infections - Gonorrhea	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_HEPB	Maternal infections - Hepatitis B	0=No 1=Yes 9=Unknown	Num
MATINF_HEPC	Maternal infections - Hepatitis C	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_NONE	Maternal Infections - None of the above	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_RUBELLA	Maternal Infections - Rubella infection during pregnancy	0=No 1=Yes 9=Unknown	Num
MATINF_SYPH	Maternal Infections - Syphilis	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_DIABETES_ G	Maternal risk factors - Gestational diabetes	0=No 1=Yes 9=Unknown	Num
MATRISK_DIABETES_ P	Maternal risk factors - Diabetes, prepregnancy	0=No 1=Yes 9=Unknown	Num
MATRISK_ANEMIA	Maternal risk factors - Anemia (HCT < 30, HGB < T10)	0=No 1=Yes 9=Unknown	Num
MATRISK_C_SEC	Maternal risk factors - Previous cesarean delivery	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_C_SEC_NU M	Maternal risk factors - If previous cesarean, how many?	Count 99=Unknown 88 = Not applicable Blank=N/A (MF Record)	Num

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Variable Name	Variable Description	Meta Data	Format
MATRISK_CANCERS	Maternal risk factors - Maternal cancers	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_CARDIAC	Maternal risk factors - Cardiac disease	0=No 1=Yes 9=Unknown	Num
MATRISK_CERVIX	Maternal risk factors - Incompetent cervix	0=No 1=Yes 9=Unknown	Num
MATRISK_HEMOGLO B	Maternal risk factors - Hemoglobinopathy, non- sickle cell anemia	0=No 1=Yes 9=Unknown	Num
MATRISK_HYDRAMNI OS	Maternal risk factors - Hydramnios	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_HYPER_E	Maternal risk factors - Hypertension, eclampsia	0=No 1=Yes 9=Unknown	Num
MATRISK_HYPER_G	Maternal risk factors - Hypertension, gestational	0=No 1=Yes 9=Unknown	Num
MATRISK_HYPER_P	Maternal risk factors - Hypertension, prepregnancy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_HYPER_C	Maternal risk factors - Hypercoagulable conditions	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_HYPER_PR E_E	Maternal risk factors - Hypertension, pre-eclampsia	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_LARGE_INF	Maternal risk factors - Previous infant 4000+ grams	0=No 1=Yes 9=Unknown	Num
MATRISK_LUNG	Maternal risk factors -Acute or chronic lung disease	0=No 1=Yes 9=Unknown	Num
MATRISK_NONE	Maternal risk factors - None of the above	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_OLIGOHYD RAMNIOS	Maternal risk factors - Oligohydramnios	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

Variable Name	Variable Description	Meta Data	Format
MATRISK_OTHER	Maternal Risk Factors - Other	0=No 1=Yes 9=Unknown	Num
MATRISK_PKU	Maternal Risk Factors - Maternal PKU	0=No 1=Yes 9=Unknown	Num
MATRISK_PRE_DIABE TES	Maternal Risk Factors - Pre- diabetes	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_PRE_LABO R	Maternal Risk Factors - Pre- term labor this pregnancy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_PREV_PRE TERM	Maternal Risk Factors - Previous preterm birth	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_PREV_BD	Maternal Risk Factors - Previous infant with birth defects	0=No 1=Yes 9=Unknown	Num
MATRISK_RENAL	Maternal Risk Factors - Renal disease	0=No 1=Yes 9=Unknown	Num
MATRISK_RH	Maternal Risk Factors - RH sensitization	0=No 1=Yes 9=Unknown	Num
MATRISK_SEIZURE	Maternal Risk Factors - Seizure disorders	0=No 1=Yes 9=Unknown	Num
MATRISK_SICKLE	Maternal Risk Factors - Sickle cell anemia	0=No 1=Yes 9=Unknown	Num
MATRISK_WT_GAIN	Maternal Risk Factors - Weight gain inappropriate for mother	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_WT_LOSS	Maternal Risk Factors - Weight loss inappropriate for mother	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_LUPUS	Maternal risk factors -Lupus erythematosus	0=No 1=Yes 9=Unknown	Num

Variable Name	Variable Description	Meta Data	Format
MOTHER_EDU	Highest grade of elementary or secondary school that the mother completed.	1=No HS degree 2=HS degree or GED 3=Associate or Bachelor degree 4=Post graduate 5=Other 8=Refused 9=Unknown/Unobtainable 10=Special Education	Num
MOTHER_ETH_AFRIC AN	Mother's Ethnicity - African	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_AFRIC AN_AMER	Mother's Ethnicity - African American	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_AMER	Mother's Ethnicity - American	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_ASIAN _INDIAN	Mother's Ethnicity - Asian Indian	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_BRAZI LIAN	Mother's Ethnicity - Brazilian	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_CAMB ODIAN	Mother's Ethnicity - Cambodian	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_CAPE_ VERDEAN	Mother's Ethnicity - Cape Verdean	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_CARIB BEAN	Mother's Ethnicity - Caribbean Islander	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_CEN_ AMER	Mother's Ethnicity - Other Central American	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_CHINE SE	Mother's Ethnicity - Chinese	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_COLO MBIAN	Mother's Ethnicity - Colombian	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_CUBA N	Mother's Ethnicity - Cuban	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_DOMI NICAN	Mother's Ethnicity - Dominican	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_EURO PEAN	Mother's Ethnicity - European	0=No 1=Yes 9=Unknown	Num

Variable Name	Variable Description	Meta Data	Format
MOTHER_ETH_FILIPI NO	Mother's Ethnicity - Filipino	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_GUAT EMALAN	Mother's Ethnicity - Guatemalan	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_ETH_HAITIA	Mother's Ethnicity - Haitian	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_HISP_ OTH	Mother's Ethnicity - Hispanic/Latina/Other	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_HOND URAN	Mother's Ethnicity - Honduran	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_ETH_JAPAN ESE	Mother's Ethnicity - Japanese	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_KORE AN	Mother's Ethnicity - Korean	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_LAOTI AN	Mother's Ethnicity - Laotian	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_MEX	Mother's Ethnicity - Mexican, Mexican American, Chicana	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_MID_E ASTERN	Mother's Ethnicity - Middle Eastern	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_OTHE R	Mother's Ethnicity - Mother's Ethnicity - Other	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_PAC_I SL_OT	Mother's Ethnicity - Other Pacific Islander	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_PORT UGUESE	Mother's Ethnicity - Portuguese	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_PORT UGUESE_OTH	Mother's Ethnicity - Other Portuguese	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_PR	Mother's Ethnicity - Puerto Rican	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_REFU SED	Mother's Ethnicity - Refused	0=No 1=Yes 9=Unknown	Num

Variable Name	Variable Description	Meta Data	Format
MOTHER_ETH_RUSSI AN	Mother's Ethnicity - Russian	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_ETH_S_AM ER_OTH	Mother's Ethnicity - Other South American	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_SAL	Mother's Ethnicity - Salvadoran	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_UNK	Mother's Ethnicity - Unknown	0=No 1=Yes 9=Unknown	Num
MOTHER_ETH_VIET	Mother's Ethnicity - Vietnamese	0=No 1=Yes 9=Unknown	Num
MOTHER_HEIGHT	Mother's height (feet)	One digit integer Blank=N/A (MF Record)	Num
MOTHER_HEIGHT_IN	Mother's height (inches)	Two digit integer Blank=N/A (MF Record)	Num
MOTHER_RACE_AME R_NATIVE	Mother's Race - American Indian/Alaska Native/Native American	0=No 1=Yes 9=Unknown	Num
MOTHER_RACE_ASIA N	Mother's Race - Asian	0=No 1=Yes 9=Unknown	Num
MOTHER_RACE_ASIA N_OTH	Mother's Ethnicity - Other Asian	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_RACE_BIRT H	Single race/Hispanic ethnicity for mother	<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = unknown</li> </ol>	Num
MOTHER_RACE_BLA CK	Mother's Race - Black	0=No 1=Yes 9=Unknown	Num
MOTHER_RACE_BLA CK_HISP	Mother's Race - Hispanic/Latina/Black	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_RACE_GUA M_CHAM	Mother's Race - Guamanian or Chamorro	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

Variable Name	Variable Description	Meta Data	Format
MOTHER_RACE_HAW Alian	Mother's Ethnicity - Native Hawaiian	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_RACE_OTH	Mother's Race - Other	0=No 1=Yes 9=Unknown	Num
MOTHER_RACE_PI_O TH	Mother's Race - Other Pacific Islander	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_RACE_REF USED	Mother's Race - Refused	0=No 1=Yes 9=Unknown	Num
MOTHER_RACE_SAM OAN	Mother's Race - Samoan	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_RACE_UNK	Mother's Race - Unknown	0=No 1=Yes 9=Unknown	Num
MOTHER_RACE_WHI TE	Mother's Race - White	0=No 1=Yes 9=Unknown	Num
MOTHER_RACE_WHI TE_HISP	Mother's Race - Hispanic/Latina/White	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_WEIGHT_N OW	Weight at admission for delivery (pounds)	Integer 999=Missing Blank=N/A (MF Record)	Num
MOTHER_WEIGHT_P RIOR	Pre-pregnancy weight (pounds)	Integer 999=Missing Blank=N/A (MF Record)	Num
NAICS_BIRTH	North American Industry Classification System	6 digit North American Industry code	Char
NAICS_YEAR_BIRTH	Coding year for NAICS	4 digit year	Num
OTHER_OUTCOME_N UM	Total number of other pregnancy outcomes	Count 99=Unknown	Num
PARITY	PARITY CALCULATION IS NUMBER OF LIVE BIRTHS LIVING+NUMBER OF LIVE BIRTHS NOW DEAD+1	Count 99=Unknown	
PRENAT_AMNIO	Prenatal tests of procedures - Amniocentesis	0=No 1=Yes 9=Unknown	Num

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Variable Name	Variable Description	Meta Data	Format
PRENAT_CVS	Prenatal tests of procedures - CVS (Chorionic villus sampling), a procedure for first-trimester prenatal diagnosis	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
PRENAT_FETAL_SUR G	Prenatal tests of procedures -Fetal surgery	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
PRENAT_HOSP	Prenatal tests of procedures - Hospitalization (prenatal for this pregnancy)	0=No 1=Yes 9=Unknown	Num
PRENAT_NONE	Prenatal Tests and Procedures - None of the above	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
PRENAT_OTHER	Prenatal Tests and Procedures - Other	0=No 1=Yes 9=Unknown	Num
PRENAT_SITE	Primary prenatal care site	<ul> <li>1 = Private Physician's Office</li> <li>2 = Community Health Center</li> <li>3 = HMO</li> <li>4 = Hospital Clinic</li> <li>5 = Other</li> <li>9 = Unknown</li> </ul>	Num
PRENAT_ULTRAS	Prenatal Tests and Procedures - Ultrasound	0=No 1=Yes 9=Unknown	Num
PRENATAL_CARE	Prenatal care?	0=No 1=Yes 8=Refused 9=Unknown Blank=N/A (MF Record)	Num
PRENATAL_CARE_CO UNT	Total number of prenatal care visits	Count 99=Unknown	Num
PRENATAL_PAY	Source of payment for prenatal care	1=Public 2=Private 9=Unknown	Num
PREVIOUS_LIVE_DEA D	Number of live births now dead	Count 88 = Refused 99=Unknown	Num
PREVIOUS_LIVE_LIVI NG	Number now living	Count 88 = Refused 99=Unknown	Num
RES_CODE_BIRTH	City/town	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num
RES_ZIP_BIRTH	Zip code	5 digit zip code 99999=Unknown	Char

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Variable Name	Variable Description	Meta Data	Format
SPOUSE_IS_FATHER	Is the spouse or deceased spouse the father/parent?	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
SOC_BIRTH	SOC code	XX-XXXX	Char
WIC_BIRTH	Did mother receive WIC food for herself?	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
SYSTEM	Is the record from MainFrame or VIP?	1=MF 2=VIP	Num
YEAR_BIRTH	Year of birth	YYYY	Num
INFANT_DOB	Date of infant birth	<b>Date Proxy</b> – count of days between infant birth and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
MONTH_BIRTH	Month of birth	1-12	Num
LAD_COMP_ARRIVE_ EARLY	Started being collected on 07/16/2018 New Progesterone section on 12 Parent Confidential: In any prior pregnancy, did the baby arrive more than 3 weeks early as mother went into labor or her water broke?	0=No 1=Yes 9=Unknown	Num
LAD_COMP_SHORT_ CERVIX	Started being collected on 07/16/2018. New Progesterone section on 12 Parent Confidential: Was mother told she had short cervix during this pregnancy?	0=No 1=Yes 9=Unknown	Num

Variable Name	Variable Description	Meta Data	Format
LAD_COMP_OFFERE D_PROG	Started being collected on 07/16/2018 New Progesterone section on 12 Parent Confidential: Was mother offered progesterone during this pregnancy?	0=No 1=Yes, due to a short cervix during this pregnancy 2=Yes, due to an early delivery in a prior pregnancy 9=Unknown	Num
LAD_COMP_RECEIVE D_PROG	Started being collected on 07/16/2018 New Progesterone section on 12 Parent Confidential: Did mother receive progesterone during this pregnancy?	1=Yes, progesterone shots 2=Yes, vaginal progesterone 3=Yes, oral progesterone, pills 4=No 5=No, insurance would not cover 6= No, mother declined; 9=Unknown	Num
LAD_COMP_DENTAL_ COND	Started being collected on 07/16/2018 New Other Self-Reported Items on tab 12 Parent Confidential: Oral health conditions (e.g. swollen or bleeding gums, dental decay, signs of infection)	0=No 1=Yes 9=Unknown	Num
LAD_COMP_DENTAL_ REFER	Started being collected on 07/16/2018. New Other Self- Reported Items on tab 12 Parent Confidential: If dental visit is more than 6 months or if any oral health problems identified, were you referred to a dentist?	0=No 1=Yes 9=Unknown	Num

Variable Name	Variable Description	Meta Data	Format
LAD_ELECTIVE_CON VENIENCE	Started being collected on 07/16/2018	0=No 1=Yes 9=Unknown	Num
	New Item added to Method of Delivery section of tab 15		
	Labor and Delivery: Was this an elective delivery that was scheduled		
	for convenience of patient or obstetrical provider?		
LAD_PROC_TDAP_VA C	Started being collected on 07/16/2018	0=No 1=Yes 9=Unknown	Num
	New items added in Test and Procedures section on tab 14 Prenatal 2		
	Tdap Vaccine		
LAD_PROC_FLU_VAC	Started being collected on 07/16/2018	0=No 1=Yes 9=Unknown	Num
	New items added in Test and Procedures section on tab 14		
	Prenatal 2 Influenza (Flu) Vaccine		

#### Bureau of Substance Addiction Services (PHDBSAS.BSAS)

Variable Name	Variable Description	Meta Data	Format
ID	Proj <b>e</b> ct specific ID	9 character alphanumeric ID	Char
Match_level_BSAS	CHIA Match level	<ul> <li>1= These are CHIA members that received a high score against the DPH input record. This group includes those that matched all elements of the DPH input record and those that had only one element mismatch. The group 1 individual match determination has been optimized based upon the input elements and their overall weight.</li> <li>2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches.</li> <li>Candidates in this group could match on as little as SSN or date of birth and first and last name. These candidates are included for completeness.</li> </ul>	Num
AGE_BSAS	Client's age in years at enrollment (calculated from DOB and enrollment date)	Age in years (from 12 yrs old) Blank=missing	Num
BIRTH_MONTH_BSAS	Month of birth	1-12 99=Missing/unknown	
BIRTH_YEAR_BSAS	Year of birth	YYYY 9999=Missing/unknown	
CLT_ENR_EDUCATION	Education level at enrollment	<ol> <li>1 = Not of School Age</li> <li>2 = No Formal Education</li> <li>3 = Some Schooling</li> <li>4 = Some High School</li> <li>5 = High School Diploma / GED</li> <li>6 = Some College</li> <li>7 = Associates Degree</li> <li>8 = College Degree or Higher</li> <li>9 = Other Credentials</li> <li>95 = Unknown</li> <li>99 = Missing</li> </ol>	Num

Variable Name	Variable Description	Meta Data	Format
CLT_ENR_EMPLOYMENT	Employment status at enrollment	<ol> <li>1 = Working Full Time</li> <li>2 = Working Part Time</li> <li>3 = Unemployed - Looking</li> <li>4 = Unemployed - Not Looking</li> <li>5 = Not In Labor Force - Student</li> <li>6 = Not In Labor Force - Retired</li> <li>7 = Not In Labor Force - Disabled</li> <li>8 = Not In Labor Force - Homemaker</li> <li>9 = Not In Labor Force - Other</li> <li>10 =Not In Labor Force - Incarcerated</li> <li>11 = Volunteer</li> <li>13 = Maternity/Family Leave</li> <li>14 = Refused</li> <li>15 = Unable to Work</li> <li>94 = Other</li> <li>95 = Unknown</li> <li>99 = Missing</li> </ol>	Num
CLT_ENR_HAS_CHILDREN	Does the client have children at enrollment?	0 = Does Not Have Children 1 = Has Children 8 = Refused 9 = Missing	Num
CLT_ENR_HEAR_IMPAIR	Did client have hearing impairment at enrollment?	0 = None 1 = Slight 2 = Moderate 3 = Severe 9 = Missing	Num
CLT_ENR_LIVES_6TO18	Client lives with children 6 - 18 years of age at Enrollment?	0 = Does Not Live with a Child 6-18 1 = Lives with a Child 6-18 9 = Missing	Num
CLT_ENR_LIVES_OVER18	Client lives with children over 18 years of age at enrollment?	0 = Does Not Live with a Child over 18 1 = Lives with a Child over 18 9 = Missing	Num
CLT_ENR_LIVES_UNDER6	Client lives with children under 6 years of age at enrollment?	0 = Does Not Live with a Child Under 6 1 = Lives with a Child Under 6 9 = Missing	Num
CLT_ENR_MARITAL_STATUS	Marital status at enrollment	1 = Never Married 2 = Married 3 = Separated 4 = Divorced 5 = Widowed 6 = Partnership 9 = Missing	Num

Variable Name	Variable Description	Meta Data	Format
CLT_ENR_DEVEL_DIS	Did client have a developmental disability at enrollment?	0 = None 1 = Slight 2 = Moderate 3 = Severe 9 = Missing	Num
CLT_ENR_MHTX	Reported prior mental health treatment at enrollment	0 = No Prior History 1 = Prior Counseling 2 = One Prior Hospitalization 3 = Two or More Prior Hospitalizations 9 = Missing	Num
CLT_ENR_MOB_AID_CRUT CHES	Was client using a mobility aid at enrollment? crutches	0 = Not Using Crutches at Enrollment 1 = Using Crutches at Enrollment 9 = Missing	Num
CLT_ENR_MOB_AID_MAN_ WC	Was client using a mobility aid at enrollment? manual wheelchair	0 = Not Using a Manual Wheelchair at Enrollment 1 = Using a Manual Wheelchair at Enrollment 9 = Missing	Num
CLT_ENR_MOB_AID_NONE	Was client using a mobility aid at enrollment? none	0 = Using Some Mobility Aid at Enrollment 1 = Not Using Any Mobility Aid at Enrollment 9 = Missing	Num
CLT_ENR_MOB_AID_WALK ER	Was client using a mobility aid at enrollment? Walker	0 = Not Using a Walker at Enrollment 1 = Using a Walker at Enrollment 9 = Missing	Num
CLT_ENR_MOB_AID_WC	Was client using a mobility aid at enrollment? electric wheelchair	0 = Not Using an Electric Wheelchair at Enrollment 1 = Using an Electric Wheelchair at Enrollment 9 = Missing	Num
RES_CODE_BSAS	Client's city/town at enrollment (Boston neighborhoods collapsed into Boston)	<u>1-351 for valid MA city/town</u> 999=Unknown	Num
CLT_ENR_OVERDOSES_LI FE	Number of drug overdoses in the client's lifetime	This is a continuous variable with values >= 0. 999 = SAS system missing values	Num
CLT_ENR_PRIMARY_DRUG	enrollment	<u>See code list</u>	Num
CLT_ENR_SECONDARY_D RUG	Client's secondary substance at enrollment	<u>See code list</u>	Num

Variable Name	Variable Description	Meta Data	Format
CLT_ENR_SELF_CARE_IMP AIR	Did client have self- care/activities of daily living (ADL) skills impairment at enrollment?	0 = None 1 = Slight 2 = Moderate 3 = Severe 9 = Missing	Num
CLT_ENR_TERTIARY_DRU G	Client's tertiary substance at enrollment	<u>See code list</u>	Num
	Did Client have vision impairment at enrollment?	0 = None 1 = Slight 2 = Moderate 3 = Severe 9 = Missing	Num
CLT_ENR_ZIP_CODE	Client's zip code at enrollment		Char
CLT_HOMELESS_AT_ENR	Identifies if client is homeless at enrollment?	0 = No 1 = Yes 8 = Unable to Determine 9 = Missing	Num
CLT_ENR_CHRONIC_HOME LESS	homeless?	0 = No 1 = Yes 9 = Missing/invalid	
DIS_DATE_YEAR	Calendar year of the end date for the enrollment	Year, yyyy	Num
DIS_DATE_MONTH	Month of the end date for the enrollment	Month, 1-12	Num
	Number representing days between event and random date in the future	Date Proxy – count of days between disenrollment date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
DIS_REASON_TYP	Disenrollment reason type	1 = Completed 2 = Dropout 3 = Administrative Discharge 4 = Hospitalized 6 = Moved 7 = Assessment Only 8 = Incarcerated 12 = Relapsed 14 = ACA/AMA 15 = Transferred 94 = Other 99 = Missing	Num
ENR_DATE_YEAR	Calendar year of the start date for the enrollment	Year, yyyy	Num
ENR_DATE_MONTH	Month of the start date for the enrollment	Month, 1-12	Num

Variable Name	Variable Description	Meta Data	Format
ENR_DATE_BSAS	Number representing days between event and random date in the future	Date Proxy – count of days between enrollment date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
PDM_PRV_SERV_CAT	Treatment service category	See code list	Num
PDM_PRV_SERV_TYPE	Treatment service type	See code list	Num
PREG_ENH	Pregnant Enhancement (service in residential program)	0=No 1=Yes 9=Missing	Num
POSTPARTUM_ENH	Postpartum Enhancement (service in residential program)	0=No 1=Yes 9=Missing	Num
POSTPARTUM_ENH_MBHP	Postpartum Enhancement MBHP only (service in residential program)	0=No 1=Yes 9=Missing	Num
RACE_BSAS	Client race (derived)	1 = White Non-Hispanic 2 = Black non-Hispanic 3 = Asian/PI non-Hispanic 4 = Hispanic 5 = American Indian or Other 9 = Missing	Num
SEX_BSAS	Intake reported gender	1 = Male 2 = Female 9 = Missing	Num
CLT_TYPE_VETERAN_BSA S	Client type at enrollment: Veteran	0 = No 1 = Yes 9 = Missing	Num

<u>clt_enr_drug (all types)</u>
0=None
1=Alcohol
2=Cocaine
3=Crack
4=Marijuana
5=Heroin
6=Non-Rx Methadone
7=Other Opiates
8=PCP
9=Other Hallucinogens
10=Methamphetamine
11=Other Amphetamines
12=Other Stimulants
13=Benzodiazepines
14=Other Tranquilizers
15=Barbiturates
16=Other Sedatives
17=Inhalants
18=OTC
19=Club Drugs
21=Oxycodone
22=Non-Rx Suboxone
23=Rx Opiates
24=Non-Rx Opiates
25=K2marij
94=Other
99=Missing

pdm_prv_serv_cat
2=Post Detox Stabilization
3=Outpatient
4=Residential
5=Case Management
6=Recovery Support Services
7=Opioid Treatment
8=Statewide Services and Coordination
10=Youth Treatment Programs
11=Family Treatment Services
13=Acute Treatment Services
14=County Corrections
15=Intervention
16=Recovery High School

pdm_prv_serv_cat
17=Youth Program
18=Recovery Support
19=Engagement, Assessment and Referral
94=Other
99=Missing

pdm_prv_serv_type
1=1st Offender Drunk Driver
2=2nd Offender Aftercare
3=2nd Offender Residential
4=Acupuncture Detoxification
5=Acute Treatment Services
6=Methadone Treatment
8=ATR-Recovery Support Services
10=Case Management
12=Clinical Stabilization Services
13=Community Based Case Management
14=Compulsive Gambling
15=County Corrections
16=Day Treatment
17=Drug Court Program
18=Drug Court Case Management
19=Expanded Treatment Services
20=Family Intervention
21=Family Oriented Case Management
22=Family Residential
24=Intensive Outpatient Treatment
26=Office Based Opioid Treatment Services
28=Outpatient Case Management
29=Outpatient Counseling
30=Outpatient Detox
31=Outpatient Services
32=Partnership For Success
33=Permanent Housing
34=Prevention Services
35=Recovery High Schools
36=Recovery Home
37=Recovery Support Centers
38=Recovery Support Outpatient Services
39=Social Model House
40=Statewide Housing Support
41=Statewide Services and Coordination
42=Street Outreach/ Housing Stabilization
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(PHDBSAS.BSAS)

pdm_prv_serv_type
43=Substance Abuse Prevention Collaborative (SAPC)
44=Tewksbury Stabilization
45=Therapeutic Community
46=Transitional Housing
47=Transitional Support Services
48=Young Adult Residential
49=Youth Intervention
50=Youth Residential
52=Youth Stabilization
53=Section 35
54=Jail Diversion - Residential Component
55=CHINS - Substance Abuse Services
56=Housing Options Program
57=Crim Just Collab-Youth
58=ATARP
59=Opioid Urgent Care Centers
61=Low Threshold Housing
62=SYT-I Project A-CRA
63=SYT-I Project MAT
64=Supportive Case Management
65=Crim Just Collab-Adult
66=Young Adult Residential Case Management
67=Family Intervention - Clinical Support
68=CJ Diversion
69=State Parole Board
70=Jail Diversion - Case Management Component
71=DYS Residential
72=ER Visit
73=Inpatient Hospital Stay
76=Observation
80=Death Record
81=Youth Program
82=BSAS-STR-HOC
83=Heroin Education Aware Task
84=Post Detox Pre-Recovery
85=Family Intervention - Family Support
86=State Funded Earmarks
87=Enhanced OBOT
88=Medication Assisted Re-Entry Initiative
89=Collaborative and Transitional Models for MAT
90=Moms Do Care
91=Transitional Addiction Treatment
92=SOR Home Visit Initiative
93=Co-Occurring Enhanced Residential Rehab Services

#### (PHDBSAS.BSAS)

pdm_prv_serv_type
94=Low Threshold
95=Other
99=Missing

clt enr nbhd         1=Abington         2=Acton         3=Acushnet         4=Adams         5=Agawam         6=Alford         7=Amesbury         8=Amherst         9=Andover         10=Arlington         11=Ashburnham         12=Ashby         13=Ashfield         14=Ashland         15=Athol         16=Attleboro         17=Auburn         18=Avon         19=Ayer         20=Barnstable         21=Barre         22=Becket         23=Bedford         24=Belchertown         25=Bellingham         26=Belmont         27=Berkley         28=Berlin         29=Bernardston         30=Beverly         31=Billerica         32=Blackstone         33=Blandford         34=Bolton         35=Boston         36=Bourne         37=Boxboro         38=Boxford         39=Boylston         40=Braintree         41=Brewster         42=Bridgewater         43=Brimfield         44=Brockton <th>1</th>	1
2=Acton3=Acushnet4=Adams5=Agawam6=Alford7=Amesbury8=Amherst9=Andover10=Arlington11=Ashburnham12=Ashby13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford41=Brewster41=Bremster41=Brewster43=Brimfield44=Brockline47=Buckland48=Burlington	<u>clt_enr_nbhd</u>
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6=Alford7=Amesbury8=Amherst9=Andover10=Arlington11=Ashburnham12=Ashby13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookline47=Buckland48=Burlington	4=Adams
7=Amesbury8=Amherst9=Andover10=Arlington11=Ashburnham12=Ashby13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford41=Brewster41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookline47=Buckland48=Burlington	5=Agawam
8=Amherst9=Andover10=Arlington11=Ashburnham12=Ashby13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster43=Brimfield44=Brockton45=Brookline47=Buckland48=Burlington	6=Alford
9=Andover10=Arlington11=Ashburnham12=Ashby13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookline47=Buckland48=Burlington	7=Amesbury
10=Arlington11=Ashburnham12=Ashby13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	8=Amherst
11=Ashburnham12=Ashby13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brinfield44=Brockton45=Brookline47=Buckland48=Burlington	9=Andover
11=Ashburnham12=Ashby13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brinfield44=Brockton45=Brookline47=Buckland48=Burlington	10=Arlington
13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookline47=Buckland48=Burlington	
13=Ashfield14=Ashland15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookline47=Buckland48=Burlington	12=Ashby
15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookline47=Buckland48=Burlington	
15=Athol16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookline47=Buckland48=Burlington	
16=Attleboro17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
17=Auburn18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
18=Avon19=Ayer20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
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20=Barnstable21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
21=Barre22=Becket23=Bedford24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
22=Becket 23=Bedford 24=Belchertown 25=Bellingham 26=Belmont 27=Berkley 28=Berlin 29=Bernardston 30=Beverly 31=Billerica 32=Blackstone 33=Blandford 34=Bolton 35=Boston 36=Bourne 37=Boxboro 38=Boxford 39=Boylston 40=Braintree 41=Brewster 42=Bridgewater 43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
23=Bedford 24=Belchertown 25=Bellingham 26=Belmont 27=Berkley 28=Berlin 29=Bernardston 30=Beverly 31=Billerica 32=Blackstone 33=Blandford 34=Bolton 35=Boston 36=Bourne 37=Boxboro 38=Boxford 39=Boylston 40=Braintree 41=Brewster 41=Brewster 42=Bridgewater 43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
24=Belchertown25=Bellingham26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
25=Bellingham 26=Belmont 27=Berkley 28=Berlin 29=Bernardston 30=Beverly 31=Billerica 32=Blackstone 33=Blandford 34=Bolton 35=Boston 36=Bourne 37=Boxboro 38=Boxford 39=Boylston 40=Braintree 41=Brewster 42=Bridgewater 42=Bridgewater 43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
26=Belmont27=Berkley28=Berlin29=Bernardston30=Beverly31=Billerica32=Blackstone32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
27=Berkley 28=Berlin 29=Bernardston 30=Beverly 31=Billerica 32=Blackstone 33=Blandford 34=Bolton 35=Boston 36=Bourne 37=Boxboro 38=Boxford 39=Boylston 40=Braintree 41=Brewster 41=Brewster 42=Bridgewater 43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
28=Berlin 29=Bernardston 30=Beverly 31=Billerica 32=Blackstone 33=Blandford 34=Bolton 35=Boston 36=Bourne 37=Boxboro 38=Boxford 39=Boylston 40=Braintree 41=Brewster 42=Bridgewater 43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
29=Bernardston30=Beverly31=Billerica32=Blackstone32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
30=Beverly31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
31=Billerica32=Blackstone33=Blandford34=Bolton35=Boston36=Bourne37=Boxboro38=Boxford39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
32=Blackstone 33=Blandford 34=Bolton 35=Boston 36=Bourne 37=Boxboro 38=Boxford 39=Boylston 40=Braintree 41=Brewster 42=Bridgewater 43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
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37=Boxboro 38=Boxford 39=Boylston 40=Braintree 41=Brewster 42=Bridgewater 43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
38=Boxford 39=Boylston 40=Braintree 41=Brewster 42=Bridgewater 43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
39=Boylston40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
40=Braintree41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
41=Brewster42=Bridgewater43=Brimfield44=Brockton45=Brookfield46=Brookline47=Buckland48=Burlington	
42=Bridgewater 43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
43=Brimfield 44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
44=Brockton 45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
45=Brookfield 46=Brookline 47=Buckland 48=Burlington	
46=Brookline 47=Buckland 48=Burlington	
47=Buckland 48=Burlington	
48=Burlington	
49=Cambridge	
	49=Cambridge

clt_enr_nbhd
50=Canton
51=Carlisle
52=Carver
53=Charlemont
54=Charlton
55=Chatham
56=Chelmsford
57=Chelsea
58=Cheshire
59=Chester
60=Chesterfield
61=Chicopee
62=Chilmark
63=Clarksburg
64=Clinton
65=Cohasset
66=Colrain
67=Concord
68=Conway
69=Cummington
70=Dalton
71=Danvers
72=Dartmouth
73=Dedham
74=Deerfield
75=Dennis
76=Dighton
77=Douglas
78=Dover
79=Dracut
80=Dudley
81=Dunstable
82=Duxbury
83=East Bridgewater
84=East Brookfield
85=East Longmeadow
86=Eastham
87=Easthampton
88=Easton
89=Edgartown
90=Egremont
91=Erving
92=Essex
93=Everett
94=Fairhaven
95=Fall River
96=Falmouth
97=Fitchburg
98=Florida
50-1101100

<u>clt_enr_nbhd</u>
99=Foxboro
100=Framingham
101=Franklin
102=Freetown
103=Gardner
104=Aquinnah
105=Georgetown
106=Gill
107=Gloucester
108=Goshen
109=Gosnold
110=Grafton
111=Granby
112=Granville
113=Great Barrington
114=Greenfield
115=Groton
116=Groveland
117=Hadley
118=Halifax
119=Hamilton
120=Hampden
121=Hancock
122=Hanover
123=Hanson
124=Hardwick
125=Harvard
126=Harwich
127=Hatfield
128=Haverhill
129=Hawley
130=Heath
131=Hingham
132=Hinsdale
133=Holbrook
134=Holden
135=Holland
136=Holliston
137=Holyoke
138=Hopedale
139=Hopkinton
140=Hubbardston
141=Hudson
142=Hull
143=Huntington
144=Ipswich
145=Kingston
146=Lakeville
147=Lancaster

<u>clt_enr_nbhd</u>
148=Lanesboro
149=Lawrence
150=Lee
151=Leicester
152=Lenox
153=Leominster
154=Leverett
155=Lexington
156=Leyden
157=Lincoln
158=Littleton
159=Longmeadow
160=Lowell
161=Ludlow
162=Lunenberg
163=Lynn
164=Lynnfield
165=Malden
166=Manchester
167=Mansfield
168=Marblehead
169=Marion
170=Marlborough
171=Marshfield
172=Mashpee
173=Mattapoisett
174=Maynard
175=Medfield
176=Medford
177=Medway
178=Melrose
179=Mendon
180=Merrimac
181=Methuen
182=Middleboro
183=Middlefield
184=Middleton
185=Milford
186=Millbury
, 187=Millis
188=Millville
189=Milton
190=Monroe
191=Monson
192=Montague
193=Monterey
194=Montgomery
195=Mount Washington
196=Nahant

<u>clt_enr_nbhd</u>
197=Nantucket
198=Natick
199=Needham
200=New Ashford
201=New Bedford
202=New Braintree
203=New Marlboro
204=New Salem
205=Newbury
206=Newburyport
207=Newton
208=Norfolk
209=North Adams
210=North Andover
211=North Attleboro
212=North Brookfield
213=North Reading
214=Northampton
215=Northboro
216=Northbridge
217=Northfield
218=Norton
219=Norwell
220=Norwood
221=Oak Bluffs
222=Oakham
223=Orange
224=Orleans
225=Otis
226=Oxford
227=Palmer
228=Paxton
229=Peabody
230=Pelham
231=Pembroke
232=Pepperell
233=Peru
234=Petersham
235=Phillipston
236=Pittsfield
237=Plainfield
238=Plainville
239=Plymouth
240=Plympton
241=Princeton
242=Provincetown
243=Quincy
244=Randolph
245=Raynham
·

<u>clt_enr_nbhd</u>
246=Reading
247=Rehoboth
248=Revere
249=Richmond
250=Rochester
251=Rockland
252=Rockport
253=Rowe
254=Rowley
255=Royalston
256=Russell
257=Rutland
258=Salem
259=Salisbury
260=Sandisfield
261=Sandwich
262=Saugus
263=Savoy
264=Scituate
265=Seekonk
266=Sharon
267=Sheffield
268=Shelbourne
269=Sherborn
270=Shirley
271=Shrewsbury
272=Shutesbury
273=Somerset
274=Somerville
275=South Hadley
276=Southampton
277=Southboro
278=Southbridge
279=Southwick
280=Spencer
281=Springfield
282=Sterling
283=Stockbridge
284=Stoneham
285=Stoughton
286=Stow
287=Sturbridge
288=Sudbury
289=Sunderland
290=Sutton
291=Swampscott
292=Swansea
293=Taunton
294=Templeton
251-101101001

<u>clt_enr_nbhd</u>
295=Tewksbury
296=Tisbury
297=Tolland
298=Topsfield
299=Townsend
300=Truro
301=Tyngsboro
302=Tyringham
303=Upton
304=Uxbridge
305=Wakefield
306=Wales
307=Walpole
308=Waltham
309=Ware
310=Wareham
311=Warren
312=Warwick
313=Washington
314=Watertown
315=Wayland
316=Webster
317=Wellesley
318=Wellfleet
319=Wendell
320=Wenham
321=West Boylston
322=West Bridgewater
323=West Brookfield
324=West Newbury
325=West Springfield
326=West Stockbridge
327=West Tisbury
328=Westboro
329=Westfield
330=Westford
331=Westhampton
332=Westminster
333=Weston
334=Westport
335=Westwood
336=Weymouth
337=Whatley
338=Whitman
339=Wilbraham
340=Williamsburg
341=Williamstown
342=Wilmington
343=Winchendon
5-5-winchendon

<u>clt_enr_nbhd</u>
344=Winchester
345=Windsor
346=Winthrop
347=Woburn
348=Worcester
349=Worthington
350=Wrentham
351=Yarmouth

# Casemix Emergency Department Diagnostic (ED\_DIAG) Analytic Data Dictionary

#### (PHDCM.ED\_DIAG)

Casemix Emergency Department Diagnostic (PHDCM.ED\_DIAG) Result

Variable Name	Variable Description	Meta Data	Format
ED_ID	Unique key to link from Visit table.	12 digit ID	Char
ED_CONDITIONPRESENT	followed admission. There is a present on admission	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable/not used 9=Unknown	Num
ED_DIAG	ICD code for each diagnosis reported by the facility. Excludes the decimal point.	Valid ICD code, no decimals	Char
ED_PRINCIPLE_DIAG	Indicates if the diagnosis code was principal or secondary. Each diagnosis record has this field.	1=Principal 2=Not Principal	Num
ID	PHD ID	9 character alphanumeric ID	Char

Casemix Emergency Department (PHDCM.ED) Visit

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
ED_ADMIT_DATE	Date of admission to the ED	Date Proxy – count of days between admission date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
ED_ADMIT_MONTH	Month of Admission	Months, 1-12	Num
ED_ADMIT_YEAR	Year of Admission	Years	Num
ED_AGE	Age at Admission	0=Less than 1 (please see ED_NEWBORNAGE) Persons over 1 year (1-89): actual age 999=Unknown/missing	Num
ED_CAREGIVER	Primary caregiver responsible for the <b>patient's care other than the</b> <b>attending physician,</b> operating room physician, or nurse midwife	1= Resident 2= Intern 3= Nurse Practitioner 4= Physician Assistant 9=Missing/Unknown	Num
ED_CHARGES	The grand total of charges associated with the patient's emergency room visit. A charge of \$0 is not permitted unless the patient has a special Departure Status. Reported by facility. Does not include allowed or negotiated amounts. Not the actual dollars paid to the facility for care.	The total charge amount, rounded to the nearest dollar	Num
ED_CITY	Municipality in which the emergency room is located.	1-351 for valid MA city/towns 999=Out of state or unknown	Num
ED_DAYSBETWEEN	This CHIA calculated field indicates the number of days between each ED Visit for applicable patients.	Integer	Num
ED_DIAG1	The ICD diagnosis code corresponding to the condition established after study to be chiefly responsible for the admission of the patient for hospital care. Determined by the ED.	Valid ICD code, no decimals	Char

Variable Name	Variable Description	Meta Data	Format		
ED_DISCHARGE_DATE	Date patient left emergency department.	Date Proxy – count of days between discharge date and randomly chosen date in the past <b>NOTE: The larger the</b> <b>date proxy, the more</b> <b>recently the event</b> <b>occurred</b>	Num		
ED_DISCHARGE_MONTH	Discharge month	Months, 1-12	Num		
ED_DISCHARGE_YEAR	Discharge year	Years	Num		
ED_DISPOSITION	This field identifies the disposition and destination of the patient after discharge from the ED.	1= Routine (i.e. to home or usual place of residence) 2 =Transferred to Other Facility 3= AMA 4= Eloped 5= Within Hospital Clinic Referral 6= Dead on Arrival (with or without resuscitative efforts in the ED) 7= Died during ED Visit 8= Patient met personal physician in the emergency department (not seen by staff) 9=Missing	Num		
ED_FACILITY	The Organization ID for the main facility affiliation.	See code list	Num		
ED_HOMELESS	This flag indicates that the patient was homeless at the time of visit.	0= Patient is not known to be homeless 1= Patient is known to be homeless 9=Unknown	Num		
ED_ICD_Indicator	CMS procedure classification code. ( 0,9) indicates ICD-9 or ICD-10- PCS. Only one coding system is allowed per Patient discharge.	9=ICD-9 0=ICD-10 Blanks=Missing/Unknowns	Num		
ED_ID	Unique key to link from Visit table. <b>NOTE:</b> ED_ID is unique to a year and data set. It cannot be used to link across years or datasets.	12 digit ID	Char		
ED_LOS_HOURS	Count of hours between the admitting and discharge time for an ED visit.	Integer	Num		
ED_NEWBORNAGE	Age in weeks for children younger than 53 weeks of age who are admitted to the ED.	Weeks, 0-52 99=Missing/Unknown	Num		

Variable Name Variable Description Meta Data Forma			Format
ED_PAYERTYPE	Indicates the type of organization or individual who is payer. Payertype was not collected on EDD or OOD until FY20.	0=None (Valid only for Secondary Payer) 1=Self-Pay 2=Worker's Compensation 3=Medicare 4=Medicare Managed Care 5=Medicaid Managed Care 7=Other Government Payment 8=Blue Cross 9=Blue Cross Managed Care 10=Commercial Insurance 11=Commercial Insurance 11=Commercial Managed Care 12=HMO 13=Free Care 14=Other Non-Managed Care Plans 15=PPO and Other Managed Care Plans Not Elsewhere Classified 16=Point-of-Service Plan 17=Exclusive Provider Organization 18=Auto Insurance 19= Commonwealth Care/ConnectorCare Plans 20= Dental Plans 21=Health Safety Net	Num
ED_PAYSOURCE1	Primary payer for the ED Visit	<u>See code list</u>	Num
ED_PAYSOURCE2	Secondary payer for this visit	See code list	Num
ED_PHYSICIAN_NUMBER	Physician's state license number (BORIM #) for the ED Physician who provided services related to this visit. Report if the physician's involvement in the patient's ED Visit is captured in the facility's electronic information systems	Alphanumeric Encrypted BORIM ID	Char
ED_PRIMARYCONDITION_PRESENT	Flag indicating that principal condition was present on admission	0=condition not present 1=condition present 3=clinically undetermined 8=not applicable 9=unknown	Num

Variable Name	Variable Description	Meta Data	Format
ED_PRINCIPLE_ECODE	Describes the principal external cause of injuries, poisonings, and adverse effects using codes. ED determined. In addition to the dedicated E-Code field, facilities record additional E-Codes in the associated diagnosis fields for conditions having multiple causes. The E-Code that led to the admission to the ED.	Valid E-Code Blanks=Missing/Unknown	Char
ED_PRINCIPLE_ECODEP	Flag indicating that principal e-code condition was present on admission. Determined by the emergency department	0=condition not present 1=condition present 3=clinically undetermined 8=not applicable 9=unknown	Num
ED_PROC_TYPE	Indicates if the code is an ICD-10 code, Current Procedural Terminology code, or Healthcare Common Procedure Code System (HCPCS) code.	1=ICD-10 2=Current Procedural Terminology code (CPT) or Healthcare Common Procedure Code System (HCPCS) code 3= ICD-9 Blanks=Missing/Unknown	Num
ED_PROC1	The chief procedure performed in the ED as determined by the emergency department - ICD code. In general visits do not need to have a principal procedure. Some visits will only have secondary procedures. These codes should not be Current Procedural Terminology (CPT) Codes.	Valid ICD code, no decimals	Char
ED_RACE	Combined race and Hispanic ethnicity	<ol> <li>1 = White Non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or</li> <li>Other</li> <li>9 = Unknown</li> </ol>	Num

Variable Name	Variable Description	Meta Data	Format
ED_SEVERITY	Patient's score on the Emergency Severity Index, as described in "Reliability and Validity of a New Five-level Triage Instrument." Wooers, R. et al. Academic Emergency Medicine 2000; 7:236- 242. Must range from 1 to 5. Where 1 is highest severity and 5 is lowest severity.	0=missing 1=most severe - patient requires immediate life- saving intervention 2=patient is in a high risk situation, vitals are in danger zone 3=multiple resources required to stabilize patient, but vitals not in danger zone 4=one resource needed to stabilize patient 5=least severe, patient does not require any resources to stabilize	Num
ED_SEX	Sex flag as assigned by emergency department.	1= Male 2= Female 3= Unknown	Num
ED_SITE	The Organization ID for site where the patient received ED care.	See PHDCM.ED_ORG for linking on this variable for info on the site	Num
ED_TRANSFERFROM	The Organization ID for the site where the patient was transferred from. If the patient is transferred from outside of Massachusetts, then the value will be.	<u>See code list</u> 9999999=Transferred from facility outside of MA	Num
ED_TRANSPORT	The patient's mode of transport to the emergency department	1=Ambulance 2=Helicopter 3=Law Enforcement 4=Walk-in (incl. private or public transport) 5=Other 9=Unknown	Num
ED_VISITSOURCE1	How a patient reached the Observation unit.	See code list	Num
ED_VISITSOURCE2	Secondary cause of stay	<u>See code list</u>	Num
ED_VISITTYPE	Type of stay	1= Emergency 2= Urgent 3= Non-Urgent 4= Newborn 9=Unknown	Num
ED_RES_CODE	Permanent city of residence for the patient	1-351 for valid MA city/towns 999=Out of state or unknown	Num
ED_RES_ZIP	First five digits of patient's permanent zip code.	5 digit zip code 99999=Unknown	Char

ED_SITE		
ED_TRANSFERFROM	ED_FACILITY	Description
1	1	Anna Jaques Hospital
2	2	Athol Memorial Hospital
3	345	North Shore Medical Center - Union Campus
4	4	Baystate Medical Center
5	5	Baystate Franklin Medical Center
6	6	Baystate Mary Lane Hospital
7	6309	Berkshire Medical Center - Berkshire Campus
8	8	Fairview Hospital
10	8702	Beth Israel Deaconess Medical Center - East Campus
16	3107	Boston Medical Center - Menino Pavilion Campus
22	22	Brigham and Women's Hospital
25	25	Signature Healthcare Brockton Hospital
27	3108	Cambridge Health Alliance - Cambridge Hospital Campus
39	39	Cape Cod Hospital
40	40	Falmouth Hospital
41	41	Steward Norwood Hospital, Inc.
42	42	Steward Carney Hospital, Inc.
46	46	Boston Children's Hospital
49	3110	MetroWest Medical Center - Framingham Campus
50	50	Cooley Dickinson Hospital
51	51	Dana-Farber Cancer Institute
53	53	Beth Israel Deaconess Hospital - Needham
57	57	Emerson Hospital
59	59	Brigham and Women's Faulkner Hospital
62	8701	Steward Good Samaritan Medical Center - Brockton Campus
66	3111	Hallmark Health - Lawrence Memorial Hospital Campus
68	68	Harrington Memorial Hospital
73	73	Heywood Hospital
75	75	Steward Holy Family Hospital, Inc.
77	77	Holyoke Medical Center
79	79	Beth Israel Deaconess Hospital - Plymouth
81	6546	Lahey Hospital & Medical Center, Burlington
83	83	Lawrence General Hospital
85	85	Lowell General Hospital
88	88	Martha's Vineyard Hospital
89	89	Massachusetts Eye and Ear Infirmary
91	91	Massachusetts General Hospital
97	97	Milford Regional Medical Center
98	98	Beth Israel Deaconess Hospital - Milton
99	99	Morton Hospital, A Steward Family Hospital, Inc.
100	100	Mount Auburn Hospital
101	101	Nantucket Cottage Hospital
103	103	New England Baptist Hospital
104	104	Tufts Medical Center
105	105	Newton-Wellesley Hospital

ED_SITE ED_TRANSFERFROM	ED FACILITY	Description
106	106	Noble Hospital
109	3112	Lahey Health - Addison Gilbert Hospital
110	3112	Lahey Health - Beverly Hospital
112	112	Quincy Medical Center, A Steward Family Hospital, Inc.
114	114	Steward Saint Anne's Hospital, Inc.
115	85	Lowell General Hospital Saints Campus
116	345,116	North Shore Medical Center - Salem Campus
118	6547	Mercy Medical Center - Providence Behavioral Health Hospital Campus
119	6547	Mercy Medical Center - Springfield Campus
122	122	South Shore Hospital
123	3113	Southcoast Hospitals Group - Charlton Memorial Campus
124	3113	Southcoast Hospitals Group - St. Luke's Campus
126	126	Steward St. Elizabeth's Medical Center
127	127	Saint Vincent Hospital
129	129	Sturdy Memorial Hospital
130	3115	UMass Memorial Medical Center - Memorial Campus
131	3115	UMass Memorial Medical Center - University Campus
132	132	Clinton Hospital - A member of the UMASS Memorial Health Center
133	133	Marlborough Hospital - A member of the UMASS Memorial Health Center
138	138	Lahey Health - Winchester Hospital
139	139, 14495	Baystate Wing Hospital
141	3111	Hallmark Health - Melrose-Wakefield Hospital Campus
142	3108	Cambridge Health Alliance - WEDDen Hospital Campus
145	3113	Southcoast Hospitals Group - Tobey Hospital Campus
457	3110	MetroWest Medical Center - Leonard Morse Campus
4448	6546	Lahey Medical Center, Peabody
4460	8701	Steward Good Samaritan Medical Center - NORCAP Lodge Campus
6963	6963	Shriners Hospitals for Children Boston
8509, 71	71	HealthAlliance Hospital - Leominster Campus
11466	75	Holy Family Hospital at Merrimack Valley, A Steward Family Hospital, Inc.
11467	11467	Nashoba Valley Medical Center, A Steward Family Hospital, Inc.
11718	11718	Shriners Hospitals for Children Springfield
143		Cambridge Health Alliance - Somerville Hospital
	14496	HealthAlliance-Clinton Hospital

ED_TRANSFERFROM	Facility
9	Berkshire Medical Center - Hillcrest Campus
19	East Boston Neighborhood Health Center
52	Nashoba Valley Medical Center
70	Merrimack Valley Hospital
71	HealthAlliance - Leominster Campus

ED_TRANSFERFROM	Facility
78	Hubbard Regional Hospital
107	North Adams Regional Hospital
135	Curahealth Hospital Boston North Shore
136	Curahealth Hospital Boston
143	Cambridge Health Alliance - Somerville Hospital Outpatient
144	Boston Medical Center - Newton Pavilion Campus
410	New England Sinia Hospital, A Steward Family Hospital
416	Hebrew Rehabilitation Center
443	Bournewood Hospital
445	McLean Hospital
450	Spaulding Rehabilitation Hospital - Boston
451	Encompass Health Rehabilitation Hospital of New England
452	Encompass Health Rehabilitation Hospital of Braintree
487	D's Nursing Agency
495	Favorite Healthcare Staffing, Inc Boston
512	Interim HealthCare of Rockland (TNS)
634	BEAUMONT REHAB & SKD NORTHBRIDGE
637	BOSTON HOME
638	PLYMOUTH NURSING HOME
639	CATHOLIC MEMORIAL HOME
642	KATZMAN CENTER FOR THE LIVING
643	WAYLAND NURSING & REHAB CENTER
652	HERITAGE HOUSE NURSING HOME
654	HOLDEN REHAB & SKILLED NURSING CTR
658	JOHN SCOTT NURSING AND REHAB.
661	MARIAN MANOR
663	BRANDON WOODS OF DARTMOUTH
665	NORWELL KNOLL NURSING HOME
666	OUR LADY'S HAVEN
673	RIVERCREST L.T.C.F.
674	SACRED HEART NURSING HOME
675	SHERRILL HOUSE
676	ST. JOSEPH MANOR HEALTH CARE INC.
678	PENACOOK PLACE, INC.
683	DWYER HOME
684	WOBURN NURSING CENTER

ED_TRANSFERFROM	Facility
686	SAVOY NURSING & REHAB CENTER
689	SHREWSBURY NURSING & REHAB.CTR INC
690	LYNN PUBLIC MEDICAL INST.
692	BRANDON WOODS OF NEW BEDFORD
696	ELLIS NURSING HOME
698	TAUNTON NURSING HOME
701	GERMAN CENTRE FOR EXT. CARE
702	ADAMS HOUSE
703	BLAIRE HOUSE LTCF WORCESTER
705	LELAND HOME
707	POND HOME
710	HANNAH B G SHAW HOME FOR AGED
712	MEDWAY COUNTRY MANOR SK NURG & REH
715	BERKELEY RETIREMENT HOME
717	COZY CORNER NURSING & REHAB CTR
722	ABERJONA NURSING CENTER, INC.
725	BLAIRE HOUSE LTCF MILFORD
728	VERNON HALL NURSING HOME
729	BLAIRE HOUSE LTCF TEWKSBURY
730	DOOLITTLE HOME, INC.
731	ISLAND TERRACE NURSING HOME
737	JEWISH HEALTHCARE CENTER
740	MARIAN MANOR OF TAUNTON
742	WINCHESTER NURSING CENTER
745	SOLDIERS' HOME
747	CARLETON-WILLARD VILLAGE
751	LOOMIS HOUSE
754	HIGHLAND MANOR NURSING HOME
757	NEVINS NURSING & REHAB. CENTER
758	PORT HEALTHCARE CENTER
759	WEST SIDE HOUSE LTCF
768	BEAR HILL NURSING CENTER
775	LAKEVIEW HOUSE SKLD NURS & RESIDENTIAL FACILITY
777	MAPLES REHABILITATION & NURSING CENTER
791	THE HERMITAGE, A BEVERLY H.C.
794	BAYPATH AT DUXBURY NSG REHAB

ED_TRANSFERFROM	Facility
795	CARDIGAN NURSING & REHABILITATION CTR
797	NORTH HILL - THE S.N.F.
803	QUABBIN VALLEY HEALTHCARE
804	OAKDALE REHAB. & SKILLED NURS.CTR
805	BEDFORD VILLAGE NURSING HOME
807	BRIDGEWATER NURSING HOME
810	POPE NURSING HOME
811	VICTORIA HAVEN NURSING HOME
812	COLEMAN HOUSE
820	CAMPION HEALTH & WELLNESS, INC.
823	SOUTH COVE MANOR NURSING HOME
835	THOMAS UPHAM HOUSE
836	RIVERBEND OF SOUTH NATICK
849	MEADOW GREEN NSG AND REHAB CTR
852	QUEEN ANNE NURSING HOME
865	PRESENTATION NURSING & REHAB. CENTER
874	DIGHTON NURSING CENTER
876	BEAUMONT REHAB & SKD WESTBOROUGH
885	WATERVIEW LODGE, LLC
889	OVERLOOK MASONIC HEALTH CENTER
893	MADONNA MANOR NURSING HOME
900	BIRCH MANOR REHABILITATION & SKILLED NURSING CTR.
906	BROOKHAVEN AT LEXINGTON
917	BRAEMOOR REHABILITATION & NURSING CTR, INC.
925	CLARK HOUSE N.C @FOX HILL VILLAGE
926	LIFE CARE CENTER OF LYNN: A L.T.C.F FACILITY
928	SANCTA MARIA NURSING HOME
930	HUNT NURSING AND REHABILITATION CENTER
931	E. LONGMEADOW SKILLED NURSING CTR
932	PILGRIM REH & SKIL NURS CTR
933	WINDSOR NSG & RET. HOME
935	BETHANY HEALTH CARE CENTER
938	KNOLLWOOD NURSING CENTER
942	LIFE CARE CENTER OF WILBRAHAM, A L.T.C.F
953	JULIAN J. LEVITT FAMILY NURSING HOME
955	MARY ANN MORSE NURS. & REHAB. CTR.

ED_TRANSFERFROM	Facility
958	MONT MARIE HEALTH CARE CENTER, INC.
959	EASTPOINTE NURSING CARE CENTER
966	LIFE CARE CENTER OF ATTLEBORO
967	SAMUEL MARCUS NURSING HOME
971	SEACOAST NURSING & REHABILITATION CTR.
972	WOODBRIAR OF WILMINGTON REHAB & SKILLED NURSING CENTER
978	NOTRE DAME HEALTH CARE CENTER
987	SOUTHWOOD AT NORWELL NURSING CTR
989	SOUTHPOINTE REHAB & SKILLED NURSING
1004	QUABOAG ON THE COMMON
1028	GROSVENOR PARK
1032	HOLY TRINITY EASTERN ORTHODOX NURSING AND REHAB. CENTER
1035	COMMONS RESIDENCE AT ORCHARD COVE
1039	COPLEY AT STOUGHTON NURG.CARE CTR
1040	LIFE CARE CENTER OF AUBURN
1041	LIFE CARE CENTER OF RAYNHAM
1049	LIFE CARE CENTER OF PLYMOUTH
1050	HARBOR HOUSE NURS.& REHAB.CTR.
1051	CHRISTOPHER HOUSE OF WORCESTER
1057	LIGHTHOUSE NURSING CARE CENTER
1072	CHAPIN CENTER
1073	GOVERNORS CENTER
1074	WILLIMANSETT CENTER EAST
1075	WILLIMANSETT CENTER WEST
1076	EMERSON REHAB. & TRANS. CARE UNIT
1078	STONE REHAB & SENIOR LIVING
1080	BAYPOINTE REH.& SKILLED CARE CTR
1094	LIFE CARE CENTER OF W. BRIDGEWATER
1111	LIFE CARE CENTER OF MERRIMACK VALLEY
1112	LIFE CARE CENTER OF THE SOUTH SHORE
1119	HANCOCK PARK REHAB.& NURS. CTR
1121	COYNE HEALTHCARE CENTER
1124	LIFE CARE CENTER OF NASHOBA VALLEY
1131	CHS of WALTHAM INC. dba MARISTHILL NURSING & REHAB CTR

ED_TRANSFERFROM	Facility
1136	THE MEADOWS
1156	CARLYLE HOUSE
1167	LIFE CARE CENTER OF STONEHAM
1174	SISTERS OF PROVIDENCE INFIRM.
1180	FALL RIVER JEWISH HOME, INC.
1182	NEW ENGLAND PEDIATRIC CARE
1185	FARREN CARE CENTER, INC.
1186	PROVIDENCE CARE CNTR OF LENOX
1187	MOUNT SAINT VINCENT CARE CENTER
1206	CRANEVILLE PLACE AT DALTON
1207	ST. MARY HEALTH CARE
1210	WABAN HEALTH & REHAB., INC.
1263	THE GUARDIAN CENTER, INC.
1270	SUNNY ACRES NURSING HOME
1272	ST. PATRICK'S MANOR
1273	BENJAMIN HEALTHCARE CENTER
1276	ODD FELLOWS HOME OF MASS
1277	NEW BEDFORD JEWISH CONV HOME
1279	MI NURSING/RESTORATIVE CTR
1280	JEANNE JUGAN RESIDENCE
1282	GODDARD HOUSE, A SKILLED NURSING & REHAB CTR
1284	D'YOUVILLE SENIOR CARE, INC.
1285	DON ORIONE NURSING HOME
1286	COREY HILL NURSING HOME
1287	COLONIAL NSG & REHAB. CTR.
1290	CENTER FOR EXT. CARE @ AMHERST
1296	STEVENS-BENNETT HOME
1302	THE GERMAN HOME
1304	HOMESTEAD HALL
1307	MT. PLEASANT HOME
1317	HALE-BARNARD CORPORATION
1319	HOME FOR AGED WOMEN-BROOKHOUSE
1338	SOMERVILLE HOME
1347	RIVER VALLEY REST HOME
1352	WILLOWBROOK MANOR REST HOME
1354	DAGGETT-CRANDALL-NEWCOMB HOME

ED_TRANSFERFROM	Facility
1355	FULLER HOUSE OF STONEHAM R.H.
1361	OLD COLONY ROAD RH, INC.
1374	FAIRMOUNT REST HOME
1393	DALTON REST HOME
1395	DARTMOUTH MANOR REST HOME
1398	BAKER MANOR REST HOME
1405	PLEASANT STREET REST HOME
1422	CUSHING MANOR COMM.SUPP.FAC.,INC.
1423	ELIZABETH CATHERINE REST HOME
1425	MAPLE HILL REST HOME
1429	BROOK HAVEN ASSISTED CARE, INC.
1434	HAMPDEN HOUSE
1440	VILLAGE REST HOME OF EASTON
1443	BEAVEN KELLY HOME
1444	ANN'S REST HOME
1445	BURGOYNE REST HOME
1450	HALCYON HOUSE
1477	TOWN & COUNTRY NURSING CENTER
2187	HILLCREST REST HOME
2238	PARK PLACE
2300	LABELLE'S REST HOME
2395	MARILLAC RESIDENCE
2636	PHILLIPS MANOR NURSING HOME
2651	PINE KNOLL NURSING CENTER
2786	ROYAL NURSING CENTER, LLC
2807	SERENITY HILL NURSING & REH. CTR
2886	LIFE CARE CENTER OF ACTON
2984	ALLIANCE HEALTH AT WEST ACRES
4062	Whittier Rehabilitation Hospital - Westborough
4216	ABBOTT HOUSE NURSING HOME
4218	BAKER KATZ SKILLED NURSING & REHABILITATION
4219	BELMONT MANOR NURSING HOME
4220	KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S
4221	KINDRED TRANS CARE & REH-BLUEBERRY HILL
4225	KINDRED NURSING & REH-BRIGHAM
4228	KINDRED NURSING & REH-WALDEN

ED_TRANSFERFROM	Facility
4230	KINDRED TRANS CARE & REH-WESTBOROUGH
4234	ROYAL CAPE COD NURSING AND REHAB CTR
4239	KINDRED NURSING & REH-COLONY HOUSE
4241	KINDRED NURSING & REH-COUNTRY GARDENS
4242	KINDRED TRANS CARE & REH-NEWBURYPORT
4243	KINDRED TRANS CARE & REH-CRAWFORD
4244	KINDRED NURSING & REH-DEN-MAR
4245	DEVEREUX HOUSE SKILLED NURSING & REHAB
4248	KINDRED TRANS CARE & REH-FRANKLIN
4250	HALLMARK NURSING & REHAB. CTR
4251	KINDRED TRANS CARE & REH-HAMMERSMITH
4253	KINDRED TRANS CARE & REH-HARRINGTON
4261	KINDRED NURSING & REH-LAUREL RIDGE
4262	LEDGEWOOD REHAB & SKILLED NC
4263	ALLIANCE HEALTH AT MARINA BAY
4264	AMESBURY VILLAGE
4267	NEVILLE CTR.@ FRESH POND FOR NURSING & REHABILITATION
4270	KINDRED NURSING & REH-OAKWOOD
4274	KINDRED NURSING & REH-PRESENTATION
4278	KINDRED TRANS CARE & REH-QUINCY
4281	ROSCOMMON EXTENDED CARE CENTER
4282	ALLIANCE HEALTH AT ROSEWOOD
4283	KINDRED TRANS CARE & REH-SACHEM
4284	SEA VIEW CONV & NURSING HOME
4285	ST. CAMILLUS HEALTH CENTER
4287	SUDBURY PINES EXTENDED CARE
4289	ROYAL TABER STREET NURSING AND REHAB CTR
4291	KINDRED TRANS CARE & REH-ELIOT
4292	THE OXFORD
4872	BUCKLEY-GREENFIELD HEALTHCARE CTR
4874	HOLYOKE HEALTH CARE CTR.
4875	JOHN ADAMS HEALTHCARE CENTER
4876	KIMBALL FARMS NURSING CARE CENTER
4877	LASELL HOUSE
4878	LONGMEADOW OF TAUNTON
4880	PLEASANT BAY NURSING & REH. CTR

ED_TRANSFERFROM	Facility
4887	COLONIAL HEIGHTS
4888	SPRING VALLEY CENTER
4896	HAMMOND CENTER
4902	SANDALWOOD CENTER
4903	MILFORD CENTER
4906	MEADOW VIEW CENTER
4908	ELAINE CENTER AT HADLEY
4911	WOOD MILL CENTER
4982	THE NEURO-REHAB CENTER AT MIDDLEBORO
4984	THE TERRACES ORLEANS
4985	WINGATE AT WORCESTER
5050	BEAUMONT REHAB & SKD NORTHBOROUGH
5054	RECUPERATIVE SERVICES UNIT
5055	WINGATE AT SILVER LAKE
6333	SPAULDING NSG & THERAPY CTR-WEST ROXBURY
6342	SPAULDING NSG & THERAPY CTR-NORTH END
6343	SAINT LUKE'S HOME
6345	WINGATE AT BELVIDERE
6346	WHITTAKER REST HOME
6377	THE TREMONT
6526	AUTUMN VILLAGE, LLC
6527	CARE ONE AT BROOKLINE
6674	CARE ONE AT MILLBURY
6687	CARE ONE AT NORTHAMPTON
6688	CARE ONE AT CONCORD
6689	CARE ONE AT REDSTONE
6690	CARE ONE AT HOLYOKE
6691	CARE ONE AT LEXINGTON
6693	CARE ONE AT NEW BEDFORD
6694	CARE ONE AT NEWTON
6695	CARE ONE AT PEABODY
6696	CARE ONE AT RANDOLPH
6697	CARE ONE AT WEYMOUTH
6698	CARE ONE AT WILMINGTON
6751	PALMER HEALTHCARE CENTER
6753	RENAISSANCE MANOR ON CABOT

ED_TRANSFERFROM	Facility
6754	SOUTH SHORE REH.& SKILLED CARE CTR
6778	CLIFTON REHABILITATIVE NURG. CTR
6785	PENNY LANE
6790	THE OAKS
6796	SEVEN HILLS PEDIATRIC CENTER
6975	ST. JOSEPH'S ABBEY RES.CARE FAC INC.
7850	CONTINUING CARE AT BROOKSBY VILLAGE
7851	ROSCOMMON WEST ROXBURY
8024	Valley Medical Group, P.C.
8032	MARLBOROUGH HILLS HLTHCARE CTR
8033	SOPHIA SNOW HOUSE, INC.
8078	NEW ENGLAND HOMES FOR THE DEAF
8124	DMR Hogan Regional Center
8210	SERENITY HOME, INC
8214	VILLAGE R.H. 2 OF BROCKTON
8444	ALDEN COURT NURG. CARE & REH. CTR
8445	THE BOSTONIAN N.C AND REH. CTR
8509	HealthAlliance Hospital - Leominster Campus
8560	BRIARWOOD REHAB & NURSING CTR
8574	POET'S SEAT HEALTH CARE CENTER
8575	WINGATE AT SO.HADLEY
8576	ARMENIAN NURSING & REHAB. CTR.
8602	ROSCOMMON ON THE PARKWAY
8606	STONEHEDGE REHABILITATION AND SKILLED CARE CENTER
8616	HATHAWAY MANOR EXTENDED CARE
8626	CARE ONE AT ESSEX PARK
8631	LINDA MANOR EXTENDED CARE FAC
8632	CHARLENE MANOR EXT. CARE FAC.
8662	LIFE CARE CENTER OF LEOMINSTER
8663	THE HIGHLANDS
8693	PRESENTATION HEALTH CARE CTR., INC
8711	SE MASSACHUSETTS HLT & REHAB. CENTER
8712	METHUEN HEALTH & REHAB. CTR.
8782	WINGATE AT HAMPDEN
8783	WINGATE AT SPRINGFIELD
8784	WINGATE AT EAST LONGMEADOW

ED_TRANSFERFROM	Facility
8785	WINGATE AT WEST SPRINGFIELD
8800	WINGATE AT ANDOVER
8801	WINGATE AT WILBRAHAM
8802	WINGATE AT SUDBURY
8803	WINGATE AT READING
8804	WINGATE AT NEEDHAM
8805	WINGATE @ BOSTON
8819	ROSEWOOD CENTER
8820	PARK VIEW REHAB & NSG CENTER
8822	KINDRED TRANS CARE & REH-HIGHLANDER
8824	KINDRED NURSING & REH-BRAINTREE
8826	KINDRED TRANS CARE & REH-FORESTVIEW
8828	KINDRED TRANS CARE & REH-COUNTRY ESTATES
8829	KINDRED TRANS CARE & REH-HIGHGATE
8830	KINDRED TRANS CARE & REH-AVERY
8831	KINDRED NURSING & REH-TOWER HILL
8832	KINDRED NURSING & REH-GODDARD
8833	KINDRED NURSING & REH-HARBORLIGHTS
8837	GOLDEN LIVINGCENTER - FITCHBURG
8838	GOLDEN LIVINGCENTER - GARDEN PLACE
8839	GOLDEN LIVINGCENTER - DEDHAM
8840	GOLDEN LIVINGCENTER - COHASSET
8841	GOLDEN LIVINGCENTER - HEATHWOOD
8842	GOLDEN LIVINGCENTER - CHETWYNDE
8843	GOLDEN LIVINGCENTER - WEST NEWTON
8844	SOUTHEAST REHAB & SKILLED CARE CTR.
8845	GOLDEN LIVINGCENTER - PLYMOUTH
8846	GOLDEN LIVINGCENTER - ATTLEBORO
8847	GOLDEN LIVINGCENTER - WEDGEMERE
8848	GOLDEN LIVINGCENTER - OAK HILL
8853	GOLDEN LIVINGCENTER - GLOUCESTER
8854	GOLDEN LIVINGCENTER - LEXINGTON
8855	GOLDEN LIVINGCENTER - DEXTER HOUSE
8856	GOLDEN LIVINGCENTER - NORWOOD
8857	GOLDEN LIVINGCENTER - MELROSE
8858	GOLDEN LIVINGCENTER - THE ELMHURST

#### (PHDCM.ED)

ED_TRANSFERFROM	Facility
8913	WINGATE AT HAVERHILL
8943	BRIGHTON HOUSE REHAB.& NURSING
8997	SEASHORE POINT AND WELLNESS REHAB
9501	THE PAVILION
9502	GLEN RIDGE NURSING CARE CTR.
9503	ST. JOSEPH REHABILITATION AND NURSING CARE CENTER
9504	RENAISSANCE MANOR OF WESTFIELD
9505	BERKSHIRE REHABILITATION & SKILLED CARE CENTER
9590	WINDEMERE NURSING & REHAB CENTER ON MARTHA'S VINEYARD
9625	WESTFIELD CENTER
9626	WAKEFIELD CENTER
9629	HATHORNE HILL
9630	SAUGUS CENTER
9633	TWIN OAKS CENTER
9634	MAPLEWOOD CENTER
9641	ROYAL FAIRHAVEN NURSING AND REHAB CTR
9719	SARAH S. BRAYTON NURSING CARE CENTER
9720	COOLIDGE HOUSE
9722	WESTFORD HOUSE
9724	HERITAGE HALL SOUTH
9725	SOMERSET RIDGE
9727	ACADEMY MANOR
9728	HERITAGE HALL EAST
9729	PALM MANOR
9730	HERITAGE HALL WEST
9731	APPLE VALLEY CENTER
9732	SUTTON HILL
9733	WILLOW MANOR
9734	HERITAGE HALL NORTH
9735	PRESCOTT HOUSE
9739	HELLENIC NURSING AND REHABILITATION CENTER
9795	DODGE PARK REST HOME
9805	ALLIANCE HEALTH AT BRAINTREE
9816	KINGSTON PLACE, INC.

ED_TRANSFERFROM	Facility
9831	PLEASANT ACRES REST HOME LLC
9958	EPOCH SENIOR H.C. OF WESTON
9959	EPOCH SENIOR H.C. OF SHARON
9964	EPOCH SENIOR H.C. OF CHESTNUT HILL
9966	EPOCH SENIOR H.C. OF NORTON
9967	EPOCH SENIOR H.C. OF BREWSTER
9968	THE WILLOWS AT WORCESTER
9970	WEBSTER MANOR LONG TERM CARE, INC.
9982	CHARWELL HOUSE
9983	KIMWELL
9984	MILTON HEALTH CARE
9985	PARKWELL NURSING AND REHAB CENTER
9986	KATHLEEN DANIEL H.C., A SNF
9987	EMERSON VILLAGE
9988	CHAMPION REHABILITATION AND HEALTH CTR
9999	Preferred Home Healthcare Services (CSN)
10210	BEAUMONT AT UNIVERSITY CAMPUS LLC
10337	ROYAL BRAINTREE NRSG & REHAB CENTER
10388	FAIRHAVEN HEALTHCARE CENTER
10396	ATLANTIC REST HOME
10399	ANNA MARIA REST HOME
10400	DONNA KAY REST HOME
10420	BOURNE MANOR EXT CARE FACILITY
10465	ST. FRANCIS REHAB & NURSING CENTER
10531	Goddard House in Brookline
10687	CHELSEA SKILLED NURSING AND REHAB
10689	COURTYARD NURSING CARE CENTER
10695	SIPPICAN HEALTHCARE CENTER
10696	NEMASKET HEALTHCARE CENTER
10697	MASCONOMET HEALTHCARE CENTER
10699	HANNAH DUSTON HEALTHCARE CTR.
10706	OAK KNOLL HEALTHCARE CENTER
10716	LOOMIS LAKESIDE AT REEDS LANDING
10727	PARK AVENUE NURSING & REHAB CENTER
10771	WESTVIEW REST HOME
10849	MARY'S MEADOW AT PROVIDENCE PLACE

ED_TRANSFERFROM	Facility
10877	NEWBRIDGE ON THE CHARLES SKILLED NURSING FAC
10885	STERLING VILLAGE LLC
11225	CAMBRIDGE REHAB & NURSING CTR
11242	CHARLTON MANOR RH, INC.
11268	SOUTHSHORE HEALTH CARE CENTER
11269	SOUTHEAST HEALTH CARE CENTER
11272	STONEHEDGE HEALTH CARE CENTER
11481	SOMERSET RIDGE
11501	WACHUSETT MANOR
11502	ACADEMY MANOR
11503	HERITAGE MANOR
11512	SARAH S. BRAYTON NURSING CARE CENTER
11515	HERITAGE HALL SOUTH
11524	PRESCOTT HOUSE
11534	WILLOW MANOR
11538	APPLE VALLEY CENTER
11542	SUTTON HILL CENTER
11627	SAVOY NURSING & REHAB CENTER
11885	MEDFORD REHAB & NURSING CTR
11903	LUTHERAN REHAB & SKILLED CARE CTR
11950	PLYMOUTH REHAB & HLTH CARE CTR
11952	CAPE HERITAGE REHAB & HLTH CARE CTR
11953	WORCESTER REHAB & HLTH CARE CTR
11954	SOUTHBRIDGE REHAB & HLTH CARE CTR
11955	NORTHWOOD REHAB & HLTH CARE CTR
11974	WHITTIER WESTBOROUGH TRANSITIONAL CARE UNIT
12012	NEW ENGLAND HEALTH CENTER
12123	BRIARWOOD REHAB & HEALTHCARE CTR
12167	RESERVOIR CENTER FOR HEALTH & REHAB
12168	ELIOT CENTER FOR HEALTH & REHAB
12169	COUNTRY CENTER FOR HEALTH & REHAB
12197	SACHEM CENTER FOR HEALTH & REHAB
12198	COLONY CENTER HEALTH & REHAB
12210	LAUREL RIDGE REHAB & SKILLED CARE CTR
12212	PRESENTATION REHAB & SKILLED CARE CTR
12251	GARDNER REHABILITATION AND NSG CTR

ED_TRANSFERFROM	Facility
12273	VIBRA NUR & REHAB CTR OF WESTERN MASS
12343	HOLYOKE HEALTHCARE CENTER
12344	JOHN ADAMS HEALTHCARE CENTER
12347	BRENTWOOD REHAB & HEALTHCARE CTR
12349	WEBSTER PARK REHAB & HEALTHCARE CTR.
12356	LONGMEADOW OF TAUNTON
12372	ROYAL NORWELL NURSING & REHAB CTR, LLC
12418	EXCEL CENTER FOR NURSING & REHAB-LEXINGTON
12419	WORCESTER HEALTH CENTER
12420	MERRIMACK VALLEY HEALTH CENTER
12422	PARK PLACE REHAB & SKILLED CARE CTR
12425	WATERTOWN HEALTH CENTER
12426	WABAN HEALTH CENTER
12432	SOUTH COVE MANOR NURSING & REHAB CTR
12434	RIVER TERRACE REHAB & HEALTHCARE CTR
12435	BROOKSIDE REHAB & HEALTHCARE CTR
12499	QUINCY HEALTH & REHAB CTR
12500	FRANKLIN HEALTH & REHAB CTR
12501	BLUE HILLS HEALTH & REHAB CTR
12502	COUNTRY GARDENS HEALTH & REHAB CTR
12503	WALDEN HEALTH & REHAB CTR
12505	CRAWFORD HEALTH & REHAB CTR
12506	BRIGHAM HEALTH & REHAB CTR
12527	WEBSTER MANOR REHAB & HEALTH CARE CTR.
12528	THE OXFORD REHAB & HEALTH CARE CENTER
12529	LANESSA EXTENDED CARE
12530	MARLBOROUGH HILLS REHAB & HEALTH CARE CTR
12531	TCU @ WEBSTER
12532	PARSONS HILL REHAB & HEALTH CARE CTR.
12550	MAPLES REHABILITATION & NURSING CENTER
12585	BROCKTON HEALTH CENTER
12586	MONT MARIE REHAB & HEALTHCARE CTR.
12592	VERO HEALTH & REHAB OF MATTAPAN
12600	VERO HEALTH & REHAB, PARKWAY
12602	VERO HEALTH & REHAB OF WEST ROXBURY
12616	LIFE CARE CENTER OF THE SOUTH SHORE

ED_TRANSFERFROM	Facility
12632	QUABOAG REHABILITATION & SKILLED CARE CTR
12762	WEST REVERE HEALTH CENTER
12763	WOODBRIAR HEALTH CENTER
12823	DIGHTON CARE & REHAB CTR, LLC
12824	ROCKDALE CARE & REHABILITATION CENTER
12825	HIGHLAND MANOR CARE & REHAB CTR, LLC
12826	GLEN RIDGE NURSING CARE CENTER
12828	LIFE CARE CENTER OF MERRIMACK VALLEY
12844	BENCHMARK SR. LIVING AT THE COMMONS IN LINCOOLN
12845	WHITTIER BRADFORD TRANS. CARE UNIT
12930	WINGATE AT HARWICH
12931	WINGATE AT CHESTNUT HILL
12932	WINGATE AT SHARON
12934	WINGATE AT NORTON
12936	WINGATE AT WESTON
13011	CHARLWELL HOUSE
13013	KIMWELL NURSING & REHAB
13023	FRANKLIN HEALTH & REHAB CENTER
13030	COUNTRY GARDENS SKILLED NURSING & REHAB CTR
13032	QUINCY HEALTH & REHAB CENTER LLC
13033	CRAWFORD SKILLED NURSING & REHAB CENTER
13034	BLUE HILLS HEALTH & REHAB CENTER LLC
13038	BRUSH HILL CARE CENTER
13043	CEDAR VIEW REHAB & HEALTHCARE CTR
13054	BRIGHTON HOUSE REHAB & NURSING CTR
13056	COLONIAL REHAB & NURSING CTR
13080	LIFE CARE CENTER OF NASHOBA VALLEY
13094	ALDEN COURT NURSING CARE & REHAB CTR
13124	FITCHBURG GARDENS FOR NURSING & REHAB, LLC
13128	BAYPOINTE REHAB CENTER
13129	SOUTHPOINTE REHAB CENTER

ED_PAYSOURCE1	
ED_PAYSOURCE2	Description
145	Self-Pay Self-Pay

ED_PAYSOURCE1	
ED_PAYSOURCE2	Description
146	Worker's Compensation Worker's Compensation
121	Medicare Medicare
135	Out-of-State Medicare Medicare
125	Medicare HMO - Fallon Senior Plan Medicare Managed Care
127	Medicare HMO - Health New England Medicare Wrap Medicare Managed Care
128	Medicare HMO - HMO Blue for Seniors Medicare Managed Care
129	Medicare HMO - Kaiser Medicare Plus Plan Medicare Managed Care
131	Medicare HMO - Pilgrim Enhance 65 Medicare Managed Care
132	Medicare HMO - Matthew Thornton Senior Plan Medicare Managed Care
133	Medicare HMO -Tufts Medicare Supplement (TMS) Medicare Managed Care
134	Medicare HMO - Other (not listed elsewhere) Medicare Managed Care
173	Aetna Medicare Open Medicare Managed Care
180	Fresenius Medical Care Health Plan (Medicare Advantage Plan) Medicare Manage
210	Medicare HMO - Pilgrim Preferred 65 Medicare Managed Care
211	Medicare HMO - Neighborhood Health Plan Senior Health Plus Medicare Managed
212	Medicare HMO - Healthsource CMHC Central Care Supplement Medicare Managed Ca
213	Medicare HMO - Medicare Complete Plans offered by SecureHorizons Medicare Ma
214	Medicare HMO - Harvard Pilgrim Health Plan - Medicare Enhance Medicare Manag
215	Tufts Medicare HMO - Medicare Preferred Medicare Managed Care
216	Medicare Special Needs Plan - Commonwealth Care Alliance Medicare Managed Ca
217	Medicare Special Needs Plan - Fallon Community Health Plan Medicare Managed
218	Medicare Special Needs Plan - Senior Whole Health Medicare Managed Care
219	Medicare Special Needs Plan - United Health Group Evercare Mass. SCO and Eve
220	Medicare HMO - Blue Care 65 Medicare Managed Care
221	Medicare HMO - Harvard Community Health Plan 65 Medicare Managed Care
222	Medicare HMO - Healthsource CMHC Medicare Managed Care
223	Medicare HMO - Harvard Pilgrim Health Care of New England Care Plus Medicare
224	Medicare HMO - Tufts Secure Horizons Medicare Managed Care
225	Medicare HMO - US Healthcare Medicare Managed Care
230	Medicare HMO - HCHP First Seniority Medicare Managed Care
231	Medicare HMO - Pilgrim Prime Medicare Managed Care
232	Medicare HMO - Seniorcare Direct Medicare Managed Care
233	Medicare HMO - Seniorcare Plus Medicare Managed Care
234	Medicare HMO - Managed Blue for Seniors Medicare Managed Care
245	Trail Blazer Health Enterprises, LLC Medicare Managed Care
252	Health New England (HNE) Medicare Advantage Plan Medicare Managed Care
253	Blue Medicare PFFS Medicare Managed Care
254	Cigna Medicare Access Plans Medicare Managed Care
255	Health Net Pearl Medicare Managed Care
256	Humana Gold PFFS Medicare Managed Care
257	Today's Options Premier from Universal American Medicare Managed Care
258	Unicare Security Choice Medicare Managed Care
273	MassHealth Senior Care Options**** Medicare Managed Care
275	Medicare SCO - NaviCare (HMO) Medicare Managed Care
276	Medicare SCO - Tufts Senior Care Options Medicare Managed Care

ED_PAYSOURCE1	
ED_PAYSOURCE2	Description
277	Medicare SCO - United Health Care Medicare Managed Care
278	Medicare SCO - Commonwealth Care Alliance Medicare Managed Care
279	Medicare One Care - Fallon Total Care Medicare Managed Care
280	Medicare One Care - Network Health Medicare Managed Care
281	Medicare One Care - Commonwealth Care Alliance Medicare Managed Care
103	Medicaid (includes MassHealth) Medicaid
104	Medicaid Managed Care-Primary Care Clinician Medicaid Managed Care
106	Medicaid Managed Care-Central Mass Health Care Medicaid Managed Care
107	Medicaid Managed Care - Community Health Plan Medicaid Managed Care
108	Medicaid Managed Care - Fallon Community Health Plan Medicaid Managed Care
109	Medicaid Managed Care - Harvard Community Health Plan Medicaid Managed Care
110	Medicaid Managed Care - Health New England Medicaid Managed Care
111	Medicaid Managed Care - HMO Blue Medicaid Managed Care
112	Medicaid Managed Care - Kaiser Foundation Plan Medicaid Managed Care
113	Medicaid Managed Care - Neighborhood Health Plan Medicaid Managed Care
114	Medicaid Managed Care - United Health Plans of NE Medicaid Managed Care
115	Medicaid Managed Care - Pilgrim Health Care Medicaid Managed Care
116	Medicaid Managed Care -Tufts Associated Health Plan Medicaid Managed Care
118	Medicaid Mental Health & Substance Abuse Plan -Mass Behavioral Health Partne
119	Medicaid Managed Care Other (not listed elsewhere) Medicaid Managed Care
207	Network Health (Cambridge Health Alliance MCD Program) Medicare Managed Care
208	HealthNet (Boston Medical Center MCD Program) Medicaid Managed Care
274	Medicaid Managed Care - Network Health Medicaid Managed Care
282	BMC MassHealth CarePlus Medicaid Managed Care
283	Fallon MassHealth CarePlus Medicaid Managed Care
284	NHP MassHealth CarePlus Medicaid Managed Care
285	Network Health MassHealth CarePlus Medicaid Managed Care
286	Celticare MassHealth CarePlus Medicaid Managed Care
287	MassHealth CarePlus Medicaid Managed Care
120	Out-of-State Medicaid Other Government Payment
144	Other Government Other Government Payment
151	CHAMPUS Other Government Payment
178	Children's Medical Security Plan (CMSP) Government
50	Blue Health Plan for Kids Blue Cross
136	BCBS Medex Blue Cross
142	Blue Cross Indemnity Blue Cross
154	BCBS Other (Not listed elsewhere) Blue Cross
156	Out of state BCBS Blue Cross
2	Bay State - a product of HMO Blue Blue Cross Managed Care
3	Network Blue (PPO) Blue Cross Managed Care
11	Blue Care Elect Blue Cross Managed Care
81	HMO Blue Blue Cross Managed Care
155	Blue Cross Managed Care Other Blue Cross Managed Care
160	Blue Choice (includes Healthflex Blue) - POS Blue Cross Managed Care
246	Preferred Blue PPO Blue Cross Managed Care

ED_PAYSOURCE1	
ED_PAYSOURCE2	Description
30	CIGNA (Indemnity) Commercial Insurance
51	Aetna Life Insurance Commercial Insurance
52	Boston Mutual Insurance Commercial Insurance
54	Continental Assurance Insurance Commercial Insurance
55	Guardian Life Insurance Commercial Insurance
56	Hartford L&A Insurance Commercial Insurance
57	John Hancock Life Insurance Commercial Insurance
58	Liberty Life Insurance Commercial Insurance
59	Lincoln National Insurance Commercial Insurance
62	Mutual of Omaha Insurance Commercial Insurance
63	New England Mutual Insurance Commercial Insurance
64	New York Life Care Indemnity Commercial Insurance
65	Paul Revere Life Insurance Commercial Insurance
66	Prudential Insurance Commercial Insurance
67	First Allmerica Financial Life Insurance Commercial Insurance
69	Corporate Health Insurance Liberty Plan Commercial Insurance
70	Union Labor Life Insurance Commercial Insurance
72	Healthsource New Hampshire Commercial Insurance
73	United Health and Life Commercial Insurance
74	United Healthcare Insurance Company Commercial Insurance
85	Liberty Mutual Commercial Insurance
89	Great West/NE Care Commercial Insurance
91	New England Benefits Commercial Insurance
94	Time Insurance Co Commercial Insurance
96	Metrahealth (United Health Care of NE) Commercial Insurance
97	UniCare Commercial Insurance
100	Transport Life Insurance Commercial Insurance
101	Quarto Claims Commercial Insurance
102	Wausau Insurance Company Commercial Insurance
137	AARP/Medigap supplement Commercial Insurance
138	Banker's Life and Casualty Insurance Commercial Insurance
139	Bankers Multiple Line Commercial Insurance
140	Combined Insurance Company of America Commercial Insurance
141	Other Medigap (not listed elsewhere) Commercial Insurance
147	Other Commercial (not listed elsewhere) Commercial Insurance
176	Carelink (CIGNA & Tufts) Commercial Insurance
177	Chesapeake Life Insurance Company Commercial Insurance
179	First Health Life and Health Insurance Company Commercial Insurance
185	Connecticut General Life - Indemnity Commercial Insurance
189	Fallon Major Medical - Indemnity Commercial Insurance
193	Harvard Pilgrim - Indemnity Commercial Insurance
197	Health Insurance Plan of New York (HIP) Commercial Insurance
198	John Alden Life Insurance Company Commercial Insurance
200	Hartford Life Insurance Co Commercial Insurance
201	Mutual of Omaha Commercial Insurance

ED_PAYSOURCE1		
ED_PAYSOURCE2	Description	
202	New York Life Insurance Commercial Insurance	
203	Principal Financial Group (Principal Mutual Life) Commercial Insurance	
204	Christian Brothers Employee Commercial Insurance	
206	Health New England Guaranteed Issue - Individual Plans Commercial Insurance	
209	Mid-West National Life Insurance Company of Tennessee Commercial Insurance	
228	Oxford Health Plans Commercial Insurance	
229	Professional Insurance Company (Indemnity) Commercial Insurance	
235	Trustmark Life Insurance Company Commercial Insurance	
241	Union Security Insurance Company Commercial Insurance	
242	Wellcare Health Plans, Inc. Commercial Insurance	
244	Tufts Medicare Complement (TMC) Commercial Insurance	
247	Humana Insurance Company ** Commercial Insurance	
248	Mail Handlers Benefit Plan Commercial Insurance	
249	MEGA Life and Health Insurance Company Commercial Insurance	
17	Prudential Healthcare POS Commercial Managed Care	
18	Prudential Healthcare PPO Commercial Managed Care	
22	Aetna Open Choice PPO Commercial Managed Care	
23	Guardian Life Insurance Company PPO Commercial Managed Care	
27	First Allmerica Financial Life Insurance PPO Commercial Managed Care	
28	Great West Life PPO Commercial Managed Care	
31	One Health Plan HMO (Great West Life) Commercial Managed Care	
33	Mutual of Omaha PPO Commercial Managed Care	
34	New York Life Care PPO Commercial Managed Care	
35	United Healthcare Insurance Company - HMO Commercial Managed Care	
36	United Healthcare Insurance Company - PPO Commercial Managed Care	
75	Prudential Healthcare HMO Commercial Managed Care	
78	Phoenix Preferred PPO Commercial Managed Care	
82	John Hancock Preferred Commercial Managed Care	
87	CIGNA PPO Commercial Managed Care	
157	Metrahealth - PPO (United Health Care of NE) Commercial Managed Care	
158	Metrahealth - HMO (United Health Care of NE) Commercial Managed Care	
161	Aetna Managed Choice POS Commercial Managed Care	
162	Great West Life POS Commercial Managed Care	
163	United Healthcare Insurance Company - POS Commercial Managed Care	
171	CIGNA POS Commercial Managed Care	
172	Metrahealth - POS (United Health Care of NE) Commercial Managed Care	
181	First Allmerica Financial Life Insurance EPO Commercial Managed Care	
182	UniCare Preferred Plus Managed Access EPO Commercial Managed Care	
190	Fallon Preferred Care - PPO Commercial Managed Care	
191	Genworth Preferred PPO Commercial Managed Care	
192	Guarantee Trust Life Insurance Company - PPO Commercial Managed Care	
226	United Health Care of New England, Inc. Commercial Managed Care	
250	CIGNA HMO Commercial Managed Care	
270	UniCare Preferred Plus PPO Commercial Managed Care	
1	Harvard Community Health Plan HMO	

ED_PAYSOURCE1	
ED_PAYSOURCE2	Description
4	Fallon Community Health Plan HMO
7	Tufts Associated Health Plan HMO
8	Pilgrim Health Care HMO
9	United Health Plan of New England (Ocean State) HMO
19	Matthew Thornton HMO
20	HCHP of New England (formerly RIGHA) HMO
24	Health New England HMO
25	Pioneer Plan HMO
37	HCHP-Pilgrim HMO (integrated product) HMO
38	Health New England Select (self-funded) HMO
39	Pilgrim Direct HMO
40	Kaiser Foundation HMO
42	ConnectiCare Of Massachusetts HMO
43	MEDTAC HMO
44	Community Health Plan HMO
45	Health Source New Hampshire HMO
46	Blue CHiP (BCBS Rhode Island) HMO
47	Neighborhood Health Plan HMO
48	US Healthcare HMO
148	Other HMO (not listed elsewhere) HMO
174	Aetna Health Inc Quality POS HMO
175	Aetna Health, Inc HMO HMO
194	Harvard Pilgrim - POS HMO
195	Harvard Pilgrim - PPO HMO
196	Harvard Pilgrim Health Care, Inc. (HMO) HMO
236	Tufts Health Maintenance Organization, Inc. (TAHMO) HMO
238	Tufts Associated Health Maintenance Organization, Inc. PPO HMO
239	Tufts Associated Health Maintenance Organization, Inc. POS Plan HMO
243	Pioneer Health Network HMO
251	Healthsource CMHC HMO HMO
259	CeltiCare Health Plan of Massachusetts Commercial Insurance
271	Hillcrest HMO HMO
295	Meritain HMO
98	Healthy Start Free Care
143	Free Care Free Care
990	Free Care - Co-pay, Deductible, or Co-Insurance Free Care
996	Charity Care Other Free Care (Charity Care)
150	Other Non-Managed Care (not listed elsewhere) Other Non-Managed Care Plans
152	Foundation Other Non-Managed Care Plans
153	Grant Other Non-Managed Care Plans
10	Pilgrim Advantage - PPO PPO and Other Managed Care Plans Not Elsewhere Classified
21	Commonwealth PPO PPO and Other Managed Care Plans Not Elsewhere Classified
49	Healthsource CMHC Plus PPO PPO and Other Managed Care Plans Not Elsewhere Classified
71	ADMAR PPO and Other Managed Care Plans Not Elsewhere Classified
77	Options for Healthcare PPO PPO and Other Managed Care Plans Not Elsewhere Classified

ED_PAYSOURCE1	Description
ED_PAYSOURCE2 79	Description           Pioneer Health Care PPO PPO and Other Managed Care Plans Not Elsewhere Classified
80	Tufts Total Health Plan PPO PPO and Other Managed Care Plans Not Elsewhere Classified
83	US Healthcare Quality Network Choice- PPO PPO and Other Managed Care Plans Not Elsewhere Classified
84	
-	Private Healthcare Systems PPO PPO and Other Managed Care Plans Not Elsewhere Classified
86	United Health & Life PPO PPO and Other Managed Care Plans Not Elsewhere Classified
88	Freedom Care PPO and Other Managed Care Plans Not Elsewhere Classified
90	Healthsource Preferred (self-funded) PPO and Other Managed Care Plans Not Elsewhere Classified
93	Psychological Health Plan PPO and Other Managed Care Plans Not Elsewhere Classified
95	Pilgrim Select - PPO PPO and Other Managed Care Plans Not Elsewhere Classified
149	PPO and Other Managed Care PPO and Other Managed Care Plans Not Elsewhere Classified
187	Connecticut General Life - PPO PPO
205	Health New England Select Premier PPO PPO
227	Northeast Health Direct - PPO PPO
237	Tufts Insurance Company PPO PPO
240	Unicare PPO PPO
13	Community Health Plan Options (New York) Point-of-Service Plan
14	Health New England Advantage POS Point-of-Service Plan
99	Other POS (not listed elsewhere) Point-of-Service Plan
164	Healthsource CMHC Plus POS Point-of-Service Plan
165	Healthsource New Hampshire POS (self-funded) Point-of-Service Plan
166	Private Healthcare Systems POS Point-of-Service Plan
167	Fallon POS Point-of-Service Plan
169	Kaiser Added Choice Point-of-Service Plan
170	US Healthcare Quality POS Point-of-Service Plan
186	Connecticut General Life - POS POS
188	Fallon Flex POS POS
183	Pioneer Health Care EPO Exclusive Provider Organization
184	Private Healthcare Systems EPO Exclusive Provider Organization
199	Other EPO (not listed elsewhere) Exclusive Provider Organization
272	Auto Insurance Auto Insurance
288	Boston Medical Center HealthNet ConnectorCare Commonwealth Care Plans
289	CeltiCareConnectorCare Commonwealth Care Plans
290	Fallon ConnectorCare Commonwealth Care Plans
291	Health New England ConnectorCare Commonwealth Care Plans
292	Minuteman Health ConnectorCare Commonwealth Care Plans
293	Neighborhood Health ConnectorCare Commonwealth Care Plans
294	Network Health ConnectorCare Commonwealth Care Plans
300	CommCare: BMC HealthNet Plan/Commonwealth Care– General Classification Commo
301	CommCare: BMC HealthNet Plan/Commonwealth Care – Plan Type I Commonwealth Ca
302	CommCare: BMC HealthNet Plan/Commonwealth Care– Plan Type II Commonwealth Ca
303	CommCare: BMC HealthNet Plan/Commonwealth Care– Plan Type III Commonwealth C
304	CommCare: BMC HealthNet Plan/Commonwealth Care– Plan Type IV Commonwealth Ca
400	CommCare: Cambridge Network Health Forward –General Classification Commonwea
401	CommCare: Cambridge Network Health Forward – Plan Type I Commonwealth Care P
402	CommCare: Cambridge Network Health Forward – Plan Type II Commonwealth Care

ED_PAYSOURCE1 ED_PAYSOURCE2	Description
LD_FAISOURCEZ	CommCare: Cambridge Network Health Forward – Plan Type III Commonwealth Care General Classification
403	Commonwealth Care Plans
	CommCare: Cambridge Network Health Forward – Plan Type IV Commonwealth Care Plan 1 (Group No.
404	4445077) Commonwealth Care Plans
	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care –Plan 2 (Group No.
500	4455220) Commonwealth Care Plans
501	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care – Plan 3 (Group No. 4455221) Commonwealth Care Plans
501	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care –Plan 4 (Group No.
502	4455222) Commonwealth Care Plans
503	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care Plans
	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care –I (9CC1) Commonwealth
504	Care Plans
	CommCare: Neighborhood Health Plan– General Classification Commonwealth Care II (9CC2) Commonwealth
600	Care Plans
601	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type III (9CC3) Commonwealth Care Plans
001	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type IV (9CC4) Commonwealth
602	Care Plans
	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type Classification
603	Commonwealth Care Plans
	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type Commonwealth Care
604	Plans
700	CommCare: Celticare Health Plan of Massachusetts / Commonwealth Care General Commonwealth Care Plans
701	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care - Plan 1 Commonwealth Care Plans
702	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care - Plan 2 Commonwealth Care Plans
703	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care - Plan 3
704	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care Bridge P
800	Aetna Dental Commercial Managed Care
801	Aflac Commercial Insurance
802	AllState Commercial Insurance
803	Altus Dental Commercial Managed Care
804	Ameritas Life Insurance Corp Commercial Insurance
805	Anthem Blue Cross Blue Shield Blue Cross Managed Care
806	Assurant PPO and Other Managed Care Plans Not Elsewhere Classified
807	Blue Cross Blue Shield of MA Blue Cross Managed Care
808	Blue Cross Blue Shield of RI Blue Cross Managed Care Not Elsewhere Classified
809	Children's Medical Security Government
810	Cigna Dental PPO and Other Managed Care Plans Not Elsewhere Classified
811	Creative Plan Dental Administrators PPO and Other Managed Care Plans Not Elsewhere Classified
812	Delta Dental of MA Commercial Managed Care
813	Delta Dental - Other Commercial Managed Care
815	Delta Dental of New York Commercial Managed Care
814	DentaQuest Commonwealth Care Commonwealth Care Plans
815	
	DentaQuest MassHealth Medicare Managed Care
817	DentaQuest Senior Whole Health PPO and Other Managed Care Plans Not Elsewher
818	EverCare Dental PPO and Other Managed Care Plans Not Elsewhere Classified
819	Fallon Health Plan Commercial Insurance
820	Great West Dental PPO and Other Managed Care Plans Not Elsewhere Classified

ED_PAYSOURCE1	
ED_PAYSOURCE2	Description
821	Guardian Dental Medicaid
822	Harvard Pilgrim Health Care PPO and Other Managed Care Plans Not Elsewhere C
823	MetLife Dental PPO and Other Managed Care Plans Not Elsewhere Classified
824	Principal Plan Dental Medicare Managed Care
825	Unicare Dental PPO and Other Managed Care Plans Not Elsewhere Classified
826	United Concordia Other Government Payment
827	United HealthCare: Dental PPO and Other Managed Care Plans Not Elsewhere Cla
828	Alicare Commercial Insurance
829	Adventist Risk Management INC Commercial Insurance
830	Blue Cross Blue Shield of Texas Blue Cross Managed Care
831	Brokers National Life insurance Commercial Insurance
832	Cba Blue Dental Blue Cross Managed Care
833	Chesterfield Resources Commercial Insurance
834	Companion Life insurance Commercial Insurance
835	Dental Health Alliance Commercial Insurance
836	EBS Benefit Solutions Commercial Insurance
837	Empire Blue Cross Blue Cross Managed Care
838	Excellus Blue cross Blue Cross Managed Care
839	Fortis Commercial Insurance
840	GEHA Connection Dental Commercial Insurance
841	GHI Commercial Insurance
842	Lincoln Financial Group Commercial Insurance
843	London Health Administrators Commercial Insurance
844	Midwest Life Insurance Commercial Insurance
845 846	Premier Access Dental Plans Commercial Insurance
840	Sentry Life Insurance Commercial Insurance Sonoco Commercial Insurance
847	Sonoco Commercial Insurance Sun Life Dental Benefits Commercial Insurance
848	Symetra Life Insurance Company Commercial Insurance
850	Tricare Dental PPO and Other Managed Care Plans Not Elsewhere Classified
850	Dentemax Insurance Commercial Insurance
995	Health Safety Net Office HSNO
127	Medicare HMO -Health New England Medicare Wrap
128	Medicare HMO -HMO Blue for Seniors
129	Medicare HMO-Kaiser Medicare Plus Plan
136	BCBS Medex
137	AARP/Medigap Supplement
138	Banker's Life and Casualty Insurance
139	Bankers Multiple Line
140	Combined Insurance Company of America
159	None (Valid only for Secondary Source of Payment)
200	Hartford Life Insurance co.
212	Medicare HMO - Healthsource CMHC Central Care Supplement
0	Invalid
15	Invalid (replaced by #158)

ED_PAYSOURCE1	
ED_PAYSOURCE2	Description
32	Invalid (replaced by #157 and 158)
157	Metrahealth - PPO (United Health Care of NE)
158	Metrahealth - HMO (United Health Care of NE)
311	Medicaid: Other ACO
312	Medicaid: Fallon 365 Care (ACO)
313	Medicaid: Be Healthy Partnership with Health New England (ACO)
314	Medicaid: Berkshire Fallon Health Collaborative (ACO)
315	Medicaid: BMC HealthNet Plan Community Alliance (ACO)
316	Medicaid: BMC HealthNet Plan Mercy Alliance (ACO)
317	Medicaid: BMC HealthNet Plan Signature Alliance (ACO)
318	Medicaid: BMC HealthNet Plan Southcoast Alliance (ACO)
320	Medicaid: Community Care Cooperative (ACO)
321	Medicaid: My Care Family with Neighborhood Health Plan (ACO)
322	Medicaid: Partners Healthcare Choice (ACO)
323	Medicaid: Steward Health Choice (ACO)
324	Medicaid: Tufts Health Together with Atrius Health (ACO)
325	Medicaid: Tufts Health Together with BIDCO (ACO)
326	Medicaid: Tufts Health Together with Boston Children's ACO
327	Medicaid: Tufts Health Together with CHA (ACO)
328	Medicaid: Wellforce Care Plan (ACO)
901	Other Commercial Managed Care (not listed elsewhere)
903	Unlisted International Source
904	Unlisted Military Source
905	Other Connector Care Plan (not listed elsewhere)

ED_VISITSOURCE1 ED_VISITSOURCE2	
0	Information Not Available
1	Direct Physician Referral
2	Within Hospital Clinic Referral
3	Direct Health Plan Referral/HMO Referral
4	Transfer from Acute Care Hospital
5	Transfer from a Skilled Nursing Facility (SNF)
6	Transfer from Intermediate Care Facility (ICF)
7	Outside Hospital Emergency Room Transfer
8	Court/Law Enforcement
9	Other
10	Transfer from a Hospice Facility
11	Outside Hospital Clinic Referral
12	Walk-In/Self-Referral
13	Inside Hospital ER Transfer

14	Transfer from Another Institution's Ambulatory Surgery (SDS)
15	Within Hospital Ambulatory Surgery Transfer (SDS Transfer)
16	EMS Transport Decision
17	Information Not Available - Newborn
18	Normal Delivery
19	Premature Delivery
20	Sick Baby
21	Extramural Birth
22	Extramural Birth

#### ED Organizational Table Analytic Data Dictionary (PHDCM.ED\_ORG)

#### Casemix ED\_ORG (PHDCM.ED\_ORG)

Variable Name	Variable Description	Meta Data	Format
ED_SITE/ ED_FACILITY ED_TRANSFERFROM	OrgID to link for hospital characteristics in other ED datasets		Num
ED_City	Code of the municipality in which the facility is located	1-351 for valid MA city/towns 999=Out of state or unknown	Num
GroupName_ED		1= Nursing Facility 2= Hospital 3= Rest Home 4= Private Nursing Facility 5= Private Rest Home 6= Community Health Center 7= DDS - Residential Services 8= Other 9= Unspecified/Unknown/Missing	Num
OrganizationName	Name of Facility		Char
Type_EDFac	Type of Facility	1=Acute Hospital 2=Alzheimer 3=Chronic Hospital 4=Freestanding CHC 5=Geriatric 6=Group Adult Foster Care 7=Head Trauma 8=HMO 9=Hospital Campus - Acute 10=Hospital Campus - Acute 10=Hospital Licensed Health Center 11=Hospital-Based LTC 12=ICF 13=Licensed Satellite Facility 14=Mental Health and Substance Abuse 15=Municipal Agency 16=NH/High MMQ 17=NH/MIMI 18=NH/Pediatric with Ventilation 19=None 20=Other Government Agency 21=Other LTC 22=Outpatient Care Center 23=Pediatric 24=Psychiatric Hospital 26=Rehabilitation Hospital 27=Residential 28=Residential A 29=Satellite Clinic 30=State Agency	Num

#### ED Organizational Table Analytic Data Dictionary (PHDCM.ED\_ORG)

	98= Other 99=Unknown	
Zip code of the municipality in which the facility is located		Char

#### ED Organizational Table Analytic Data Dictionary (PHDCM.ED\_PROC)

#### Casemix Emergency Department Procedure (PHDCM.ED\_PROC)

Variable Name	Variable Description	Meta Data	Format
ED_ID	Unique key to link from Visit table	12 digit ID	Char
ED_PROC	Valid ICD or CPT code		Char
ID	PHD ID	9 character alphanumeric ID	Char

#### ED Organizational Table Analytic Data Dictionary (PHDCM.HD\_DIAG)

Variable Name	Variable Description	Meta Data	Format
HD_ID	Unique key to link from Visit table.	12 digit ID	Char
HD_DIAG_IND	Indicates if the diagnosis was primary, secondary, admitting, or discharge	1=Admitting 2=Discharge 3=Principal 4=Secondary	Num
HD_CONDITIONPRESENT	Flag indicating that diagnosis was present on admission	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown	Num
HD_DIAG	ICD Associated Diagnosis. Excludes the decimal point. May be an External Cause Code or an Associated or Supplemental External Cause Code IF the Principal External Cause Code is present.	Valid ICD-9 or ICD-10 code	Char
ID	PHD ID	9 character alphanumeric ID	Char

#### Casemix Inpatient Hospital Discharge Diagnosis (PHDCM.HD\_DIAG)

#### Casemix Inpatient Hospital Discharge (PHDCM.HD)

Variable Name	Variable Description	Meta Data	Forma t
ID	PHD ID	9 character alphanumeric ID	Char
HD_ADMIT_DATE	the date the patient was admitted to the hospital as an inpatient for this episode of care	Date Proxy – count of days between admission date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
HD_ADMIT_MONTH	Month of admission	Months, 1-12	Num
HD_ADMIT_YEAR	Year of admission	Years	Num
HD_ADMITDAY	Weekday that the patient was admitted to the hospital	1=Sunday 2=Monday 3=Tuesday 4=Wednesday 5=Thursday 6=Friday 7=Saturday Blanks=Missing/Unknown	Num
HD_AGE	Age	0=Less than 1 (please see HD_NEWBORNAGE) Persons over 1 year (1-89): actual age 999=Unknown/missing	Num
HD_CAREGIVER	This data element indicates the type of primary caregiver responsible for the patient's care <u>other</u> than the attending physician, operating room physician, or nurse midwife	1= Resident 2= Intern 3= Nurse Practitioner 4= Physician Assistant 9=Missing/Unknown	Num
HD_CHARGES	The grand total of charges associated with the patient's HD visit. A charge of \$0 is not permitted unless the patient has a special Departure Status. Reported by facilitate. Does not include allowed or negotiated amounts. Not the actual dollars paid to the facility for care.	The total charge amount, rounded to the nearest dollar	Num
HD_CITY	Name of the municipality in which the emergency room is located.	1-351 for valid MA city/towns 999=Out of state or unknown	Num
HD_DAYSBETWEEN	calculated field that indicates the number of	Integer 999=Unknown	Num

Variable Name	Variable Description	Meta Data	Forma t
	days between each consecutive admission		
HD_DIAG1	The ICD diagnosis code corresponding to the condition established after study to be chiefly responsible for the admission of the patient for hospital care.	Valid ICD code, no decimals	Char
HD_DISCHARGE_DATE	date the patient was discharged from inpatient status	Date Proxy – count of days between discharge date and randomly chosen date in the past <b>NOTE: The larger the date</b> <b>proxy, the more recently the</b> <b>event occurred</b>	Num
HD_DISCHARGE_MONTH	Discharge month	Months, 1-12	Num
HD_DISCHARGE_YEAR	Discharge year	Years	Num
HD_DISPOSITION	A code indicating the patient's status upon discharge and/or the destination to which the patient was referred or transferred upon discharge	<u>See code list</u>	Num
HD_ECODE	ICD external cause code	Valid ICD code, no decimals	Char
HD_ECODEPRESENT	Flag indicating that e-code was present on admission. Only patients with injury diagnoses would have a cause of injury code, otherwise coding this POA field would be exempt. Exempt and missing mean different things. On most of the records this field is blank because the coding is exempt for a patient with, say, a heart condition or asthma. Hospitals tend to leave it blank for medical conditions that are exempt.	1=present at time of admission 2=not present at time of admission 3=documentation insufficient to determine if present at time of admission 4= Unable to clinically determine if present at time of admission 5=Unreported/Not used. Exempt from POA reporting	Num

Variable Name	Variable Description	Meta Data	Forma t
HD_EDADMIT	indicates if admission began in the ED	0=Not admitted from the ED, no ED visit reflected in this record 1=Not admitted from the ED, but ED visit(s) reflected in this record 2= Admitted from the ED Blanks=Unknown	Num
HD_FACILITY	The Organization ID for the main facility affiliation.	<u>See code list</u>	Num
HD_HOMELESS	This flag indicates that the patient was homeless at the time of visit.	0= Patient is not known to be homeless 1= Patient is known to be homeless 9=Unknown	Num
HD_ID	unique key to help link CHIA information across other HD tables <b>Note:</b> HD_ID is unique to a year and data set. It cannot be used to link across years or datasets	12 digit ID	Char
HD_LOS	Count of days between the admitting and discharge time for an HD visit.	Integer	Num
HD_NEWBORNAGE	Age in weeks for children younger than 53 weeks of age who are admitted to the ED.	Weeks, 0-52	Num
HD_PAYERNAME1	A description for use with standardized payer codes. Most MA payers are identified in advance of the payment cycle. This field captures the specific differences between those payers.	<u>See code list</u>	Num
HD_PAYERNAME2	A description for use with standardized payer codes. Most MA payers are identified in advance of the payment cycle. This field captures the specific differences between those payers.	<u>See code list</u>	Num
HD_PAYERTYPE1	Indicates the type of organization or individual who is payer.	0=None (valid only for secondary payer) 1=Self-Pay 2=Worker's Compensation 3=Medicare	Num

Variable Name	Variable Description	Meta Data	Forma t
		4=Medicare Managed Care 5=Medicaid 6=Medicaid Managed Care 7=Other Government Payment 8=Blue Cross 9=Blue Cross Managed Care 10=Commercial Insurance 11=Commercial Managed Care 12=HMO 13=Free Care 14=Other Non-Managed Care Plans 15=PPO and Other Managed Care Plans Not Elsewhere Classified 16=Point-of-Service Plan 17=Exclusive Provider Organization 18=Auto Insurance 19= Commonwealth Care/ConnectorCare Plans 20= Dental Plans 21=Health Safety Net 99=Unknown	
HD_PAYERTYPE2	Indicates the type of organization or individual who is payer.	0=None (Valid only for Secondary Payer) 1=Self-Pay 2=Worker's Compensation 3=Medicare 4=Medicare Managed Care 5=Medicaid 6=Medicaid Managed Care 7=Other Government Payment 8=Blue Cross 9=Blue Cross Managed Care 10=Commercial Insurance 11=Commercial Insurance 11=Commercial Managed Care 12=HMO 13=Free Care 14=Other Non-Managed Care Plans 15=PPO and Other Managed Care Plans Not Elsewhere Classified 16=Point-of-Service Plan 17=Exclusive Provider Organization 18=Auto Insurance 19= Commonwealth Care/ConnectorCare Plans	Num

Variable Name	Variable Description	Meta Data	Forma t
		20= Dental Plans 21=Health Safety Net 99=Unknown	
HD_PHYSICIAN_NUMBER	Physician's state license number (BORIM #) for the HD Physician who provided services related to this visit. Report if the physician's involvement in the patient's HD Visit is captured in the facility's electronic information systems	Alphanumeric Encrypted BORIM ID	Char
HD_PRIMARYCONDITION_PRES	Flag indicating that principal condition was present on admission	0=condition not present 1=condition present 2=clinically undetermined 8=not applicable 9=unknown	Num
HD_PROC1	The chief procedure performed in the HD as determined by the hospital - ICD code. In general visits do not need to have a principal procedure. Some visits will only have secondary procedure s. These codes should not be Current Procedural Terminology (C PT) Codes.		Char
HD_PROC1_DATE	date the principal procedure was performed	Date Proxy – count of days between principal procedure date and randomly ch osen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
HD_PROC1_MONTH	Principal procedure month	Months, 1-12	Num
HD_PROC1_YEAR	Principal procedure year	Years, 2011-2019	Num
HD_RACE	Combined race and Hispanic ethnicity	<ol> <li>1 = White Non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown</li> </ol>	Num
HD_RES_CODE	Permanent city of residence for the patient	1-351 for valid MA city/towns 999=Out of state or unknown	Num
HD_RES_ZIP	First five digits of patient's permanent zip code. Zip	5 digit zip code 99999=Unknown	Char

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Variable Name	Variable Description	Meta Data	Forma t
	codes are not standardized and this field is as reported from a nine-digit zip code.		
HD_SEX	Sex flag as assigned by HD	1= Male 2= Female 3= Unknown	Num
HD_SITE	The Organization ID for site where the patient received ED care.	See PHDCM.HD_ORG for linking on this variable for info on the site	Num
HD_VISITSOURCE1	How a patient entered the hospital	<u>See code list</u>	Num
HD_VISITSOURCE2	How a patient entered the hospital	<u>See code list</u>	Num
HD_VETERANSTATUS	indicates veteran status	0=No (includes never in military, currently inactive duty, national guard or reservist with 6 months or less active duty) 1=Yes 8= Not applicable 9= Unknown	Num
HD_ICD_Indicator	ICD Indicator Values (0,9)	9=ICD9 0=ICD10 Blanks=Missing/Unknowns	Num
HD_VISITTYPE	type of stay	1= Emergency 2= Urgent 3= Non-Urgent 4= Newborn 5 =Information Unavailable	Num

HD_Disposition	Description
1	Discharged/transferred to home or self-care (routine discharge)
	Discharged/transferred to another short-term general hospital for inpatient
2	care
3	Discharged, transferred to Skilled Nursing Facility (SNF)
4	Discharged/transferred to an Intermediate Care Facility (ICF)
5	Discharged/transferred to a Designated cancer Center or Children's Hospital.
6	Discharged/transferred to home under care of organized home health service organization
7	Left against medical advice (AMA)
8	Discharged/transferred to home under care of a Home IV Drug Therapy Provider

HD_Disposition	Description
9	Not allowed in the MA Hospital Inpatient Discharge Data
10	Discharge Other
11	Discharge/transfer to rehab hospital
12	Discharge/transfer to rest home
13	Discharge to Shelter
14	20 Expired (or did not recover - Christian Science Patient)
15	Discharged/transferred to federal healthcare facility
16	Discharged to Hospice - Home
17	Discharged to Hospice Medical Facility
18	Discharged/transferred within this institution to a hospital-based Medicare- approved swing bed
19	Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital.
20	Discharge/transfer to a Medicare certified long term care hospital.
21	Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare
22	Discharged/transferred to psychiatric hospital or psychiatric distinct part unit of a hospital.
23	Discharged/transferred to a Critical Access Hospital (CAH).
24	Discharged/transferred to another Type of Health Care Institution not defined elsewhere
25	Discharged to home or self-care with a planned acute care hospital inpatient readmission
26	Discharged/transferred to a short term general hospital for inpatient care with a planned acute care hospital inpatient readmission
27	Discharged/transferred to a skilled nursing facility (SNF) with Medicare certification with a planned acute care hospital inpatient readmission
28	Discharged/transferred to a facility that provides custodial or supportive care with a planned acute care hospital inpatient readmission
29	Discharged/transferred to a designated cancer center or children's hospital with a planned acute care hospital inpatient readmission
30	Discharged/transferred to home under care of organized home health service organization with a planned acute care hospital inpatient readmission
31	Discharged/transferred to court/law enforcement with a planned acute care hospital inpatient readmission Discharged/transferred to a federal health care facility with a planned acute
32	care hospital inpatient readmission
33	Discharged/transferred to a hospital-based Medicare approved swing bed with a planned acute care hospital inpatient readmission
	Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital with a planned acute care hospital
34	inpatient readmission Discharged/transferred to a Medicare certified long term care hospital (LTCH)
35	with a planned acute care hospital inpatient readmission
36	Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare with a planned acute care hospital inpatient readmission
50	readmission

#### (PHDCM.HD)

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HD_Disposition	Description
37	Discharged/transferred to a psychiatric distinct part unit of a hospital with a planned acute care hospital inpatient readmission
38	Discharged/transferred to a critical access hospital (CAH) with a planned acute care hospital inpatient readmission
	Discharged/transferred to another type of health care institution not defined elsewhere in this code list with a planned acute care hospital inpatient
39	readmission
99	Unknown

HD_VISITSOURCE1	
HD_VISITSOURCE2	
0	Information Not Available
1	Direct Physician Referral
2	Within Hospital Clinic Referral
3	Direct Health Plan Referral/HMO Referral
4	Transfer from Acute Care Hospital
5	Transfer from a Skilled Nursing Facility (SNF)
6	Transfer from Intermediate Care Facility (ICF)
7	Outside Hospital Emergency Room Transfer
8	Court/Law Enforcement
9	Other
10	Transfer from a Hospice Facility
11	Outside Hospital Clinic Referral
12	Walk-In/Self-Referral
13	Inside Hospital ER Transfer
14	Transfer from Another Institution's Ambulatory Surgery (SDS)
15	Within Hospital Ambulatory Surgery Transfer (SDS Transfer)
16	EMS Transport Decision
17	Information Not Available - Newborn
18	Normal Delivery
19	Premature Delivery
20	Sick Baby
21	Extramural Birth
22	Observation

HD_PAYERNAME1	
HD_PAYERNAME2	Description
145	Self-Pay Self-Pay
146	Worker's Compensation Worker's Compensation
121	Medicare Medicare
135	Out-of-State Medicare Medicare
125	Medicare HMO - Fallon Senior Plan Medicare Managed Care
127	Medicare HMO - Health New England Medicare Wrap Medicare Managed Care
128	Medicare HMO - HMO Blue for Seniors Medicare Managed Care
129	Medicare HMO - Kaiser Medicare Plus Plan Medicare Managed Care
131	Medicare HMO - Pilgrim Enhance 65 Medicare Managed Care
132	Medicare HMO - Matthew Thornton Senior Plan Medicare Managed Care
133	Medicare HMO -Tufts Medicare Supplement (TMS) Medicare Managed Care
134	Medicare HMO - Other (not listed elsewhere) Medicare Managed Care
173	Aetna Medicare Open Medicare Managed Care
180	Fresenius Medical Care Health Plan (Medicare Advantage Plan) Medicare Manage
210	Medicare HMO - Pilgrim Preferred 65 Medicare Managed Care
211	Medicare HMO - Neighborhood Health Plan Senior Health Plus Medicare Managed
212	Medicare HMO - Healthsource CMHC Central Care Supplement Medicare Managed Ca

HD_PAYERNAME1	
HD_PAYERNAME2	Description
213	Medicare HMO - Medicare Complete Plans offered by SecureHorizons Medicare Ma
214	Medicare HMO - Harvard Pilgrim Health Plan - Medicare Enhance Medicare Manag
215	Tufts Medicare HMO - Medicare Preferred Medicare Managed Care
216	Medicare Special Needs Plan - Commonwealth Care Alliance Medicare Managed Ca
217	Medicare Special Needs Plan - Fallon Community Health Plan Medicare Managed
218	Medicare Special Needs Plan - Senior Whole Health Medicare Managed Care
219	Medicare Special Needs Plan - United Health Group Evercare Mass. SCO and Eve
220	Medicare HMO - Blue Care 65 Medicare Managed Care
221	Medicare HMO - Harvard Community Health Plan 65 Medicare Managed Care
222	Medicare HMO - Healthsource CMHC Medicare Managed Care
223	Medicare HMO - Harvard Pilgrim Health Care of New England Care Plus Medicare
224	Medicare HMO - Tufts Secure Horizons Medicare Managed Care
225	Medicare HMO - US Healthcare Medicare Managed Care
230	Medicare HMO - HCHP First Seniority Medicare Managed Care
231	Medicare HMO - Pilgrim Prime Medicare Managed Care
232	Medicare HMO - Seniorcare Direct Medicare Managed Care
233	Medicare HMO - Seniorcare Plus Medicare Managed Care
234	Medicare HMO - Managed Blue for Seniors Medicare Managed Care
245	Trail Blazer Health Enterprises, LLC Medicare Managed Care
252	Health New England (HNE) Medicare Advantage Plan Medicare Managed Care
253	Blue Medicare PFFS Medicare Managed Care
254	Cigna Medicare Access Plans Medicare Managed Care
255	Health Net Pearl Medicare Managed Care
256	Humana Gold PFFS Medicare Managed Care
257	Today's Options Premier from Universal American Medicare Managed Care
258	Unicare Security Choice Medicare Managed Care
273	MassHealth Senior Care Options**** Medicare Managed Care
275	Medicare SCO - NaviCare (HMO) Medicare Managed Care
276	Medicare SCO - Tufts Senior Care Options Medicare Managed Care
277	Medicare SCO - United Health Care Medicare Managed Care
278	Medicare SCO - Commonwealth Care Alliance Medicare Managed Care
279	Medicare One Care - Fallon Total Care Medicare Managed Care
280	Medicare One Care - Network Health Medicare Managed Care
281	Medicare One Care - Commonwealth Care Alliance Medicare Managed Care
103	Medicaid (includes MassHealth) Medicaid
104	Medicaid Managed Care-Primary Care Clinician Medicaid Managed Care
106	Medicaid Managed Care-Central Mass Health Care Medicaid Managed Care
107	Medicaid Managed Care - Community Health Plan Medicaid Managed Care
108	Medicaid Managed Care - Fallon Community Health Plan Medicaid Managed Care
109	Medicaid Managed Care - Harvard Community Health Plan Medicaid Managed Care
110	Medicaid Managed Care - Health New England Medicaid Managed Care
111	Medicaid Managed Care - HMO Blue Medicaid Managed Care
112	Medicaid Managed Care - Kaiser Foundation Plan Medicaid Managed Care
113	Medicaid Managed Care - Neighborhood Health Plan Medicaid Managed Care
114	Medicaid Managed Care - United Health Plans of NE Medicaid Managed Care

HD_PAYERNAME1	
HD_PAYERNAME2	Description
115	Medicaid Managed Care - Pilgrim Health Care Medicaid Managed Care
116	Medicaid Managed Care -Tufts Associated Health Plan Medicaid Managed Care
118	Medicaid Mental Health & Substance Abuse Plan -Mass Behavioral Health Partne
119	Medicaid Managed Care Other (not listed elsewhere) Medicaid Managed Care
207	Network Health (Cambridge Health Alliance MCD Program) Medicare Managed Care
208	HealthNet (Boston Medical Center MCD Program) Medicaid Managed Care
274	Medicaid Managed Care - Network Health Medicaid Managed Care
282	BMC MassHealth CarePlus Medicaid Managed Care
283	Fallon MassHealth CarePlus Medicaid Managed Care
284	NHP MassHealth CarePlus Medicaid Managed Care
285	Network Health MassHealth CarePlus Medicaid Managed Care
286	Celticare MassHealth CarePlus Medicaid Managed Care
287	MassHealth CarePlus Medicaid Managed Care
120	Out-of-State Medicaid Other Government Payment
144	Other Government Other Government Payment
151	CHAMPUS Other Government Payment
178	Children's Medical Security Plan (CMSP) Government
50	Blue Health Plan for Kids Blue Cross
136	BCBS Medex Blue Cross
142	Blue Cross Indemnity Blue Cross
154	BCBS Other (Not listed elsewhere) Blue Cross
156	Out of state BCBS Blue Cross
2	Bay State - a product of HMO Blue Blue Cross Managed Care
3	Network Blue (PPO) Blue Cross Managed Care
11	Blue Care Elect Blue Cross Managed Care
81	HMO Blue Blue Cross Managed Care
155	Blue Cross Managed Care Other Blue Cross Managed Care
160	Blue Choice (includes Healthflex Blue) - POS Blue Cross Managed Care
246	Preferred Blue PPO Blue Cross Managed Care
30	CIGNA (Indemnity) Commercial Insurance
51	Aetna Life Insurance Commercial Insurance
52	Boston Mutual Insurance Commercial Insurance
54	Continental Assurance Insurance Commercial Insurance
55	Guardian Life Insurance Commercial Insurance
56	Hartford L&A Insurance Commercial Insurance
57	John Hancock Life Insurance Commercial Insurance
58	Liberty Life Insurance Commercial Insurance
59	Lincoln National Insurance Commercial Insurance
62	Mutual of Omaha Insurance Commercial Insurance
63	New England Mutual Insurance Commercial Insurance
64	New York Life Care Indemnity Commercial Insurance
65	Paul Revere Life Insurance Commercial Insurance
66	Prudential Insurance Commercial Insurance
67	First Allmerica Financial Life Insurance Commercial Insurance
69	Corporate Health Insurance Liberty Plan Commercial Insurance

HD_PAYERNAME1	
HD_PAYERNAME2	Description
70	Union Labor Life Insurance Commercial Insurance
72	Healthsource New Hampshire Commercial Insurance
73	United Health and Life Commercial Insurance
74	United Healthcare Insurance Company Commercial Insurance
85	Liberty Mutual Commercial Insurance
89	Great West/NE Care Commercial Insurance
91	New England Benefits Commercial Insurance
94	Time Insurance Co Commercial Insurance
96	Metrahealth (United Health Care of NE) Commercial Insurance
97	UniCare Commercial Insurance
100	Transport Life Insurance Commercial Insurance
101	Quarto Claims Commercial Insurance
102	Wausau Insurance Company Commercial Insurance
137	AARP/Medigap supplement Commercial Insurance
138	Banker's Life and Casualty Insurance Commercial Insurance
139	Bankers Multiple Line Commercial Insurance
140	Combined Insurance Company of America Commercial Insurance
141	Other Medigap (not listed elsewhere) Commercial Insurance
147	Other Commercial (not listed elsewhere) Commercial Insurance
176	Carelink (CIGNA & Tufts) Commercial Insurance
177	Chesapeake Life Insurance Company Commercial Insurance
179	First Health Life and Health Insurance Company Commercial Insurance
185	Connecticut General Life - Indemnity Commercial Insurance
189	Fallon Major Medical - Indemnity Commercial Insurance
193	Harvard Pilgrim - Indemnity Commercial Insurance
197	Health Insurance Plan of New York (HIP) Commercial Insurance
198	John Alden Life Insurance Company Commercial Insurance
200	Hartford Life Insurance Co Commercial Insurance
201	Mutual of Omaha Commercial Insurance
202	New York Life Insurance Commercial Insurance
203	Principal Financial Group (Principal Mutual Life) Commercial Insurance
204	Christian Brothers Employee Commercial Insurance
206	Health New England Guaranteed Issue - Individual Plans Commercial Insurance
209	Mid-West National Life Insurance Company of Tennessee Commercial Insurance
228	Oxford Health Plans Commercial Insurance
229	Professional Insurance Company (Indemnity) Commercial Insurance
235	Trustmark Life Insurance Company Commercial Insurance
241	Union Security Insurance Company Commercial Insurance
242	Wellcare Health Plans, Inc. Commercial Insurance
244	Tufts Medicare Complement (TMC) Commercial Insurance
247	Humana Insurance Company ** Commercial Insurance
248	Mail Handlers Benefit Plan Commercial Insurance
249	MEGA Life and Health Insurance Company Commercial Insurance
17	Prudential Healthcare POS Commercial Managed Care
18	Prudential Healthcare PPO Commercial Managed Care

HD_PAYERNAME1	
HD_PAYERNAME2	Description
22	Aetna Open Choice PPO Commercial Managed Care
23	Guardian Life Insurance Company PPO Commercial Managed Care
27	First Allmerica Financial Life Insurance PPO Commercial Managed Care
28	Great West Life PPO Commercial Managed Care
31	One Health Plan HMO (Great West Life) Commercial Managed Care
33	Mutual of Omaha PPO Commercial Managed Care
34	New York Life Care PPO Commercial Managed Care
35	United Healthcare Insurance Company - HMO Commercial Managed Care
36	United Healthcare Insurance Company - PPO Commercial Managed Care
75	Prudential Healthcare HMO Commercial Managed Care
78	Phoenix Preferred PPO Commercial Managed Care
82	John Hancock Preferred Commercial Managed Care
87	CIGNA PPO Commercial Managed Care
157	Metrahealth - PPO (United Health Care of NE) Commercial Managed Care
158	Metrahealth - HMO (United Health Care of NE) Commercial Managed Care
161	Aetna Managed Choice POS Commercial Managed Care
162	Great West Life POS Commercial Managed Care
163	United Healthcare Insurance Company - POS Commercial Managed Care
171	CIGNA POS Commercial Managed Care
172	Metrahealth - POS (United Health Care of NE) Commercial Managed Care
181	First Allmerica Financial Life Insurance EPO Commercial Managed Care
182	UniCare Preferred Plus Managed Access EPO Commercial Managed Care
190	Fallon Preferred Care - PPO Commercial Managed Care
191	Genworth Preferred PPO Commercial Managed Care
192	Guarantee Trust Life Insurance Company - PPO Commercial Managed Care
226	United Health Care of New England, Inc. Commercial Managed Care
250	CIGNA HMO Commercial Managed Care
270	UniCare Preferred Plus PPO Commercial Managed Care
1	Harvard Community Health Plan HMO
4	Fallon Community Health Plan HMO
7	Tufts Associated Health Plan HMO
8	Pilgrim Health Care HMO
9	United Health Plan of New England (Ocean State) HMO
19	Matthew Thornton HMO
20	HCHP of New England (formerly RIGHA) HMO
24	Health New England HMO
25	Pioneer Plan HMO
37	HCHP-Pilgrim HMO (integrated product) HMO
38	Health New England Select (self-funded) HMO
39	Pilgrim Direct HMO
40	Kaiser Foundation HMO
42	ConnectiCare Of Massachusetts HMO MEDTAC HMO
43	
44 45	Community Health Plan HMO
45	Health Source New Hampshire HMO

HD_PAYERNAME1 HD_PAYERNAME2	Description
46	Blue CHiP (BCBS Rhode Island) HMO
40	Neighborhood Health Plan HMO
48	US Healthcare HMO
148	Other HMO (not listed elsewhere) HMO
174	Aetna Health Inc Quality POS HMO
175	Aetna Health, Inc HMO HMO
194	Harvard Pilgrim - POS HMO
195	Harvard Pilgrim - PPO HMO
196	Harvard Pilgrim Health Care, Inc. (HMO) HMO
236	Tufts Health Maintenance Organization, Inc. (TAHMO) HMO
238	Tufts Associated Health Maintenance Organization, Inc. PPO HMO
239	Tufts Associated Health Maintenance Organization, Inc. POS Plan HMO
243	Pioneer Health Network HMO
251	Healthsource CMHC HMO HMO
259	CeltiCare Health Plan of Massachusetts Commercial Insurance
271	Hillcrest HMO HMO
295	Meritain HMO
98	Healthy Start Free Care
143	Free Care Free Care
990	Free Care - Co-pay, Deductible, or Co-Insurance Free Care
996	Charity Care Other Free Care (Charity Care)
150	Other Non-Managed Care (not listed elsewhere) Other Non-Managed Care Plans
152	Foundation Other Non-Managed Care Plans
153	Grant Other Non-Managed Care Plans
10	Pilgrim Advantage - PPO PPO and Other Managed Care Plans Not Elsewhere Classified
21	Commonwealth PPO PPO and Other Managed Care Plans Not Elsewhere Classified
49	Healthsource CMHC Plus PPO PPO and Other Managed Care Plans Not Elsewhere Classified
71	ADMAR PPO and Other Managed Care Plans Not Elsewhere Classified
77 79	Options for Healthcare PPO PPO and Other Managed Care Plans Not Elsewhere Classified Pioneer Health Care PPO PPO and Other Managed Care Plans Not Elsewhere Classified
80	Tufts Total Health Plan PPO PPO and Other Managed Care Plans Not Elsewhere Classified
83	US Healthcare Quality Network Choice- PPO PPO and Other Managed Care Plans Not Elsewhere Classified
84	Private Healthcare Systems PPO PPO and Other Managed Care Plans Not Elsewhere Classified
86	United Health & Life PPO PPO and Other Managed Care Plans Not Elsewhere Classified
88	Freedom Care PPO and Other Managed Care Plans Not Elsewhere Classified
90	Healthsource Preferred (self-funded) PPO and Other Managed Care Plans Not Elsewhere Classified
93	Psychological Health Plan PPO and Other Managed Care Plans Not Elsewhere Classified
95	Pilgrim Select - PPO PPO and Other Managed Care Plans Not Elsewhere Classified
149	PPO and Other Managed Care PPO and Other Managed Care Plans Not Elsewhere Classified
187	Connecticut General Life - PPO PPO
205	Health New England Select Premier PPO PPO
227	Northeast Health Direct - PPO PPO
237	Tufts Insurance Company PPO PPO
240	Unicare PPO PPO
13	Community Health Plan Options (New York) Point-of-Service Plan

D_PAYERNAME1	
ID_PAYERNAME2	Description
14	Health New England Advantage POS Point-of-Service Plan
99	Other POS (not listed elsewhere) Point-of-Service Plan
164	Healthsource CMHC Plus POS Point-of-Service Plan
165	Healthsource New Hampshire POS (self-funded) Point-of-Service Plan
166	Private Healthcare Systems POS Point-of-Service Plan
167	Fallon POS Point-of-Service Plan
169	Kaiser Added Choice Point-of-Service Plan
170	US Healthcare Quality POS Point-of-Service Plan
186	Connecticut General Life - POS POS
188	Fallon Flex POS POS
183	Pioneer Health Care EPO Exclusive Provider Organization
184	Private Healthcare Systems EPO Exclusive Provider Organization
199	Other EPO (not listed elsewhere) Exclusive Provider Organization
272	Auto Insurance Auto Insurance
288	Boston Medical Center HealthNet ConnectorCare Commonwealth Care Plans
289	CeltiCareConnectorCare Commonwealth Care Plans
290	Fallon ConnectorCare Commonwealth Care Plans
291	Health New England ConnectorCare Commonwealth Care Plans
292	Minuteman Health ConnectorCare Commonwealth Care Plans
293	Neighborhood Health ConnectorCare Commonwealth Care Plans
294	Network Health ConnectorCare Commonwealth Care Plans
300	CommCare: BMC HealthNet Plan/Commonwealth Care– General Classification Commo
301	CommCare: BMC HealthNet Plan/Commonwealth Care – Plan Type I Commonwealth Ca
302	CommCare: BMC HealthNet Plan/Commonwealth Care- Plan Type II Commonwealth Ca
303	CommCare: BMC HealthNet Plan/Commonwealth Care– Plan Type III Commonwealth C
304	CommCare: BMC HealthNet Plan/Commonwealth Care- Plan Type IV Commonwealth Ca
400	CommCare: Cambridge Network Health Forward –General Classification Commonwea
401	CommCare: Cambridge Network Health Forward – Plan Type I Commonwealth Care P
402	CommCare: Cambridge Network Health Forward – Plan Type II Commonwealth Care
-	CommCare: Cambridge Network Health Forward – Plan Type III Commonwealth Care General Classification
403	Commonwealth Care Plans
	CommCare: Cambridge Network Health Forward – Plan Type IV Commonwealth Care Plan 1 (Group No.
404	4445077) Commonwealth Care Plans
F00	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care –Plan 2 (Group No.
500	4455220) Commonwealth Care Plans
501	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care – Plan 3 (Group No. 4455221) Commonwealth Care Plans
201	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care –Plan 4 (Group No.
502	4455222) Commonwealth Care Plans
503	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care Plans
	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care –I (9CC1) Commonwealth
504	Care Plans
	CommCare: Neighborhood Health Plan- General Classification Commonwealth Care II (9CC2) Commonwealth
600	Care Plans
	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type III (9CC3) Commonwealt
601	Care Plans
600	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type IV (9CC4) Commonwealt
602	Care Plans

ID PAYERNAME1	Description
ID_PAYERNAME2	<b>Description</b> CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type Classification
603	Commonwealth Care Plans
	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type Commonwealth Care
604	Plans
700	CommCare: Celticare Health Plan of Massachusetts / Commonwealth Care General Commonwealth Care Plan
701	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care - Plan 1 Commonwealth Care Plans
702	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care - Plan 2 Commonwealth Care Plan
703	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care - Plan 3
704	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care Bridge P
800	Aetna Dental Commercial Managed Care
801	Aflac Commercial Insurance
802	AllState Commercial Insurance
803	Altus Dental Commercial Managed Care
804	Ameritas Life Insurance Corp Commercial Insurance
805	Anthem Blue Cross Blue Shield Blue Cross Managed Care
806	Assurant PPO and Other Managed Care Plans Not Elsewhere Classified
807	Blue Cross Blue Shield of MA Blue Cross Managed Care
808	Blue Cross Blue Shield of RI Blue Cross Managed Care Not Elsewhere Classified
809	Children's Medical Security Government
810	Cigna Dental PPO and Other Managed Care Plans Not Elsewhere Classified
811	Creative Plan Dental Administrators PPO and Other Managed Care Plans Not Elsewhere Classified
812	Delta Dental of MA Commercial Managed Care
813	Delta Dental - Other Commercial Managed Care
814	Delta Dental of New York Commercial Managed Care
815	DentaQuest Commonwealth Care Commonwealth Care Plans
816	DentaQuest MassHealth Medicare Managed Care
817	DentaQuest Senior Whole Health PPO and Other Managed Care Plans Not Elsewher
818	EverCare Dental PPO and Other Managed Care Plans Not Elsewhere Classified
819	Fallon Health Plan Commercial Insurance
820	Great West Dental PPO and Other Managed Care Plans Not Elsewhere Classified
821	Guardian Dental Medicaid
822	Harvard Pilgrim Health Care PPO and Other Managed Care Plans Not Elsewhere C
823	MetLife Dental PPO and Other Managed Care Plans Not Elsewhere Classified
824	Principal Plan Dental Medicare Managed Care
825	Unicare Dental PPO and Other Managed Care Plans Not Elsewhere Classified
826	United Concordia Other Government Payment
827	United HealthCare: Dental PPO and Other Managed Care Plans Not Elsewhere Cla
828	Alicare Commercial Insurance
829	Adventist Risk Management INC Commercial Insurance
830	Blue Cross Blue Shield of Texas Blue Cross Managed Care
831	Brokers National Life insurance Commercial Insurance
832	Cba Blue Dental Blue Cross Managed Care
833	Chesterfield Resources Commercial Insurance
834	Companion Life insurance Commercial Insurance
835	Dental Health Alliance Commercial Insurance
836	EBS Benefit Solutions Commercial Insurance

HD_PAYERNAME1	
HD_PAYERNAME2	Description
837	Empire Blue Cross Blue Cross Managed Care
838	Excellus Blue cross Blue Cross Managed Care
839	Fortis Commercial Insurance
840	GEHA Connection Dental Commercial Insurance
841	GHI Commercial Insurance
842	Lincoln Financial Group Commercial Insurance
843	London Health Administrators Commercial Insurance
844	Midwest Life Insurance Commercial Insurance
845	Premier Access Dental Plans Commercial Insurance
846	Sentry Life Insurance Commercial Insurance
847	Sonoco Commercial Insurance
848	Sun Life Dental Benefits Commercial Insurance
849	Symetra Life Insurance Company Commercial Insurance
850	Tricare Dental PPO and Other Managed Care Plans Not Elsewhere Classified
851	Dentemax Insurance Commercial Insurance
995	Health Safety Net Office HSNO
127	Medicare HMO -Health New England Medicare Wrap
128	Medicare HMO -HMO Blue for Seniors
129	Medicare HMO-Kaiser Medicare Plus Plan
136	BCBS Medex
137	AARP/Medigap Supplement
138	Banker's Life and Casualty Insurance
139	Bankers Multiple Line
140	Combined Insurance Company of America
159	None (Valid only for Secondary Source of Payment)
200	Hartford Life Insurance co.
212	Medicare HMO - Healthsource CMHC Central Care Supplement
0	Invalid
15	Invalid (replaced by #158)
32	Invalid (replaced by #157 and 158)
157	Metrahealth - PPO (United Health Care of NE)
158	Metrahealth - HMO (United Health Care of NE)
311	Medicaid: Other ACO
312	Medicaid: Fallon 365 Care (ACO)
313	Medicaid: Be Healthy Partnership with Health New England (ACO)
314	Medicaid: Berkshire Fallon Health Collaborative (ACO)
315	Medicaid: BMC HealthNet Plan Community Alliance (ACO)
316	Medicaid: BMC HealthNet Plan Mercy Alliance (ACO)
317	Medicaid: BMC HealthNet Plan Signature Alliance (ACO)
318	Medicaid: BMC HealthNet Plan Southcoast Alliance (ACO)
320	Medicaid: Community Care Cooperative (ACO)
320	Medicaid: My Care Family with Neighborhood Health Plan (ACO)
321	
	Medicaid: Partners Healthcare Choice (ACO)
323	Medicaid: Steward Health Choice (ACO)
324	Medicaid: Tufts Health Together with Atrius Health (ACO)

HD_PAYERNAME1 HD_PAYERNAME2	Description
325	Medicaid: Tufts Health Together with BIDCO (ACO)
326	Medicaid: Tufts Health Together with Boston Children's ACO
327	Medicaid: Tufts Health Together with CHA (ACO)
328	Medicaid: Wellforce Care Plan (ACO)
901	Other Commercial Managed Care (not listed elsewhere)
903	Unlisted International Source
904	Unlisted Military Source
905	Other Connector Care Plan (not listed elsewhere)

# Casemix Inpatient Hospital Discharge Procedure Table Analytic Data Dictionary

## (PHDCM.HD\_ORG)

#### Casemix Inpatient Hospital Discharge Procedure Table (PHDCM.HD\_ORG)

Variable Name	Variable Description	Meta Data	Format
HD_SITE / HD_FACILITY	OrgID to link for hospital characteristics in other HD datasets		Num
HD_City	Code of the municipality in which the facility is located	1-351 for valid MA city/towns 999=Out of state or unknown	Num
GroupName_HD		<ul> <li>1= Nursing Facility</li> <li>2= Hospital</li> <li>3= Rest Home</li> <li>4= Private Nursing Facility</li> <li>5= Private Rest Home</li> <li>6= Community Health Center</li> <li>7= DDS - Residential Services</li> <li>8= Other</li> <li>9= Unspecified/Unknown/Missing</li> </ul>	Num
OrganizationName	Name of Facility		Char
Type_HDFac	Type of Facility	1=Acute Hospital2=Alzheimer3=Chronic Hospital4=Freestanding CHC5=Geriatric6=Group Adult Foster Care7=Head Trauma8=HMO9=Hospital Campus - Acute10=Hospital Licensed HealthCenter11=Hospital-Based LTC12=ICF13=Licensed Satellite Facility14=Mental Health and SubstanceAbuse15=Municipal Agency16=NH/High MMQ17=NH/MIMI18=NH/Pediatric with Ventilation19=None20=Other Government Agency21=Other LTC22=Outpatient Care Center23=Pediatric24=Psychiatric25=Psychiatric Hospital26=Rehabilitation Hospital27=Residential28=Residential A29=Satellite Clinic30=State Agency31=Ventilation99=Unknown	Num

## Casemix Inpatient Hospital Discharge Procedure Table Analytic Data Dictionary (PHDCM.HD\_PROC)

Casemix - Inpatient Hospital Discharge Procedure (PHDCM.HD\_PROC)

Variable Name	Variable Description	Meta Data	Format
HD_PROC_IND	Indicates if the procedure was primary, secondary, admitting, or discharge.	1=Admitting 2=Discharge 3=Principal 4=Secondary	Num
HD_PROC	The ICD-10 or Current Procedural Terminology (CPT) code corresponding to procedures which carry an operative or anesthetic risk or require highly trained personnel, special equipment or facilities.	Valid ICD or CPT code	Char
HD_PROC_DATE	Date the procedure was performed	Date Proxy – count of days between procedure date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
HD_PROC_MONTH	Procedure month	Months, 1-12	Num
HD_PROC_YEAR	Procedure year	Years	Num
HD_ID	Unique key to link from Visit table. <b>Note:</b> HD_ID is unique to a year and data set. It cannot be used to link across years or datasets.	12 digit ID	Char
ID	PHD ID	9 character alphanumeric ID	Char

#### Casemix Outpatient Observation Visit Table Analytic Data Dictionary (PHDCM.OO)

#### Casemix - Hospital Outpatient Observation (PHDCM.OO) Visit

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
OO_ADMIT_DATE	Date of admission to the Observation unit	Date Proxy – count of days between admission date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
OO_ADMIT_MONTH	Admission month	Months, 1-12	Num
OO_ADMIT_YEAR	Admission year	Years	Num
OO_AGE	Age	0=Less than 1 (please see OO_NEWBORNAGEWEEK) Persons over 1 year (1-89): actual age 999=Unknown/missing	Num
OO_CAREGIVER	This data element indicates the type of primary caregiver responsible for the patient's care <b>other</b> than the attending physician, operating room physician, or nurse midwife	1= Resident 2= Intern 3= Nurse Practitioner 4= Physician Assistant 9=Missing/Unknown	Num
OO_CHARGES	The grand total of charges associated with the patient's OD visit. A charge of \$0 is not permitted unless the patient has a special Departure Status. Reported by facilitate. Does not include allowed or negotiated amounts. Not the actual dollars paid to the facility for care.	The total charge amount, rounded to the nearest dollar	Num
OO_CONDITIONPRESENT1	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown	Num
OO_CONDITIONPRESENT2	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown	Num
OO_CONDITIONPRESENT3	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
OO_CONDITIONPRESENT4	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown	Num
OO_CONDITIONPRESENT5	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown	Num
OO_CONDITIONPRESENT6	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown Blanks =Not available prior FY2017	Num
OO_CONDITIONPRESENT7	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown Blanks =Not available prior FY2017	Num
OO_CONDITIONPRESENT8	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown Blanks =Not available prior FY2017	Num
OO_CONDITIONPRESENT9	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown Blanks =Not available prior FY2017	Num
OO_CONDITIONPRESENT10	Flags whether the diagnosis was present on admission to Observation unit.	0=Condition not present 1=Condition present 2=Clinically undetermined 8=not applicable 9=Unknown Blanks =Not available prior FY2017	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
00_CPT1	CPT code for each significant procedure reported by the facility.	HCPCS or CPT codes	Char
00_CPT2	CPT code for each significant procedure reported by the facility.	HCPCS or CPT codes	Char
OO_CPT3	CPT code for each significant procedure reported by the facility.	HCPCS or CPT codes	Char
OO_CPT4	CPT code for each significant procedure reported by the facility.	HCPCS or CPT codes	Char
OO_CPT5	CPT code for each significant procedure reported by the facility.	HCPCS or CPT codes	Char
OO_DAYSBETWEEN	Calculated field that indicates the number of days between each consecutive Observation stay	Integer	Num
OO_DIAG1	The ICD diagnosis code corresponding to the condition established after study to be chiefly responsible for the admission of the patient for hospital care. Determined by the ED.	Valid ICD code, no decimals	Char
OO_DIAG2	ICD Associated Diagnosis.	Valid ICD code. Excludes the decimal point.	Char
OO_DIAG3	ICD Associated Diagnosis.	Valid ICD code. Excludes the decimal point.	Char
OO_DIAG4	ICD Associated Diagnosis.	Valid ICD code. Excludes the decimal point.	Char
OO_DIAG5	ICD Associated Diagnosis.	Valid ICD code. Excludes the decimal point.	Char
OO_DIAG6	ICD Associated Diagnosis.	Valid ICD code. Excludes the decimal point.	Char
OO_DIAG7	ICD Associated Diagnosis. Available only since 2017	Valid ICD code. Excludes the decimal point.	Char
OO_DIAG8	ICD Associated Diagnosis. Available only since 2017	Valid ICD code. Excludes the decimal point.	Char
OO_DIAG9	ICD Associated Diagnosis. Available only since 2017	Valid ICD code. Excludes the decimal point.	Char
OO_DIAG10	ICD Associated Diagnosis. Available only since 2017	Valid ICD code. Excludes the decimal point.	Char

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
OO_DIAG11	ICD Associated Diagnosis. Available only since 2017	Valid ICD code. Excludes the decimal point.	Char
OO_DISCHARGE_DATE	Date of discharge from Observation	Date Proxy – count of days between discharge date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
OO_DISCHARGE_MONTH	Discharge month	Months, 1-12	Num
OO_DISCHARGE_YEAR	Discharge year	Years	Num
OO_DISCHARGESTATUS	This field identifies the disposition and destination of the patient after discharge from the Observation.	1=Routine 2=Admission to Hospital 3=Transferred 4=Against medical advice (AMA) 5=Expired 9=Missing	Num
OO_EDADMIT	indicates whether an Observation stay began in the ED	0=Not admitted from the ED, no ED visit reflected in this record 1=Not admitted from the ED, but ED visit(s) reflected in this record 2= Admitted from the ED 9=Unknown	Num
OO_FACILITY	The Organization ID for the main facility affiliation.	See code list	Num
OO_HOMELESS	This flag indicates that the patient was homeless at the time of visit.	0= Patient is not known to be homeless 1= Patient is known to be homeless 9=Unknown	Num
OO_ICD_Indicator	CMS classification code indicator: ICD Indicator Values (0,9) indicates ICD-9 or ICD-10-CM. Only one coding system is allowed per Patient visit.	9=ICD9 0=ICD10 Blanks=Unknown	Num
OO_LOS_HOURS	Count of hours between the admitting and discharge time for an Observation visit.	999.99 = Unknown	Num
OO_NEWBORNAGEWEEK	Age in weeks for children younger than 53 weeks of age who are admitted to the ED. Weeks are calculated from the Admitting Date - the DOB, and then rounded to the nearest week. Only	Weeks, 0-52 99=Unknown	Num

#### Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
	values between 0 and 52 are valid. All other values are invalid.		
OO_PAYSOURCE1	Primary payer for the OD Visit. Please note that the values are in "text" format, therefore, there may have duplicate numbers because of spaces in the field	<u>See code list</u>	Num
OO_PAYSOURCE2	Secondary payer for this visit. Please note that the values are in text format and may have duplicates due to spaces and capitalization.	See code list	Num
OO_PHYSICIAN_NUMBER	Physician's state license number (BORIM #) for the OD Physician who provided services related to this visit. Report if the physician's involvement in the patient's OD Visit is captured in the facility's electronic information systems		Char
OO_PrincipalExternal_CauseCode	Principal External Cause Code - <mark>New starting FY17</mark>	Principal External Cause Code must be a valid ICD-10-CM external cause code (V00-Y89) or supplemental (Y90-Y99) ICD external cause codes.	Char
OO_PRIMARYCONDITIONPRESENT	Flag indicating that principal condition was present on admission	0=condition not present 1=condition present 3=clinically undetermined 8=not applicable 9=unknown	Num
OO_PROC1	ICD code for the most important procedure in the Observation unit stay	Valid ICD code, no decimals	Char
OO_PROC1_DATE	date of the principal procedure	Date Proxy – count of days between procedure date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
OO_PROC1_MONTH	Procedure month	Months, 1-12	Num
OO_PROC1_YEAR	Procedure year	Years	Num

# Casemix Outpatient Observation Visit Table Analytic Data Dictionary

Variable Name	Variable Description	Meta Data	Format
OO_PROC2	Patient's significant procedure	Valid ICD or CPT code. Excludes the decimal point.	Char
OO_PROC2_DATE	Date on which this procedure was performed	Date Proxy – count of days between procedure date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
OO_PROC2_MONTH	Procedure month	Months, 1-12	Num
OO_PROC2_YEAR	Procedure year	Years	Num
OO_PROC3	Patient's significant procedure	Valid ICD or CPT code. Excludes the decimal point.	Char
OO_PROC3_DATE	date on which this procedure was performed	Date Proxy – count of days between procedure date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
OO_PROC3_MONTH	Procedure month	Months, 1-12	Num
OO_PROC3_YEAR	Procedure year	Years	Num
OO_PROC4	Patient's significant procedure	Valid ICD or CPT code. Excludes the decimal point.	Char
OO_PROC4_DATE	date on which this procedure was performed	Date Proxy – count of days between procedure date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
OO_PROC4_MONTH	Procedure month	Months, 1-12	Num
00_PROC4_YEAR	Procedure year	Years,	Num
OO_RACE	Combined race and Hispanic ethnicity	<ol> <li>1 = White Non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown</li> </ol>	Num
OO_RES_CODE	Permanent city of residence for the patient	1-351 for valid MA city/towns 999=Out of state or unknown	Num
OO_RES_ZIP	First five digits of patient's permanent zip code. Zip codes are not standardized, and this	5 digit zip code 99999=Unknown	Char

# **Casemix Outpatient Observation Visit Table**

#### Analytic Data Dictionary

#### (PHDCM.OO)

Variable Name	Variable Description	Meta Data	Format
	field is as reported from a nine-digit zip code.		
OO_SEX	Sex flag as assigned by Observation unit	1= Male 2= Female 3= Unknown	Num
OO_SITE	The Organization ID for site where the patient received care.	See PHDCM.OO_ORG for linking on this variable for info on the site	Num
OO_SURGEONPROC1	ICD or CPT code for each significant procedure reported by the facility	Valid ICD or CPT code. Excludes the decimal point. These are the surgeons that performed the procedures so should be a Board of Registration in Medicine (BORIM) license	Char
OO_SURGEONPROC2	ICD or CPT code for each significant procedure reported by the facility	Valid ICD or CPT code. Excludes the decimal point. These are the surgeons that performed the procedures so should be a Board of Registration in Medicine (BORIM) license number or one of our allowable other codes. These include: "DENSG", "PODTR", "OTHER" , "NURSEP", "PHYAST" or "MIDWIF" as BORIM does not license these medical professionals.	Char
OO_SURGEONPROC3	ICD or CPT code for each significant procedure reported by the facility	Valid ICD or CPT code. Excludes the decimal point. These are the surgeons that performed the procedures so should be a Board of Registration in Medicine (BORIM) license number or one of our allowable other codes. These include: "DENSG", "PODTR", "OTHER" , "NURSEP", "PHYAST" or "MIDWIF" as BORIM does not	Char

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# **Casemix Outpatient Observation Visit Table**

#### Analytic Data Dictionary

#### (PHDCM.OO)

Variable Name	Variable Description	Meta Data	Format
		license these medical professionals.	
OO_TRANSFERFROM	The Organization ID for the site where the patient was transferred from.	See code list 9999999=Transferred from facility outside of MA	Num
OO_VISITSOURCE1	The first source of visit code indicating the source of originating, referring, or transferring the patient to the Observation. Please note that the terms "visit" and "stay" are used interchangeably for Observation services.	See code list	Num
OO_VISITSOURCE2	The second source of visit code indicating the source of originating, referring, or transferring the patient to the Observation. Please note that the terms "visit" and "stay" are used interchangeably for Observation services.	See code list	Num
OO_VISITTYPE	type of stay	1= Emergency 2= Urgent 3= Non-Urgent 4= Newborn 9 = Unknown	Num

OO_SITE	OO_FACILITY OO_TRANSFERFROM	Description
1	1	Anna Jaques Hospital
2	2	Athol Memorial Hospital
3	345	North Shore Medical Center - Union Campus
4	4	Baystate Medical Center
5	5	Baystate Franklin Medical Center
6	6	Baystate Mary Lane Hospital
7	6309	Berkshire Medical Center - Berkshire Campus
8	8	Fairview Hospital
10	8702	Beth Israel Deaconess Medical Center - East Campus
16	3107	Boston Medical Center - Menino Pavilion Campus
22	22	Brigham and Women's Hospital

OO_SITE	OO_FACILITY OO_TRANSFERFROM	Description
25	25	Signature Healthcare Brockton Hospital
27	3108	Cambridge Health Alliance - Cambridge Hospital Campus
39	39	Cape Cod Hospital
40	40	Falmouth Hospital
41	41	Steward Norwood Hospital, Inc.
42	42	Steward Carney Hospital, Inc.
46	46	Boston Children's Hospital
49	3110	MetroWest Medical Center - Framingham Campus
50	50	Cooley Dickinson Hospital
51	51	Dana-Farber Cancer Institute
53	53	Beth Israel Deaconess Hospital - Needham
57	57	Emerson Hospital
59	59	Brigham and Women's Faulkner Hospital
62	8701	Steward Good Samaritan Medical Center - Brockton Campus
66	3111	Hallmark Health - Lawrence Memorial Hospital Campus
68	68	Harrington Memorial Hospital
73	73	Heywood Hospital
75	75	Steward Holy Family Hospital, Inc.
77	77	Holyoke Medical Center
79	79	Beth Israel Deaconess Hospital - Plymouth
81	6546	Lahey Hospital & Medical Center, Burlington
83	83	Lawrence General Hospital
85	85	Lowell General Hospital
88	88	Martha's Vineyard Hospital
89	89	Massachusetts Eye and Ear Infirmary
91	91	Massachusetts General Hospital
97	97	Milford Regional Medical Center
98	98	Beth Israel Deaconess Hospital - Milton
99	99	Morton Hospital, A Steward Family Hospital, Inc.
100	100	Mount Auburn Hospital
101	101	Nantucket Cottage Hospital
103	103	New England Baptist Hospital
104	104	Tufts Medical Center
105	105	Newton-Wellesley Hospital
106	106	Noble Hospital
109	3112	Lahey Health - Addison Gilbert Hospital
110	3112	Lahey Health - Beverly Hospital
112	112	Quincy Medical Center, A Steward Family Hospital, Inc.
114	114	Steward Saint Anne's Hospital, Inc.
115	85	Lowell General Hospital Saints Campus
116	345,116	North Shore Medical Center - Salem Campus
118	6547	Mercy Medical Center - Providence Behavioral Health Hospital Campus
119	6547	Mercy Medical Center - Springfield Campus
122	122	South Shore Hospital
123	3113	Southcoast Hospitals Group - Charlton Memorial Campus
124	3113	Southcoast Hospitals Group - St. Luke's Campus

OO_SITE	OO_FACILITY OO_TRANSFERFROM	Description
126	126	Steward St. Elizabeth's Medical Center
127	127	Saint Vincent Hospital
129	129	Sturdy Memorial Hospital
130	3115	UMass Memorial Medical Center - Memorial Campus
131	3115	UMass Memorial Medical Center - University Campus
132	132	Clinton Hospital - A member of the UMASS Memorial Health Center
133	133	Marlborough Hospital - A member of the UMASS Memorial Health Center
138	138	Lahey Health - Winchester Hospital
139	139, 14495	Baystate Wing Hospital
141	3111	Hallmark Health - Melrose-Wakefield Hospital Campus
142	3108	Cambridge Health Alliance - WEDDen Hospital Campus
145	3113	Southcoast Hospitals Group - Tobey Hospital Campus
457	3110	MetroWest Medical Center - Leonard Morse Campus
4448	6546	Lahey Medical Center, Peabody
4460	8701	Steward Good Samaritan Medical Center - NORCAP Lodge Campus
6963	6963	Shriners Hospitals for Children Boston
8509, 71	71	HealthAlliance Hospital - Leominster Campus
11466	75	Holy Family Hospital at Merrimack Valley, A Steward Family Hospital, Inc.
11467	11467	Nashoba Valley Medical Center, A Steward Family Hospital, Inc.
11718	11718	Shriners Hospitals for Children Springfield
143		Cambridge Health Alliance - Somerville Hospital
	14496	HealthAlliance-Clinton Hospital

OO_TRANSFERFROM	Facility
9	Berkshire Medical Center - Hillcrest Campus
19	East Boston Neighborhood Health Center
52	Nashoba Valley Medical Center
70	Merrimack Valley Hospital
71	HealthAlliance - Leominster Campus
78	Hubbard Regional Hospital
107	North Adams Regional Hospital
135	Curahealth Hospital Boston North Shore
136	Curahealth Hospital Boston
143	Cambridge Health Alliance - Somerville Hospital Outpatient
144	Boston Medical Center - Newton Pavilion Campus
410	New England Sinia Hospital, A Steward Family Hospital
416	Hebrew Rehabilitation Center
443	Bournewood Hospital
445	McLean Hospital
450	Spaulding Rehabilitation Hospital - Boston
451	Encompass Health Rehabilitation Hospital of New England

updated: November 22, 2021

OO_TRANSFERFROM	Facility
452	Encompass Health Rehabilitation Hospital of Braintree
487	D's Nursing Agency
495	Favorite Healthcare Staffing, Inc Boston
512	Interim HealthCare of Rockland (TNS)
634	BEAUMONT REHAB & SKD NORTHBRIDGE
637	BOSTON HOME
638	PLYMOUTH NURSING HOME
639	CATHOLIC MEMORIAL HOME
642	KATZMAN CENTER FOR THE LIVING
643	WAYLAND NURSING & REHAB CENTER
652	HERITAGE HOUSE NURSING HOME
654	HOLDEN REHAB & SKILLED NURSING CTR
658	JOHN SCOTT NURSING AND REHAB.
661	MARIAN MANOR
663	BRANDON WOODS OF DARTMOUTH
665	NORWELL KNOLL NURSING HOME
666	OUR LADY'S HAVEN
673	RIVERCREST L.T.C.F.
674	SACRED HEART NURSING HOME
675	SHERRILL HOUSE
676	ST. JOSEPH MANOR HEALTH CARE INC.
678	PENACOOK PLACE, INC.
683	DWYER HOME
684	WOBURN NURSING CENTER
686	SAVOY NURSING & REHAB CENTER
689	SHREWSBURY NURSING & REHAB.CTR INC
690	LYNN PUBLIC MEDICAL INST.
692	BRANDON WOODS OF NEW BEDFORD
696	ELLIS NURSING HOME
698	TAUNTON NURSING HOME
701	GERMAN CENTRE FOR EXT. CARE
702	ADAMS HOUSE
703	BLAIRE HOUSE LTCF WORCESTER
705	LELAND HOME
707	POND HOME
710	HANNAH B G SHAW HOME FOR AGED
712	MEDWAY COUNTRY MANOR SK NURG &REH
715	BERKELEY RETIREMENT HOME
717	COZY CORNER NURSING & REHAB CTR
722	ABERJONA NURSING CENTER, INC.
725	BLAIRE HOUSE LTCF MILFORD
728	VERNON HALL NURSING HOME

OO_TRANSFERFROM	Facility
729	BLAIRE HOUSE LTCF TEWKSBURY
730	DOOLITTLE HOME, INC.
731	ISLAND TERRACE NURSING HOME
737	JEWISH HEALTHCARE CENTER
740	MARIAN MANOR OF TAUNTON
742	WINCHESTER NURSING CENTER
745	SOLDIERS' HOME
747	CARLETON-WILLARD VILLAGE
751	LOOMIS HOUSE
754	HIGHLAND MANOR NURSING HOME
757	NEVINS NURSING & REHAB. CENTER
758	PORT HEALTHCARE CENTER
759	WEST SIDE HOUSE LTCF
768	BEAR HILL NURSING CENTER
775	LAKEVIEW HOUSE SKLD NURS & RESIDENTIAL FACILITY
777	MAPLES REHABILITATION & NURSING CENTER
791	THE HERMITAGE, A BEVERLY H.C.
794	BAYPATH AT DUXBURY NSG REHAB
795	CARDIGAN NURSING & REHABILITATION CTR
797	NORTH HILL - THE S.N.F.
803	QUABBIN VALLEY HEALTHCARE
804	OAKDALE REHAB. & SKILLED NURS.CTR
805	BEDFORD VILLAGE NURSING HOME
807	BRIDGEWATER NURSING HOME
810	POPE NURSING HOME
811	VICTORIA HAVEN NURSING HOME
812	COLEMAN HOUSE
820	CAMPION HEALTH & WELLNESS, INC.
823	SOUTH COVE MANOR NURSING HOME
835	THOMAS UPHAM HOUSE
836	RIVERBEND OF SOUTH NATICK
849	MEADOW GREEN NSG AND REHAB CTR
852	QUEEN ANNE NURSING HOME
865	PRESENTATION NURSING & REHAB. CENTER
874	DIGHTON NURSING CENTER
876	BEAUMONT REHAB & SKD WESTBOROUGH
885	WATERVIEW LODGE, LLC
889	OVERLOOK MASONIC HEALTH CENTER
893	MADONNA MANOR NURSING HOME
900	BIRCH MANOR REHABILITATION & SKILLED NURSING CTR.
906	BROOKHAVEN AT LEXINGTON
917	

OO_TRANSFERFROM	Facility
	· admity
925	CLARK HOUSE N.C @FOX HILL VILLAGE
926	LIFE CARE CENTER OF LYNN: A L.T.C.F FACILITY
928	SANCTA MARIA NURSING HOME
930	HUNT NURSING AND REHABILITATION CENTER
931	E. LONGMEADOW SKILLED NURSING CTR
932	PILGRIM REH & SKIL NURS CTR
933	WINDSOR NSG & RET. HOME
935	BETHANY HEALTH CARE CENTER
938	KNOLLWOOD NURSING CENTER
942	LIFE CARE CENTER OF WILBRAHAM, A L.T.C.F
953	JULIAN J. LEVITT FAMILY NURSING HOME
955	MARY ANN MORSE NURS. & REHAB. CTR.
958	MONT MARIE HEALTH CARE CENTER, INC.
959	EASTPOINTE NURSING CARE CENTER
966	LIFE CARE CENTER OF ATTLEBORO
967	SAMUEL MARCUS NURSING HOME
971	SEACOAST NURSING & REHABILITATION CTR.
972	WOODBRIAR OF WILMINGTON REHAB & SKILLED NURSING CENTER
978	NOTRE DAME HEALTH CARE CENTER
987	SOUTHWOOD AT NORWELL NURSING CTR
989	SOUTHPOINTE REHAB & SKILLED NURSING
1004	QUABOAG ON THE COMMON
1028	GROSVENOR PARK
1032	HOLY TRINITY EASTERN ORTHODOX NURSING AND REHAB. CENTER
1035	COMMONS RESIDENCE AT ORCHARD COVE
1039	COPLEY AT STOUGHTON NURG.CARE CTR
1040	LIFE CARE CENTER OF AUBURN
1041	LIFE CARE CENTER OF RAYNHAM
1049	LIFE CARE CENTER OF PLYMOUTH
1050	HARBOR HOUSE NURS.& REHAB.CTR.
1051	CHRISTOPHER HOUSE OF WORCESTER
1057	LIGHTHOUSE NURSING CARE CENTER
1072	CHAPIN CENTER
1073	GOVERNORS CENTER
1074	WILLIMANSETT CENTER EAST
1075	WILLIMANSETT CENTER WEST
1076	EMERSON REHAB. & TRANS. CARE UNIT
1078	STONE REHAB & SENIOR LIVING
1080	BAYPOINTE REH.& SKILLED CARE CTR
1094	LIFE CARE CENTER OF W. BRIDGEWATER
1111	LIFE CARE CENTER OF MERRIMACK VALLEY
1112	LIFE CARE CENTER OF THE SOUTH SHORE

OO_TRANSFERFROM	Facility
1119	HANCOCK PARK REHAB.& NURS. CTR
1121	COYNE HEALTHCARE CENTER
1124	LIFE CARE CENTER OF NASHOBA VALLEY
1131	CHS of WALTHAM INC. dba MARISTHILL NURSING & REHAB CTR
1136	THE MEADOWS
1156	CARLYLE HOUSE
1167	LIFE CARE CENTER OF STONEHAM
1174	SISTERS OF PROVIDENCE INFIRM.
1180	FALL RIVER JEWISH HOME, INC.
1182	NEW ENGLAND PEDIATRIC CARE
1185	FARREN CARE CENTER, INC.
1186	PROVIDENCE CARE CNTR OF LENOX
1187	MOUNT SAINT VINCENT CARE CENTER
1206	CRANEVILLE PLACE AT DALTON
1207	ST. MARY HEALTH CARE
1210	WABAN HEALTH & REHAB., INC.
1263	THE GUARDIAN CENTER, INC.
1270	SUNNY ACRES NURSING HOME
1272	ST. PATRICK'S MANOR
1273	BENJAMIN HEALTHCARE CENTER
1276	ODD FELLOWS HOME OF MASS
1277	NEW BEDFORD JEWISH CONV HOME
1279	MI NURSING/RESTORATIVE CTR
1280	JEANNE JUGAN RESIDENCE
1282	GODDARD HOUSE, A SKILLED NURSING & REHAB CTR
1284	D'YOUVILLE SENIOR CARE, INC.
1285	DON ORIONE NURSING HOME
1286	COREY HILL NURSING HOME
1287	COLONIAL NSG & REHAB. CTR.
1290	CENTER FOR EXT. CARE @ AMHERST
1296	STEVENS-BENNETT HOME
1302	THE GERMAN HOME
1304	HOMESTEAD HALL
1307	MT. PLEASANT HOME
1317	HALE-BARNARD CORPORATION
1319	HOME FOR AGED WOMEN-BROOKHOUSE
1338	SOMERVILLE HOME
1347	RIVER VALLEY REST HOME
1352	WILLOWBROOK MANOR REST HOME
1354	DAGGETT-CRANDALL-NEWCOMB HOME
1355	FULLER HOUSE OF STONEHAM R.H.
1361	OLD COLONY ROAD RH, INC.

Image: Constraint of the second sec	OO_TRANSFERFROM	Facility
1395DARTMOUTH MANOR REST HOME1398BAKER MANOR REST HOME1405PLEASANT STREET REST HOME1422CUSHING MANOR COMM.SUPP.FAC.,INC.1423ELIZABETH CATHERINE REST HOME1424HILL REST HOME1425MAPLE HILL REST HOME1426MAPLE HILL REST HOME1427BROOK HAVEN ASSISTED CARE,INC.1434HAMPDEN HOUSE1440VILLAGE REST HOME OF EASTON1443BEAVEN KELLY HOME1444ANN'S REST HOME1445BURGOYNE REST HOME1445HALCYON HOUSE1477TOWN & COUNTRY NURSING CENTER1477TOWN & COUNTRY NURSING CENTER2187HILLCREST REST HOME2300LABELLE'S REST HOME2301LABELLE'S REST HOME2302PARK PLACE2303MARILLAC RESIDENCE2636PHILLIPS MANOR NURSING HOME2651PINE KNOLL NURSING CENTER2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING & REH. CTR2866LIFE CARE CENTER OF ACTON2884ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING & REHABILITATION4219BELMONT MANOR NURSING & REHABILITATION4220KINDRED TRANS CARE & REH-BLUEBERRY HILL4221KINDRED TRANS CARE & REH-BLUEBERRY HILL4223KINDRED TRANS CARE & REH-BLUEBERRY HILL4224KINDRED TRANS CARE & REH		
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1422CUSHING MANOR COMM.SUPP.FAC.,INC.1423ELIZABETH CATHERINE REST HOME1424BROOK HAVEN ASSISTED CARE,INC.1429BROOK HAVEN ASSISTED CARE,INC.1434HAMPDEN HOUSE1443HAMPDEN HOUSE1444VILLAGE REST HOME OF EASTON1443BEAVEN KELLY HOME1444ANN'S REST HOME OF EASTON1445BURGOYNE REST HOME1446HALCYON HOUSE1447TOWN & COUNTRY NURSING CENTER1450HALCYON HOUSE1477TOWN & COUNTRY NURSING CENTER2187HILLCEST REST HOME2238PARK PLACE2300LABELLE'S REST HOME2335MARILLAC RESIDENCE2636PHILLIPS MANOR NURSING GENTER2786ROYAL NURSING CENTER2786ROYAL NURSING CENTER, LLC2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING & REH-BILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BILEBERRY HILL4221KINDRED NURSING & REH-BILEBERRY HILL4223KINDRED NURSING & REH-BILEBERRY HILL4224KINDRED NURSING & REH-BULEBERRY HILL4230KINDRED NURSING & REH-BULEBERRY HILL4231KINDRED NURSING & REH-BULGEN4234KOYAL CAPE COD NURSING & REH-BULGENS4241KINDRED TRANS CARE & REH-WALDEN4244KINDRED TRANS CARE & REH-WALDEN	1398	BAKER MANOR REST HOME
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1445BURGOYNE REST HOME1450HALCYON HOUSE1477TOWN & COUNTRY NURSING CENTER2187HILLCREST REST HOME2238PARK PLACE2300LABELLE'S REST HOME2395MARILLAC RESIDENCE2636PHILLIPS MANOR NURSING HOME2651PINE KNOLL NURSING CENTER2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING CENTER, LLC2866LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING HOME4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4223KINDRED NURSING & REH-BLUEBERRY HILL4224ROYAL CAPE COD NURSING AND REHAB CTR4234ROYAL CAPE COD NURSING AND REHAB CTR4234KINDRED NURSING & REH-WALDEN4234KINDRED NURSING & REH-COUNTRY GARDENS4241KINDRED NURSING & REH-COUNTRY GARDENS4241KINDRED NURSING & REH-COUNTRY GARDENS4241KINDRED NURSING & REH-COUNTRY GARDENS4244KINDRED NURSING & REH-COUNTRY GARDENS	1443	BEAVEN KELLY HOME
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1477TOWN & COUNTRY NURSING CENTER2187HILLCREST REST HOME2238PARK PLACE2300LABELLE'S REST HOME2395MARILLAC RESIDENCE2636PHILLIPS MANOR NURSING HOME2651PINE KNOLL NURSING CENTER2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING & REH. CTR2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING & REHABILITATION4219BELMONT MANOR NURSING MOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4223KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4230KINDRED NURSING & REH-WALDEN4231KINDRED NURSING & REH-WALDEN4232KINDRED NURSING & REH-WALDEN4234ROYAL CAPE COD NURSING AND REHAB CTR4235KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COLONY HOUSE	1445	BURGOYNE REST HOME
2187HILLCREST REST HOME2238PARK PLACE2300LABELLE'S REST HOME2395MARILLAC RESIDENCE2636PHILLIPS MANOR NURSING HOME2651PINE KNOLL NURSING CENTER2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING & REH. CTR2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING HOME4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUE BERRY HILL4225KINDRED NURSING & REH-BLUEBERRY HILL4228KINDRED NURSING & REH-WALDEN4230KINDRED NURSING & REH-WESTBOROUGH4230KINDRED NURSING & REH-WESTBOROUGH4231ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-OLONY HOUSE4241KINDRED NURSING & REH-OLONY HOUSE4242KINDRED NURSING & REH-OLONY HOUSE4244KINDRED TRANS CARE & REH-ORWFORD4244KINDRED NURSING & REH-DEN-MAR	1450	HALCYON HOUSE
2238PARK PLACE2300LABELLE'S REST HOME2395MARILLAC RESIDENCE2636PHILLIPS MANOR NURSING HOME2651PINE KNOLL NURSING CENTER2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING & REH. CTR2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING HOME4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUEBERRY HILL4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED NURSING & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-NEWBURYPORT4244KINDRED NURSING & REH-CONNFORD	1477	TOWN & COUNTRY NURSING CENTER
2300LABELLE'S REST HOME2395MARILLAC RESIDENCE2636PHILLIPS MANOR NURSING HOME2651PINE KNOLL NURSING CENTER2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING & REH. CTR2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4223KINDRED NURSING & REH-BLUEBERRY HILL4224ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-WALDEN4234ROYAL CAPE COD NURSING AND REHAB CTR4234KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COLONY HOUSE4244KINDRED NURSING & REH-COLONY HOUSE	2187	HILLCREST REST HOME
2395MARILLAC RESIDENCE2636PHILLIPS MANOR NURSING HOME2651PINE KNOLL NURSING CENTER2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING & REH. CTR2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING & REHABILITATION4219BELMONT MANOR NURSING & REHABILITATION4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4225KINDRED NURSING & REH-BLUEBERRY HILL4228KINDRED NURSING & REH-BRIGHAM4230KINDRED TRANS CARE & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-OUNTRY GARDENS4244KINDRED TRANS CARE & REH-NEWBURYPORT4244KINDRED TRANS CARE & REH-NEWBURYPORT	2238	PARK PLACE
2636PHILLIPS MANOR NURSING HOME2651PINE KNOLL NURSING CENTER2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING & REH. CTR2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING & REHABILITATION4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING & REHABILITATION4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUEBERRY HILL4223KINDRED NURSING & REH-WALDEN4234ROYAL CAPE COD NURSING & REH-WESTBOROUGH4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COLONY HOUSE4244KINDRED NURSING & REH-COLONY HOUSE	2300	LABELLE'S REST HOME
2651PINE KNOLL NURSING CENTER2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING & REH. CTR2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING & REHABILITATION4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUE BERRY HILL4225KINDRED NURSING & REH-BIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED NURSING & REH-WESTBOROUGH4239KINDRED NURSING & REH-OLONY HOUSE4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COLONY HOUSE4242KINDRED NURSING & REH-COLONY HOUSE4244KINDRED TRANS CARE & REH-NEWBURYPORT4244KINDRED TRANS CARE & REH-NEWBURYPORT	2395	MARILLAC RESIDENCE
2786ROYAL NURSING CENTER, LLC2807SERENITY HILL NURSING & REH. CTR2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING HOME4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUEBERRY HILL4225KINDRED NURSING & REH-BLUEBERRY HILL4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4243KINDRED NURSING & REH-COUNTRY GARDENS4244KINDRED NURSING & REH-CRAWFORD4244KINDRED NURSING & REH-CRAWFORD	2636	PHILLIPS MANOR NURSING HOME
2807SERENITY HILL NURSING & REH. CTR2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING HOME4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING & REHABILITATION4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUE BERRY HILL4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COLONY HOUSE4242KINDRED NURSING & REH-COUNTRY GARDENS4244KINDRED NURSING & REH-COUNTRY GARDENS	2651	PINE KNOLL NURSING CENTER
2886LIFE CARE CENTER OF ACTON2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING HOME4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED TRANS CARE & REH-BLUEBERRY HILL4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-NEWBURYPORT4244KINDRED TRANS CARE & REH-NEWBURYPORT	2786	ROYAL NURSING CENTER, LLC
2984ALLIANCE HEALTH AT WEST ACRES4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING HOME4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4225KINDRED NURSING & REH-BLUEBERRY HILL4228KINDRED NURSING & REH-BRIGHAM4230KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED NURSING & REH-NEWBURYPORT4244KINDRED TRANS CARE & REH-NEWBURYPORT	2807	SERENITY HILL NURSING & REH. CTR
4062Whittier Rehabilitation Hospital - Westborough4216ABBOTT HOUSE NURSING HOME4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED TRANS CARE & REH-BLUEBERRY HILL4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-NEWBURYPORT4244KINDRED TRANS CARE & REH-ORD4244KINDRED TRANS CARE & REH-NEWBURYPORT	2886	LIFE CARE CENTER OF ACTON
4216ABBOTT HOUSE NURSING HOME4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED TRANS CARE & REH-BLUEBERRY HILL4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED NURSING & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-NEWBURYPORT4244KINDRED TRANS CARE & REH-CRAWFORD	2984	ALLIANCE HEALTH AT WEST ACRES
4218BAKER KATZ SKILLED NURSING & REHABILITATION4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED TRANS CARE & REH-BLUEBERRY HILL4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-NEWBURYPORT4244KINDRED TRANS CARE & REH-CRAWFORD	4062	Whittier Rehabilitation Hospital - Westborough
4219BELMONT MANOR NURSING HOME4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED TRANS CARE & REH-BLUEBERRY HILL4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED NURSING & REH-COUNTRY GARDENS4243KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-CRAWFORD	4216	ABBOTT HOUSE NURSING HOME
4220KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S4221KINDRED TRANS CARE & REH-BLUEBERRY HILL4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-NEWBURYPORT4244KINDRED TRANS CARE & REH-CRAWFORD	4218	BAKER KATZ SKILLED NURSING & REHABILITATION
4221KINDRED TRANS CARE & REH-BLUEBERRY HILL4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-NEWBURYPORT4244KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-DEN-MAR	4219	BELMONT MANOR NURSING HOME
4225KINDRED NURSING & REH-BRIGHAM4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-CONTAR	4220	KINDRED NURSING & REH-BLUE HILLS ALZHEIMER'S
4228KINDRED NURSING & REH-WALDEN4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-DEN-MAR	4221	KINDRED TRANS CARE & REH-BLUEBERRY HILL
4230KINDRED TRANS CARE & REH-WESTBOROUGH4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-DEN-MAR	4225	KINDRED NURSING & REH-BRIGHAM
4234ROYAL CAPE COD NURSING AND REHAB CTR4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-DEN-MAR	4228	KINDRED NURSING & REH-WALDEN
4239KINDRED NURSING & REH-COLONY HOUSE4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-DEN-MAR	4230	KINDRED TRANS CARE & REH-WESTBOROUGH
4241KINDRED NURSING & REH-COUNTRY GARDENS4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-DEN-MAR	4234	ROYAL CAPE COD NURSING AND REHAB CTR
4242KINDRED TRANS CARE & REH-NEWBURYPORT4243KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-DEN-MAR	4239	KINDRED NURSING & REH-COLONY HOUSE
4243KINDRED TRANS CARE & REH-CRAWFORD4244KINDRED NURSING & REH-DEN-MAR	4241	KINDRED NURSING & REH-COUNTRY GARDENS
4244 KINDRED NURSING & REH-DEN-MAR	4242	KINDRED TRANS CARE & REH-NEWBURYPORT
	4243	KINDRED TRANS CARE & REH-CRAWFORD
4245 DEVEREUX HOUSE SKILLED NURSING & REHAB	4244	KINDRED NURSING & REH-DEN-MAR
	4245	DEVEREUX HOUSE SKILLED NURSING & REHAB

OO_TRANSFERFROM	Facility
4248	KINDRED TRANS CARE & REH-FRANKLIN
4250	HALLMARK NURSING & REHAB. CTR
4251	KINDRED TRANS CARE & REH-HAMMERSMITH
4253	KINDRED TRANS CARE & REH-HARRINGTON
4261	KINDRED NURSING & REH-LAUREL RIDGE
4262	LEDGEWOOD REHAB & SKILLED NC
4263	ALLIANCE HEALTH AT MARINA BAY
4264	AMESBURY VILLAGE
4267	NEVILLE CTR.@ FRESH POND FOR NURSING & REHABILITATION
4270	KINDRED NURSING & REH-OAKWOOD
4274	KINDRED NURSING & REH-PRESENTATION
4278	KINDRED TRANS CARE & REH-QUINCY
4281	ROSCOMMON EXTENDED CARE CENTER
4282	ALLIANCE HEALTH AT ROSEWOOD
4283	KINDRED TRANS CARE & REH-SACHEM
4284	SEA VIEW CONV & NURSING HOME
4285	ST. CAMILLUS HEALTH CENTER
4287	SUDBURY PINES EXTENDED CARE
4289	ROYAL TABER STREET NURSING AND REHAB CTR
4291	KINDRED TRANS CARE & REH-ELIOT
4292	THE OXFORD
4872	BUCKLEY-GREENFIELD HEALTHCARE CTR
4874	HOLYOKE HEALTH CARE CTR.
4875	JOHN ADAMS HEALTHCARE CENTER
4876	KIMBALL FARMS NURSING CARE CENTER
4877	LASELL HOUSE
4878	LONGMEADOW OF TAUNTON
4880	PLEASANT BAY NURSING & REH. CTR
4887	COLONIAL HEIGHTS
4888	SPRING VALLEY CENTER
4896	HAMMOND CENTER
4902	SANDALWOOD CENTER
4903	MILFORD CENTER
4906	MEADOW VIEW CENTER
4908	ELAINE CENTER AT HADLEY
4911	WOOD MILL CENTER
4982	THE NEURO-REHAB CENTER AT MIDDLEBORO
4984	THE TERRACES ORLEANS
4985	WINGATE AT WORCESTER
5050	BEAUMONT REHAB & SKD NORTHBOROUGH
5054	RECUPERATIVE SERVICES UNIT
5055	WINGATE AT SILVER LAKE
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OO_TRANSFERFROM	Facility	
6333	SPAULDING NSG & THERAPY CTR-WEST ROXBURY	
6342	SPAULDING NSG & THERAPY CTR-NORTH END	
6343	SAINT LUKE'S HOME	
6345	WINGATE AT BELVIDERE	
6346	WHITTAKER REST HOME	
6377	THE TREMONT	
6526	AUTUMN VILLAGE, LLC	
6527	CARE ONE AT BROOKLINE	
6674	CARE ONE AT MILLBURY	
6687	CARE ONE AT NORTHAMPTON	
6688	CARE ONE AT CONCORD	
6689	CARE ONE AT REDSTONE	
6690	CARE ONE AT HOLYOKE	
6691	CARE ONE AT LEXINGTON	
6693	CARE ONE AT NEW BEDFORD	
6694	CARE ONE AT NEWTON	
6695	CARE ONE AT PEABODY	
6696	CARE ONE AT RANDOLPH	
6697	CARE ONE AT WEYMOUTH	
6698	CARE ONE AT WILMINGTON	
6751	PALMER HEALTHCARE CENTER	
6753	RENAISSANCE MANOR ON CABOT	
6754	SOUTH SHORE REH.& SKILLED CARE CTR	
6778	CLIFTON REHABILITATIVE NURG. CTR	
6785	PENNY LANE	
6790	THE OAKS	
6796	SEVEN HILLS PEDIATRIC CENTER	
6975	ST. JOSEPH'S ABBEY RES.CARE FAC INC.	
7850	CONTINUING CARE AT BROOKSBY VILLAGE	
7851	ROSCOMMON WEST ROXBURY	
8024	Valley Medical Group, P.C.	
8032	MARLBOROUGH HILLS HLTHCARE CTR	
8033	SOPHIA SNOW HOUSE, INC.	
8078	NEW ENGLAND HOMES FOR THE DEAF	
8124	DMR Hogan Regional Center	
8210	SERENITY HOME, INC	
8214	VILLAGE R.H. 2 OF BROCKTON	
8444	ALDEN COURT NURG. CARE & REH. CTR	
8445	THE BOSTONIAN N.C AND REH. CTR	
8509	HealthAlliance Hospital - Leominster Campus	
8560	BRIARWOOD REHAB & NURSING CTR	
8574	POET'S SEAT HEALTH CARE CENTER	

OO_TRANSFERFROM	Facility
8575	WINGATE AT SO.HADLEY
8576	ARMENIAN NURSING & REHAB. CTR.
8602	ROSCOMMON ON THE PARKWAY
8606	STONEHEDGE REHABILITATION AND SKILLED CARE CENTER
8616	HATHAWAY MANOR EXTENDED CARE
8626	CARE ONE AT ESSEX PARK
8631	LINDA MANOR EXTENDED CARE FAC
8632	CHARLENE MANOR EXT. CARE FAC.
8662	LIFE CARE CENTER OF LEOMINSTER
8663	THE HIGHLANDS
8693	PRESENTATION HEALTH CARE CTR., INC
8711	SE MASSACHUSETTS HLT & REHAB. CENTER
8712	METHUEN HEALTH & REHAB. CTR.
8782	WINGATE AT HAMPDEN
8783	WINGATE AT SPRINGFIELD
8784	WINGATE AT EAST LONGMEADOW
8785	WINGATE AT WEST SPRINGFIELD
8800	WINGATE AT ANDOVER
8801	WINGATE AT WILBRAHAM
8802	WINGATE AT SUDBURY
8803	WINGATE AT READING
8804	WINGATE AT NEEDHAM
8805	WINGATE @ BOSTON
8819	ROSEWOOD CENTER
8820	PARK VIEW REHAB & NSG CENTER
8822	KINDRED TRANS CARE & REH-HIGHLANDER
8824	KINDRED NURSING & REH-BRAINTREE
8826	KINDRED TRANS CARE & REH-FORESTVIEW
8828	KINDRED TRANS CARE & REH-COUNTRY ESTATES
8829	KINDRED TRANS CARE & REH-HIGHGATE
8830	KINDRED TRANS CARE & REH-AVERY
8831	KINDRED NURSING & REH-TOWER HILL
8832	KINDRED NURSING & REH-GODDARD
8833	KINDRED NURSING & REH-HARBORLIGHTS
8837	GOLDEN LIVINGCENTER - FITCHBURG
8838	GOLDEN LIVINGCENTER - GARDEN PLACE
8839	GOLDEN LIVINGCENTER - DEDHAM
8840	GOLDEN LIVINGCENTER - COHASSET
8841	GOLDEN LIVINGCENTER - HEATHWOOD
8842	GOLDEN LIVINGCENTER - CHETWYNDE
8843	GOLDEN LIVINGCENTER - WEST NEWTON
8844	SOUTHEAST REHAB & SKILLED CARE CTR.

OO_TRANSFERFROM	Facility
8845	GOLDEN LIVINGCENTER - PLYMOUTH
8846	GOLDEN LIVINGCENTER - ATTLEBORO
8847	GOLDEN LIVINGCENTER - WEDGEMERE
8848	GOLDEN LIVINGCENTER - OAK HILL
8853	GOLDEN LIVINGCENTER - GLOUCESTER
8854	GOLDEN LIVINGCENTER - LEXINGTON
8855	GOLDEN LIVINGCENTER - DEXTER HOUSE
8856	GOLDEN LIVINGCENTER - NORWOOD
8857	GOLDEN LIVINGCENTER - MELROSE
8858	GOLDEN LIVINGCENTER - THE ELMHURST
8913	WINGATE AT HAVERHILL
8943	BRIGHTON HOUSE REHAB.& NURSING
8997	SEASHORE POINT AND WELLNESS REHAB
9501	THE PAVILION
9502	GLEN RIDGE NURSING CARE CTR.
9503	ST. JOSEPH REHABILITATION AND NURSING CARE CENTER
9504	RENAISSANCE MANOR OF WESTFIELD
9505	BERKSHIRE REHABILITATION & SKILLED CARE CENTER
9590	WINDEMERE NURSING & REHAB CENTER ON MARTHA'S VINEYARD
9625	WESTFIELD CENTER
9626	WAKEFIELD CENTER
9629	HATHORNE HILL
9630	SAUGUS CENTER
9633	TWIN OAKS CENTER
9634	MAPLEWOOD CENTER
9641	ROYAL FAIRHAVEN NURSING AND REHAB CTR
9719	SARAH S. BRAYTON NURSING CARE CENTER
9720	COOLIDGE HOUSE
9722	WESTFORD HOUSE
9724	HERITAGE HALL SOUTH
9725	SOMERSET RIDGE
9727	ACADEMY MANOR
9728	HERITAGE HALL EAST
9729	PALM MANOR
9730	HERITAGE HALL WEST
9731	APPLE VALLEY CENTER
9732	SUTTON HILL
9733	WILLOW MANOR
9734	HERITAGE HALL NORTH
9735	PRESCOTT HOUSE
9739	HELLENIC NURSING AND REHABILITATION CENTER
9795	DODGE PARK REST HOME

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OO_TRANSFERFROM	Facility
9805	ALLIANCE HEALTH AT BRAINTREE
9816	KINGSTON PLACE, INC.
9831	PLEASANT ACRES REST HOME LLC
9958	EPOCH SENIOR H.C. OF WESTON
9959	EPOCH SENIOR H.C. OF SHARON
9964	EPOCH SENIOR H.C. OF CHESTNUT HILL
9966	EPOCH SENIOR H.C. OF NORTON
9967	EPOCH SENIOR H.C. OF BREWSTER
9968	THE WILLOWS AT WORCESTER
9970	WEBSTER MANOR LONG TERM CARE, INC.
9982	CHARWELL HOUSE
9983	KIMWELL
9984	MILTON HEALTH CARE
9985	PARKWELL NURSING AND REHAB CENTER
9986	KATHLEEN DANIEL H.C., A SNF
9987	EMERSON VILLAGE
9988	CHAMPION REHABILITATION AND HEALTH CTR
9999	Preferred Home Healthcare Services (CSN)
10210	BEAUMONT AT UNIVERSITY CAMPUS LLC
10337	ROYAL BRAINTREE NRSG & REHAB CENTER
10388	FAIRHAVEN HEALTHCARE CENTER
10396	ATLANTIC REST HOME
10399	ANNA MARIA REST HOME
10400	DONNA KAY REST HOME
10420	BOURNE MANOR EXT CARE FACILITY
10465	ST. FRANCIS REHAB & NURSING CENTER
10531	Goddard House in Brookline
10687	CHELSEA SKILLED NURSING AND REHAB
10689	COURTYARD NURSING CARE CENTER
10695	SIPPICAN HEALTHCARE CENTER
10696	NEMASKET HEALTHCARE CENTER
10697	MASCONOMET HEALTHCARE CENTER
10699	HANNAH DUSTON HEALTHCARE CTR.
10706	OAK KNOLL HEALTHCARE CENTER
10716	LOOMIS LAKESIDE AT REEDS LANDING
10727	PARK AVENUE NURSING & REHAB CENTER
10771	WESTVIEW REST HOME
10849	MARY'S MEADOW AT PROVIDENCE PLACE
10877	NEWBRIDGE ON THE CHARLES SKILLED NURSING FAC
10885	STERLING VILLAGE LLC
11225	CAMBRIDGE REHAB & NURSING CTR
11242	CHARLTON MANOR RH, INC.
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OO TRANSFERFROM	Facility
11268	SOUTHSHORE HEALTH CARE CENTER
11269	SOUTHEAST HEALTH CARE CENTER
11272	STONEHEDGE HEALTH CARE CENTER
11481	SOMERSET RIDGE
11501	WACHUSETT MANOR
11502	ACADEMY MANOR
11503	HERITAGE MANOR
11512	SARAH S. BRAYTON NURSING CARE CENTER
11515	HERITAGE HALL SOUTH
11524	PRESCOTT HOUSE
11534	WILLOW MANOR
11538	APPLE VALLEY CENTER
11542	SUTTON HILL CENTER
11627	SAVOY NURSING & REHAB CENTER
11885	MEDFORD REHAB & NURSING CTR
11903	LUTHERAN REHAB & SKILLED CARE CTR
11950	PLYMOUTH REHAB & HLTH CARE CTR
11952	CAPE HERITAGE REHAB & HLTH CARE CTR
11953	WORCESTER REHAB & HLTH CARE CTR
11954	SOUTHBRIDGE REHAB & HLTH CARE CTR
11955	NORTHWOOD REHAB & HLTH CARE CTR
11974	WHITTIER WESTBOROUGH TRANSITIONAL CARE UNIT
12012	NEW ENGLAND HEALTH CENTER
12123	BRIARWOOD REHAB & HEALTHCARE CTR
12167	RESERVOIR CENTER FOR HEALTH & REHAB
12168	ELIOT CENTER FOR HEALTH & REHAB
12169	COUNTRY CENTER FOR HEALTH & REHAB
12197	SACHEM CENTER FOR HEALTH & REHAB
12198	COLONY CENTER HEALTH & REHAB
12210	LAUREL RIDGE REHAB & SKILLED CARE CTR
12212	PRESENTATION REHAB & SKILLED CARE CTR
12251	GARDNER REHABILITATION AND NSG CTR
12273	VIBRA NUR & REHAB CTR OF WESTERN MASS
12343	HOLYOKE HEALTHCARE CENTER
12344	JOHN ADAMS HEALTHCARE CENTER
12347	BRENTWOOD REHAB & HEALTHCARE CTR
12349	WEBSTER PARK REHAB & HEALTHCARE CTR.
12356	LONGMEADOW OF TAUNTON
12372	ROYAL NORWELL NURSING & REHAB CTR, LLC
12418	EXCEL CENTER FOR NURSING & REHAB-LEXINGTON
12419	WORCESTER HEALTH CENTER
12420	MERRIMACK VALLEY HEALTH CENTER

OO_TRANSFERFROM	Facility
12422	PARK PLACE REHAB & SKILLED CARE CTR
12425	WATERTOWN HEALTH CENTER
12426	WABAN HEALTH CENTER
12432	SOUTH COVE MANOR NURSING & REHAB CTR
12434	RIVER TERRACE REHAB & HEALTHCARE CTR
12435	BROOKSIDE REHAB & HEALTHCARE CTR
12499	QUINCY HEALTH & REHAB CTR
12500	FRANKLIN HEALTH & REHAB CTR
12501	BLUE HILLS HEALTH & REHAB CTR
12502	COUNTRY GARDENS HEALTH & REHAB CTR
12503	WALDEN HEALTH & REHAB CTR
12505	CRAWFORD HEALTH & REHAB CTR
12506	BRIGHAM HEALTH & REHAB CTR
12527	WEBSTER MANOR REHAB & HEALTH CARE CTR.
12528	THE OXFORD REHAB & HEALTH CARE CENTER
12529	LANESSA EXTENDED CARE
12530	MARLBOROUGH HILLS REHAB & HEALTH CARE CTR
12531	TCU @ WEBSTER
12532	PARSONS HILL REHAB & HEALTH CARE CTR.
12550	MAPLES REHABILITATION & NURSING CENTER
12585	BROCKTON HEALTH CENTER
12586	MONT MARIE REHAB & HEALTHCARE CTR.
12592	VERO HEALTH & REHAB OF MATTAPAN
12600	VERO HEALTH & REHAB, PARKWAY
12602	VERO HEALTH & REHAB OF WEST ROXBURY
12616	LIFE CARE CENTER OF THE SOUTH SHORE
12632	QUABOAG REHABILITATION & SKILLED CARE CTR
12762	WEST REVERE HEALTH CENTER
12763	WOODBRIAR HEALTH CENTER
12823	DIGHTON CARE & REHAB CTR, LLC
12824	ROCKDALE CARE & REHABILITATION CENTER
12825	HIGHLAND MANOR CARE & REHAB CTR, LLC
12826	GLEN RIDGE NURSING CARE CENTER
12828	LIFE CARE CENTER OF MERRIMACK VALLEY
12844	BENCHMARK SR. LIVING AT THE COMMONS IN LINCOOLN
12845	WHITTIER BRADFORD TRANS. CARE UNIT
12930	WINGATE AT HARWICH
12931	WINGATE AT CHESTNUT HILL
12932	WINGATE AT SHARON
12934	WINGATE AT NORTON
12936	WINGATE AT WESTON
13011	CHARLWELL HOUSE

OO_TRANSFERFROM	Facility
13013	KIMWELL NURSING & REHAB
13023	FRANKLIN HEALTH & REHAB CENTER
13030	COUNTRY GARDENS SKILLED NURSING & REHAB CTR
13032	QUINCY HEALTH & REHAB CENTER LLC
13033	CRAWFORD SKILLED NURSING & REHAB CENTER
13034	BLUE HILLS HEALTH & REHAB CENTER LLC
13038	BRUSH HILL CARE CENTER
13043	CEDAR VIEW REHAB & HEALTHCARE CTR
13054	BRIGHTON HOUSE REHAB & NURSING CTR
13056	COLONIAL REHAB & NURSING CTR
13080	LIFE CARE CENTER OF NASHOBA VALLEY
13094	ALDEN COURT NURSING CARE & REHAB CTR
13124	FITCHBURG GARDENS FOR NURSING & REHAB, LLC
13128	BAYPOINTE REHAB CENTER
13129	SOUTHPOINTE REHAB CENTER

OO PAYSOURCE1	
OO PAYSOURCE2	Description
145	Self-Pay Self-Pay
146	Worker's Compensation Worker's Compensation
121	Medicare Medicare
135	Out-of-State Medicare Medicare
125	Medicare HMO - Fallon Senior Plan Medicare Managed Care
127	Medicare HMO - Health New England Medicare Wrap Medicare Managed Care
128	Medicare HMO - HMO Blue for Seniors Medicare Managed Care
129	Medicare HMO - Kaiser Medicare Plus Plan Medicare Managed Care
131	Medicare HMO - Pilgrim Enhance 65 Medicare Managed Care
132	Medicare HMO - Matthew Thornton Senior Plan Medicare Managed Care
133	Medicare HMO -Tufts Medicare Supplement (TMS) Medicare Managed Care
134	Medicare HMO - Other (not listed elsewhere) Medicare Managed Care
173	Aetna Medicare Open Medicare Managed Care
180	Fresenius Medical Care Health Plan (Medicare Advantage Plan) Medicare Manage
210	Medicare HMO - Pilgrim Preferred 65 Medicare Managed Care
211	Medicare HMO - Neighborhood Health Plan Senior Health Plus Medicare Managed
212	Medicare HMO - Healthsource CMHC Central Care Supplement Medicare Managed Ca
213	Medicare HMO - Medicare Complete Plans offered by SecureHorizons Medicare Ma
214	Medicare HMO - Harvard Pilgrim Health Plan - Medicare Enhance Medicare Manag
215	Tufts Medicare HMO - Medicare Preferred Medicare Managed Care
216	Medicare Special Needs Plan - Commonwealth Care Alliance Medicare Managed Ca
217	Medicare Special Needs Plan - Fallon Community Health Plan Medicare Managed
218	Medicare Special Needs Plan - Senior Whole Health Medicare Managed Care
219	Medicare Special Needs Plan - United Health Group Evercare Mass. SCO and Eve
220	Medicare HMO - Blue Care 65 Medicare Managed Care
221	Medicare HMO - Harvard Community Health Plan 65 Medicare Managed Care

OO PAYSOURCE1	
OO_PAYSOURCE1	Description
222	Medicare HMO - Healthsource CMHC Medicare Managed Care
223	Medicare HMO - Harvard Pilgrim Health Care of New England Care Plus Medicare
224	Medicare HMO - Tufts Secure Horizons Medicare Managed Care
225	Medicare HMO - US Healthcare Medicare Managed Care
230	Medicare HMO - HCHP First Seniority Medicare Managed Care
231	Medicare HMO - Pilgrim Prime Medicare Managed Care
232	Medicare HMO - Seniorcare Direct Medicare Managed Care
233	Medicare HMO - Seniorcare Plus Medicare Managed Care
234	Medicare HMO - Managed Blue for Seniors Medicare Managed Care
245	Trail Blazer Health Enterprises, LLC Medicare Managed Care
252	Health New England (HNE) Medicare Advantage Plan Medicare Managed Care
253	Blue Medicare PFFS Medicare Managed Care
254	Cigna Medicare Access Plans Medicare Managed Care
255	Health Net Pearl Medicare Managed Care
256	Humana Gold PFFS Medicare Managed Care
257	Today's Options Premier from Universal American Medicare Managed Care
258	Unicare Security Choice Medicare Managed Care
273	MassHealth Senior Care Options**** Medicare Managed Care
275	Medicare SCO - NaviCare (HMO) Medicare Managed Care
276	Medicare SCO - Tufts Senior Care Options Medicare Managed Care
277	Medicare SCO - United Health Care Medicare Managed Care
278	Medicare SCO - Commonwealth Care Alliance Medicare Managed Care
279	Medicare One Care - Fallon Total Care Medicare Managed Care
280	Medicare One Care - Network Health Medicare Managed Care
281	Medicare One Care - Commonwealth Care Alliance Medicare Managed Care
103	Medicaid (includes MassHealth) Medicaid
104	Medicaid Managed Care-Primary Care Clinician Medicaid Managed Care
106	Medicaid Managed Care-Central Mass Health Care Medicaid Managed Care
107	Medicaid Managed Care - Community Health Plan Medicaid Managed Care
108	Medicaid Managed Care - Fallon Community Health Plan Medicaid Managed Care
109	Medicaid Managed Care - Harvard Community Health Plan Medicaid Managed Care
110	Medicaid Managed Care - Health New England Medicaid Managed Care
111	Medicaid Managed Care - HMO Blue Medicaid Managed Care
112	Medicaid Managed Care - Kaiser Foundation Plan Medicaid Managed Care
113	Medicaid Managed Care - Neighborhood Health Plan Medicaid Managed Care
114	Medicaid Managed Care - United Health Plans of NE Medicaid Managed Care
115	Medicaid Managed Care - Pilgrim Health Care Medicaid Managed Care
116	Medicaid Managed Care -Tufts Associated Health Plan Medicaid Managed Care
118	Medicaid Mental Health & Substance Abuse Plan -Mass Behavioral Health Partne
119	Medicaid Managed Care Other (not listed elsewhere) Medicaid Managed Care
207	Network Health (Cambridge Health Alliance MCD Program) Medicare Managed Care
208	HealthNet (Boston Medical Center MCD Program) Medicaid Managed Care
274	Medicaid Managed Care - Network Health Medicaid Managed Care
282	BMC MassHealth CarePlus Medicaid Managed Care
283	Fallon MassHealth CarePlus Medicaid Managed Care
284	NHP MassHealth CarePlus Medicaid Managed Care

OO_PAYSOURCE1	
OO_PAYSOURCE2	Description
285	Network Health MassHealth CarePlus Medicaid Managed Care
286	Celticare MassHealth CarePlus Medicaid Managed Care
287	MassHealth CarePlus Medicaid Managed Care
120	Out-of-State Medicaid Other Government Payment
144	Other Government Other Government Payment
151	CHAMPUS Other Government Payment
178	Children's Medical Security Plan (CMSP) Government
50	Blue Health Plan for Kids Blue Cross
136	BCBS Medex Blue Cross
142	Blue Cross Indemnity Blue Cross
154	BCBS Other (Not listed elsewhere) Blue Cross
156	Out of state BCBS Blue Cross
2	Bay State - a product of HMO Blue Blue Cross Managed Care
3	Network Blue (PPO) Blue Cross Managed Care
11	Blue Care Elect Blue Cross Managed Care
81	HMO Blue Blue Cross Managed Care
155	Blue Cross Managed Care Other Blue Cross Managed Care
160	Blue Choice (includes Healthflex Blue) - POS Blue Cross Managed Care
246	Preferred Blue PPO Blue Cross Managed Care
30	CIGNA (Indemnity) Commercial Insurance
51	Aetna Life Insurance Commercial Insurance
52	Boston Mutual Insurance Commercial Insurance
54	Continental Assurance Insurance Commercial Insurance
55	Guardian Life Insurance Commercial Insurance
56	Hartford L&A Insurance Commercial Insurance
57	John Hancock Life Insurance Commercial Insurance
58	Liberty Life Insurance Commercial Insurance
59	Lincoln National Insurance Commercial Insurance
62	Mutual of Omaha Insurance Commercial Insurance
63	New England Mutual Insurance Commercial Insurance
64	New York Life Care Indemnity Commercial Insurance
65	Paul Revere Life Insurance Commercial Insurance
66	Prudential Insurance Commercial Insurance
67	First Allmerica Financial Life Insurance Commercial Insurance
69	Corporate Health Insurance Liberty Plan Commercial Insurance
70	Union Labor Life Insurance Commercial Insurance
72	Healthsource New Hampshire Commercial Insurance
73	United Health and Life Commercial Insurance
74	United Healthcare Insurance Company Commercial Insurance
85	Liberty Mutual Commercial Insurance
89	Great West/NE Care Commercial Insurance
91	New England Benefits Commercial Insurance
94	Time Insurance Co Commercial Insurance
96	Metrahealth (United Health Care of NE) Commercial Insurance
97	UniCare Commercial Insurance
100	Transport Life Insurance Commercial Insurance

OO_PAYSOURCE1	
OO_PAYSOURCE2	Description
101	Quarto Claims Commercial Insurance
102	Wausau Insurance Company Commercial Insurance
137	AARP/Medigap supplement Commercial Insurance
138	Banker's Life and Casualty Insurance Commercial Insurance
139	Bankers Multiple Line Commercial Insurance
140	Combined Insurance Company of America Commercial Insurance
141	Other Medigap (not listed elsewhere) Commercial Insurance
147	Other Commercial (not listed elsewhere) Commercial Insurance
176	Carelink (CIGNA & Tufts) Commercial Insurance
177	Chesapeake Life Insurance Company Commercial Insurance
179	First Health Life and Health Insurance Company Commercial Insurance
185	Connecticut General Life - Indemnity Commercial Insurance
189	Fallon Major Medical - Indemnity Commercial Insurance
193	Harvard Pilgrim - Indemnity Commercial Insurance
197	Health Insurance Plan of New York (HIP) Commercial Insurance
198	John Alden Life Insurance Company Commercial Insurance
200	Hartford Life Insurance Co Commercial Insurance
201	Mutual of Omaha Commercial Insurance
202	New York Life Insurance Commercial Insurance
203	Principal Financial Group (Principal Mutual Life) Commercial Insurance
204	Christian Brothers Employee Commercial Insurance
206	Health New England Guaranteed Issue - Individual Plans Commercial Insurance
209	Mid-West National Life Insurance Company of Tennessee Commercial Insurance
228	Oxford Health Plans Commercial Insurance
229	Professional Insurance Company (Indemnity) Commercial Insurance
235	Trustmark Life Insurance Company Commercial Insurance
241	Union Security Insurance Company Commercial Insurance
242	Wellcare Health Plans, Inc. Commercial Insurance
244	Tufts Medicare Complement (TMC) Commercial Insurance
247	Humana Insurance Company ** Commercial Insurance
248	Mail Handlers Benefit Plan Commercial Insurance
249	MEGA Life and Health Insurance Company Commercial Insurance
17	Prudential Healthcare POS Commercial Managed Care
18	Prudential Healthcare PPO Commercial Managed Care
22	Aetna Open Choice PPO Commercial Managed Care
23	Guardian Life Insurance Company PPO Commercial Managed Care
27	First Allmerica Financial Life Insurance PPO Commercial Managed Care
28	Great West Life PPO Commercial Managed Care
31	One Health Plan HMO (Great West Life) Commercial Managed Care
33	Mutual of Omaha PPO Commercial Managed Care
34	New York Life Care PPO Commercial Managed Care
35	United Healthcare Insurance Company - HMO Commercial Managed Care
36	United Healthcare Insurance Company - PPO Commercial Managed Care
75	Prudential Healthcare HMO Commercial Managed Care
78	Phoenix Preferred PPO Commercial Managed Care
82	John Hancock Preferred Commercial Managed Care

OO_PAYSOURCE1	
OO_PAYSOURCE2	Description
87	CIGNA PPO Commercial Managed Care
157	Metrahealth - PPO (United Health Care of NE) Commercial Managed Care
158	Metrahealth - HMO (United Health Care of NE) Commercial Managed Care
161	Aetna Managed Choice POS Commercial Managed Care
162	Great West Life POS Commercial Managed Care
163	United Healthcare Insurance Company - POS Commercial Managed Care
171	CIGNA POS Commercial Managed Care
172	Metrahealth - POS (United Health Care of NE) Commercial Managed Care
181	First Allmerica Financial Life Insurance EPO Commercial Managed Care
182	UniCare Preferred Plus Managed Access EPO Commercial Managed Care
190	Fallon Preferred Care - PPO Commercial Managed Care
191	Genworth Preferred PPO Commercial Managed Care
192	Guarantee Trust Life Insurance Company - PPO Commercial Managed Care
226	United Health Care of New England, Inc. Commercial Managed Care
250	CIGNA HMO Commercial Managed Care
270	UniCare Preferred Plus PPO Commercial Managed Care
1	Harvard Community Health Plan HMO
4	Fallon Community Health Plan HMO
7	Tufts Associated Health Plan HMO
8	Pilgrim Health Care HMO
9	United Health Plan of New England (Ocean State) HMO
19	Matthew Thornton HMO
20	HCHP of New England (formerly RIGHA) HMO
24	Health New England HMO
25	Pioneer Plan HMO
37	HCHP-Pilgrim HMO (integrated product) HMO
38	Health New England Select (self-funded) HMO
39	Pilgrim Direct HMO
40	Kaiser Foundation HMO
42	ConnectiCare Of Massachusetts HMO
43	MEDTAC HMO
44	Community Health Plan HMO
45	Health Source New Hampshire HMO
46	Blue CHiP (BCBS Rhode Island) HMO
47	Neighborhood Health Plan HMO
48	US Healthcare HMO
148	Other HMO (not listed elsewhere) HMO
174	Aetna Health Inc Quality POS HMO
175	Aetna Health, Inc HMO HMO
194	Harvard Pilgrim - POS HMO
195	Harvard Pilgrim - PPO HMO
196	Harvard Pilgrim Health Care, Inc. (HMO) HMO
236	Tufts Health Maintenance Organization, Inc. (TAHMO) HMO
238	Tufts Associated Health Maintenance Organization, Inc. PPO HMO
239	Tufts Associated Health Maintenance Organization, Inc. POS Plan HMO
243	Pioneer Health Network HMO

OO_PAYSOURCE1	Description
OO_PAYSOURCE2	Description
251	Healthsource CMHC HMO HMO
259	CeltiCare Health Plan of Massachusetts Commercial Insurance
271	Hillcrest HMO HMO
295	Meritain HMO
98	Healthy Start Free Care
143	Free Care Free Care
990	Free Care - Co-pay, Deductible, or Co-Insurance Free Care
996	Charity Care Other Free Care (Charity Care)
150	Other Non-Managed Care (not listed elsewhere) Other Non-Managed Care Plans
152	Foundation Other Non-Managed Care Plans
153	Grant Other Non-Managed Care Plans
10	Pilgrim Advantage - PPO PPO and Other Managed Care Plans Not Elsewhere Classified
21	Commonwealth PPO PPO and Other Managed Care Plans Not Elsewhere Classified
49	Healthsource CMHC Plus PPO PPO and Other Managed Care Plans Not Elsewhere Classified
71	ADMAR PPO and Other Managed Care Plans Not Elsewhere Classified
77	Options for Healthcare PPO PPO and Other Managed Care Plans Not Elsewhere Classified
79	Pioneer Health Care PPO PPO and Other Managed Care Plans Not Elsewhere Classified
80	Tufts Total Health Plan PPO PPO and Other Managed Care Plans Not Elsewhere Classified
83	US Healthcare Quality Network Choice- PPO PPO and Other Managed Care Plans Not Elsewhere Classified
84	Private Healthcare Systems PPO PPO and Other Managed Care Plans Not Elsewhere Classified
86	United Health & Life PPO PPO and Other Managed Care Plans Not Elsewhere Classified
88	Freedom Care PPO and Other Managed Care Plans Not Elsewhere Classified
90	Healthsource Preferred (self-funded) PPO and Other Managed Care Plans Not Elsewhere Classified
93	Psychological Health Plan PPO and Other Managed Care Plans Not Elsewhere Classified
95	Pilgrim Select - PPO PPO and Other Managed Care Plans Not Elsewhere Classified
149	PPO and Other Managed Care PPO and Other Managed Care Plans Not Elsewhere Classified
187	Connecticut General Life - PPO PPO
205	Health New England Select Premier PPO PPO
227	Northeast Health Direct - PPO PPO
237	Tufts Insurance Company PPO PPO
240	Unicare PPO PPO
13	Community Health Plan Options (New York) Point-of-Service Plan
14 99	Health New England Advantage POS Point-of-Service Plan
	Other POS (not listed elsewhere) Point-of-Service Plan Healthsource CMHC Plus POS Point-of-Service Plan
164 165	Healthsource New Hampshire POS (self-funded) Point-of-Service Plan
165	
166	Private Healthcare Systems POS Point-of-Service Plan Fallon POS Point-of-Service Plan
169	Kaiser Added Choice Point-of-Service Plan
170	US Healthcare Quality POS Point-of-Service Plan
170	Connecticut General Life - POS POS
188	Fallon Flex POS POS
188	
183	Pioneer Health Care EPO Exclusive Provider Organization
	Private Healthcare Systems EPO Exclusive Provider Organization
199	Other EPO (not listed elsewhere) Exclusive Provider Organization

OO_PAYSOURCE1	
OO_PAYSOURCE2	Description
288	Boston Medical Center HealthNet ConnectorCare Commonwealth Care Plans
289	CeltiCareConnectorCare Commonwealth Care Plans
290	Fallon ConnectorCare Commonwealth Care Plans
291	Health New England ConnectorCare Commonwealth Care Plans
292	Minuteman Health ConnectorCare Commonwealth Care Plans
293	Neighborhood Health ConnectorCare Commonwealth Care Plans
294	Network Health ConnectorCare Commonwealth Care Plans
300	CommCare: BMC HealthNet Plan/Commonwealth Care– General Classification Commo
301	CommCare: BMC HealthNet Plan/Commonwealth Care – Plan Type I Commonwealth Ca
302	CommCare: BMC HealthNet Plan/Commonwealth Care– Plan Type II Commonwealth Ca
303	CommCare: BMC HealthNet Plan/Commonwealth Care– Plan Type III Commonwealth C
304	CommCare: BMC HealthNet Plan/Commonwealth Care– Plan Type IV Commonwealth Ca
400	CommCare: Cambridge Network Health Forward –General Classification Commonwea
401	CommCare: Cambridge Network Health Forward – Plan Type I Commonwealth Care P
402	CommCare: Cambridge Network Health Forward – Plan Type II Commonwealth Care
402	CommCare: Cambridge Network Health Forward – Plan Type II Commonwealth Care General Classification
403	Commonwealth Care Plans
	CommCare: Cambridge Network Health Forward – Plan Type IV Commonwealth Care Plan 1 (Group No.
404	4445077) Commonwealth Care Plans
500	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care –Plan 2 (Group No.
500	4455220) Commonwealth Care Plans CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care – Plan 3 (Group No.
501	4455221) Commonwealth Care Plans
501	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care –Plan 4 (Group No.
502	4455222) Commonwealth Care Plans
503	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care Plans
	CommCare: Fallon Community Health Care: Commonwealth Care FCHP Direct Care –I (9CC1) Commonwealth
504	Care Plans
600	CommCare: Neighborhood Health Plan– General Classification Commonwealth Care II (9CC2) Commonwealth Care Plans
600	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type III (9CC3) Commonwealth
601	Care Plans
	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type IV (9CC4) Commonwealth
602	Care Plans
	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type Classification
603	Commonwealth Care Plans
604	CommCare: Neighborhood Health Plan – NHP Commonwealth Care Plan – Plan Type Commonwealth Care Plans
700	CommCare: Celticare Health Plan of Massachusetts / Commonwealth Care General Commonwealth Care Plans
700	CommCare: Celticare Health Plan of Massachusetts / Commonwealth Care - Plan 1 Commonwealth Care Plans
701	
	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care - Plan 2 Commonwealth Care Plans
703	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care - Plan 3
704	CommCare: Celticare Health Plan of Massachusetts /Commonwealth Care Bridge P
800	Aetna Dental Commercial Managed Care
801	Aflac Commercial Insurance
802	AllState Commercial Insurance
803	Altus Dental Commercial Managed Care
804	Ameritas Life Insurance Corp Commercial Insurance
805	Anthem Blue Cross Blue Shield Blue Cross Managed Care
806	Assurant PPO and Other Managed Care Plans Not Elsewhere Classified

OO_PAYSOURCE1	
OO_PAYSOURCE2	Description
807	Blue Cross Blue Shield of MA Blue Cross Managed Care
808	Blue Cross Blue Shield of RI Blue Cross Managed Care Not Elsewhere Classified
809	Children's Medical Security Government
810	Cigna Dental PPO and Other Managed Care Plans Not Elsewhere Classified
811	Creative Plan Dental Administrators PPO and Other Managed Care Plans Not Elsewhere Classified
812	Delta Dental of MA Commercial Managed Care
813	Delta Dental - Other Commercial Managed Care
814	Delta Dental of New York Commercial Managed Care
815	DentaQuest Commonwealth Care Commonwealth Care Plans
816	DentaQuest MassHealth Medicare Managed Care
817	DentaQuest Senior Whole Health PPO and Other Managed Care Plans Not Elsewher
818	EverCare Dental PPO and Other Managed Care Plans Not Elsewhere Classified
819	Fallon Health Plan Commercial Insurance
820	Great West Dental PPO and Other Managed Care Plans Not Elsewhere Classified
821	Guardian Dental Medicaid
822	Harvard Pilgrim Health Care PPO and Other Managed Care Plans Not Elsewhere C
823	MetLife Dental PPO and Other Managed Care Plans Not Elsewhere Classified
824	Principal Plan Dental Medicare Managed Care
825	Unicare Dental PPO and Other Managed Care Plans Not Elsewhere Classified
826	United Concordia Other Government Payment
827	United HealthCare: Dental PPO and Other Managed Care Plans Not Elsewhere Cla
828	Alicare Commercial Insurance
829	Adventist Risk Management INC Commercial Insurance
830	Blue Cross Blue Shield of Texas Blue Cross Managed Care
831	Brokers National Life insurance Commercial Insurance
832	Cba Blue Dental Blue Cross Managed Care
833	Chesterfield Resources Commercial Insurance
834	Companion Life insurance Commercial Insurance
835	Dental Health Alliance Commercial Insurance
836	EBS Benefit Solutions Commercial Insurance
837	Empire Blue Cross Blue Cross Managed Care
838	Excellus Blue cross Blue Cross Managed Care
839	Fortis Commercial Insurance
840	GEHA Connection Dental Commercial Insurance
841	GHI Commercial Insurance
842	Lincoln Financial Group Commercial Insurance
843	London Health Administrators Commercial Insurance
844	Midwest Life Insurance Commercial Insurance
845	Premier Access Dental Plans Commercial Insurance
846	Sentry Life Insurance Commercial Insurance
847	Sonoco Commercial Insurance
848	Sun Life Dental Benefits Commercial Insurance
849	Symetra Life Insurance Company Commercial Insurance
850	Tricare Dental PPO and Other Managed Care Plans Not Elsewhere Classified
851	Dentemax Insurance Commercial Insurance
995	Health Safety Net Office HSNO

OO_PAYSOURCE1		
OO_PAYSOURCE2	Description	
127	Medicare HMO -Health New England Medicare Wrap	
128	Medicare HMO -HMO Blue for Seniors	
129	Medicare HMO-Kaiser Medicare Plus Plan	
136	BCBS Medex	
137	AARP/Medigap Supplement	
138	Banker's Life and Casualty Insurance	
139	Bankers Multiple Line	
140	Combined Insurance Company of America	
159	None (Valid only for Secondary Source of Payment)	
200	Hartford Life Insurance co.	
212	Medicare HMO - Healthsource CMHC Central Care Supplement	
0	Invalid	
15	Invalid (replaced by #158)	
32	Invalid (replaced by #157 and 158)	
157	Metrahealth - PPO (United Health Care of NE)	
158	Metrahealth - HMO (United Health Care of NE)	
311	Medicaid: Other ACO	
312	Medicaid: Fallon 365 Care (ACO)	
313	Medicaid: Be Healthy Partnership with Health New England (ACO)	
314	Medicaid: Berkshire Fallon Health Collaborative (ACO)	
315	Medicaid: BMC HealthNet Plan Community Alliance (ACO)	
316	Medicaid: BMC HealthNet Plan Mercy Alliance (ACO)	
317	Medicaid: BMC HealthNet Plan Signature Alliance (ACO)	
318	Medicaid: BMC HealthNet Plan Southcoast Alliance (ACO)	
320	Medicaid: Community Care Cooperative (ACO)	
321	Medicaid: My Care Family with Neighborhood Health Plan (ACO)	
322	Medicaid: Partners Healthcare Choice (ACO)	
323	Medicaid: Steward Health Choice (ACO)	
324	Medicaid: Tufts Health Together with Atrius Health (ACO)	
325	Medicaid: Tufts Health Together with BIDCO (ACO)	
326	Medicaid: Tufts Health Together with Boston Children's ACO	
327	Medicaid: Tufts Health Together with CHA (ACO)	
328	Medicaid: Wellforce Care Plan (ACO)	
901	Other Commercial Managed Care (not listed elsewhere)	
903	Unlisted International Source	
904	Unlisted Military Source	
905	Other Connector Care Plan (not listed elsewhere)	

OO_VISITSOURCE1	
OO_VISITSOURCE2	
0	Information Not Available
1	Direct Physician Referral
2	Within Hospital Clinic Referral
3	Direct Health Plan Referral/HMO Referral
4	Transfer from Acute Care Hospital
5	Transfer from a Skilled Nursing Facility (SNF)
6	Transfer from Intermediate Care Facility (ICF)
7	Outside Hospital Emergency Room Transfer
8	Court/Law Enforcement
9	Other
10	Transfer from a Hospice Facility
11	Outside Hospital Clinic Referral
12	Walk-In/Self-Referral
13	Inside Hospital ER Transfer
14	Transfer from Another Institution's Ambulatory Surgery (SDS)
15	Within Hospital Ambulatory Surgery Transfer (SDS Transfer)
16	EMS Transport Decision
17	Information Not Available - Newborn
18	Normal Delivery
19	Premature Delivery
20	Sick Baby
21	Extramural Birth
22	Extramural Birth

#### Casemix Outpatient Observation Organization (PHDCM\_OO\_ORG)

Variable Name	Variable Description	Meta Data	Format
00_SITE / 00_FACILITY/ 00_TRANSFERFROM	OrgID to link for hospital characteristics in full OO dataset		Num
OO_City	Code of the municipality in which the facility is located	1-351 for valid MA city/towns 999=Out of state or unknown	Num
GROUPNAME_OO		1= Nursing Facility 2= Hospital 3= Rest Home 4= Private Nursing Facility 5= Private Rest Home 6= Community Health Center 7= DDS - Residential Services 8= Other 9= Unspecified/Unknown/Missing	Num
ORGANIZATIONNAME	Name of Facility		Char
TYPE_OOFAC	Type of Facility	1=Acute Hospital 2=Alzheimer 3=Chronic Hospital 4=Freestanding CHC 5=Geriatric 6=Group Adult Foster Care 7=Head Trauma 8=HMO 9=Hospital Campus - Acute 10=Hospital Licensed Health Center 11=Hospital-Based LTC 12=ICF 13=Licensed Satellite Facility 14=Mental Health and Substance Abuse 15=Municipal Agency 16=NH/High MMQ 17=NH/MIMI 18=NH/Pediatric with Ventilation 19=None 20=Other Government Agency 21=Other LTC 22=Outpatient Care Center 23=Pediatric 24=Psychiatric 25=Psychiatric Hospital 26=Rehabilitation Hospital 27=Residential 28=Residential A 29=Satellite Clinic 30=State Agency 31=Ventilation 99=Unknown	Num

#### **Population Census Data**

There are ten Population datasets in the PHD:

- 1. Census Population by town (CENSUS.POP\_TOWNTOTAL)
- 2. <u>Census Population by 11 age groups by town (CENSUS.POP\_TOWN\_11AGE)</u>
- 3. <u>Census Population by 19 age groups by town (CENSUS.POP\_TOWN\_19AGE</u>
- 4. <u>Census Female Population by 18 age groups (CENSUS.FEMALE\_TOWNCITY\_18AGE\_RACE)</u>
- 5. <u>Census State Population by gender and race (CENSUS.POP\_STATETOTAL</u>
- 6. <u>Census State Population by 11 age groups (CENSUS.POP\_STATE\_11AGE)</u>
- 7. <u>Census State Population by 19 age groups (CENSUS.POP\_STATE\_19AGE)</u>
- 8. <u>Census Zip from Public Health Disparities geocoding project (CENSUS.POP\_ACS\_ZCTA): Dataset downloaded</u> <u>from The Public Health Disparities Geocoding Project https://www.hsph.harvard.edu/thegeocodingproject/</u>
- 9. <u>Census Town from Public Health Disparities geocoding project (CENSUS.POP\_ACS\_COUNTY): Dataset from The</u> <u>Public Health Disparities Geocoding Project https://www.hsph.harvard.edu/thegeocodingproject/</u>
- 10. Census Town from ACS (CENSUS.POP\_ACS\_TOWN): Data from 2014-2018 American Community Survey 5-Year

#### Sets 1 through 7 are based on Donahue Population files estimates created by Malena Hood

Population Estimates 2011-2019: Small Area Population Estimates 2011-2020, version 2018, Massachusetts Department of Public Health, Bureau of Environmental Health. Version 2018 years 2016-2019 apply updates from U.S. Census Bureau's County Population by Characteristics, vintage 2018; all previous years apply updates from U.S. Census Bureau's County Population by Characteristics, vintage 2017. Population estimates used for years following the decennial census were developed by the University of Massachusetts Donahue Institute (UMDI) in partnership with the Massachusetts Department of Public Health, Bureau of Environmental Health.

Variable Name	Description	Format
RESCODE	Code for city/town (1-351)	Num
COMMUNITY	Name of city/town	Char
P2011	2011 Total population	Num
P2012	2012 Total population	Num
P2013	2013 Total population	Num
P2014	2014 Total population	Num
P2015	2015 Total population	Num
P2016	2016 Total population	Num
P2017	2017 Total population	Num
P2018	2018 Total population	Num
P2019	2019 Total population	Num

#### **1.CENSUS.POP\_TOWNTOTAL** Total population by city/town 2011 to 2019

#### 2. CENSUS.POP\_TOWN\_11AGES – Total Population by <u>11 age groups</u> by city/town 2011-2019

#### 3. CENSUS.POP\_TOWN\_19AGES – Total Population by 19 age groups by city/town 2011-2019

Variable Name	Description	Format
RESCODE	code for city/town (1-351)	Num
AGEGRP	Age Group11 19 ages	Num
COMMUNITY	Name of city/town	Char
P2011	2011 Total population	Num
P2012	2012 Total population	Num
P2013	2013 Total population	Num
P2014	2014 Total population	Num
P2015	2015 Total population	Num
P2016	2016 Total population	Num
P2017	2017 Total population	Num
P2018	2018 Total population	Num
P2019	2019 Total population	Num

#### 4. Total Female Population 2019 by 18 age groups and race/ethnicity by city/town

#### (CENSUS.Female towncity 18age race)

Variable Name	Description	Format
RESCODE	code for city/town (1-351)	Num
AGEGRP	Age Group18 ages	Num
AMERICANINDIAN_NOTHISPANIC	Total Female American Indian Non-Hispanic Population	Num
ASIANPI_NOTHISPANIC	Total Female Asian/Pacific Islander Non- Hispanic Pop	Num
BLACK_NOTHISPANIC	Total Female Black Non-Hispanic Population	Num
HISPANIC	Total Female Hispanic Population	Num
WHITE_NOTHISPANIC	Total Female White Non-Hispanic Population	Num
MULTIRACIAL	Total Female Multiracial Population	Num

#### 5. Statewide Total Population (CENSUS.POP\_STATETOTAL) by gender and race/ethnicity 2011-2019

Variable Name	Description	Format
FEMALE	Female Population	Num
HISP	Total Hispanic Population	Num
HISPF	Total Female Hispanic Population	Num
HISPM	Total Male Hispanic Population	Num
MALE	Male Population	Num
NHAI	Total American Indian Non-Hispanic Population	Num
NHAIF	Total Female American Indian Non-Hispanic Population	Num
NHAIM	Total Male American Indian Non-Hispanic Population	Num
NHAP	Total Asian/Pacific Islander Non-Hispanic Population	Num
NHAPF	Total Female Asian/Pacific Islander Non-Hispanic Pop	
NHAPM	Total Asian/Pacific Islander Non-Hispanic Population Nu	
NHB	Total Black Non-Hispanic Population	Num
NHBF	Total Female Black Non-Hispanic Population	Num
NHBM	Total Male Black Non-Hispanic Population	Num
NHW	Total White Non-Hispanic Population	
NHWF	Total Female White Non-Hispanic Population	
NHWM	Total Male White Non-Hispanic Population	Num
TOTAL	TOTAL Population	Num
YEAR	Year (2011-2019)	Num

# 5. <u>Statewide (CENSUS.POP\_STATE\_11AGE)</u> 2011-2019 Population by 11 age groups, gender and race/ethnicity 6. Statewide (CENSUS.POP\_STATE\_19AGE) 2011-2019 Population by 19 age groups, gender and race/ethnicity

Variable Name	Description	Format
FEMALE	Female Population	Num
HISP	Total Hispanic Population	Num
HISPF	Total Female Hispanic Population	Num
HISPM	Total Male Hispanic Population	Num
MALE	Male Population	Num
NHAI	Total American Indian Non-Hispanic Population	Num
NHAIF	Total Female American Indian Non-Hispanic Population	Num
NHAIM	Total Male American Indian Non-Hispanic Population	Num
NHAP	Total Asian/Pacific Islander Non-Hispanic Population	Num
NHAPF	Total Female Asian/Pacific Islander Non-Hispanic Population	Num
NHAPM	Total Asian/Pacific Islander Non-Hispanic Population	Num
NHB	Total Black Non-Hispanic Population	Num
NHBF	Total Female Black Non-Hispanic Population	Num
NHBM	Total Male Black Non-Hispanic Population	Num
NHW	Total White Non-Hispanic Population	Num
NHWF	Total Female White Non-Hispanic Population	Num
NHWM	Total Male White Non-Hispanic Population	Num
TOTAL	TOTAL Population	Num
YEAR	Year (2011-2019)	Num
AGEGRP	Age group (1-11) or Age group 19 ages	Num

#### 11 ages

1	<1
2	1-4
3	5-14
4	15-24
5	25-34
6	35-44
7	45-54
8	55-64
9	65-74
10	75-84
11	85+

18 Ages	:
1	U

1	Under 5 years
2 3 4 5 6 7	5 to 9 years
3	10 to 14 years
4	15 to 19 years
5	20 to 24 years
6	25 to 29 years
7	30 to 34 years
8 9	35 to 39 years
9	40 to 44 years
10	45 to 49 years
11	50 to 54 years
12	55 to 59 years
13	60 to 64 years
14	65 to 69 years

15	70 to 74 years
16	75 to 79 years
17	80 to 84 years
18	85 years and over

6	20-24
7	25-29
8	30-34
9	35-39
10	40-44
11	45-49
12	50-54
13	55-59
14	60-64
15	65-69
16	70-74
17	75-79
18	80-84
19	85+

#### 19 ages

1	<1
2	1-4
3	5-9
4	10-14
5	15-19

Sets 8 and 9 (POP\_ACS\_ZCTA and POP\_ACS\_COUNTY) use Datasets downloaded from The Public Health Disparities Geocoding Project

https://www.hsph.harvard.edu/thegeocodingproject/ Based on U.S. Census Bureau, 2014-2018 American Community Survey 5-Year Estimates.

The Index of Concentration at the Extremes [12] measure captures the extent to which the population in a given area is concentrated at either extreme of a social metric and ranges from -1 (everyone in the worst category) to 1 (everyone in the best category). For our analyses, we set the extremes for this ICE as: (a) high-income White Non-Hispanic population, versus (b) low-income population of color (i.e. not white non-Hispanic) [12]. For analysis purposes, we defined categories of ABSMs using *a priori* cutpoints for % below poverty (0-4.9%, 5-9.9%, 10-14.9%, 15-19.9%, and 20-100%) and quintile cut-points based on the distribution of ZCTA or city/town attributes in Massachusetts (weighted by population size).

#### 7. American Community Survey Population (CENSUS. POP\_ACS\_ZCTA) 2014-2018

Variable Name	Variable Description	Format
GEOID	5-digit ZCTA	Char
POP_TOTAL	Total population count	Num
POP_WHITE	Total white population count	Num
POP_BLACK	Total black population count	Num
PERCBLACK	Percent population that is Black	Num
PERCHISP	Percent population that is Hispanic	Num
PERCCOLOR	Percent population Non-White	Num
POP_AMIND	Total American Indian/Alaskan Native population count	Num
POP_API	Total Asian Pacific Islander population count	Num
POP_HISP	Total Hispanic population count	Num
POP_WNH	Total white non-Hispanic population count	Num
ICEWBINC	Index of Concentration at the Extremes for white, high income vs. black low income	Num
ICEWNHINC	Index of Concentration at the Extremes for white non- Hispanic high income vs. people of color low income	Num
POVERTY	% below poverty	Num
CROWDING	% crowded households	Num
YEAR	2018	Num
APINDPOV	Categorical poverty variable (0-4.9%, 5-9.9%, 10-19.9%, 20-100%)	Char
QINDPOV	Quintiles of poverty At ZCTA geography, weighted by population size	Char
QICEWNHINC	Quintiles of Index of Concentration at the Extremes for white non-Hispanic high income vs. people of color low income At ZCTA geography, weighted by population size	Char
QICEWBINC	Quintiles of Index of Concentration at the Extremes for white high income vs, black low income. At ZCTA geography, weighted by population size	Char

#### 8. ACS at County Level (CENSUS.POP\_ACS\_COUNTY) 2014-2018

9. Variable Name	Variable Description	Format
COUNTY	Name of County	Char
GEOID	3 digit FIPS code         Barnstable 001         Berkshire 003         Bristol 005         Dukes 007         Essex 009         Franklin 011         Hampden 013         Hampshire 015         Middlesex 017         Nantucket 019         Norfolk 021         Plymouth 023         Suffolk 025         Worcester 027	Num
POP_TOTAL	Total population count	Num
POP_WHITE	Total white population count	Num
POP_BLACK	Total black population count	Num
POP_AMIND	Total American Indian/Alaskan Native population count	Num
POP_API	Total Asian Pacific Islander population count	Num
POP_HISP	Total Hispanic population count	Num
POP_WNH	Total white non-Hispanic population count	Num
PERCBLACK	Percent population that is Black	Num
PERCHISP	Percent population that is Hispanic	Num
PERCCOLOR	Percent population Non-White	Num
ICEWBINC	Index of Concentration at the Extremes for white, high income vs. black low income	Num
ICEWNHINC	Index of Concentration at the Extremes for white non- Hispanic high income vs. people of color low income	Num
POVERTY	% below poverty	Num
CROWDING	% crowded households (>1 person per room)	Num
YEAR	YYYY 2014-2018	Num
APINDPOV	0-4.9%, 5-9.9%, 10-19.9%, 20-100%	Num
QINDPOV	Quintiles of poverty (at geography, weighted by population size)	Char

Dataset #10 created by Malena Hood is based on Donahue Population files as well as the U.S. Census Bureau, 2014-2018 American Community Survey 5-Year Estimates and BEH Estimates

#### **10.** Donahue Census Bureau (CENSUS.POP\_ACS\_town\_city)

Variable Name	Description	Format
rescode	Code for city/town (1-351)	Num
Townname	Name of city/town	Char
POP1980	1980 Population	Num
POP1990	1990 Population	Num
POP2000	2000 Population	Num
POP2010	2010 Population	Num
POP2018	2018 Population (using BEH estimates)	Num
Area	Area in square miles	Num
Pop_ Density	Calculated: Area/2018 Population	Num
Rural	<ul> <li>Rural towns are also classified into two categories of rurality. Towns in level one and level two are both rural.</li> <li>1= Towns classified as rural level one meet fewer rural criteria than towns considered rural at level two.</li> <li>2= Towns in level two are less densely populated and more remote and isolated from urban core areas.</li> <li>0= Towns considered urban</li> </ul>	Num
Percent_NonWhite	% population that is non-White (using BEH estimates)	Num
Percent_Male	% population that is male (using BEH estimates)	Num
Pecent_Ages65+	% population ages 65 years and older (using BEH estimates)	Num
Old_age_dependency_ratio	Old-age dependency ratio is defined as the number of individuals aged 65 and over per 100 people of working age defined as those aged between 20 and 64.	Num
Median_age	Median age in years	Num
Percent_limited_English	% limited English Households	Num
Percent_renters	% renters	Num
Percent_owner _under35	% owner-occupied housing units Under 35 years	Num
Percent_renter_2015orlater	% renter-occupied housing units-Moved in 2015 or later	Num
Percent_Foreign_Born	% foreign born	Num
Percent_25_bachelor	% of individuals 25 years or older who have a bachelor's degree or higher	Num

	\ \	
Variable Name	Description	Format
Percent_25_9thgrade	% of individuals 25 years or older who have a Less than 9th grade education	Num
Median_household_income	Median household income in the past 12 months (in 2018 inflation-adjusted dollars)	Num
Mean_household_income	Mean household income in the past 12 months (in 2018 inflation-adjusted dollars)	Num
Per_capita_income	Per capita income in the past 12 months (in 2018 inflation-adjusted dollars)	Num
mean_cash_public_assistance	Mean cash public assistance	Num
mean_family_income	Mean family income	Num
mean_retirement_income	Mean retirement income	Num
percent_with_retirement_income	% Income and Benefits (IN 2018 INFLATION- ADJUSTED DOLLARS) Households with retirement income	Num
mean_ss	Mean Social Security income	Num
percent_income_with_ss	% Income and Benefits (IN 2018 INFLATION- ADJUSTED DOLLARS) Households with Social Security	Num
mean_ssi	Mean Supplemental Security Income	Num
percent_with_ssi	% Income and Benefits (IN 2018 INFLATION- ADJUSTED DOLLARS) Households with Supplemental Security Income	Num
median_earnings_female_workers	Median earnings female full-time, year-round workers	Num
median_earnings_male_workers	Median earnings for male full-time, year-round workers	Num
median_earnings_workers	Median earnings workers	Num
median_family_income	Median family income	Num
percent_cash_public_assistance	% Households with cash public assistance income. Public assistance includes cash and non- cash benefits (e.g. TANF, SNAP) to low-income families or individuals, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_foodstamp_snap	% Households with Food Stamp/SNAP benefits in the past 12 months, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_less_than_10000	% Households Less than \$10,000, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_10000_to_14999	% Households with \$10,000 to \$14,999, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num

	(11126211303)	
Variable Name	Description	Format
percent_15000_to_24999	% Households with \$15,000 to \$24,999, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_25000_to_34999	% Households with \$25,000 to \$34,999, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_35000_to_49999	% Households with \$35,000 to \$49,999, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_50000_to_74999	% Households with \$50,000 to \$74,999, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_75000_to_99999	% Households with \$75,000 to \$99,999, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_100000_to_149999	% Households with \$100,000 to \$149,999, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_150000_to_199999	% Households with \$150,000 to \$199,999, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
percent_200000_or_more	% Households with \$200,000 or more, Income and Benefits (IN 2018 INFLATION-ADJUSTED DOLLARS)	Num
Percent_Below_Poverty	% Families And People Whose Income In The Past 12 Months Is Below The Poverty Level	Num
below_poverty_18plus	% Families And People Whose Income In The Past 12 Months Is Below The Poverty Level_18 Years And Over	Num
below_poverty_18to64	% Families And People Whose Income In The Past 12 Months Is Below The Poverty Level_18 To 64 Years	Num
below_poverty_65plus	% Families And People Whose Income In The Past 12 Months Is Below The Poverty Level_All People_65 Years And Over	Num
below_poverty_all_people	% Families And People Whose Income In The Past 12 Months Is Below The Poverty Level_All People	Num
below_poverty_all_under18	% Families And People Whose Income In The Past 12 Months Is Below The Poverty Level_All People Under 18 Years	Num
below_poverty_children_5to17	% Families And People Whose Income In The Past 12 Months Is Below The Poverty Level_Related Children Of The Householder 5 To 17 Years	Num

Variable Name	Description	Format	
below_poverty_children_under5	% Families And People Whose Income In The Past	Num	
	12 Months Is Below The		
	Poverty Level_Related Children Of The		
	Householder Under 5 Years		
below_poverty_children_under_18	% Families And People Whose Income In The Past	Num	
	12 Months Is Below The		
	Poverty Level_Related Children Of The		
	Householder Under 18 Years		
below_poverty_female_householde	% Families And People Whose Income In The Past	Num	
r	12 Months Is Below The		
	Poverty Level_Female Householder, No Husband		
halan and family the 191	Present	N1	
below_poverty_female_withchildre	% Families And People Whose Income In The Past 12 Months Is Below The	Num	
	Poverty Level_Female Householder, No		
	Husband Present_With Related Children Of The		
	Householder Under 18 Years		
below_poverty_married_couple_chi	% Families And People Whose Income In The Past	Num	
below_poverty_married_coupie_em	12 Months Is Below The	Nulli	
	Poverty Level_Married Couple Families_With Relat		
	ed Children Of The Householder Under 18 Years		
below_poverty_married_couples	% Families And People Whose Income In The Past	Num	
	12 Months Is Below The		
	Poverty Level_Married Couple Families		
percent_workedathome	% worked at home, workers 16 years	Num	
percent_carpooled_towork	% carpooled to work in car, truck, or van, workers	Num	
	16 years		
percent_drovealone_towork	% drove alone to work in car, truck, or van, workers 16 years	Num	
percent_publictransp_towork	% using public transportation (excluding taxicab)	Num	
percent_publicitalisp_towork	for work, workers 16 years	Num	
percent_other_means_towork	% using other means of transportation to work,	Num	
<u>-</u> <u>-</u> <u>-</u>	workers 16 years		
percent_walked_towork	% walked to work, workers 16 years	Num	
Mean_travel_time_work	Mean travel time to work (minutes) for workers 16	Num	
	years and over who did not work at home		
health_insurance	% with health insurance coverage , civilian	Num	
_	noninstitutionalized population		
health_insurance_19to64	% With health insurance coverage , civilian	Num	
	noninstitutionalized population 19 to		
	64 years_In labor force_Employed		
no_health_insurance	% No health insurance coverage , civilian	Num	
	noninstitutionalized population		

Variable Name	Description	Format
no_health_insurance_19to64	% No health insurance coverage , civilian noninstitutionalized population 19 to 64 years_In labor force_Employed	Num
not_in_labor_force_insurance	% With health insurance coverage , civilian noninstitutionalized population 19 to 64 years_Not in labor force	Num
not_in_labor_force_privateins	% With private health insurance , civilian noninstitutionalized population 19 to 64 years_Not in labor force	Num
not_in_labor_force_publicins	% With public health coverage , civilian noninstitutionalized population 19 to 64 years_Not in labor force	Num
not_in_laborforce_noinsurance	% No health insurance coverage, civilian noninstitutionalized population 19 to 64 years_Not in labor force_	Num
private_health_insurance	% With private health insurance, civilian noninstitutionalized population	Num
private_healthinsurance_19to64	% With private health insurance, civilian noninstitutionalized population 19 to 64 years employed, in labor force	Num
public_insurance	% With public health coverage, civilian noninstitutionalized population	Num
public_insurance_19to64	% With public coverage, civilian noninstitutionalized population 19 to 64 years_In labor force_Employed_	Num
under19_no_health_insurance	% No health insurance coverage, civilian noninstitutionalized population under 19 years	Num
unemployed_no_insurance	% No health insurance coverage, civilian noninstitutionalized population 19 to 64 years_In labor force_Unemployed_	Num
unemployed_private_insurance	% With private health insurance , civilian noninstitutionalized population 19 to 64 years_In labor force_Unemployed	Num
unemployed_with_insurance	% With health insurance coverage , civilian noninstitutionalized population 19 to 64 years_in labor force_Unemployed	Num
unemployed_with_public_insuranc e	% With public coverage , civilian noninstitutionalized population 19 to 64 years_In labor force_Unemployed	Num
industry_agriculture_fishing	% Agriculture, forestry, fishing and hunting, and mining, civilian employed population 16 years and over (industry)	Num

Variable Name	Description	Format
industry_arts_entertainment	% Arts, entertainment, and recreation, and accommodation and food services, civilian employed population 16 years and over (industry)	Num
industry_construction	% Construction, civilian employed population 16 years and over (industry)	Num
industry_educ_health_social	% Educational services, and health care and social assistance, civilian employed population 16 years and over (industry)	Num
industry_finance_and_insurance	% Finance and insurance, and real estate and rental and leasing, civilian employed population 16 years and over (industry)	Num
industry_information	% Information, civilian employed population 16 years and over (industry)	Num
industry_manufacturing	% Manufacturing, civilian employed population 16 years and over (industry)	Num
industry_other	% Other services, except public administration, civilian employed population 16 years and over (industry)	Num
industry_professional	% Professional, scientific, and management, and administrative and waste management services, civilian employed population 16 years and over (industry)	Num
industry_publicadministration	% Public administration, civilian employed population 16 years and over (industry)	Num
industry_retailtrade	% Retail trade, civilian employed population 16 years and over (industry)	Num
industry_transportation	% Transportation and warehousing, and utilities, civilian employed population 16 years and over (industry)	Num
industry_wholesaletrade	% Wholesale trade, civilian employed population 16 years and over (industry)	Num
percent_16plus_unemployed	% unemployed, 16 years and over in civilian labor force	Num
percent_civilian_labor_force	% in civilian labor force , population 16 years and over	Num
percent_employed	% employed, population 16 years and over in civilian labor force	Num
percent_females_inlaborforce	% in labor force, females 16 years and over	Num
percent_inlabor_force	% in labor force, population 16 years and over	Num
percent_not_inlaborforce	% not in labor force, population 16 years and over	Num
percent_unemployed	% unemployed, population 16 years and over in civilian labor force	Num

Variable Name	Description	Format
percent_private_wage_and_salary	% private wage and salary workers, civilian labor force, 16 years and over (class of worker)	Num
percent_unpaid_family_workers	% self-employed in own not incorporated business workers and unpaid family workers, civilian labor force, 16 years and over (class of worker)	Num
percent_government_workers	% government workers, civilian labor force, 16 years and over (class of worker)	Num
percent_self_employed	% self-employed in own incorporated business workers, civilian labor force, 16 years and over (class of worker)	Num
percent_occupation_construction	% Natural resources, construction, and maintenance, , civilian employed population 16 years and over	Num
percent_occupation_management	% Management, business, science, and arts occupations, civilian employed population 16 years and over	Num
percent_occupation_production_tr	% Production, transportation, and material moving occupations, civilian employed population 16 years and over	Num
percent_occupation_sales	% Sales and office occupations, civilian employed population 16 years and over	Num
percent_occupation_service	% Service occupations, civilian employed population 16 years and over	Num

#### **Death Records – (PHDDeath.Death)**

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_DEATH	CHIA Match level	<ul> <li>1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.</li> <li>2=This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches.</li> <li>Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for completeness.</li> </ul>	Num
AGE_DEATH	Age at time of death	1-199 in years 2XX = months 1-11 (i.e. 201 = 1 month) 3XX = days 1-27 (i.e. 301 = 1 day) 4xx=hours 1-23 (i.e. 401 = 1 hour) 5xx = minutes (i.e. 501=1 minute) 999=Unknown	Num
AGE_DEATH_UNITS	Units for age variable	1.00=Minutes 2.00=Hours 3.00=Days 4.00=Weeks 5.00=Months 6.00=Years 9.00=Unknown Age	Num with 2 decimals
AUTOPSY	Was an autopsy performed?	0=No 1=Yes 9=Unknown	Num
CENSUS_IND_DEATH	Bureau of census industry code	4 digit bureau of census industry code	Num
CENSUS_OCC_DEATH	Bureau of census occupation code	4 digit bureau of census occupation code	Num
CONTRIB_CAUSE1	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char

Variable Name	Variable Description	Meta Data	Format
CONTRIB_CAUSE10	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE11	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE12	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE13	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE14	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE15	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE2	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE3	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char

Variable Name	Variable Description	Meta Data	Format
CONTRIB_CAUSE4	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE5	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE6	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE7	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE8	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
CONTRIB_CAUSE9	ICD codes for underlying and other mentionable causes of death	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
DOD	Date of death	<b>Date Proxy</b> – count of days between death date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
EDU_DEATH	Education level	1 = HS or less 2 = 13+ years 9 = Unknown 10=Special Education	Num
FOREIGN_BORN_DEATH	Was decedent US or foreign born?	0=US born 1=Foreign born 9=Unknown	Num

Variable Name	Variable Description	Meta Data	Format
HOMELESS_DEATH	N/A	0=No indication of homeless 1=Homeless based on address match only 2=Homeless based on OCME intake only 3=Homeless based on both address and OCME intake	Num
INC_CODE_DEATH	Text for city/town where death occurred	1-351 = valid MA city/town 888=Known, but not MA 999 = missing/unknown/invalid	Num
MANNER	Manner of death	<ul> <li>1 = Natural</li> <li>2 = Accident</li> <li>3 = Homicide</li> <li>4 = Suicide</li> <li>5 = Could not be Determined</li> <li>6 = Pending Investigation</li> <li>7 = Other</li> <li>8 = Therapeutic Complication</li> <li>9=Unknown</li> </ul>	Num
MARITAL_DEATH	Marital status at time of death	<ol> <li>1 = Single, Never married</li> <li>2 = Married or separated</li> <li>3 = Widowed</li> <li>4 = Divorced</li> <li>9 = Missing/Unknown</li> </ol>	Num
MONTH_DEATH	Month of death	Months, 1-12	Num
MONTH_SEQ	When in the month did the death occur?	1= Death occur beginning of month (days 1,2,3,4) 2= Death occur middle of month (days 13,14,15,16) 3= Death occur end of month (days 28,29,30,31) 4= Everything else	Num
NAICS_DEATH	North American Industry Classification System	6 digit North American Industry code	Char
NAICS_YEAR_DEATH	Coding year for NAICS	4 digit year	Num
OCME_8TERMS	Medical Examiner Narrative text search for 8 terms: fentanyl, opioid, opiate, overdose, od, heroin, syringe, and needle	0=No 1=Yes Blanks= Not in OCME	Num
OCME_PREGNANT	Medical Examiner Past Medical History text search for: Pregnant, Pregnancy	0=No 1=Yes Blanks= Not in OCME	Num

	-	-	
Variable Name	Variable Description	Meta Data	Format
OCME_SA	Medical Examiner Past Medical History text search for: Opioid, Heroin, opiate, probable od, od, overdose, possible O/D, substance abuse, polysubstance abuse, drug use	0=No 1=Yes Blanks= Not in OCME	Num
OCME_TOX	Medical Examiner toxicology collected	0=No 1=Yes Blanks= Not in OCME	Num
OPIOID_DEATH	Opioid death based on ICD10 codes or literal search	0=No 1=Yes	Num
PLACE_DEATH	Type of place where death occurred	1=Hospital 2=Residence 3=Other 9=Unknown	Num
PREGNANT_DEATH	Pregnancy checkbox	1=Not pregnant in last year 2= Pregnant at death 3=No, But within 42 days 4=No, But Within 43 days-1 yr 7=Not on certificate (for out-of-state records only) 8=NA 9=Unknown Blank= MF Record	Num
PREGNANCY	Combination of literal search and pregnancy checkbox- literal search for terms: Peripartum, Pregnancy, Pregnant, Ectopic, Chorioamnionitis, Amniotic, Intrauterine fetal demise, peripartum cardiomyopathy, uterine rupture, placental, postpartum, and eclampsia	1= Yes, checkbox alone 2= Yes, literal search alone 3= Both 4= No 5= Unknown Blank= MF Record	Num
Pregnancy_Associated_de ath	Is this death pregnancy- associated? In Maternal Mortality Review Information Application (MMRIA)system	1=Yes 0=No Blanks= Not in system yet	Num
Pregnancy_Related_Deat h	Was death found to be pregnancy related after review by the Maternal Mortality and Morbidity Review Committee	1=Yes 0=No 2=Possibly 3=Undetermined/injury 4=Unknown Blanks= not in MMRIA	Num

Variable Name	Variable Description	Meta Data	Format
RACE_DEATH	Race/ethnicity of the decedent	<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = unknown</li> </ol>	Num
RES_CODE_DEATH	Code for city/town of residence at time of death	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num
RES_ZIP_DEATH	Resident zip code at time of death	5 digit zip 99999=Unknown	Char
SEX_DEATH	Gender	1 = male 2 = female 9 = unknown	Num
SOC_DEATH	Standard Occupation code	XX-XXXX	Char
UNDERLYING_CAUSE_D EATH	ICD codes for underlying cause of death (coded to ICD-10)	ICD 10 code. Characters 1-3 = Indicate the category of the diagnosis Characters 4-6 = Indicate etiology, anatomic site, severity, or other clinical detail	Char
VETERAN_DEATH	Veteran's Status	0=No 1=Yes 9=Unknown	Num
WEEKEND_DEATH	Did the death occur on a weekend?	0=No 1=Yes 9=Missing day of death	Num
YEAR_DEATH	Year of death	Years, YYYY format (starts 2011)	Num

\*

The following International Classification of Disease (ICD-10) codes for mortality were selected from the underlying cause of death field to identify poisonings/overdoses: X40-X44, X60-X64, X85, and Y10-Y14. All multiple cause of death fields were then used to identify an opioid-related overdose death: T40.0, T40.1, T40.2, T40.3, T40.4, and T40.6.

For those records with no ICD coding yet – then literal search for any of the following 45 opioid-related terms on the cause of death text fields on death certificates:

- o OPIOID
- o ACTIQ
- o DOLOPHINE
- o MPHINE
- o DEMEROL
- o LEVPHANOL
- o LTAB
- o CODEINE

- o PENTAZOCINE
- o HEROIN
- o VICODIN
- o OXYCODONE
- o ENDOCET
- o DARVON
- o SUBLIMAZE
- o ULTRAM
- o PERCOCET
- o HYDROCODONE
- o OXYMPHONE
- o HYDROMPHONE
- o OPIUM
- o METHADONE
- o OPIATE
- o FENTANYL
- o **PROPOXYPHENE**
- o ANPP
- o 47700
- o **PIPERIDINE**
- o **BUPRENPHINE**
- o SUBOXONE
- o SUBUTEX
- o TRAMADOL
- o FENTANIL
- o DARVOCET
- o DEXTRPHAN
- o DILAUDID
- o EDDP
- o MEPERIDINE
- o OXYCONTIN
- o TAPENTADOL
- o HERION
- o OPIOD
- o OPOID
- o W-18
- o W18

### PHDDHCD.DHCD

#### Family Homelessness - Department of Housing and Community Development (PHDDHCD.DHCD)

Variable Name	Variable Description	Meta Data	Format
ID	Project Specific ID	9 character alphanumeric ID	Char
Match_level_DHCD	CHIA Match level	1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.	Num
		2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches. Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for completeness.	
CHRON_HEALTH_DHCD	Chronic health condition.	0=No 1=Yes 9=Unknown	Num
DESTINATION_DHCD	Identifies where a client will stay just after exiting a project	See code list below	Num
DEV_DISABILITY_DHCD	Developmental disability	0=No 1=Yes 9=Unknown	Num
DISABILITY_DHCD	Indicate whether or not clients have a disabling condition.	0=No 1=Yes 9=Unknown	Num
EXIT_AGE_DHCD	Age in years at exit from DHCD	Integer age in years	Num
EXIT_DATE_DHCD	The project exit date indicates a client has left the project. For residential projects this is the date of move out.	Count of days between project exit date and a random date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
EXIT_MONTH_DHCD	Month of exit from project	Months, 1-12	Num
EXIT_YEAR_DHCD	Year of exit from project	Years, YYYY format	Num
HOH_RELATION_DHCD	Identifies one person to whom all other household members can be linked to at the time they enter a project	1=Self 2=Head of household's child 3=Head of household's spouse/partner 4=Head of household's other relation member 5=Other; non-relation member	Num
HOMELESS_COUNT_LA ST3YRS	Number of times the client has been on the streets, in	1=One time 2=Two times	Num

### PHDDHCD.DHCD

Variable Name	Variable Description	Meta Data	Format
	ES, or SH in the past three years including today. For persons entering HMIS Project Type: Street Outreach, Emergency Shelter, & Safe Haven	3=Three times 4=Four or more times 8=Client doesn't know 9=Client refused 99=Data not collected	
HOMELESS_MONTHS_L AST3YRS	Total number of months homeless on the street, in ES, or SH in the past three years. For persons entering HMIS Project Type: Street Outreach, Emergency Shelter, & Safe Haven	1=One month (this time is first month) 2-12 13=More than 12 months 88=Client doesn't know 98=Client refused 99=Data not collected	Num
HOMELESS_START_DAT E	The beginning of the continuous period of homelessness on the streets, in emergency shelters, in safe havens, or moving back and forth between those places. For persons entering HMIS Project Type: Street Outreach, Emergency Shelter, & Safe Haven	Count of days between first homeless date and a random date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b> Please note: this data element was created by HUD in 2017. For clients entering prior to 2017 data are sporadic depending on if the record was updated after the data element was created.	Num
HOMELESS_MONTH	The month of the beginning of the continuous period of homelessness on the streets, in emergency shelters, in safe havens, or moving back and forth between those places.	Months, 1-12. Please note: this data element was created by HUD in 2017. For clients entering prior to 2017 data are sporadic depending on if the record was updated after the data element was created.	Num
HOMELESS_YEAR	The year of the beginning of the continuous period of homelessness on the streets, in emergency shelters, in safe havens, or moving back and forth between those places.	Years, YYYY format Please note: this data element was created by HUD in 2017. For clients entering prior to 2017 data are sporadic depending on if the record was updated after the data element was created.	Num
LENGTH_PRIOR_DHCD	Length of time the client was residing in their previous place of stay. For persons entering HMIS Project Type: Street Outreach, Emergency Shelter, & Safe Haven	1=One night or less 2=Two to six nights 3=One week or more, but less than one month 4=One month or more, but less than 90 days 5=90 days or more, but less than one year 6=One year or longer 8=Client doesn't know 9=Client refused 99=Data not collected	Num

PHDDHCD.DHCD

Variable Name	Variable Description	Meta Data	Format
		Please note: this data element was created by HUD in 2017. For clients entering prior to 2017 data are sporadic depending on if the record was updated after the data element was created.	
PHYS_DISABILITY_DHC D	Physical disability	0=No 1=Yes 9=Unknown	Num
RACE_DHCD	Client's race/ethnicity	<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown</li> </ol>	Num
RES_TYPE_DHCD	Type of Residence that most closely matches where the client was living prior to project start. For persons entering HMIS Project Type: Street Outreach, Emergency Shelter, & Safe Haven	See code list below Please note: this data element was created by HUD in 2017. For clients entering prior to 2017 data are sporadic depending on if the record was updated after the data element was created.	Num
SEX_DHCD	Client's sex	1 = Male 2 = Female 9 = Unknown or transgender	Num
START_AGE_DHCD	Age in years at entry to DHCD	Integer age in years	Num
START_DATE_DHCD	The project start date indicates a client is now being assisted by the project	Count of days between project start date and a random date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
START_MONTH_DHCD	The project start month	Months, 1-12	Num
START_YEAR_DHCD	The project start year	Years, YYYY format	Num
VETERAN_DHCD	Indicates whether clients are veterans of the United States armed forces	0=No 1=Yes 9=Unknown	Num

### PHDDHCD.DHCD

		Res_Type_DHCD	Destination_DHCD
		(X means it is a	(X means it is a valid
		valid option for	option for this
value	Meaning	this variable)	variable)
	Emergency shelter, including hotel or motel paid for with emergency		
	shelter voucher, or RHY-funded Host Home shelter	Х	Х
	Transitional housing for homeless person (including homeless youth)	Х	Х
	Permanent housing (other than RRH) for formerly homeless persons	Х	Х
	Psychiatric hospital or other psychiatric facility	Х	Х
	Substance abuse treatment facility or detox center	Х	Х
	Hospital or other residential non-psychiatric medical facility	Х	Х
7	Jail, prison, or juvenile detention facility	Х	Х
8	Client doesn't know	Х	Х
9	Client refused	Х	Х
10	Rental by client, no ongoing housing subsidy	Х	Х
11	Owned by client, no ongoing housing subsidy	Х	Х
	Staying or living with family, temporary tenure (e.g. room,		
12	apartment, or house)		х
	Staying or living with friends, temporary tenure (e.g. room,		
13	apartment, or house)		х
14	Hotel or motel paid for without emergency shelter voucher	Х	Х
15	Foster care home or foster care group home	Х	Х
	Place not meant for habitation (e.g., a vehicle, an abandoned		
16	building, bus/train/subway station/airport or anywhere outside)	Х	х
	Other		Х
18	Safe Haven	Х	Х
19	Rental by client, with VASH housing subsidy	Х	Х
	Rental by client, with other ongoing housing subsidy	Х	Х
	Owned by client, with ongoing housing subsidy	Х	Х
	Staying or living with family, permanent tenure		Х
	Staying or living with friends, permanent tenure		х
	Deceased		Х
	Long-term care facility or nursing home	Х	Х
	Moved from one HOPWA funded project to HOPWA PH		X
	Moved from one HOPWA funded project to HOPWA TH		Х
	Rental by client, with GPD TIP housing subsidy	Х	X
	Residential project or halfway house with no homeless criteria	X	X
	No exit interview completed	- •	X
	Rental by client, with RRH or equivalent subsidy	Х	X
	Host Home (non-crisis)	X	X
	Rental by client, with HCV voucher (tenant or project based)	X	X
	Rental by client in a public housing unit	X	X
	Staying or living in a family member's room, apartment, or house	X	~
	Staying or living in a friend's room, apartment, or house	X	
	Data not collected	X	x

#### Department of Industrial Accidents - Worker's Compensation (PHDDIA.DIA)

Variable Name	Variable Description	Meta Data	Format
ID	Project Specific ID	9-character alphanumeric ID	Char
Match_level_DIA	CHIA Match level	1= These are CHIA members that received a high score against the DPH input record. This group includes those that matched all elements of the DPH input record and those that had only one element mismatch. The group 1 individual match determination has been optimized based upon the input elements and their overall weight. 2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches. Candidates in this group could match on as little as SSN or date of birth and first and last name. These candidates are included for completeness.	Num
ANSI_BODY1	ANSI Body part affected (first listed)	<u>See code list</u> 999=missing	Num
ANSI_BODY2	ANSI Body part affected (2nd listed)		Num
ANSI_BODY3	ANSI Body part affected (3rd listed)	<u>See code list</u> 999=missing	Num
ANSI_NATURE1	1st nature of injury on the first report of injury	<u>See code list</u> 999=missing	Num
ANSI_NATURE2	2nd nature of injury on the first report of injury	<u>See code list</u> 999=missing	Num
ANSI_NATURE3	3rd nature of injury on the first report of injury		Num
BIRTH_YEAR_DIA	Injured worker's birth		Num
BIRTH_MONTH_DIA	Worker's birth month	99=missing/unknown	Num
BLS_OCC_DIA	BLS Occupation code	XX-XXXX <u>See BLS webpage</u> 99-9999 = missing/unknown	Char
CENSUS_OCC_DIA		<u>See webpage</u> 9999=missing	Num
COMPANY_ZIP	Zip code of employer	5 digit zip code 99999=missing/unknown	Char
DOD_DIA	Worker DOD	Date Proxy – count of days between death date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num

	FIIDDIA		
DOD_MONTH_DIA	Month of death	Months, 1-12 99=missing/unknown	Num
DOD_YEAR_DIA	Year of death	YYYY	Num
		9999=missing/unknown	Num
DOI DIA	Date Worker injured	Date Proxy – count of days between	Num
201_2#		injury date and randomly chosen	
		date in the past	
		NOTE: The larger the date	
		proxy, the more recently the event	
		occurred	
doi month dia	Month of injury	Months, 1-12	Num
	, ,	99=missing/unknown	
DOI YEAR DIA	Year of injury	YYYY	Num
		9999=missing/unknown	
INC_ZIP_DIA	Zip where the accident or	5 digit zip code	Char
	injury occurred	99999=missing/unknown	
INSURANCE_DIA	Insurer's/Payer's name	text field	Char
NAICS_DIA	NAICS Industry Code	6-digit code	Num
	submitted by data	See code list	
	reporters (e.g. insurers) through EDI	999999=missing/unknown	
RES CODE DIA	City/town of worker's	1-351	Num
	residence	999=missing/unknown	
RETURN_TO_OCC	Has employee returned to	0=No	Num
	regular occupation?	1=Yes	
		9=missing/unknown	
RETURN_TO_WORK		0=No	Num
	work?	1=Yes	
		9=missing/unknown	
SELF_INSURER	Self-insured employer?	0=No	Num
		1=Yes	
		9=missing/unknown	
SEX_DIA	Worker's sex	1 = male	Num
		2 = female	
		9 = missing/unknown	<u> </u>
WEEKLY_WAGE	Weekly average wage	XXXX.XX	Num

ANSI_BODY1, ANSI_BODY2, ANSI_BODY3	
100=Head, UNS*	320=Wrist(s)
110=Brain	330=Hand(s), Not Wrists or Fingers
120=Ear(s), UNS*	340=Finger(s)
121=Ear(s), External	398=Upper Extremities, Multiple
124=Ear(s), Internal	400=Trunk, UNS*
130=Eye(s), UNS*	410=Abdomen, Internal Organs, Inguinal
	Hernia
140=Face, UNS*	420=Back
141=Jaw, Chin	430=Chest, Ribs, Breastbone, Internal
	Organs
144=Mouth and Throat (vocal chords, larynx)	440=Hip, Pelvis, Organs and Buttocks
146=Nose	450=Shoulder(s)
148=Face, Multiple Parts	498=Trunk, Multiple
149=Face, NEC**	500=Lower Extremities
150=Scalp	510=Leg(s), UNS*
160=Skull	513=Knee(s)
198=Head Multiple	515=Lower Leg(s)
200=Neck & Cervical Vertebrae	518=Leg(s), Multiple
300=Upper Extremities, NEC**	519=Leg(s), NEC**
310=Arm(s), UNS*	520=Ankle(s)
311=Upper Arm	530=Foot or Feet, Not Ankle
313=Elbow(s)	540=Toe(s)
315=Forearm(s)	598=Lower Extremities, Multiple
318=Arm(s), Multiple	700=MULTIPLE PARTS. Applies when more
	than one major body part has been affected
	such as an arm and a leg
319=Arm(s), NEC**	998=NON-CLASSIFIABLE - Insufficient
	information to identify part of body effected.
	Includes damage to prosthetic devices
	999=missing/unknown

ANSI NATURE1, ANSI NATURE2, ANSI NATU	RE3
100=Amputation or Erucloation	283=Asbestosis
110=Asphyxia or Strangulation Etc.	284=Byssinosis
120=Burns (Heat)	285=Siderosis
130=Burns (Chemical)	286=Silicosis
140=Concussion	287=Other Pneumoconioses
150=Infective or Parasitic Disease, UNS*	289=Pneumoconiosis and Tuberculosis
151=Amebiasis	290=Radiation Effects, UNS*
152=Anthrax	291=Non-Ionizing Radiation
153=Brucellosis	292=Microwaves
154=Conjunctivitis and Opthalmia	293=Ionizing Radiation - X-Ray
156=Tetanus	294=Ionizing Radiation - Isotopes
157=Tuberculosis	295=Welder's Flash
159=Other Infective or Parasitic Diseases	300=Scratches, Abrasions
160=Contusion, Crushing, Bruise	310=Sprains, Strains
170=Cut, Laceration, Puncture	320=Hemorrhoids
180=Dermatitis, UNS*	330=Hepatitis, Serum and Infective
183=Primary Infections of the Skin	400=Multiple Injuries
184=Other Skin Conditions	500=Effects of Changes in Atmospheric Pressure
185=Dermatitis, Allergenic or Contact	510=Cardiovascular and Other Conditions of the Circulatory System
189=Skin Condition, NEC**	520=Complications Peculiar to Medical Care

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ANSI_NATURE1, ANSI_NATURE2, ANSI_NATURE	3
190=Dislocation	530=Eye, other Diseases of the Eye
200=Electric Shock, Electrocution	540=Mental Disorders
210=Fracture	550=Neoplasm Tumor, UNS*
220=Effects of Exposure to Low Temperature	551=Malignant
230=Hearing Loss or Impairment	552=Benign
240=Effects of Environmental Heat	560=Nervous System, Conditions of - NEC**
250=Hernia, Rupture	561=Diseases of the Central Nervous System
260=Inflammation of Joints, Etc.	562=Diseases of the Nerves and Peripheral Ganglia
265=Carpal Tunnel Syndrome	570=Respiratory Systems, Conditions of
270=Poisoning, Systemic, UNS*	571=Upper Respiratory
271=Due to Toxic Materials other than Lead	572=Asthma, Influenza, Pneumonia
272=Diseases of the Blood and Blood Forming Organs	580=Symptoms and Ill-defined Conditions
273=Upper Respiratory Conditions	900=No Illness/no injury
274=Influenza, Pneumonia, Etc.	950=Damage to Prosthetic Devices
275=Hepatitis, Toxic	990=Occupational Disease, NEC**
276=Other Diseases of the Gastro-Intestinal	991=Heart Condition, excludes Heart
Tract	Attack
278=Effects of Lead	995=No Other Injury, NEC**
279=Other Toxic Effects of One System Only	998=Non-classifiable
280=Pneumoconiosis	999=missing/unknown
281=Aluminosis	
282=Anthracosis	

NAICS Sector Codes
11 Agriculture, Forestry, Fishing and Hunting
21 Mining, Quarrying, and Oil and Gas Extraction
22 Utilities
23 Construction
31-33 Manufacturing
42 Wholesale Trade
44-45 Retail Trade
48-49 Transportation and Warehousing
51 Information
52 Finance and Insurance
53 Real Estate and Rental and Leasing
54 Professional, Scientific, and Technical Services
55 Management of Companies and Enterprises
56 Administrative, Support, Waste Management, Remediation
Svcs.
61 Educational Services
62 Health Care and Social Assistance
71 Arts, Entertainment, and Recreation
72 Accommodation and Food Services
81 Other Services (except Public Administration)
92 Public Administration

NAICS Subsector Codes111 Crop Production112 Animal Production and Aquaculture113 Forestry and Logging114 Fishing, Hunting and Trapping115 Support Activities for Agriculture and Forestry211 Oil and Gas Extraction212 Mining (except Oil and Gas)213 Support Activities for Mining221 Utilities236 Construction of Buildings237 Heavy and Civil Engineering Construction238 Specialty Trade Contractors311 Food Manufacturing312 Beverage and Tobacco Product Manufacturing313 Textile Mills314 Textile Product Mills315 Apparel Manufacturing316 Leather and Allied Product Manufacturing322 Paper Manufacturing322 Paper Manufacturing323 Paper Manufacturing324 Deixten de Generat Activities	
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323 Printing and Related Support Activities	323 Printing and Related Support Activities

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523 Securities, Commodity Contracts, and Other Financial Investments and Related Activities 524 Insurance Carriers and Related Activities	521 Monetary Authorities-Central Bank
524 Insurance Carriers and Related Activities	522 Credit Intermediation and Related Activities
	523 Securities, Commodity Contracts, and Other Financial Investments and Related Activities
525 Funds, Trusts, and Other Financial Vehicles	524 Insurance Carriers and Related Activities
	525 Funds, Trusts, and Other Financial Vehicles

#### PHDDIA.DIA

NAICS Subsector Codes
531 Real Estate
532 Rental and Leasing Services
533 Lessors of Nonfinancial Intangible Assets (except Copyrighted Works)
541 Professional, Scientific, and Technical Services
551 Management of Companies and Enterprises
561 Administrative and Support Services
562 Waste Management and Remediation Services
611 Educational Services
621 Ambulatory Health Care Services
622 Hospitals
623 Nursing and Residential Care Facilities
624 Social Assistance
711 Performing Arts, Spectator Sports, and Related Industries
712 Museums, Historical Sites, and Similar Institutions
713 Amusement, Gambling, and Recreation Industries
721 Accommodation
722 Food Services and Drinking Places
811 Repair and Maintenance
812 Personal and Laundry Services
813 Religious, Grantmaking, Civic, Professional, and Similar Organizations
814 Private Households
921 Executive, Legislative, and Other General Government Support
922 Justice, Public Order, and Safety Activities
923 Administration of Human Resource Programs
924 Administration of Environmental Quality Programs
925 Administration of Housing Programs, Urban Planning, and Community Development
926 Administration of Economic Programs
927 Space Research and Technology
928 National Security and International Affairs

#### **Department of Corrections (PHDDOC.DOC)**

Variable Name	Variable Description	Meta Data	Format
ID	Project Specific ID	9 character alphanumeric ID	Char
Match_level_DOC	CHIA Match level	<ul> <li>1= These are CHIA members that received a high score against the DPH input record. This group includes those that matched all elements of the DPH input record and those that had only one element mismatch. The group 1 individual match determination has been optimized based upon the input elements and their overall weight.</li> <li>2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches.</li> <li>Candidates in this group could match on as little as SSN or date of birth and zip code. These candidates are included for completeness</li> </ul>	Num
ADMISSION_AGE_DOC	Age at admission	Age in years	Num
ADMISSION_MONTH_DOC	Admission month	Months, 1-12	Num
ADMISSION_YEAR_DOC	Admission year	Years, YYYY format	Num
ADMIT_DATE_DOC	Admission date for most recent release	Count of years between admission date and a random date in the future	Num
CUSTODY_DOC	Custody includes all inmates who are incarcerated in a MA DOC facility. CFI stands for "county/federal/interstate" and includes inmates housed in correctional facilities outside of the MA DOC (i.e. MA HOCs, other state's correctional facilities, and federal bureau of prisons	1= Custody 2= CFI (County, Federal, Interstate)	Num
GOV_OFFENSE_DOC	Reported offence of a criminally sentenced inmate that carries the longest max sentence. A criminally sentenced inmate as one governing offense.	1=Property 2=Drug 3=Person 4=Sex 5=Other	Num
INMATE_TYPE_DOC	The status of an inmate admitted to prison	1=Pretrial 2=Criminal 3=Civil	Num
INSITUTION_DOC		See code list	Num

Variable Name	Variable Description	Meta Data	Format
MATH_LEVEL_DOC	Highest grade equivalent math level	1= Less than 6th grade 2=6th through less than 9th grade 3=9th grade and above	Num
PRERELEASE_MATRI	Participated in Medication Assisted Treatment Reentry Initiative (MATRI) during this incarceration	0=No 1=Yes	Num
RACE_DOC	Self-reported. Inmates who report a Hispanic ethnicity are reported as Hispanic	<ol> <li>1 = White Non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown</li> </ol>	Num
READING_LEVEL_DOC	Highest grade equivalent reading level	1= Less than 6th grade 2=6th through less than 9th grade 3=9th grade and above	Num
RELEASE_AGE_DOC	Age at release	Age in years	Num
RELEASE_CODE_DOC	Release code	See code list	Num
RELEASE_DATE_DOC	Release date	Count of days between release date and a random date in the future	Num
RELEASE_MONTH_DOC	Release month	Months, 1-12	Num
RELEASE_TO_COMMUNI TY	Indicator that release was to community	0=No 1=Yes	N/A
RELEASE_YEAR_DOC	Release year	Years, YYYY format	Num
RELEASE_ZIP_DOC	Release zip code - self- reported	5 digit zip code 99999=Unknown	Char
SECTION35_DOC	Was commitment the result of Section 35?	0=No 1=Yes	Num
SECURITY_LEVEL	Security level designation of the releasing facility	<ul> <li>1=Pre-Release</li> <li>2=Minimum</li> <li>3=Medium</li> <li>4=Maximum</li> <li>5=ELMO (Massachusetts Probation</li> <li>Service's Electronic Monitoring Program)</li> </ul>	Num
SEX_DOC	Gender	1=Male 2=Female	Num
SMI_DOC	Serious mental illness?	0=No 1=Yes	Num
VIOLENT_CRIME	Reported offence of a criminally sentenced inmate that carries the longest max sentence. A criminally sentenced inmate as one governing offense.	0=No (non-violent) 1=Yes (violent)	Num

#### Code Lists

Inst	Institution Codes	
1	Baystate Correctional Center	
2	Boston Pre-Release Center	
3	Bridgewater State Hospital	
4	Brooke House	
5	CFI County/Fed/Interstate (DOC)	
6	Lemuel Shattuck Hospital Correctional Center	
7	MA Alcohol & Subst Abuse Correctional Center	
8	MA Treatment Center	
9	MASAC at Plymouth	
10	MCI Cedar Junction	
11	MCI Concord	
12	MCI Framingham	
13	MCI Norfolk	
14	MCI Plymouth	
15	MCI Shirley	
16	MCI Gardner	
17	Northeastern Correctional Center	
18	Old Colony Correctional Center	
19	Pondville Correctional Center	
20	South Middlesex Correctional Center	
21	Souza-Baranowski Correctional Center	
22	Spectrum Women Children Prg	

RELEASE_CODE_D OC	RELEASE DESCRIPTION	RELEASE_TO_ COMMUNITY
131	Transfer to House of Correction	
132	Transfer to Out of State	
133	NON-DOC Inmate to HOC/FED/PD/OTHER STATE	
135	Transfer to Federal Authority	
136	*Transfer to Other Authority	
137	HABEAS to Court - Sentenced	
138	HABEAS to Court - Did not Return	
139	HABEAS to Court - Ret'd with new Case #	
141	HABEAS to Court - Rec'd Forthwith Sent.	
144	Escape	
145	Death	
146	*HABED to Court - Escaped	
150	Court Release - Sent REVOKE/STAY/VACATED	YES
151	*Court Release - Sent VACATED	
152	*Court Release - Await Trial	
153	*Court Release - BAILED	
154	*Court Release - Sent STAYED	
155	*Released to PV Warrant	
156	*Released on Pers Recognizance	
157	Crime Lab Court Release/JP	YES
158	*Released from Out of State Detainer	
159	Release from Out of STATE/FED Detainer	
160	*Unconditional Discharge	
161	*Experation of Sentence to Street	
162	*Voluntary Commitment Discharge	
163	*Alcohal Commitment Discharge	
164	*Release by Federal Authority	
165	*Release by Out of STATE/FED Authority	
166	Pardon/Commutation	
167	*Voluntary Release Own Request	
168	*Expiration - to DOC/HOC Sentence	
169	*Expiration to Warrant	
170	*Paroled - Need to research	
171	Bailed/Rel on Personal Recognizance	
172	Bailed/Rel on Personal Recog to Warrant	
173	*Bailed to PV Warrant	
174	*Bailed to a Police Department	
175	International Transfer	

RELEASE_CODE_D		RELEASE_TO_
<u>OC</u>	RELEASE_DESCRIPTION	COMMUNITY
178	Release - to Correct Error	
179	Release from MA Parole Detainer	YES
180	Parole to Street	YES
181	Parole to Out of State Sentence	
182	Parole to Federal Authority	
183	Parole to Immigration	
185	Revised Sentence Crime Lab/Hampden	YES
186	Revised Sentence Crime Lab/JP	YES
187	Parole to From & After HOC Sentence	
188	Parole to Warrant	
189	Parole to From & After DOC Sentence	
190	GCD/EXP/REL to Street	YES
191	GCD/EXP/REL to Out of State Sentence	
192	GCD/EXP/REL to Federal Authority	
193	GCD/EXP/REL to Immigration	
196	Crime Lab Court Release/Hampden	YES
197	GCD/EXP/REL to F&A/CC HOC Sentence	
198	GCD/EXP/REL to Warrant	
199	GCD/EXP/REL to From & After/CC at DOC	
223	*Expiration to Civil Commitment	
229	GCD/EXP/REL to Civil Commitment	
230	*GCD to CC at HOC	
234	Parole to Civil Commitment	
235	Release from Weekend Sentence	
239	*Release from Civil Comm. to a Warrant	
240	*Release from Civil Commitment	
242	Transfer to Other Authority	
244	Payment of Fine	YES
245	Payment of Fine to a Warrant	
246	Expiration of Fine	YES
247	Expiration of Fine to a Warrant	
255	Parole to Transitional Treatment Prog	YES
261	Crime Lab Court Release/Western	YES
262	Evidence Room Court Release/Braintree PD	
291	Mandatory Parole as RTS	
292	Medical Parole	
325	Elopement	
437	Video Conference/Other Court Order-Sent	
450	Video Conference/Other Court Order-Rel	

## Department of Mental Health (DMH) Analytic Data Dictionary (PHDDMH.DMH)

#### Department of Mental Health (PHDDMH.DMH)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
MATCH_LEVEL_DMH	CHIA Match level	1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match. 2=This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches. Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for completeness.	Num
		1=Forensic Eval,	
ADMIT_LEGAL_DMH	Admitting Legal Status	2=Forensic Treatment, 3=Civil Blanks=Missing/Unknown	Num
ADMIT_SOURCE_DMH	Referred from	1=A NEW BEGINNING 2=ACUTE MEDICAL FACILITY 3=ACUTE PSYCHIATRIC FACILITY 4=ADMIN D/C RETURN - SNF 5=ADMIN D/C RETURN-MED FACILITY 6=ADULT RESPITE 7=Against Medical Advice 8=AMESBURY 9=ANCHORAGE HOUSE/RIVERSIDE SC 10=ANGEL HOUSE FAMILY RESI SVCS 11=ANNA JACQUES 12=ARBOUR 13=ARBOUR - FULLER 14=ARBOUR - HRI 15=ARBOUR HOSPITAL 16=ASSISTED LIVING 17=ATLANTICARE MEDICAL CENTER 18=ATTELBORO CENTER 19=Attleboro District Court 20=AWA 21=Ayer District Court	Num

Analytic Data Dictionary

	22=BALDPATE	
	23=BARBARA MCINNIS HOUSE	
	24=Barnstable District Court	
	25=BAY COVE MHC	
	26=BAY RIDGE	
	27=BAYSTATE MED CTR	
	28=BEACON HOUSE FOR WOMEN	
	29=BERKSHIRE MEDICAL CENTER	
	30=BERYL'S HOUSE	
	31=BEVERLY - BAY RIDGE	
	32=BEVERLY HOSPITAL	
	33=BIDMC - DEACONESS	
	34=BIDMC NORTH	
	35=BOSTON EMERGENCY SERVICE	
	36=BOSTON MEDICAL CTR INTAKE	
	37=Boston Municipal Court	
	38=Boston Municipal Ct-Dorchester	
	39=BOSTON REGIONAL MEDICAL CTR	
	40=BOURNEWOOD	
	41=BRANDON 42=BRIDGEWATER STATE HOSPITAL	
	43=Brockton District Court	
	45=BROCKTON MULTI SERVICE	
	46=Brookline District Court	
	47=CAMBR HLTH ALL @ MALDEN HOSP	
	48=Cambridge District Court	
	49=CAMBRIDGE HOSPITAL	
	50=CAPE COD HOSPITAL	
	51=CARITAS NORWOOD HOSPITAL	
	52=CARNEY HOSPITAL	
	53=CASE MANAGEMENT	
	54=CASPER HOUSE CAMBRIDGE	
	55=CATHOLIC CHARITIES DETOX	
	56=CENTER FOR ADDICTIVE BEHAV	
	57=CHARLES RIVER - EAST	
	58=CHARLES RIVER HOSPITAL	
	59=CHARLTON HOSPITAL	
	60=Chelsea District Court	
	61=Chicopee District Court	
	62=CHILD/ADOL COMM/SCHL SUPPORT	
	63=CHILD/ADOL INTENSIVE RESI TX	
	64=CHILD/ADOL RESPITE SERVICES	
	65=CHILDREN'S HOSPITAL	
	66=CLEAN SLATE INC	
	67=CLINIC REFERRED	
	68=CLINTON	
	69=Clinton District Court	
	70=CLTS GOING HOME W OUTPATIENTTX	
	71=COMM BASED ACUTE TX-ADOL	
	72=COMMUNITY HEALTH INITIATIVES	
	73=COMMUNITY RES/GROUP HOME	

## Analytic Data Dictionary

	74=CONCORD ASSABET	
	75=Concord District Court	
	76=COOLEY DICKINSON	
	77=CORRECTIONAL FACILITY	
	78=CORRIGAN CRISIS UNIT	
	79=CORRIGAN MENTAL HEALTH CRISIS	
	80=CORRIGAN MHC	
	81=COURT/LAW	
	82=CRISIS STABILIZATION UNIT	
	83=DEACONESS WALTHAM	
	84=Dedham District Court	
	85=DEPARTMENT OF YOUTH SERVICES	
	86=DEPT OF CHILDREN & FAMILIES	
	87=DEPT OF SOCIAL SERVICES	
	88=DESIGNATED EMERGENCY PROGRAM	
	89=DISCHARGE/RETAIN CUSTODY	
	90=DMH FACILITY	
	91=DOMESTIC VIOL SAFE HOM W/ SA	
	92=Dorchester District Court	
	93=DRUNK DRIVING PROGRAM	
	94=Dudley District Court	
	95=East Brookfield District Court	
	96=Eastern Hampshire District Cou	
	97=Edgartown District Court	
	98=EDWINA MARTIN HOUSE	
	99=ELLIOT HOUSE	
	100=EMERGENCY ROOM	
	101=EMERSON HOSPITAL	
	102=EMERSON HOUSE FALMOUTH	
	103=ENTRE FAMILIA PROGRAM- FAMILY	
	104=F.I.R.S.T. RECOVERY HOME	
	105=FAITH HOUSE	
	105=FAITTTTOOSE 106=Fall River District Court	
	107=Falmouth District Court	
	107-Fainouth District Court	
	108=FALMOUTH HOSPITAL	
	110=FAMILY INTERVENTION PROGRAM	
	111=FAMILY RESIDENTIAL SERVICES	
	111=FAMILY RESIDENTIAL SERVICES	
	113=Fitchburg District Court	
	114=Framingham District Court	
	115=FRANCISCAN 116=FRANKLIN MEDICAL CENTER	
	117=GANDARA RESI SVCS FOR WOMEN	
	118=Gardner District Court	
	119=GENESIS II FAMILY CTR	
	120=GERMAINE LAWRENCE	
	121=GIANNA'S HOUSE	
	122=Gloucester District Court	
	123=GOOD SAMARITAN MEDICAL CTR	
	124=GRACE HOUSE FAMILY RESI SVCS	
	125=GRANADA HOUSE	

Analytic Data Dictionary

	126=Greenfield District Court	
	127=GROUP HOME	
	128=GROW PROGRAM	
	129=HABIT MANAGEMENT	
	130=HARBINGER HOUSE/HALE HOUSE	
	131=HARRINGTON MEMORIAL	
	132=HART HOUSE FAMILY RESI SVCS	
	133=HARWOOD SOBER HOUSE	
	134=HATHORNE UNIT/TEWKSBURY	
	135=Haverhill District Court	
	136=HEALING HILLS VILLAGE	
	137=HEALTH ALLIANCE	
	138=HELLO HOUSE-DORCHESTER	
	139=HENRY HEYWOOD	
	140=HIGH PONT TREATMENT CTR TSS	
	141=HIGHPOINT TSS	
	142=Hingham District Court	
	143=HIV/AIDS PROGRAM	
	144=HMO REFERRAL	
	145=HOLY FAMILY	
	146=Holyoke District Court	
	147=HOLYOKE HOSPITAL	
	148=HOME	
	149=HOMELESS OUTREACH/HOMELESS	
	SHELTER	
	150=HRI	
	151=IHR CENTRAL INTAKE	
	152=Ipswich District Court	
	153=ITALIAN HOME FOR CHILDREN	
	154=JOURNEY HOUSE	
	156=KEENAN RECOVERY HOUSE	
	157=LARK HALFWAY HOUSE	
	158=LATINAS Y NINOS CTR	
	159=Lawrence District Court	
	160=LAWRENCE MEMORIAL	
	161=LEMUEL SHATTUCK-DMH UNIT	
	162=Leominster District Court	
	163=LEROY'S LODGE	
	164=LINDA FAY GRIFIN HOUSE	
	165=LINDEMANN MHC	
	166=LOWELL COMMUNITY HEALTH CTR	
	167=Lowell District Court	
	168=LOWELL GENERAL	
	169=LOWELL RECOVERY HOUSE	
	170=LOWELL YOUTH COUNSELING CTR	
	171=LOWELL YOUTH TREATMENT CTR	
	172=Lynn District Court	
	173=LYNN TRANSITIONAL SUPPORT SVCS	
	174=Malden District Court	
	175=MARLBORO HOSPITAL	
	176=Marlborough District Court	

## Analytic Data Dictionary

	177=MARTHA'S VINYARD HOSPITAL	
	178=MASS GENERAL HOSPITAL	
	179=MASS MENTAL HEALTH CENTER	
	180=MCI FRAMINGHAM	
	181=MCLEAN AT NAUKEAG RESI	
	182=MCLEAN CTR AT FERNSIDE RECVY	
	183=MCLEAN HOSPITAL	
	184=MEDFIELD STATE HOSPITAL	
	185=MELROSE - WAKEFIELD	
	186=MERIDIAN HOUSE THERAPEUTIC COM	
	187=METRO WEST MEDICAL CENTER	
	188=METROPOLITAN STATE HOSPITAL	
	189=Milford District Court	
	190=MONARCH HOUSE	
	191=MORTON HOSPITAL	
	192=MT AUBURN	
	193=MY SISTER'S HOUSE	
	194=Nantucket District Court	
	195=Natick District Court	
	196=New Bedford District Court	
	197=NEW BEDFORD EMERGENCY SERVICES	
	198=NEW ENGLAND MEDICAL CENTER	
	199=NEW HOPE TRANSITIONAL SUPPORT	
	200=NEW HORIZONS	
	201=Newbury District Court	
	202=NEWTON WELLESLEY	
	203=Newton District Court	
	204=NICKI HOUSE	
	205=NOBLE	
	206=NON-DMH PSYCHIATRIC FACILITY	
	207=NORTH ADAMS	
	208=Northampton District Court	
	209=Northern Berkshire District Ct	
	210=NORTON CRISIS	
	211=NURSING HOME	
	212=OLYMPUS SPEC & REHAB HOSP	
	213=OLYMPUS SPECIALTY UNIT	
	214=Orange District Court	
	215=ORCHARD ST FAMILY RESI SVCS	
	216=Orleans District Court	
	217=OTHER	
	218=OUTPATIENT PROVIDER	
	219=OUTPATIENT SA COUNSELING	
	220=Palmer District Court	
	221=PARKVIEW SPECIALTY HOSP-DMH	
	222=PARTIAL HOSPITAL	
	223=Peabody District Court	
	224=PEGASUS HOUSE	
	225=PEMBROKE HOSPITAL	
	226=PHOENIX HOUSE	
	227=PHYSICIAN REFERRED	
	228=Pittsfield District Court	

## Analytic Data Dictionary

	229=Plymouth District Court	
	230=POCASSET MHC	
	231=PRISON	
	232=PRIVATE INPT PSYCH FACILITY	
	233=PRIVATE PARTIAL HOSPITAL	
	234=PROJECT COPE WOMEN'S RESI	
	235=PROVIDENCE HOSPITAL	
	236=PSYCH EMERGENCY SERVICES	
	237=Quincy District Court	
	238=QUINCY HOSPITAL	
	239=QUINCY MEDICAL CENTER	
	240=QUINCY MHC	
	241=REFLECTIONS COURT ALTERNATIVE	
	242=REHAB FACILITY	
	242-RENDENTIAL	
	244=RHODES STREET HOUSE	
	245=RIVERSIDE	
	246=ROAD BLOCK	
	247=RYAN HOUSE	
	248=SAGE HOUSE FAMILY RESI SVCS	
	249=SAINT ANNE'S HOSPITAL	
	250=SAINTS MEMORIAL HOSPITAL	
	251=SALEM	
	252=Salem District Court	
	253=SALVATION ARMY	
	254=SCHOOL	
	255=SECOND OFFENDER AFTERCARE	
	256=SELF/FAMILY/FRIEND	
	257=SERENITY HOUSE	
	258=SERVICES PROVIDED FOR WOMEN	
	259=SHAHEEN WOMEN'S PROGRAM	
	260=SHEPHERD HOUSE	
	261=SHILO HOUSE- BOSTON	
	262=SIMPLE LIVING INC	
	263=SKILLED NURSING FACILITY	
	264=SOLOMON CARTER FULLER MHC	
	265=SOLOMON MHC	
	266=SOMERVILLE	
	267=Somerville District Court	
	268=SOMERVILLE HOSPITAL	
	269=SOUTH SHORE HOSPITAL	
	270=SOUTH SHORE MENTAL HEALTH	
	271=SOUTHCOAST HOSP GROUP INC	
	272=Southern Berkshire District Ct	
	273=Springfield District Court	
	273=Springheid District Court	
	275=ST ELIZABETH'S	
	277=ST VINCENT'S CHILD TREATMENT	
	278=STATE INPT PSYCH FACILITY	
	279=STATE OP OUTPATIENT	
	280=STATE OP PARTIAL HOSP	

## Analytic Data Dictionary

	281=STATE OP RESIDENTIAL	
	282=STEPPINGSTONE WOMEN'S PROGRAM	
	283=STEPS SOLUTIONS INC #	
	284=Stoughton District Court	
	285=STURDY MEMORIAL HOSPITAL	
	286=Taunton District Court	
	287=TAUNTON STATE HOSPITAL	
	288=THAYER TRANSITIONAL SUP SVCS	
	289=THE LIGHTHOUSE	
	290=THE VINEYARD HOUSE	
	291=TRANSFER - ANOTHER HC FAC	
	292=TRANSFER FR/TO OTH MA FACIL	
	293=TRANSFER FROM/TO OOS FACIL	
	294=TRANSFER FROM/TO SNF	
	295=TRANSFR ACUTE CARE HOSPITAL	
	296=TRANSITIONAL SUPPORT SERVICES	
	297=TRANSITIONS TSS	
	298=TRIANGLE HOUSE	
	299=TRNS ANOTHER HLTH CARE FAC	
	300=TRNS OTHER ACUTE CARE HOSP	
	301=UMASS MEDICAL CENTER	
	302=UNKNOWN ADMISSION SOURCE	
	303=Uxbridge District Court	
	304=VERSACARE	
	305=VICTORY PROGRAM	
	306=WALKER HOME	
	307=Waltham District Court	
	308=Wareham District Court	
	309=West Roxbury Court	
	310=WESTBORO STATE HOSPITAL	
	311=Westborough District Court	
	312=Westfield District Court	
	313=WESTWOOD LODGE	
	314=WESTWOOD PEMBROKE	
	315=WHIDDEN HOSPITAL	
	316=Winchendon District Court	
	317=WING MEMORIAL HOSPITAL	
	318=WISE ST TRANSITIONAL	
	319=Woburn District Court	
	320=WOMENPLACE -RECOVERY HOME	
	321=WOMEN'S HELLO HOUSE-BOSTON	
	322=WOMEN'S HOPE	
	323=WOMEN'S HOPE TSS	
	324=WOMEN'S VIEW	
	325=Worcester District Court	
	326=WORCESTER STATE HOSPITAL	
	327=Wrentham District Court	
	328=YETMAN HOUSE	
	329=YOU, INC VILLAGE/MANOR	
	330=YOU, INC WETZEL CENTER	
	331=ZERO TOLERANCE	

## Analytic Data Dictionary

AGE DMH	Age at enrollment	Age in years	Num
		999= Missing	
AREA_DMH	DMH area client was assigned to for services Area Mnemonic	<ul> <li>1 = Metro Boston Area</li> <li>2 = Central Massachusetts Area</li> <li>3 = Metro Suburban Area</li> <li>4 = Northeast Area</li> <li>5 = Southeast Area</li> <li>6 = Western Massachusetts Area</li> <li>Blanks=Missing/Unknown</li> </ul>	Num
CITIZEN_DMH	Flag indicating clients	0=No	Num
	US Citizenship	1=Yes 9=Unknown/Missing	INUIT
DEP_MINORS_DMH	Number of Dependent Minors		Num
DIAGNOSIS_DATE_DMH	Date of diagnosis	Date Proxy – Count of days between diagnosis date and a random date in the future NOTE: The larger the date proxy, the more recently the event occurred	Num
DIAGNOSIS_YEAR_DMH		Year of diagnosis	Num
DIAGNOSIS_MONTH_DMH		Month of diagnosis (1-12)	Num
DISCHARGE_DISP_DMH	Discharge Disposition	1, ACCS 2, ACCS SERVICE TYPE TRANSITION 3, ACUTE MEDICAL FACILITY 4, ACUTE RESI TX ADULT DUAL DX 5, ACUTE RESIDENTIAL TX CHILD 6, AGAINST MEDICAL ADVICE 7, ASSISTED LIVING FACILITY 8, BRIDGEWATER TREATMENT CTR 9, Brief Intervention Referral to Treatment 10, CLINICAL STABILIZATION SVCS 11, Closed State Mental Hospital 12, COMM BASED ACUTE TX-CHILD 13, Community Mental Health Clinic 14, CORRECTIONAL CT 15, COURT/LAW 16, CRISIS STABILIZATION SERVICE 17, DETOXIFICATION FACILITY 18, DMH COMMUNITY RESIDENCE C/A 19, DMH GROUP/CONG LIVING-ADULT 20, DMH RESPITE SERVICE 21, DMH Unit DPH Hospital 22, DSS RESIDENTIAL 23, DYS RESIDENTIAL 24, EXPIRED 25, GAMBLING PROGRAM 26, HALFWAY HOUSE 27, HOME ALONE 28, HOME WITH FAMILY 29, HOME WITH NON-FAMILY	Num

Analytic Data Dictionary

	(11881111	1	
		32, INCARCERATED OVER 18 MONTHS	
		33, INCARCERATED UNDER 18 MONTHS	
		34, Inpatient Facility Adult	
		35, Inpatient Facility Child/Adolescent	
		36, INTERMEDIATE CARE FACILITY	
		37, LONG TERM CARE FACILITY	
		38, MEDICAL HOSPITALIZATION	
		39, MEDICAL UNIT/DPH Hospital	
		40, Mental Health Clinic	
		41, Mental Health Residential Clinic	
		42, MOVED OUT OF AREA	
		43, NON-DMH COMMUNITY RES.	
		-	
		44, NURS HOME / SNF (NON-REHAB)	
		45, O4 OUTPATIENT PROVIDER	
		46, OOS PSYCHIATRIC FACILITY	
		47, OOS RESIDENTIAL PROGRAM	
		48, OPIOID TREATMENT	
		49, OTHER FACILITY	
		50, OTHER INPATIENT FACILITY	
		51, OTHER OUTPATIENT CLINIC	
		52, PRIV. PSYCHIATRIC FAC-INPAT	
		53, PROG FOR ASSERT COMM TREATM	
		54, PSYCHIATRIC HOSPITIALIZATION	
		55, REHAB FACILITY	
		56, RESIDENTAIL TREATMENT	
		57, RESIDENTIAL SCHOOL	
		58, REST HOME	
		59, SHELTER	
		60, SHORT TERM HOSP	
		61, Short Term Transfer	
		62, SKILL NURS FAC/NURS HOME	
		63, SOBER HOUSE	
		64, State Contracted Mental Health Hospital	
		65, State Operated Mental Health Clinic	
		66, State Operated Mental Health Hospital	
		67, State Operated MH Service	
		68, SUB. ABUSE TX (NOT DETOX)	
		69, SUBSTANCE ABUSE FACILITY/HOSP	
		70, TERMINATED BY PROGRAM	
		71, TRANSFER TO ANOTHER PGM/SERV	
		72, TRANSITIONAL SUPPORT SVCS	
		73, VETERANS ADMIN. HOSPITAL	
		74, WRAP	
		99, Unknown/NO CONTACT/WHEREABOUTS	
		UNK/status not a disposition	
			ļ
DISCHARGE_LEGAL_DMH	Description of Discharge	1=Forensic Eval	Num
	Disposition	2=Forensic Treatment	
		3= Civil	
		Blanks=Missing/Unknown	

Analytic Data Dictionary

DISENROLLED_DATE_DM H	Date Client was dis- enrolled	Date Proxy – Count of days between disenrollment date and a random date in the future <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
DISENROLLED_YEAR_DM H	Year of disenrollment	YYYY	Num
DISENROLLED_MONTH_D MH	Month of disenrollment	Month (1-12)	Num
EDUCATION_DMH	Reported Level of Education	<ul> <li>1 = Not of School Age</li> <li>2 = No Formal Education</li> <li>3 = Less than High School</li> <li>4 = High School Diploma / GED</li> <li>5 = Some College/Post-Secondary</li> <li>6 = Associate/Certificate</li> <li>7 = College Degree or Higher</li> <li>8 = Other Credentials</li> <li>95 = Unknown</li> <li>99 = Missing</li> </ul>	Num
ELIGIBILITY_DMH	Status of Registration in DMH services	0=No 1=Yes Blanks=Missing/Unknown	Num
EMPLOY_END_DMH	Date employment ended	Date Proxy – Count of days between employment end date and a random date in the future <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
EMPLOY_ENDYEAR_DMH	Year employment ended	YYYY	Num
EMPLOY_ENDMONTH_DM H	Month employment ended	Months (1-12)	Num
EMPLOYMENT_STATUS_D MH	ID Description	1=Competitively Employed (Self-Sufficient) 2=Competitively Employed 3 =Transitional Employment 4 =Agency Sponsored Employment 5 =Unemployed, but in the Labor Force 6 =Not in Labor Force, but Engaged in Work-Related Activity 7 =Not in Labor Force and not Engaged in any Work-Related Activity 8 =Chooses Not to Disclose	Num
EMPLOY_START_DMH	Date employment started	Date Proxy – Count of days between employment start date and a random date in the future <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
EMPLOY_STARTYEAR_DM H	Year employment ended	YYYY	Num
EMPLOY_STARTMONTH_ DMH	Month employment ended	Months (1-12)	Num
ENROLLED_DATE_DMH	Date Client was enrolled	Date Proxy – Count of days between enrollment date and a random date in the future	Num

Analytic Data Dictionary

		NOTE: The larger the date proxy, the	
		more recently the event occurred	
ENROLLMENT_YEAR_DM	Year client was enrolled	YYYY	Num
ENROLLMENT_MONTH_D	Month client was	Months (1-12)	Num
MH	enrolled		
ETHNICITY_DMH	Ethnicity	1=ALBANIAN2=AMERICAN3=ARMENIAN4=BHUTANESE5=BOSNIAN6=BRAZILIAN7=BURMESE8=CAMBODIAN9=CANADIAN10=CAPE VERDEAN11=CHINESE12=COLOMBIAN13=CONGOLESE14=COSTA RICAN15=DOMINICAN16=ECUADORIAN17=EGYPTIAN18=ENGLISH19=ERITREAN20=ETHIOPIAN21=FILIPINO22=FINNISH23=FRENCH24=GERMAN25=GREEK26=GUATEMALAN27=HAITIAN30=HONDURAN31=INDIAN31=INDIAN32=IRANIAN33=IRAQI34=IRISH35=ISRAELI36=ITALIAN39=LAOTIAN40=LEBANESE41=MEXICAN42=MOROCCAN43=NICARAGUAN44=POLISH49=PORTUGUESE50=PUERTO RICAN51=RUSIAN52=SALVADORAN53=SOMALI	Num

# Analytic Data Dictionary

		54=THAI 55=TIBETAN 56=UKRAINIAN 57=VENEZUELAN 58=VIETNAMESE 59=WEST INDIAN/CARIBBEAN 60=OTHER 61=TWO OR MORE 62=CHOOSES NOT TO SELF-IDENTIFY 63=REFUSED 99=UNKNOWN	
FACILITY_DMH	DMH facility that a client is enrolled to for inpatient or outpatient services.	1= Acute Inpatient 2 = Inpatient 3 = Continuing Care Inpatient 4 = CYF Residential 5 = Outpatient 6 = Other 9 = Unknown	Num
HOMELESS_DMH	Flag indicating homeless	0=No indication of homeless 1=Homeless based on: - Living Arrangement is: Homeless Shelter, Homeless, Lives in Street. - City/Town of residence contains the word Homeless	Num
IN_SCHOOL_DMH	Flag indicating clients educational status	0=No 1=Yes Blanks=Missing/Unknown	Num
INTERPRETER_DMH	Flag indicating whether a client requires a language interpreter	0=No 1=Yes Blanks=Missing/Unknown	Num
HOURS_DMH	Number of hours client works per week		Num
INTERIM_LEGAL_DMH		1= Forensic Eval, 2= Forensic Treatment, 3= Civil Blanks=Missing/Unknown	Num
LANGUAGE_DMH	Client preferred language	1=Albanian 2=American Sign Language 3=Amharic 4=Arabic 5=Armenian 6=Bengali 7=Bosnian 8=Bulgarian 9=Cambodian 10=Cantonese 11=Cape Verdean 12=Chinese 13=Creole 14=Croatian 15=Czech 16=Danish	Num

### Analytic Data Dictionary

17=Dutch
18=English
19=Estonian
20=Farsi/Iranian/Persian
21=Finnish
22=French
23=Fulani Fula
24=Gaelic
25=German
26=Greek
27=Gujarati
28=Haitian Creole
29=Hawaiian
30=Hebrew
31=Hindi
32=Hmong
33=Hungarian
34=Icelandic
35=Igbo
36=Indonesian
37=Italian
38=Japanese
39=Khmer/Cambodian
40=Korean
41=Lao
42=Latvian
43=Malaysian
44=Mandarin
45=Mandingo\Mandinka
46=Marathi
47=Nepali
48=Norwegian
49=Other
50=Phillipine
51=Polish
52=Portuguese
53=Punjabi\Panjabi
54=Romanian
55=Russian
56=Serbian-Croatian
57=Slovak
58=Slovenian
59=Somali
60=Spanish
61=Swahili
62=Swedish
63=Tagalog
64=Tagalog/Filipino
65=Taiwanese
66=Thai
67=Tibetan
68=Tigrigna
69=Toisanese
70=Turkish
71=Twi
72=Ukrainian
73=Urdish
74=Vietnamese
75=Wolof
76=Wu
77=Yiddish
78=Yoruba

# Analytic Data Dictionary

		99=Unknown	
LIVING_ARRANGEMENT_ CLIENT_DMH	Living Arrangement for client	1= Lives Alone, No minor dependents 2= Assisted Living 3= C/A Community Based Residential Treatment 4= C/A Residential School 5= C/A Residential Treatment Facility 6= Foster Home 7= Group Living Environment Adults 8= Inpatient Facility 9= Jail/Correctional Facility 10= Lives with Minor Dependent(s) 11= Lives with Non-Relatives 12= Skilled Nursing Facility/Nurs Home (Non-Rehab) 13= Lives with Adult Relatives 14= Rest Home 15= Homeless Shelter 16= Lives on the Street 17= Temporary Living 99= Unknown	Num
LOS_DMH	Length of stay to date or as of dis-enrollment		Num
MARITAL_DMH	Marital Status of Client	<ol> <li>1 = Unmarried</li> <li>2 = Married</li> <li>3 = Domestic Partner/Significant</li> <li>Partnership</li> <li>4 = Legally separated</li> <li>9 = Missing/Unknown</li> </ol>	Num
PRIMARYDIAGNOSIS_DM H	Primary Diagnosis. Could be admit, interim or discharge diagnosis.	ICD-9 and ICD-10 codes	Char
DIAGNOSISTYPE_DMH	Primary Diagnosis (A)dmit (D)ischarge I(nterim). Could be admit, interim or discharge diagnosis.	1= Admit 2= Interim 3= Discharge Blanks=Missing/Unknown	Num
RACE_DMH	Combined race/ethnicity of the decedent	<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = unknown</li> </ol>	Num
Rate_DMH	Hourly Rate clubhouse member receives	99=Missing	Num
RES_CODE_DMH	City client resides in	1-351 999= missing/unknown/invalid	Num
RES_ZIP_DMH	Zip code of the address of client	5 digit zip 99999=Unknown	Char

Analytic Data Dictionary

SERVICE_DMH	Type of DMH Service a Client is Receiving	1=ACCS 2=ACIS 3=ACM 4=CYF Case Management 5=CYF Community 6=CYF Day Service 7=CYF Flex 8=CYF Residential 9=CYF Residential School 10=CYF Respite 11=CYF Service 12=Clubhouse 13=Emergency Service 14=Family Support 15=First Episode Psychosis 16=Group Living 17=Homeless Housing 18=Homeless Residential with Addiction Treatment 19=Homeless Service 20=Homeless Support with Addiction Treatment 21=MassHealth Case Management 22=Outpatient 23=PACT 24=PACT Forensic 25=Peer Service 26=Rental Assistance 27=Residential 28=Residential Supported 29=Respite 30=Transportation 99=Unknown	Num
SEX_DMH	Gender of Client	1 = male 2 = female 9 = unknown	Num
SITE_DMH	DMH Site client was assigned to for services	1=METRO BOSTON AREA SHARED 2=BAY COVE (historical) 3=METRO BOSTON CYF SITE 4=CAMBRIDGE/SOMERVILLE 5=FULLER 6=LINDEMANN,CAMBRIDGE,SOMERVILLE 7=MASS MENTAL 8=CENTRAL MASS AREA SHARED 9=CANTON 10=NORTH COUNTY 11=SOUTH COUNTY 11=SOUTH COUNTY 12=WESTBOROUGH 13=WORCESTER 14=EAST SUBURBAN 15=SOUTH SUBURBAN 16=SOUTHWEST SUBURBAN 17=WEST SUBURBAN	Num

### Analytic Data Dictionary

		•	
		18=ACTON 19=NORTHEAST AREA SHARED 20=NORTH SHORE 21=ESSEX NORTH 22=HAVERHILL/NEWBURYPORT 23=LOWELL 24=LYNN 25=METRO NORTH 26=NON-RESIDENT 27=SOUTHEASTERN MASS AREA SHARED 28=BROCKTON 29=FALL RIVER 30=CAPE COD & ISLANDS 31=NEW BEDFORD 32=PLYMOUTH 33=Quincy 34=QUINCY 35=TAUNTON/ATTLEBORO 36=WESTERN MASS AREA SHARED 37=BERKSHIRE 38=FRANKLIN/NORTH QUABBIN 39=HAMPSHIRE 40=HOLYOKE/CHICOPEE 41=SPRINGFIELD 42=WESTFIELD 99=Unknown	
DART_DMH	Yes/no flag for DART status. DMH Admissions Referral Tracking	0=No 1=Yes	Num
RAP_DMH	Yes/no flag for RAP status. (RAP includes WRAP and the new program that will include men- "Recovery from Addiction" or "RAP" to be inclusive of this anticipated expansion. The Recovery from Addiction Programs (RAP) serve men and women civilly committed under MGL Chapter 111 Section 35. These people are civilly committed to treatment for the substance addiction whether to alcohol, opioids, stimulants or any other substance. The RAP is not for persons in recovery from opioid use disorder only.	0=No 1=Yes	Num
VISIT_TYPE_DMH	Community, Inpatient, Outpatient	1=Community 2=Inpatient	Num

Analytic Data Dictionary

		3=Outpatient Blanks=Missing/Unknown	
VETERAN_DMH	Veteran Status of Client	0=No 1=Yes 2= Non-US 9=Unknown	Num
VISIT_STATUS_DMH	Status of enrollment	<ul> <li>1= Inpatient Admission</li> <li>2= ER Outpatient Reg Cancelled</li> <li>3= Ref Outpatient Reg Cancelled</li> <li>4= ER Outpatient Departure</li> <li>5= Ref Outpatient Departure</li> <li>6= Inpatient Discharge</li> <li>7= Recurring Outpatient Reg Discharge</li> <li>8= ER Outpatient Pre Reg</li> <li>9= ER Outpatient Reg</li> <li>10= Recurring Outpatient Reg</li> <li>11= Referred Outpatient Reg</li> <li>12= Recurring Outpatient Schedule</li> <li>13= Referred Outpatient Schedule</li> <li>Blanks=Missing/Unknown</li> </ul>	Num

	DispositionName
1	ACCS
2	ACCS SERVICE TYPE TRANSITION
3	ACUTE MEDICAL FACILITY
4	ACUTE RESI TX ADULT DUAL DX
5	ACUTE RESIDENTIAL TX CHILD
6	AGAINST MEDICAL ADVICE
7	ASSISTED LIVING FACILITY
8	BRIDGEWATER TREATMENT CTR
9	Brief Intervention Referral to Treatment
10	CLINICAL STABILIZATION SVCS
11	Closed State Mental Hospital
12	COMM BASED ACUTE TX-CHILD
13	Community Mental Health Clinic
14	CORRECTIONAL CT
15	COURT/LAW
16	CRISIS STABILIZATION SERVICE
17	DETOXIFICATION FACILITY
18	DMH COMMUNITY RESIDENCE C/A
19	DMH GROUP/CONG LIVING-ADULT
20	DMH RESPITE SERVICE
21	DMH Unit DPH Hospital
22	DSS RESIDENTIAL
23	DYS RESIDENTIAL
24	EXPIRED
25	GAMBLING PROGRAM
26	HALFWAY HOUSE

### Department of Mental Health (DMH) Analytic Data Dictionary (PHDDMH.DMH)

	DispositionName
27	HOME ALONE
28	HOME WITH FAMILY
29	HOME WITH NON-FAMILY
30	HOME with SERVICE
31	HOSPICE
32	INCARCERATED OVER 18 MONTHS
33	INCARCERATED UNDER 18 MONTHS
34	Inpatient Facility Adult
35	Inpatient Facility Child/Adolescent
36	INTERMEDIATE CARE FACILITY
37	LONG TERM CARE FACILITY
38	MEDICAL HOSPITALIZATION
39	MEDICAL UNIT/DPH Hospital
40	Mental Health Clinic
41	Mental Health Residential Clinic
42	MOVED OUT OF AREA
43	NON-DMH COMMUNITY RES.
44	NURS HOME / SNF (NON-REHAB)
45	O4 OUTPATIENT PROVIDER
46	OOS PSYCHIATRIC FACILITY
47	OOS RESIDENTIAL PROGRAM
48	OPIOID TREATMENT
49	OTHER FACILITY
50	OTHER INPATIENT FACILITY
51	OTHER OUTPATIENT CLINIC
	PRIV. PSYCHIATRIC FAC-INPAT
	PROG FOR ASSERT COMM TREATM
54	PSYCHIATRIC HOSPITIALIZATION
55	REHAB FACILITY
56	RESIDENTAIL TREATMENT
	RESIDENTIAL SCHOOL
	REST HOME
59	SHELTER
	SHORT TERM HOSP
	Short Term Transfer
	SKILL NURS FAC/NURS HOME
	SOBER HOUSE
	State Contracted Mental Health Hospital
	State Operated Mental Health Clinic
66	State Operated Mental Health Hospital
67	State Operated MH Service
68	SUB. ABUSE TX (NOT DETOX)
69	SUBSTANCE ABUSE FACILITY/HOSP
70	
71	TRANSFER TO ANOTHER PGM/SERV
72	TRANSITIONAL SUPPORT SVCS
73	VETERANS ADMIN. HOSPITAL
74	
99	Unknown/NO CONTACT/WHEREABOUTS UNK/status not a disposition
	นเรากรแกก

Department of Mental Health (DMH) Analytic Data Dictionary (PHDDMH.DMH)

#### SNAP Benefit Program - Department of Transitional Assistance (PHDDTA.DTA)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_DTA	CHIA Match level	1= These are CHIA members that received a high score against the DPH input record. This group includes those that matched all elements of the DPH input record and those that had only one element mismatch. The group 1 individual match determination has been optimized based upon the input elements and their overall weight. 2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches. Candidates in this group could match on as little as little as SSN or date of birth and first and last name. These candidates are included for completeness	Num
AGE_DTA	Age	Age in years	Num
BENEFIT_AMOUNT_DTA	Benefit Amount	Numeric full dollar amount	Num
BENEFIT_EFF_DATE_DTA	Benefit Status Effective Date (use with CASE_STATUS_DTA) to determine what status this date represents	Date Proxy – count of days between benefit effective date and randomly chosen date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
BENEFIT_EFF_MONTH_D TA	Effective Month of benefits	Months, 1-12 99 =missing/unknown	Num
BENEFIT_EFF_YEAR_DTA	Effective Year of benefits	Year, YYYY 9999 = missing/unknown	Num
BIRTH_MONTH_DTA	Month recipient was born	1-12 99 = missing/unknown	Num
BIRTH_YEAR_DTA	Year recipient was born	YYYY	Num
CASE_STATUS_DTA	Status of the case at the monthly snapshot	1=Active 2=Closed 3=Denied 4=Pending 9=missing/unknown	Num
CLOSED_IN_MONTH	Flag to indicate whether case closed within the month	0=No 1=Yes 9=missing/unknown	Num
DISABILITY_DTA	Indicate whether the client is disabled	0=No 1=Yes 9=missing/unknown	Num

Variable Name	Variable Description	Meta Data	Format
EARNED_INCOME	Total earned income for case	Numeric full dollar amount	Num
EDU_DTA	Highest level of education	<ul> <li>1 = No School at all</li> <li>2 = 1-8 years</li> <li>3 = 9-11 (attended but not compl)</li> <li>4 = Completed 12(high school dip.)</li> <li>5 = GED</li> <li>6 = Some college</li> <li>7 = Completed 2-year college</li> <li>8 = Completed 4-year college</li> <li>9=missing/unknown</li> </ul>	Num
HEAD_OF_CASE_FLAG	Member Role ('Grantee' if 0=No Head of Case, otherwise 1=Yes Null) 9=missing/unknown		Num
HIP	Whether case participated in HIP within month	0=No 1=Yes 9=missing/unknown	Num
HIP_TRX	The number of HIP transactions	0=0 1=1-20 2=21-40 3=41-60 4=61-80 9=missing/unknown	
HOMELESS_DTA	Homeless	0=No 1=Yes 9=missing/unknown	Num
IN_SCHOOL_DTA	Currently in school?	0=No 1=Yes 9=missing/unknown	Num
INELIGIBILITY_REASON	Ineligibility Reason Code (i.e. Closing Reason)	See code list	Num

Variable Name	Variable Description	Meta Data	Format
LANGUAGE_DTA	Spoken language	1=Amharic 2=American Sign Language 3=Arabic 4=Armenian 5=Cambodian 6=Chinese (Cantonese) 7=Chinese (Mandarin) 8=Chinese 9=Croatian 10=English 11=French 12=Greek 13=Haitian Creole 14=Italian 15=Laotian 16=Polish 17=Portuguese 18=Russian 19=Serbian Cyrillic 20=Slovenian 21=Somali 22=Spanish 23=Tagalog 24=Vietnamese 88=Other 99=missing/unknown	
MARITAL_DTA	Marital Status	1=Married 2=Not Married 8=Not Applicable 9=missing/unknown	Num
MILITARY_SVC_FLG_DTA	Flag to indicate person self- reports ever serving in the military	<ul> <li>1 = Served in the Military, Self-Reported (begun 2019)</li> <li>0 = Not served in the military</li> <li>9=Missing/unknown</li> </ul>	Char
OPENED_IN_MONTH	Flag to indicate whether case opened within the month	0=No 1=Yes 9=missing/unknown	Num
RACE_DTA	Race/Hispanic Ethnicity	<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Missing/unknown</li> </ol>	Num
RELATIONSHIP_DTA	Client relationship to the Grantee	See code list	Num
RES_CODE_DTA	City Name	1-351 for valid MA city/town 999=Unknown	Num
RES_ZIP_DTA	Postal Code	5 digit zip 99999=Missing/unknown	Char

Variable Name	Variable Description	Meta Data	Format
SEX_DTA	AP Gender Indicator Should Gender CO - B2.0 - Eff Dated	1=Male 2=Female 9=Missing/unknown	Num
SSN_LAST_DIGIT	Social Security Number (Last Digit Only)	0-9	Num
UNEARNED_INCOME	Total unearned income for case	Numeric full dollar amount	Num

Ineligibili	Ineligibility Reason		
165	You are an Ineligible Grantee		
205	Unearned Income in excess of grant amount		
206	Assets in excess of asset limit		
210	Failure to verify income and/or asset		
213	Receipt Lump Sum payment in excess of grant amount		
214	Failed to cooperate with bank match procedures.		
215	Receiving assistance from another State or County		
220	Countable earned income in excess of grant		
221	Fail to correct an incomplete Monthly Report		
222	Fail to return a complete Monthly Report		
227	Fail to correct an inadequate Monthly Report		
601	Not in Receipt of SSI		
602	Invalid SDX Living Arrangement		
603	Invalid Marital Status		
604	Invalid Date of Birth		
605	Ineligible Noncitizen		
606	Existence of SDX Earnings		
607	More than one member in SNAP AU		
609	Requested end to CAP		
619	Not in Receipt of Federal SSI		
1004	Institutionalized, including incarceration		
1005	Required to be in another SNAP AU		
1007	Currently in another SNAP AU		
1010	No longer MA resident		
1011	Death		
1012	Whereabouts Unknown		
1018	Boarder or resident in an unlicensed halfway house		
1019	Did not cooperate with Quality Control		
1024	Did not apply for / verify SSN		
1035	Not meeting SNAP AU requirements		
1037	In school higher than secondary level		
1042	Fail to submit the required verifications		

(PHDDTA.DTA)

Ineligibili	ty Reason
1043	Application Withdrawn
1044	Fail to complete a family cap review
1046	Fail to schedule a review at end of disqualification period
1053	Special Projects
1054	Voluntarily quit job(2nd time)
1055	Voluntarily quit job(3rd time)
1060	Your certification period has ended.
1064	Requested closure
1066	Failure to complete SNAP application process.
1067	Fraudulent Statement to SSA
1068	Initiated but Failed to Recertify
1069	Failure to complete Interim Report process
1070	Failure to Complete an Interim Report
1071	Incarcerated
1142	You did not submit required verification for recertification after reinstatement
1166	You did not complete SNAP recertification process after reinstatement
1266	You did not complete the Interim Report process after reinstatement
1342	You did not submit required verifications for an application after reinstatement
1442	You did not submit required verifications for a case maintenance reinstatement
2001	Administrative Closure
2002	Failed to keep appointment for review
2005	Bureau of Special Investigation determined fraud
2006	Fail to keep appointment to discuss computer match info
2007	Ineligibility reason removed
2009	Non-citizen resident for less than 60 days
3009	Voluntarily quit job(1st time)
3015	Fleeing felon
3017	Multiple cash and/or SNAP benefit applications
3019	Failed to meet SNAP HH composition requirements
3022	Failed to comply with FS ET requirements (first time)
3024	Failed to comply with FS ET requirements (second time)
3025	Failed to comply with FS ET requirements (third time)
3029	Ineligible for SNAP beyond initial expedited issuance
3030	Fail to comply with SNAP Work Program requirements
3033	SNAP Disqualification for Intentional Program Violation
3034	Disqualification for Fraud Court Conviction >\$1000
3037	SNAP Disqualification for Trading SNAP for Drugs
3039	Parole or Probation Violations
3041	Disqualified from SNAP due to a Cash IPV
3049	Fraudulently Receiving Duplicate Benefits
6008	Active member of another SNAP AU
6011	Currently in active/pending Cash AU
2006	Fail to keep appointment to discuss computer match info
2007	Ineligibility reason removed
2009	Non-citizen resident for less than 60 days

Ineligibili	Ineligibility Reason		
3009	Voluntarily quit job(1st time)		
3015	Fleeing felon		
3017	Multiple cash and/or SNAP benefit applications		
3019	Failed to meet SNAP HH composition requirements		
3022	Failed to comply with FS ET requirements (first time)		
3024	Failed to comply with FS ET requirements (second time)		
3025	Failed to comply with FS ET requirements (third time)		
3029	Ineligible for SNAP beyond initial expedited issuance		
3030	Fail to comply with SNAP Work Program requirements		
3033	SNAP Disqualification for Intentional Program Violation		
3034	Disqualification for Fraud Court Conviction >\$1000		
3037	SNAP Disqualification for Trading SNAP for Drugs		
3039	Parole or Probation Violations		
3041	Disqualified from SNAP due to a Cash IPV		
3049	Fraudulently Receiving Duplicate Benefits		
6008	Active member of another SNAP AU		
6011	Currently in active/pending Cash AU		
999	Missing/Unknown		

REL	RELATIONSHIP_DTA				
1	Aunt	20	Great Uncle		
2	Brother-in-Law	21	Half-Sibling		
3	Child	22	Mother		
4	Daughter-in-Law	23	Mother-in-Law		
5	Father	24	Nephew		
6	Father-in-Law	25	Niece		
7	First Cousin	26	Other Relationship		
8	First Cousin Once Removed	27	Sibling		
9	Great Granddaughter	28	Sister-in-Law		
10	Great Grandson	29	Son-in-Law		
11	Great Aunt	30	Spouse of a Related Person		
12	Granddaughter	31	Spouse		
13	Grandfather	32	Stepchild		
14	Great Grandfather	33	Stepfather		
15	Great Grandmother	34	Stepmother		
16	Grandmother	35	Step-Sibling		
17	Grandnephew	36	Uncle		
18	Grandniece	37	Unrelated		
19	Grandson	99	Missing/Unknown		

# Department of Veterans' Services Benefit Program Analytic Data Dictionary

### PHDDVS.DVS

#### Veteran's Benefits - Department of Veterans' Services (PHDDVS.DVS)

Variable Name	Variable Description	Meta Data	Format	
ID	Project Specific ID	9 character alphanumeric ID	Char	
Match_level_DVS	CHIA Match level	1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.	Num	
		2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches. Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for completeness.		
AGE_DVS	Age	Age in years	Num	
BENEFIT_DATE_DVS	Date of payment	Date Proxy – count of days between date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num	
BENEFIT_MONTH_D VS	Month of payment	Month, 1-12	Num	
BENEFIT_YEAR_DVS	Year of payment	Year, YYYY	Num	
DME_DVS	Payment received for durable medical equipment or hearing aids?	0=No 1=Yes	Num	
HOUSE_DVS	Payment received for housing services?	0=No 1=Yes	Num	
MED_DVS	Payment received for medical services?	0=No 1=Yes	Num	
OTH_DVS	Payment received for other services?	0=No 1=Yes	Num	
RACE_DVS	Race of benefit recipient	<ul> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown/missing</li> </ul>	Num	
RES_CODE_DVS	City of residence	1-351 for valid MA city/town 999=Unknown	Num	

### Department of Veterans' Services Benefit Program Analytic Data Dictionary PHDDVS.DVS

Variable Name	Variable Description	Meta Data	Format
RES_ZIP_DVS	Zip code of residence	5 digit zip 99999=Unknown	Char
SEX_DVS	Sex of the benefit recipient	1=Male 2=Female 9=Unknown	Num

#### **DVS Supplement**

Durable Medical Equipment and Hearing Aids includes:

5	Durable meical equipment
12	Hearing Aids

#### Housing Payments Include:

-	
8	Rent Arrears
9	Mortgage Arrears
10	Moving Expenses
27	Trans. Shelter
30	Rent Deposits(1st/last)
40	VASH-(1st, Last, Sec)
41	Hotel*PA ONLY*

#### Medical Payments Include:

1	Nursing Home	14	Misc Medical
2	Medicare Part "B"	15	*Don't USE* - Aetna
3	Medicare Part "C"	16	Medical Ins.
4	Ambulance	17	Commonwith Care
5	Durable medical equipment	19	*Don't USE* - Blue Cross/Shield
6	Medicare Part "D"	25	Other Med. Ins.
11	Eye Glasses	33	MEDIGAP
12	Hearing Aids	39	HHA-Home Health Aide

#### Other Payments Include:

0	Unknown	31	Utility Arrears
7	Emergency Cash	32	*Don't USE* - Tufts Med Ins
13	Shelter Repairs	34	ONA- Natural Disaster Assistance
18	AutoRepair	35	Ch115_'OB'_Retro
20	Burials	36	Ch115_'Fuel'_ Retro
21	Flags	37	DVS ONLY (OVP)
22	Fuel Assistance	38	IME (Ind Med Exam Submissions)
26	Repayment	42	Federal Furlough
28	Ch115_Retro Ben.	43	Misc Other
29	TBA (C.O.L.A. only)		

#### Early Intervention Clients (PHDEI.EI\_CLIENTS)

Variable Name	Variable Description	Meta Data	Format	
ID	O PHD ID 9 character alphanumeric ID		Char	
Match_level_EI_CLIENTS	CHIA Match level	1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.	Num	
		2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches. Candidates in this group could match on as little as SSN or date of birth and first and last name. These candidates are included for completeness		
CUSTODY_EI	Legal custody for this child	1=Both parents (same household) 2=Mother 3=Father 4=Joint (separate households) 5=DCF 6=Other legal guardian 8=Child's grandparents 9=Unknown	Num	
MOTHER_EMP_EI	Mother's employment status (primary family)	See code list	Num	
FATHER_EMP_EI	Mother's employment status (primary family)	See code list	Num	
PRIMARY_LANGUAGE_EI	Primary language spoken at home	1=English 2=Spanish 3=Portuguese 4=Crioula (Cape Verdean) 5=Creole (Haitian) 6=Khmer 7=Chinese 8=Laotian 9=Vietnamese 10=ASL 88=Other 99=Unknown	Num	

Veriekte			
Variable Name	Variable Description	Meta Data	Format
RACE_EI Client's race/Hispanic ethnicity		<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown</li> </ol>	Num
REF_DATE_EI       Referral date (date of 1st contact with ithe referral caller)		Date Proxy – count of days between referral date and randomly chosen date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
REF_SUGESTOR_EI	Who suggested that the family contact this EI program?	See code list	Num
RES_CODE_EI	City/town of child's residence	1-351 for valid MA city/town 999=Unknown	Num
RES_ZIP_EI	Child's zip code	5 digit zip code 99999=Unknown	Char
RES_TYPE_EI	Child's residence type	1=Family Home 2=Relative's Home 3=Foster Home 4=Shelter 5=Grandparent (non-foster) 6=Other relative's home (non-foster) 7=Foster home (kinship) 8=Foster home (non-relative) 88=Other 99=Unknown	Num
SEX_EI	Sex of the child	1=Male 2=Female 9=Unknown	Num
REF_YEAR_EI	Year of Referral date (date of 1 <sup>st</sup> contact with the referral caller)	2011-2019	Num
REF_MONTH_EI	Month of Referral date (date of 1 <sup>st</sup> contact with the referral caller)	1-12	Num
BIRTH_YEAR_EI	Year of birth of child	2011-2019	Num
BIRTH_MONTH_EI	Month of birth of child	1-12	Num
HOMELESS_NOW_EI	Currently homeless	0=No 1=Yes 9=Unknown	Num
HOMELESS_Recently_EI	Have family been homeless in last 12 months	0=No 1=Yes 9=Unknown	Num

REF	SUGESTOR EI
0	Missing
1	Another MA El Program (transferred)
2	Comm Health Center/Clinic
	Comm/Social Sv Agency (incl. shelter, residential
3	trtmt ctr)
4	Day Care/Educ Instit
5	Adolescent Parenting Program
6	DPH Care Coordination
7	DPH Family TIES
8	DPH Healthy Start
9	DPH Hearing Aid Program
10	Newborn Hearing Screening Prg
11	DPH MassCare
12	DPH Pediatric Primary Care
13	DPH WIC
14	DSS
15	FIRSTLink
16	Friend/Relative
17	HMO or HMO Physician
18	Home Health Svs/VNA
19	Hospital/NICU staff/Medical facility
20	Primary Care Provider
21	Public Information Ad
22	SSI
23	El Partnerships
27	DPH Lead Poisoning Program
28	FOR Families
29	Healthy Families
30	Self-referred/Prev or current El involvmt
31	Pediatrician/Physician/PCP/HMO
32	Hospital NICU staff
33	Hospital/Medical facility (not NICU)
34	Other allied health (incl. SP,PT,OT,RN)
35	Other allied mental health
36	Self-referred/Prev or current El involvmt
88	Other
99	Unknown

	-
Emp	ployment Status
1	Full-time, outside home
2	Self-employed, full-time, in the home
3	Not in Labor Force: Homemaker, full-time
4	Employed: Part-time (in or out of home)
5	Employed: Maternity/Paternity/Family leave
6	Not in Labor Force: Unemployed
7	Not in Labor Force: Student
8	Other
9	Unknown
10	Employed: Full time (incl uniformed svs)
11	Not in Labor Force: Retired
12	Not in Labor Force: Volunteer
13	Not in Labor Force: Disabled
14	Not in Labor Force: Incarcerated
88	Other
99	Unknown

### Early Intervention Clients- DIAGNOSIS Analytic Data Dictionary (PHDEI.EI\_DIAGNOSIS)

Early Intervention Clients – Diagnosis (PHDEI.EI\_DIAGNOSIS)

Variable Name	Variable Description	Meta Data	Format
DiagnosisID_EI	Diagnoses code in El		Num
ICD9Code	Valid ICD9 code		Num
ICD9Description	Text field description		Char
ICD10Code	Valid ICD10 code		Char
ICD10Description	Text field description		Char
Elig_Timeframe	Eligibility Timeframe		Char
BegDateICD9 Beginning Date for ICD9 Codes		MMDDYYYY	Char
EndDateICD9	Ending Date for ICD9 Codes	MMDDYYYY	Char
BegDatelCD10	Beginning Date for ICD10 Codes	MMDDYYYY	Char
EndDateICD10 Ending Date for ICD10 Codes		MMDDYYYY	Char

#### Early Intervention (EI) Discharge (PHDEI.EI\_DISCHARGE)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
BATTELLE_ADP_DQ_DIS CHARGE	Battelle: ADAPTIVE (ADP) Development Quotient (DQ)	55-145	Num
BATTELLE_AI_DISCHARG E	Battelle: PERSONAL- SOCIAL (P-S) - Adult Interaction (AI) raw score	0-60	Num
BATTELLE_AM_DISCHAR GE	Battelle: COGNITIVE (COG) - Attention and Memory (AM) raw score	0-60	Num
BATTELLE_COG_DQ_DIS CHARGE	Battelle: COGNITIVE (COG) Development Quotient (DQ)	55-145	Num
BATTELLE_COM_DQ_DIS CHARGE	Battelle: COMMUNICATION (COM) Development Quotient (DQ)	55-145	Num
BATTELLE_ED_DISCHAR GE	Battelle: COMMUNICATION (COM) - Expressive communication (EC) raw score	0-90	Num
BATTELLE_FM_DISCHAR GE	Battelle: MOTOR (MOT) - Fine motor (FM) raw score	0-60	Num
BATTELLE_GM_DISCHAR GE	Battelle: MOTOR (MOT) - Gross motor (GM) raw score	0-90	Num
BATTELLE_MOT_DQ_DIS CHARGE	Battelle: MOTOR (MOT) Development Quotient (DQ)	55-145	Num
BATTELLE_PC_DISCHAR GE	Battelle: COGNITIVE (COG) - Perception and Concepts (PC) raw score	0-80	Num
BATTELLE_PI_DISCHARG E	Battelle: PERSONAL- SOCIAL (P-S) - Peer Interaction (PI) raw score	0-50	Num
BATTELLE_PM_DISCHAR GE	Battelle: MOTOR (MOT) - Perceptual motor (PM) raw score	0-50	Num
BATTELLE_PR_DISCHAR GE	Battelle: ADAPTIVE (ADP) - Personal Responsibility (PR) raw score	0-50	Num
BATTELLE_PS_DQ_DISC HARGE	Battelle: PERSONAL- SOCIAL (P-S) Development Quotient (DQ)	55-145	Num
BATTELLE_RA_DISCHAR GE	Battelle: COGNITIVE (COG) - Reasoning and Academic Skills (RA) raw score	0-70	Num

Variable Name	Variable Description	Meta Data	Format
BATTELLE_RC_DISCHAR GE	Battelle: COMMUNICATION (COM) - Receptive communication (RC) raw score	0-80	Num
BATTELLE_SC_DISCHAR GE	Battelle: ADAPTIVE (ADP) - Self-Care (SC) raw score	0-70	Num
BATTELLE_SR_DISCHAR GE	Battelle: PERSONAL- SOCIAL (P-S) - Self- Concept and Social Role (SR) raw score	0-90	Num
DiagnosisID_EI	First ICD Medical diagnosis at discharge	EI diagnoses code correspond to Valid ICD9 or ICD10 code	Num
DISCHARGE_REASON_EI	Reason for discharge	See code list	Num
LAST_DATE_EI	Last service date	Date Proxy – count of days between last service date and randomly chosen date in the past NOTE: The smaller the date proxy, the more recently the event occurred	Num
LAST_YEAR_EI	Last year of service	YYYY	Num
LAST_MONTH_EI	Last month of service	Months (1-12)	Num
REFERRALS_ANOTHER_ EI	Recommended referrals at discharge: Another El program	0=No 1=Yes	Num
REFERRALS_CHILD_CAR E	Recommended referrals at discharge: Family or center child care	0=No 1=Yes	Num
REFERRALS_COMMUNIT Y_PLAY	Recommended referrals at discharge: Community playgroup	0=No 1=Yes	Num
REFERRALS_DPH_CARE _COORD	Recommended referrals at discharge: DPH Case Management	0=No 1=Yes	Num
REFERRALS_HEADSTAR T	Recommended referrals at discharge: Headstart	0=No 1=Yes	Num
REFERRALS_LEA_SPED	Recommended referrals at discharge: Public school- LEA/SPED	0=No 1=Yes	Num
REFERRALS_NONE	Recommended referrals at discharge: None	0=No 1=Yes	Num

13 Years of Age2Under 3 - Services Deemed Unnecessary3Transferred to Another El Program4Family Moved from Area5Referred to Other Services6Unable to Contact Family7Family Refused Services9Ineligible10Child Died11Incomplete Intake (No EVAL) - family seen12Incomplete Intake (No EVAL) - family not seen13Family moved out of state14Family moved out of state15Family decided on another El program16Prolonged hospitalizationNo shows/Unable to17contact/Cancels/UnResponsive18Family Inactive20Transferred/Family decided on another El prg21Ineligible according to eligibility assessment22Family choice-not interested in eligibility23evaluation24Family choice-not interested in services25EIPP CHA svs only26IFSP Goals Reached30Family Choice: Declined services31Child Died323 Years: Family opt out of LEA referral333 Years: Referral to LEA	Code	DischargeReason
2Under 3 - Services Deemed Unnecessary3Transferred to Another El Program4Family Moved from Area5Referred to Other Services6Unable to Contact Family7Family Refused Services9Ineligible10Child Died11Incomplete Intake (No EVAL) - family seen12Incomplete Intake (No EVAL) - family not seen13Family moved out of state14Family moved within the state15Family decided on another El program16Prolonged hospitalizationNo shows/Unable to17contact/Cancels/UnResponsive18Family Inactive20Transferred/Family decided on another El prg21Ineligible according to eligibility assessment22Family choice-not interested in eligibility23evaluation24Family choice-not interested in services25EIPP CHA svs only26IFSP Goals Reached30Family Choice: Declined services31Child Died323 Years: Family opt out of LEA referral	1	
3Transferred to Another El Program4Family Moved from Area5Referred to Other Services6Unable to Contact Family7Family Refused Services9Ineligible10Child Died11Incomplete Intake (No EVAL) - family seen12Incomplete Intake (No EVAL) - family not seen13Family moved out of state14Family moved within the state15Family decided on another El program16Prolonged hospitalizationNo shows/Unable to17contact/Cancels/UnResponsive18Family Inactive20Transferred/Family decided on another El prg21Ineligible according to eligibility assessment22Family choice-not interested in eligibility23evaluation24Family choice-not interested in services25EIPP CHA svs only26IFSP Goals Reached30Family Choice: Declined services31Child Died323 Years: Family opt out of LEA referral	2	
4Family Moved from Area5Referred to Other Services6Unable to Contact Family7Family Refused Services9Ineligible10Child Died11Incomplete Intake (No EVAL) - family seen12Incomplete Intake (No EVAL) - family not seen13Family moved out of state14Family moved out of state15Family decided on another EI program16Prolonged hospitalizationNo shows/Unable to17contact/Cancels/UnResponsive18Family Inactive20Transferred/Family decided on another EI prg21Ineligible according to eligibility assessment22Family choice-not interested in eligibility23evaluation24Family choice-not interested in services25EIPP CHA svs only26IFSP Goals Reached30Family Choice: Declined services31Child Died323 Years: Family opt out of LEA referral	3	
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<ul> <li>7 Family Refused Services</li> <li>9 Ineligible</li> <li>10 Child Died</li> <li>11 Incomplete Intake (No EVAL) - family seen</li> <li>12 Incomplete Intake (No EVAL) - family not seen</li> <li>13 Family moved out of state</li> <li>14 Family moved within the state</li> <li>15 Family decided on another EI program</li> <li>16 Prolonged hospitalization</li> <li>No shows/Unable to</li> <li>17 contact/Cancels/UnResponsive</li> <li>18 Family Inactive</li> <li>20 Transferred/Family decided on another EI prg</li> <li>21 Ineligible according to eligibility assessment</li> <li>22 Family choice-not interested in eligibility</li> <li>23 evaluation</li> <li>24 Family choice-not interested in services</li> <li>25 EIPP CHA svs only</li> <li>26 IFSP Goals Reached</li> <li>30 Family Choice: Declined services</li> <li>31 Child Died</li> <li>32 S Years: Family opt out of LEA referral</li> </ul>	6	
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32 3 Years: Family opt out of LEA referral	30	Family Choice: Declined services
	31	Child Died
33 3 Years: Referral to LEA	32	3 Years: Family opt out of LEA referral
	33	
34 Child Moved out of State	34	Child Moved out of State
35 No Contact/Lost Contact	35	No Contact/Lost Contact
36 Under 3: Not Eligible	36	Under 3: Not Eligible
37 3 Years: Not eligible for LEA-Referred elsewhere	37	3 Years: Not eligible for LEA-Referred elsewhere
38 3 Years: Not eligible for LEA-No other referrals	38	3 Years: Not eligible for LEA-No other referrals
39 Transferred to another MA EI program	39	Transferred to another MA EI program
88 Other	88	Other
96 Data Entry Error	96	Data Entry Error
99 Unknown	99	Unknown

Diagnosis		
ID	ICD10Code	DISCHARGE_ICD_EI1/DISCHARGE_ICD_EI2
197	Q73.0	Absence of limb
422	Q77.4	Achondroplasia
423	P02.9	ADAM Complex
184	Q04.0	Aicardi syndrome
481	B20	AIDS
476	Q44.7	
470 482	E72.9	Alagille Syndrome Amino acid metabolism disorder
402 132		
483	Q00.0 Q93.5	Anencephaly
		Angelman Syndrome
209	Q87.0	Apert Syndrome
79	D61.9	Aplastic anemia
212	M08.00	Arthritis, juvenile rheumatoid
113	Q74.3	Arthrogryposis
484	G11.3	Ataxia-Telangiectasia Atrioventricular canal defect
220	Q21.2	
503	F84.0	Autism spectrum disorder
458	Q87.40	Beals Syndrome
183	Q87.3	Beckwith-Wiedemann Syndrome
224	D61.01	Blackfan-Diamond Syndrome
225	H54.0	Blindness, both eyes
226	H54.40	Blindness, one eye
227	Q82.3	Bloch-Sulzberger Syndrome
235	G37.9	Brain Sclerosis
239	G12.22	Bulbar palsy
240	C80.1	Cancer, Other (not included on this list)
109	142.9	Cardiomyopathy
432	Q93.4	Cat Cry Syndrome (Cri-du-Chat)
433	Q92.8	Cat Eye Syndrome
243	Q04.9	Cerebral atrophy, congenital
24	G80.9	Cerebral palsy
245	161.9	Cerebrovascular accident (CVA)
182	Q89.8	CHARGE Syndrome
501	Q99.9	Chromosomal anomaly (e.g., trisomies)
247	Q37.9	Cleft lip and palate
136	Q35.9	Cleft palate
494	Q74.0	Cleidocranial Dysostosis
138	Q25.1	Coarctation of the aorta
249	Q87.1	Cockayne Syndrome
260	P35.1	Congenital CMV - Cytomegalovirus
469	E88.1	Congenital lipodystrophy
436	Q04.6	Congenital Schizencephaly
141	Q89.4	Conjoined twin
186	Q87.1	Cornelia De Lange Syndrome
255	H47.619	Cortical Blindness/Cortical Vision
		Impairment

Diagnosis ID	ICD10Code	DISCHARGE_ICD_EI1/DISCHARGE_ICD_EI2
256	Q75.0	Craniostenosis
257	Q75.1	Crouzon's Syndrome
62	E84.9	Cystic fibrosis
148	Q03.1	Dandy-Walker malformation
265	D82.1	DiGeorge Syndrome
266	G80.1	Diplegia
142	Q90.9	Down Syndrome
277	Q79.6	Ehlers-Danlos Syndrome
278	G04.90	Encephalitis
143	Q01.9	Encephalocele
27	G93.40	Encephalopathy
485	D22.9	Epidermal Nevus Syndrome
457	Q81.9	Epidermolysis Bullosa
281	G40.901	Epilepsy
282	N04.9	Epstein's Syndrome
283	P14.0	Erb's palsy (Brachial Plexis injury)
44	R62.51	Failure to Thrive
438	D61.09	Fanconi Anemia
430 289	P04.3	Fetal Alcohol effects
289 146	Q86.0	Fetal Alcohol Syndrome
293 477	Q99.2 E74.21	Fragile X Syndrome Galactosemia
19	E75.10	Gangliosidosis
166	Q79.3	Gastroschisis
69	E74.00	Glycogen storage disease
171	Q87.0	Goldenhar Syndrome
441	H91.93	Hearing impairment, bilateral
512	H91.92	Hearing impairment, left ear
513	H91.91	Hearing impairment, right ear
443	Q67.4	Hemifacial Microsomia
497	G81.90	Hemiparesis/Hemiplegia
498	P35.2	Herpes, congenital
504	Q04.2	Holoprosencephaly
63	E76.1	Hunter syndrome
150	Q04.3	Hydranencephaly
316	P83.2	Hydrops-Fetalis
318	127.0	Hypertension, pulmonary
72	E83.39	Hypophosphatasia
505	Q04.3	Hypoplasia of the brain
151	Q23.4	Hypoplastic left heart syndrome
326	E03.1	Hypothyroidism, congenital
323	G40.401	Hypsarrhythmia
152	P52.21	Intraventricular hemorrhage (grade 3)
502	P52.22	Intraventricular hemorrhage (grade 4)
487	P57.9	Kernicterus
475	Q76.1	Klippel-Feil Syndrome
167	Q74.8	Larsen Syndrome
444	E71.310	LCHAD (Long Chain Acyl CoA
		Dehydrogenase Deficiency)
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Diagnosis ID	ICD10Code	DISCHARGE_ICD_EI1/DISCHARGE_ICD_EI2
32	G31.82	Leigh's Disease
118	C95.90	Leukemia
18	E75.25	Leukodystrophy/Canavan disease
474	Q04.3	Lissencephaly
335	K76.9	Liver disease and/or dysfunction
488	H54.2	Low vision, both eyes
506	H54.52	Low vision, left eye, normal vision right eye
507	H54.51	Low vision, right eye, normal vision left eye
121	C82.50	Lymphoma
490	Q24.9	Major cardiac anomaly, other (not included
		on this list)
120	C71.9	Malignant neoplasm of brain
125	C64.9	Malignant neoplasm of kidney
70	E71.0	Maple syrup urine disease
342	G03.9	Meningitis with negative long-term effects
189	E83.09	Menkes Syndrome
173	Q78.5	Metaphyseal dysplasia
473	E71.120	Methylmalonic acidemia
170	Q02	Microcephaly
73	G71.3	Mitochondrial myopathy
33	Q87.0	Mobius sequence
85	167.5	Moyamoya disease
64	E76.3	Mucopolysaccharidosis
499	G71.0	Muscular dystrophy/Duchenne's
349	D46.9	Myelodysplasia
353	G71.11	Myotonic dystrophy
172	Q87.0	Nager-de Reynier Syndrome
491	P96.1	Neonatal Abstinence Syndrome
463	H90.3	Neural hearing loss/auditory neuropathy
403 36	Q85.00	Neurofibromatosis
356 356	Q83.00 Q87.1	Noonan Syndrome
357	H47.20	Optic Nerve Atrophy
155	Q78.0	Osteogenesis imperfecta
122	C41.9	Osteosarcoma
359 56	J38.00	Paralysis, vocal cords
56	E70.0	Phenylketonuria (PKU)
170	Q87.0	Pierre Robin Syndrome
362	Q04.3	Polymicrogyria
363	Q87.1	Prader-Willi Syndrome
68	E71.121	Propionic acidemia
492	Q72.90	Proximal Focal Fibula Deficiency (PFFD w/fibula hemimelia)
495	Q68.1	Radial Club Hand
165	H35.179	Retinopathy of Prematurity
31	F84.2	Rett Syndrome
453	C49.3	Rhabdomyosarcoma
376	P35.0	Rubella, congenital
378	Q87.2	Rubinstein-Taybi Syndrome
496	Q87.1	Russell-Silver Syndrome
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Diagnosis ID	ICD10Code	DISCHARGE_ICD_EI1/DISCHARGE_ICD_EI2
455	T74.4XXA	Shaken Baby Syndrome
178	Q87.1	Sjogren-Larsson Syndrome
181	E78.72	Smith-Lemli-Optiz Syndrome
472	Q93.88	Smith-Magenis Syndrome
74	Q87.3	Sotos Syndrome
386	G40.401	Spasms, infantile
500	Q05.9	Spina bifida/Myelomenigocele
175	P11.5	Spinal Cord Injury at birth
508	S14.109A	Spinal Cord Injury not at birth, cervical spinal cord
509	S34.109A	Spinal Cord Injury not at birth, lumbar spinal cord
510	S34.139A	Spinal Cord Injury not at birth, sacral spinal cord
511	S24.109A	Spinal Cord Injury not at birth, thoracic spinal cord
456	Q05.9	Spinal Lipomeningocele
179	Q89.8	Stickler Syndrome
30	Q85.8	Sturge-Weber disease
20	E75.02	Tay-Sachs disease
159	Q21.3	Tetralogy of Fallot
398	Q68.0	Torticollis, congenital
399	P37.1	Toxoplasmosis, congenital
405	Q20.3	Transposition of great vessels
416	S06.1X0A	Traumatic Head Injury
406	Q75.4	Treacher Collins Syndrome
168	Q85.1	Tuberous Sclerosis
180	Q87.2	VACTER Syndrome
412	Q79.8	Waardenburg-Klein Syndrome
413	Q87.89	Williams Syndrome
493	D82.0	Wiskott-Aldrich Syndrome

### Early Intervention Evaluation Analytic Data Dictionary (PHDEI.EI\_EVALUATION)

#### Early Intervention Evaluation (PHDEI.EI\_EVALUATION)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
ADOPTION_EI	Adoption status	0=No 1=Yes 2=In process 9=Unknown	Num
ADOPTION_INTERNATIONAL_	International adoption	0=No 1=Yes	Num
ASD_DIAG_DATE	Date of ASD diagnosis	Date Proxy – count of days between ASD diagnosis and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
ASD_DIAG_YEAR	Year of ASD diagnosis	YYYY	Num
ASD_DIAG_MONTH	Month of ASD diagnosis	Month (1-12)	Num
AUTISM_EI	Child has an autism diagnosis or is in the autism file	1=Yes 0=No	Num
BATTELLE_ADP_DQ_EVAL	Battelle: ADAPTIVE (ADP) Development Quotient (DQ)	55-145	Num
BATTELLE_AI_EVAL	Battelle: PERSONAL-SOCIAL (P- S) - Adult Interaction (AI) raw score	0-60	Num
BATTELLE_AM_EVAL	Battelle: COGNITIVE (COG) - Attention and Memory (AM) raw score	0-60	Num
BATTELLE_COG_DQ_EVAL	Battelle: COGNITIVE (COG) Development Quotient (DQ)	55-145	Num
BATTELLE_COM_DQ_EVAL	Battelle: COMMUNICATION (COM) Development Quotient (DQ)	55-145	Num
BATTELLE_DATE_EVAL	Date that tool (Battelle) was first used	Date Proxy – count of days between Batelle administration date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
BATTELLE_YEAR_EVAL	Year tool (Battelle) was first used	YYYY	Num
BATTELLE_MONTH_EVAL	Month tool (Battelle) was first used	Month (1-12)	Num
BATTELLE_EC_EVAL	Battelle: COMMUNICATION (COM) - Expressive communication (EC) raw score	0-90	Num

# Early Intervention Evaluation Analytic Data Dictionary (PHDEI.EI\_EVALUATION)

Variable Name	Variable Description	Meta Data	Format
BATTELLE_FM_EVAL	Battelle: MOTOR (MOT) - Fine motor (FM) raw score	0-60	Num
BATTELLE_GM_EVAL	Battelle: MOTOR (MOT) - Gross motor (GM) raw score	0-90	Num
BATTELLE_MOT_DQ_EVAL	Battelle: MOTOR (MOT) Development Quotient (DQ)	55-145	Num
BATTELLE_PC_EVAL	Battelle: COGNITIVE (COG) - Perception and Concepts (PC) raw score	0-80	Num
BATTELLE_PI_EVAL	Battelle: PERSONAL-SOCIAL (P- S) - Peer Interaction (PI) raw score	0-50	Num
BATTELLE_PM_EVAL	Battelle: MOTOR (MOT) - Perceptual motor (PM) raw score	0-50	Num
BATTELLE_PR_EVAL	Battelle: ADAPTIVE (ADP) - Personal Responsibility (PR) raw score	0-50	Num
BATTELLE_PS_DQ_EVAL	Battelle: PERSONAL-SOCIAL (P- S) Development Quotient (DQ)	55-145	Num
BATTELLE_RA_EVAL	Battelle: COGNITIVE (COG) - Reasoning and Academic Skills (RA) raw score	0-70	Num
BATTELLE_RC_EVAL	Battelle: COMMUNICATION (COM) - Receptive communication (RC) raw score	0-80	Num
BATTELLE_SC_EVAL	Battelle: ADAPTIVE (ADP) - Self- Care (SC) raw score	0-70	Num
BATTELLE_SR_EVAL	Battelle: PERSONAL-SOCIAL (P- S) - Self-Concept and Social Role (SR) raw score	0-90	Num
BLOOD_LEAD_EI	Child's blood lead levels measured 15 micrograms/dl?	0=No 1=Yes 9=Unknown	Num
CNS_ABNORMAL_EI	Suspected central nervous system abnormality?	0=No 1=Yes 9=Unknown	Num
DiagnosisID_EI	First ICD Medical diagnosis at evaluation	El diagnoses code correspond to Valid ICD9 or ICD10 code	Num
DV_EI	Domestic violence in the home?	0=No 1=Yes 9=Unknown	Num

# Early Intervention Evaluation Analytic Data Dictionary (PHDEI.EI\_EVALUATION)

Variable Name	Variable Description	Meta Data	Format
ELIGIBILITY_TYPE_EI	Eligibility category	0=Ineligible 1=Established Conditions 2=Established Delays 3=At Risk Conditions 4=Est Cond/Est Delay 5=Est Cond/At Risk 6=Est Delay/At Risk 7=All 3 8=Clinical judgment 99=Undetermined (missing DOB/DOE)	Num
EVALUATIONNO_EI	Evaluation number	Integer	Num
FAMILY_ADULTS_EI	# of parent(s)/caregiver(s) in the household	Integer	Num
FAMILY_CHILDREN_EI	# of children in the household	Integer	Num
FEEDING_DIFFICULTY_EI	Does this child have chronic feeding difficulties?	0=No 1=Yes 9=Unknown	Num
FIRST_DATE_EI	1st date when the child received actual therapeutic service	Date Proxy – count of days between first service date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
FIRST_YEAR_EI	Year when the child received actual therapeutic service	YYYY	Num
FIRST_MONTH_EI	Month when the child received actual therapeutic service	Month (1-12)	Num
GESTATIONAL_AGE_EI	Child's gestational age	Integer	Num
HOMELESSNESS_EI	Do any of the following conditions exist in the Biological or Primary Family? Homelessness?	0=No 1=Yes 9=Unknown	Num
HOSP_EI	Was child hospitalized for more than 25 days during a 6-month period of time?	0=No 1=Yes 9=Unknown	Num
HV_BABYSITTER	Location of home visit: Babysitter's home	0=No 1=Yes	Num
HV_CHILD_CARE_CENTER	Location of home visit: Child care center	0=No 1=Yes	Num
HV_FAMILY_DAY_CARE	Location of home visit: Family day care center	0=No 1=Yes	Num
HV_HOME	Location of home visit: Home	0=No 1=Yes	Num

# Early Intervention Evaluation Analytic Data Dictionary (PHDEI.EI\_EVALUATION)

Variable Name	Variable Description	Meta Data	Format
HV_OTHER_FAMILY_HOME	Location of home visit: Other	0=No 1=Yes	Num
IFSP_DATE	family member's home Individual Family Service Plan (IFSP) signature date	Date Proxy – count of days between IFSP date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
IFSP_YEAR	Year Individual Family Service Plan (IFSP) signature	YYYY	Num
IFSP_MONTH	Month Individual Family Service Plan (IFSP) signature	Month (1-12)	Num
INCOME_EI	Annual gross family income	Integer	Num
INSECURE_ATTACHMENT_EI	Does this child experience insecure attachment/interactional difficulty?	0=No 1=Yes 9=Unknown	Num
IUGR_SGA	Was child diagnosed at birth with IUGR or SGA?	0=No 1=Yes 9=Unknown	Num
LACKING_GOODS_EI	Family lacking adequate food and clothing	0=No 1=Yes 9=Unknown	Num
LACKING_SUPPORT_EI	Family lacking social supports?	0=No 1=Yes 9=Unknown	Num
MOM_AGE_EI	Biological mother's age at delivery	Age in years 999=Unknown	Num
MOM_EDU_EI	Biological mother's years of formal education	Integer	Num
MOM_PARITY_EI	Has the biological mother had 3 or more children before the age of 20?	0=No 1=Yes 9=Unknown	Num
MULTIPLE_TRAUMA_EI	Multiple trauma/losses experienced by the child?	0=No 1=Yes 9=Unknown	Num
NICU_DAYS_EI	# of days this child was in the NICU (if answered "Yes" to NICU Stay)	Integer 888=N/A	Num
NICU_EI	Was child in the NICU?	0=No 1=Yes 9=Unknown	Num
NOTIFIED_DATE_EI	Date Notified if Eligible or Ineligible	Date Proxy – count of days between notification date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num

# Early Intervention Evaluation Analytic Data Dictionary (PHDEI.EI\_EVALUATION)

Variable Name	Variable Description	Meta Data	Format
NOTIFIED_YEAR_EI	Year Notified if Eligible or Ineligible	YYYY	Num
NOTIFIED_MONTH_EI	Month Notified if Eligible or Ineligible	Month (1-12)	Num
PARENT_CONDITION_EI	Parental chronic illness or disability?	0=No 1=Yes 9=Unknown	Num
PRIMARY_SETTING_EI	Primary setting	1=Home setting 2=Community-based setting 3=Hospital setting 4=Residential treatment center setting 5=Other setting	Num
PROTECTIVE_SERVICES_EI	Open/confirmed protective service investigation	0=No 1=Yes 9=Unknown	Num
SMALL_SIZE_EI	Is this child's weight, weight for height or height for age less than the 5th percentile or child's weight for age dropped 2 or more major centiles?	0=No 1=Yes 9=Unknown	Num
SUBSTANCE_ABUSE_EI	Substance abuse in the home?	0=No 1=Yes 9=Unknown	Num

## Early Intervention DiagnosesTable -Analytic Data Dictionary <u>Reference table only</u> (PHDEI.EI\_PHD\_DiagnosesTable)

Early Intervention Diagnosis Reference (PHDEI.EI\_PHD\_DiagnosesTable)

Variable Name	Variable Description	Meta Data	Format
begdateicd9			MMDDYYYY
begdateicd10			MMDDYYYY
diagnosisid			Num
elig_timeframe			Char
enddateicd9			MMDDYYYY
enddateicd10			MMDDYYYY
icd10code			Char
icd10description			Char
icd9code			Char
icd9description			Char

#### Fetal Deaths - Registry of Vital Records and Statistics (PHDFETAL.FETALDEATH)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_FD	CHIA Match level	<ul> <li>1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.</li> <li>2=This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches. Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for completeness.</li> </ul>	Num
ALC_DURING_FD	Any alcohol consumption during pregnancy?	0=No 1=Yes 9=Unknown	Num
ALC_NUM_FD_TRI1	# of drinks first 3 mos of pregnancy	# of drinks 99=Unknown Blank=N/A (MF Record)	Num
ALC_NUM_FD_TRI2	# of drinks second 3 mos of pregnancy	# of drinks 99=Unknown Blank=N/A (MF Record)	Num
ALC_NUM_FD_TRI3	# of drinks third trimester of pregnancy	# of drinks 99=Unknown Blank=N/A (MF Record)	Num
ANOMALY_ANENCEPHAL Y_FD	Congenital anomalies - Anencephaly	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_CHD_CYANOTI C_FD	Congenital anomalies - Cyanotic congenital heart disease	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_CHROM_DIS_C ONFIRMED_FD	Congenital anomalies - suspected chromosomal disorder: Karyotype confirmed (chromosomal disorder)	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

Variable Name	Variable Description	Meta Data	Format
ANOMALY_CHROM_DISO RDER_FD	Congenital anomalies - Suspected chromosomal disorder	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_CHROM_DIS_P ENDING_FD	Congenital anomalies - suspected chromosomal disorder: Karyotype pending (chromosomal disorder)	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_CLEFT_FD	Congenital anomalies - Cleft lip with or without cleft palate	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_CLEFT_PALAT E	Congenital anomalies - Cleft palate alone	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_DIAPHRAGMA TIC_HERNIA_FD	Congenital anomalies - Congenital diaphragmatic hernia	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_DOWN_CONFI RMED_FD	Congenital anomalies - Down syndrome: Karyotype confirmed	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_DOWN_FD	Congenital anomalies - Down syndrome	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_DOWN_PENDI NG_FD	Congenital anomalies - Down syndrome: Karyotype pending	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_GASTRO_FD	Congenital anomalies - Gastroschisis	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_HYPO_FD	Congenital anomalies - Hypospadias	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_LIMB_REDUCT ION_FD	Congenital anomalies - Limb reduction defect (excluding dwarfing syndrome)	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_MENI_SB_FD	Congenital anomalies - Meningomyelocele/Spina bifida	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

Variable Name	Variable Description	Meta Data	Format
ANOMALY_NONE_FD	Congenital anomalies - None of the above	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ANOMALY_OMPH_FD	Congenital anomalies - Omphalocele	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ATTENDANT_TITLE_FD	Attendant title	1=MD 2=DO 3=CNM/CM 4=Other Midwife 5=Other (specify) 9=Unknown	Num
AUTOP_FD	Was an autopsy performed?	0=No 1=Yes 3=Planned Blank = MF record that wasn't Yes or No (planned was not an option)	Num
AUTOP_USED_FD	VIP: Were autopsy or histological placental examination results used in determining the cause of fetal death? MF: Were findings	0=No 1=Yes 8=Not applicable	Num
BIRTH_ORDER_FD	available prior to cause Birth Order	1=first born 2=second born 3=third born 4=fourth born 8=N/A (not a multiple birth) 9=unknown	Num
CENSUS_IND_FD	Bureau of census industry code (mother)	4 digit bureau of census industry code	Num
CENSUS_OCC_FD	Bureau of census occupation code (mother)	4 digit bureau of census industry code	Num
CERT_TITLE_FD	Certifier title	1=MD 2=DO 3=ME 5=NP (not available on MF records) 9=Unknown	Num
CIG_DURING_PREG_FD	Any tobacco use during pregnancy?	0=No 1=Yes	Num
CIG_NUM_FD_TRI1	# of cigarettes smoked first 3 mos of pregnancy	0-98 99=Unknown Blank=N/A (MF Record)	Num
CIG_NUM_FD_TRI2	# of cigarettes smoked second 3 mos of pregnancy	0-98 99=Unknown Blank=N/A (MF Record)	Num

Variable Name	Variable Description	Meta Data	Format
CIG_NUM_FD_TRI3	# of cigarettes smoked third trimester of pregnancy	0-98 99=Unknown Blank=N/A (MF Record)	Num
DEATH_BDA_LABOR	When did baby die?	1=Before 2=During 3=After 9=Unknown	Num
DELIV_METHOD_FD	Delivery method	1=Vaginal/spontaneous 2=Vaginal/forceps 3=Vaginal/vacuum 4=Cesarean 9=Unknown Blank=N/A (MF Record)	Num
DELIVERY_WEIGHT	Delivery weight	350 grams or greater 9999=unknown	Num
FACILITY_ID_FD	Facility Number	4 digit number 0000-9999	Char
FACILITY_TYPE_FD	Place Where Delivery Occurred	1=Hospital 2=Clinic/Doctor's Office 3=Freestanding birthing center 4=Planned Home Delivery 5=Unplanned Home Delivery 6=Other 7= home delivery (unknown if planned) option is only for MF 9=Unknown	Num
FATHER_RACE_FD	Single race/Hispanic ethnicity for father	<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown</li> </ol>	Num
FERT_AI_FD	Artificial insemination	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_ART_FD	Assisted Reproductive Technology	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_DRUG_FD	Fertility-enhancing drugs	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_EGG_FD	Anonymous egg donor	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_FD	Pregnancy resulted from infertility treatment	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

Variable Name	Variable Description	Meta Data	Format
FERT_IUI_FD	Intrauterine insemination	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_NONE_FD	Birth Trends and Technologies-None of the above	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_OTHER_FD	Other medical treatment	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_SPERM_FD	Anonymous sperm donor	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FERT_SURROGATE_FD	Surrogacy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
FETAL_DEATH_DATE	Date of fetal death	<b>Date Proxy</b> – count of days between fetal death date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
FETAL_DEATH_LINK_ID	Project specific ID that links a mother and infant	10 character alphanumeric ID	Char
FETAL_DEATH_MONTH	N/A	Months, 1-12	Num
FETAL_DEATH_YEAR	N/A	Years (YYYY)	Num
FETAL_PRESENTATION_F D	Fetal presentation at delivery	1=Cephalic 2=Breech 3=Other Blank = N/A (MF record)	Num
FIRST_PRENATAL_DATE_ FD	Date of first prenatal care visit	<b>Date Proxy</b> – count of days between date of first prenatal care visit and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
FIRST_PRENATAL_MONT	Month of first prenatal care visit	Months, 1-12	Num
FIRST_PRENATAL_YEAR_	Year of first prenatal care visit	Years (YYYY)	Num
FOREIGN_BORN_FD	Mother's country of birth	0=US born 1=Foreign born 9=Unknown	Num
GESTATIONAL_AGE_FD	VIP: Obstetric Estimate of Gestation at Delivery MF: Calculated gestational weeks	Age in weeks (20 or more) 99.99=unknown	Num

Variable Name	Variable Description	Meta Data	Format
HIST_PLAC_EXAM	Was a histological placental examination performed?	0=No 1=Yes 2=Planned Blank = N/A (MF record)	Num
HOME_BIRTH_PLANNED_ FD	Place Where Delivery Occurred: Home Delivery- -Planned Home Delivery?	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_ABRUPTIO	Initiating Cause/Condition: Abruptio placenta	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_CHOR	Initiating Cause/Condition: Chorioamnionitis	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_CORD	Initiating Cause/Condition: Prolapsed Cord	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_FETAL_ANOM	Initiating Cause/Condition: Fetal Anomaly	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_FETAL_INFECT	Initiating Cause/Condition: Fetal Infection	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_FETAL_INJ	Initiating Cause/Condition: Fetal Injury	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_MAT_COND	Initiating Cause/Condition: Maternal Condition/Disease	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_OTH_COMPLICATION	Initiating Cause/Condition: Other Obstetrical or Pregnancy Complications	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_OTH_CONDITION	Initiating Cause/Condition: Other Fetal Conditions/Disorders	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_OTHER	Initiating Cause/Condition: Complications Other	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_OTHER_SP	Initiating Cause/Condition: Complications Other specify	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

Variable Name	Variable Description	Meta Data	Format
ICC_PLAC_INSUFF	Initiating Cause/Condition: Placental insufficiency	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_RUPTURE_PRIOR_LA BOR	Initiating Cause/Condition: Rupture of membranes prior to onset of labor	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
ICC_UNKNOWN	Initiating Cause/Conditions: Unknown	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
INC_CODE_FD	City/town of fetal death	1-351 999=Unknown	Num
INC_ZIP_FD	Birth facility zip code	5 digit zip code 99999=Unknown Blank = N/A (MF record)	Char
LAD_COMP_HYS	Labor & Delivery complications - Unplanned hysterectomy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_COMP_ICU	Complications of labor & delivery - Admission to intensive care unit	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_COMP_MAT_TRANSF USE	Complications of labor & delivery - Maternal transfusion	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_COMP_NONE_FD	Maternal Morbidity-None of the above	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_COMP_OR	Labor & Delivery complications - Unplanned operating room procedure following delivery	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAD_COMP_RUPT_UTER US	Labor & Delivery complications - Ruptured uterus	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
LAST_MENSES_DATE_FD	Date of last menses	Date Proxy – count of days between date of last menses and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
LAST_MENSES_MONTH_F D	Month of last menses	Months, 1-12	Num
LAST_MENSES_YEAR_FD	Year of last menses	Years (YYYY)	Num

Variable Name	Variable Description	Meta Data	Format
MARITAL_FD	Mother's Marital Status	1=Married 2=Not married 9=Unknown	Num
MATINF_CHLAM_FD	Maternal infection - Chlamydia	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_CMV	Maternal infection - Cytomegalovirus	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_GON_FD	Maternal infections - Gonorrhea	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_GRB_STREP	Maternal infections - Group B Streptococcus	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_LISTERIA	Maternal infections - Listeria	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_NONE_FD	Infections-None of the above	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_OTHER	Maternal infections - other	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_PARO	Maternal infections - Parvovirus	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_SYPH_FD	Maternal infections - Syphilis	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATINF_TOXOPLAS	Maternal infections - Toxoplasmosis	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_DIABETES_G_F D	Maternal risk factors - Gestational diabetes	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_DIABETES_P_F D	Maternal risk factors - Diabetes, prepregnancy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

Variable Name	Variable Description	Meta Data	Format
MATRISK_C_SEC_FD	Maternal risk factors - Previous cesarean delivery	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_C_SEC_NUM_F D	Maternal risk factors - If previous cesarean, how many?	Count 99=Unknown 88 = Not applicable Blank=N/A (MF Record)	Num
MATRISK_HYPER_E_FD	Maternal risk factors - Hypertension, eclampsia	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_HYPER_G_FD	Maternal risk factors - Hypertension, gestational	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_HYPER_P_FD	Maternal risk factors - Hypertension, prepregnancy	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_NONE_FD	Risk Factors-None of the above	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MATRISK_PREV_PRETER M_FD	Maternal Risk Factors - Previous preterm birth	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_AGE_FD	Mother Calculated Age	Age in years	Num
MOTHER_EDU_FD	Highest level of maternal education	1=No HS degree 2=HS degree or GED 3=Associate or Bachelor degree 4=Post graduate 5=Other 8=Refused 9=Unknown/Unobtainable	Num
MOTHER_HEIGHT_FD	Mother's Height (ft)	1-8 9=Unknown Blank=N/A (MF Record)	Num
MOTHER_HEIGHT_IN_FD	Mother's Height (in)	00-11 99=Unknown Blank=N/A (MF Record)	Num
MOTHER_RACE_FD	Single race/Hispanic ethnicity for MOTHER	<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown</li> </ol>	Num

Variable Name	Variable Description	Meta Data	Format
MOTHER_TRANSFER	Was mother transferred for maternal medical or fetal indications for delivery?	0=No 1=Yes 9=Unknown	Num
MOTHER_WEIGHT_NOW_ FD	Mother's Weight at Delivery	Weight in pounds Blank=N/A (MF Record)	Num
MOTHER_WEIGHT_PRIOR _FD	Mother's Prepregnancy Weight	Weight in pounds Blank=N/A (MF Record)	Num
NAICS_FD	North American Industry Classification System	6 digit North American Industry code	Char
NAICS_YEAR_FD	Coding year for NAICS	4 digit year	Num
OSCC_ABRUPTIO	Other Significant Causes or Conditions: Abruptio placenta	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_CHOR	Other Significant Causes or Conditions: Chorioamnionitis	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_CORD	Other Significant Causes or Conditions: Prolapsed Cord	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_FETAL_ANOM	Other Significant Causes or Conditions: Fetal Anomaly	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_FETAL_CONDITION	Other Significant Causes or Conditions: Other Fetal Conditions/Disorders	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_FETAL_INFECT	Other Significant Causes or Conditions: Fetal Infection	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_FETAL_INJ	Other Significant Causes or Conditions: Fetal Injury	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_MATERNAL_CONDI TION	Other Significant Causes or Conditions: Maternal Conditions/Diseases	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_OTHER	Other Significant Causes or Conditions: Other	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_OTHER_COMPLICA	Other Significant Causes or Conditions: Other Obstetrical or Pregnancy Complications	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num

Variable Name	Variable Description	Meta Data	Format
OSCC_OTHER_SP	Other Significant Causes or Conditions: Other Specify	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_PLAC_INSUFF	Other Significant Causes or Conditions: Placental insufficiency	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_RUPTURE_PRIOR_ LABOR	Other Significant Causes or Conditions: Rupture of membranes prior to onset of labor	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OSCC_UNK	Other Significant Causes or Conditions: Unknown	0=No 1=Yes 9=Unknown Blank=N/A (MF Record)	Num
OTHER_OUTCOME_NUM_ FD	Number of other pregnancy outcomes	Count 99=Unknown Blank=N/A (MF Record)	Num
PLACE_FD	Type of place where fetal death occurred	1=Inpatient 2=Emergency room 3=Dead on arrival 5=Residence 6=Other Blank = N/A (VIP record)	Num
PLURALITY_FD	Plurality	1=Single 2=Twin 3=Triplet + 9=Unknown	Num
PRENATAL_CARE_COUNT FD	Total # of prenatal care visits	Integer 99=Unknown	Num
PRENATAL_PAY_FD	PNC Insurance	1=Public 2=Private 3=Other 9=Unknown Blank = N/A (MF record)	Num
PREVIOUS_LIVE_DEAD_F D	# of previous live births: now dead	Integer 99=Unknown	Num
PREVIOUS_LIVE_LIVING_ FD	# of previous live births: now living	Integer 99=Unknown	Num
REF_ME_FD	Was case referred to ME?	0=No 1=Yes 9=Missing	Num
RES_CODE_FD	Residence of Mother: City	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num
RES_ZIP_FD	Residence of Mother: Zip Code	5 digit zip code 99999=Unknown	Char
SEX_FD	Sex	1=Male 2=Female 9=Unknown or undetermined	Num

Variable Name	Variable Description	Meta Data	Format
SOC_FD	SOC code	XX-XXXX	Char
UC01_FD	immediate cause of death	Valid ICD-10 code	Char
UC02_FD	other cause of death 1	Valid ICD-10 code	Char
UC03_FD	other cause of death 2	Valid ICD-10 code	Char
UC04_FD	other cause of death 3	Valid ICD-10 code	Char
UC05_FD	other cause of death 4	Valid ICD-10 code	Char
UC06_FD	other cause of death 5	Valid ICD-10 code Note that MF only includes 4 other causes	Char
UC07_FD	other cause of death 6	Valid ICD-10 code Note that MF only includes 4 other causes	Char
UC08_FD	other cause of death 7	Valid ICD-10 code Note that MF only includes 4 other causes	Char
WIC_FD	Did mother get WIC food?	0=No 1=Yes 9=Unknown/refused Blank=N/A (MF Record)	Num

# House of Correction (HOC) Analytic Data Dictionary (PHDHOC.HOC)

#### House of Correction (PHDHOC.HOC)

Variable Name	Variable Description	Meta Data	Format
ID	Project Specific ID	9 character alphanumeric ID	Char
		1= These are CHIA members that received a high score against the DPH input record. This group includes those that matched all elements of the DPH input record and those that had only one element mismatch. The group 1 individual match determination has been optimized based upon the input elements and their overall weight.	
Match_level_HOC	CHIA Match level	2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches. Candidates in this group could match on as little as SSN or date of birth and zip code. These candidates are included for completeness.	Num
AGE_HOC	Age in years at time of release	Age in years	Num
SEX_HOC	Sex	1=Male 2=Female 9=Other or unknown	Num
RES_ZIP_HOC	Zip code of most recent residence	5 digit zip code 99999=Unknown	Char
ADMIT_DATE_HOC	Admission date for this incarceration	Date Proxy: Count of days between admission date and a random date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num

# House of Correction (HOC) Analytic Data Dictionary (PHDHOC.HOC)

	(110106.1106)			
Variable Name	Variable Description	Meta Data	Format	
RELEASE_DATE_HOC	Release date	Date Proxy: Count of days between release date and a random date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num	
COUNTY_HOC	County	1=Barnstable 2=Berkshire 3=Bristol 4=Dukes 5=Essex 6=Franklin 7=Hampden 8=Hampshire 9=Middlesex 10=Norfolk 11=Plymouth 12=Suffolk 13=Worcester	Num	
ADJ_STATUS_HOC	Adjudication status	1=Pre-trial 2=Sentenced 3=Safekeep	Num	
RACE_HOC	Race/Hispanic Ethnicity	1 = White non-Hispanic 2 = Black non-Hispanic 3 = Asian/PI non-Hispanic 4 = Hispanic 5 = American Indian or Other 9 = Unknown	Num	
ADMIT_YEAR_HOC	Year of admission for this incarceration	Years, YYYY format	Num	
ADMIT_MONTH_HOC	Month of admission for this incarceration	Months, 1-12	Num	
RELEASE_YEAR_HOC	Year of release for this incarceration	Years, YYYY format	Num	
RELEASE_MONTH_HOC	Month of release for this incarceration	Months, 1-12	Num	

### OEND\_Enrollments\_PHD\_Analytic Data Dictionary PHDTOWN.OEND\_Enrollments PHDZIP.OEND\_Enrollments

#### OEND Enrollments by Town (PHDTOWN.OEND\_Enrollments) OEND Enrollments by Zip (PHDZIP.OEND\_Enrollments)

Variable Name	Variable Description	Meta Data	Format
RES_CODE OR ZIP CODE	City/town of residence or zip code of residence	1 -351 = valid MA city/town 999 = missing/unknown/invalid	Num for res_code
		lf zip code- 5 digit zip code 99999 = missing/unknown/invalid	Char for zipcode
DOSES	Indicates the number of doses distributed	initioning, anitro with invalid	Num
NUMBER_KITS_DISTRIBUTE	DIndicates the number of kits distributed	This is calculated by doses/2	Num
TOTAL	Total enrollments	Count of all enrollments	Num
YEAR_ENROLLMENT	Year when the individual first enrolled in the program	Jan 2011 to Nov 2020	Num
FEMALE	Indicates whether gender is female	Count of females	Num
MALE	Indicates whether gender is male	Count of males	Num
OTHGENDER	Indicates whether gender is other	Count of other gender	Num
UNKGENDER	Indicates whether gender is unknown	Count of unknown gender	Num
MEANAGE	Mean Age at enrollment	In years	Num
MEDIANAGE	Median Age at enrollment	In years	Num
NON_USER	Indicates whether User Status is non-user	Count of non-users	Num
USER	Indicates whether User Status is user	Count of users	Num
AGES1159	Indicates whether Age is 11- 59 (newer age group for women of reproductive age)	Count of individuals ages 11-59	Num
AGES1549	Indicates whether Age is Ages 15-49(women of reproductive age)	Count of individuals ages 15-49	Num
AGES1524		Count of individuals ages 15-24	Num
AGES2534		Count of individuals ages 25-34	Num
AGES3544	Indicates whether Age is 35- 44	Count of individuals ages 35-44	Num
AGES4554		Count of individuals ages 45-54	Num
AGES5564		Count of individuals ages 55-64	Num

## OEND\_Enrollments\_PHD\_Analytic Data Dictionary PHDTOWN.OEND\_Enrollments PHDZIP.OEND\_Enrollments

Variable Name	Variable Description	Meta Data	Format
OVER65	Indicates whether Age is 65 and older	Count of individuals ages 65 plus	Num
WNH	Indicates whether race is White non-Hispanic	Count of individuals reporting White	Num
BNH	Indicates whether race is Black/African American non- Hispanic	Count of individuals reporting Black/African American	Num
HISPANIC	Indicates whether ethnicity is Latino	Count of individuals reporting Latino/Hispanic	Num
AMERINDIANNH	Indicates whether race is American Indian non- Hispanic	Count of individuals reporting American Indian	Num
APHNH	Indicates whether race is Asian or Hawaiian/Pacific Islander non-Hispanic	Count of individuals reporting Asian or Hawaiian/Pacific Islander	Num
MISSINGRACE	Indicates whether race is missing	Count of missing race	Num
MULTINH	Indicates whether race is Multi-Racial	Count of individuals reporting Multi-Racial	Num
OTHERNH	Indicates whether race is Other non-Hispanic	Count of individuals reporting Other Non-Hispanic	Num

### OEND\_Refills\_PHD\_Analytic Data Dictionary PHDTOWN.OEND\_Refills PHDZIP.OEND\_Refills

OEND\_Refills by Town (PHDTOWN.OEND\_Refills) OEND Refills by Zip (PHDZIP.OEND\_Refills)

Variable Name	Variable Description	Meta Data	Format
RES_CODE OR ZIP CODE		1 -351 = valid MA city/town	Num for
	zip code of residence	999 = missing/unknown/invalid	res_code
		lf zip code- 5 digit zip code 99999 = missing/unknown/invalid	Char for zipcode
DOSES	Indicates the number of doses distributed		Num
NUMBER_KITS_DISTRIBUTED	Indicates the number of kits distributed	This is calculated by doses/2	Num
TOTAL	Total refills	Count of all refills	Num
YEAR_ENCOUNTER	Year of encounter	Jan 2011 to Nov 2020	Num
FEMALE	Indicates whether gender is female	Count of females	Num
MALE	Indicates whether gender is male	Count of males	Num
OTHGENDER	Indicates whether gender is other	Count of other gender	Num
UNKGENDER	Indicates whether gender is unknown	Count of unknown gender	Num
MEANAGE	Mean Age at refill	In years	Num
MEDIANAGE	Median Age at refill	In years	Num
NON_USER	Indicates whether User Status is non-user	Count of non-users	Num
USER	Indicates whether User Status is user	Count of users	Num
AGES1159		Count of individuals ages 11-59	Num
AGES1549		Count of individuals ages 15-49	Num
AGES1524		Count of individuals ages 15-24	Num
AGES2534		Count of individuals ages 25-34	Num
AGES3544		Count of individuals ages 35-44	Num
AGES4554	Indicates whether Age is 45-54	Count of individuals ages 45-54	Num
AGES5564		Count of individuals ages 55-64	Num
OVER65	Indicates whether Age is 65 and older	Count of individuals ages 65 plus	Num

## OEND\_Refills\_PHD\_Analytic Data Dictionary PHDTOWN.OEND\_Refills PHDZIP.OEND\_Refills

Variable Name	Variable Description	Meta Data	Format
WNH		Count of individuals reporting White non- Hispanic	Num
BNH		Count of individuals reporting Black/African American non-Hispanic	Num
HISPANIC	Indicates whether ethnicity is Latino	Count of individuals reporting Latino/Hispanic	Num
AMERINDIANNH		Count of individuals reporting American Indian non-Hispanic	Num
APHNH		Count of individuals reporting Asian or Hawaiian/Pacific Islander non-Hispanic	Num
MISSINGRACE	Indicates whether race is missing	Count of missing race	Num
MULTINH	Indicates whether race is Multi-Racial	Count of individuals reporting Multi-Racial	Num
OTHERNH		Count of individuals reporting Other Non- Hispanic	Num

## OEND\_Rescues\_PHD\_Analytic Data Dictionary PHDTOWN.OEND\_Rescues PHDZIP.OEND\_Rescues

OEND Rescues by Town (PHDTOWN.OEND\_Rescues) OEND Rescues by Zip (PHDZIP.OEND\_RESCUES)

Variable Name	Variable Description	Meta Data	Format
RES_CODE OR ZIP CODE	City/town of residence or zip code of residence	1 -351 = valid MA city/town 999 = missing/unknown/invalid	Num for res_code
		If zip code- 5 digit zip code	Char for zipcode
DOSES	Indicates the number of doses distributed		Num
NUMBER_KITS_DISTRIBUTED	Indicates the number of kits distributed	This is calculated by doses/2	Num
TOTAL	Total rescues	Count of all rescues	Num
YEAR_ENCOUNTER	Year of encounter	Jan 2011 to Nov 2020	Num
FEMALE	Indicates whether gender is female	Count of females	Num
MALE	Indicates whether gender is male	Count of males	Num
OTHGENDER	Indicates whether gender is other	Count of other gender	Num
JNKGENDER	Indicates whether gender is unknown	Count of unknown gender	Num
MEANAGE	Mean Age	In years	Num
MEDIANAGE	Median Age	In years	Num
NON_USER	Indicates whether User Status is non-user	Count of non-users	Num
USER	Indicates whether User Status is user	Count of users	Num
AGES1159		Count of individuals ages 11-59	Num
AGES1549		Count of individuals ages 15-49	Num
AGES1524		Count of individuals ages 15-24	Num
AGES2534		Count of individuals ages 25-34	Num
AGES3544		Count of individuals ages 35-44	Num
AGES4554		Count of individuals ages 45-54	Num
AGES5564		Count of individuals ages 55-64	Num
OVER65		Count of individuals ages 65 plus	Num

### OEND\_Rescues\_PHD\_Analytic Data Dictionary

#### PHDTOWN.OEND\_Rescues PHDZIP.OEND\_Rescues

Variable Name Variable Description Meta Data Format WNH Indicates whether race is Count of individuals reporting White non-Num White non-Hispanic Hispanic BNH Indicates whether race is Count of individuals reporting Num Black/African American Black/African American non-Hispanic non-Hispanic HISPANIC Count of individuals reporting Num Indicates whether ethnicity is Latino Latino/Hispanic Indicates whether race is Count of individuals reporting American AMERINDIANNH Num American Indian non-Indian non-Hispanic Hispanic APHNH Indicates whether race is Count of individuals reporting Asian Num or Hawaiian/Pacific Islander non-Hispanic Asian or Hawaiian/Pacific Islander non-Hispanic MISSINGRACE Indicates whether race is Count of missing race Num missing MULTINH Indicates whether race is Count of individuals reporting Multi-Racial Num Multi-Racial OTHERNH Indicates whether race is Count of individuals reporting Other Non- Num Other non-Hispanic Hispanic SUCCESSFUL RESCUE Indicates whether the Count of successful rescues Num rescue was successful (Did the person live?) HELP Indicates whether help Count of help called and/or present Num was called and/or present OVERDOSE2011 Indicates whether there Count of overdoses in 2011 Num was an overdose in 2011 OVERDOSE2012 Indicates whether there Count of overdoses in 2012 Num was an overdose in 2012 OVERDOSE2013 Indicates whether there Count of overdoses in 2013 Num was an overdose in 2013 OVERDOSE2014 Indicates whether there Count of overdoses in 2014 Num was an overdose in 2014 OVERDOSE2015 Count of overdoses in 2015 Indicates whether there Num was an overdose in 2015 OVERDOSE2016 Indicates whether there Count of overdoses in 2016 Num was an overdose in 2016 OVERDOSE2017 Count of overdoses in 2017 Indicates whether there Num was an overdose in 2017 OVERDOSE2018 Indicates whether there Count of overdoses in 2018 Num was an overdose in 2018 OVERDOSE2019 Count of overdoses in 2019 Indicates whether there Num was an overdose in 2019 OVERDOSE2020 Indicates whether there Count of overdoses in 2020 Num was an overdose in 2020

## OEND\_RescuesbyLocation\_PHD\_Analytic Data Dictionary PHDTOWN.OEND\_rescuesbylocation

#### PHDZIP.OEND\_rescueslocationzip

<u>OEND Rescues by Town Location</u> (PHDTOWN.OEND\_rescuesbylocation) OEND Rescues by Zip (PHDZIP.OEND\_rescuesbylocation)

Variable Name	Variable Description	Meta Data	Format
RES_CODE OR ZIP CODE	City/town of rescue or zip code of rescue	1 -351 = valid MA city/town 999 = missing/unknown/invalid	Num for res_code
		lf zip code- 5 digit zip code 99999 = missing/unknown/invalid	Char for zipcode
DOSES	Indicates the number of doses distributed		Num
NUMBER_KITS_DISTRIBUTED	Indicates the number of kits distributed	This is calculated by doses/2	Num
TOTAL	Total rescues	Count of all rescues	Num
YEAR_ENCOUNTER	Year of encounter	Jan 2011 to Nov 2020	Num
FEMALE	Indicates whether gender is female	Count of females	Num
MALE	Indicates whether gender is male	Count of males	Num
OTHGENDER	Indicates whether gender is other	Count of other gender	Num
UNKGENDER	Indicates whether gender is unknown	Count of unknown gender	Num
MEANAGE	Mean Age	In years	Num
MEDIANAGE	Median Age	In years	Num
NON_USER	Indicates whether User Status is non-user	Count of non-users	Num
USER	Indicates whether User Status is user	Count of users	Num
AGES1159	Indicates whether Age is 11-59 (newer age group for women of reproductive age)	Count of individuals ages 11-59	Num
AGES1549	Indicates whether Age is Ages 15-49(women of reproductive age)	Count of individuals ages 15-49	Num
AGES1524	Indicates whether Age is 15-24	Count of individuals ages 15-24	Num
AGES2534	Indicates whether Age is 25-34	Count of individuals ages 25-34	Num
AGES3544	Indicates whether Age is 35-44	Count of individuals ages 35-44	Num
AGES4554	Indicates whether Age is 45-54	Count of individuals ages 45-54	Num
AGES5564	Indicates whether Age is 55-64	Count of individuals ages 55-64	Num
OVER65	Indicates whether Age is 65 and older	Count of individuals ages 65 plus	Num

## OEND\_RescuesbyTown\_PHD\_Analytic Data Dictionary

## PHDTOWN.OEND\_rescuesbytown

#### PHDZIP.OEND\_rescuestownzip

Variable Name	Variable Description	Meta Data	Format
WNH	White non-Hispanic	Count of individuals reporting White non- Hispanic	
BNH	Indicates whether race is Black/African American non-Hispanic	Count of individuals reporting Black/African American non-Hispanic	Num
HISPANIC	is Latino	Count of individuals reporting Latino/Hispanic	Num
AMERINDIANNH	Indicates whether race is American Indian non- Hispanic	Count of individuals reporting American Indian non-Hispanic	Num
APHNH	Indicates whether race is Asian or Hawaiian/Pacific Islander non-Hispanic	Count of individuals reporting Asian or Hawaiian/Pacific Islander non- Hispanic	Num
MISSINGRACE	Indicates whether race is missing	Count of missing race	Num
MULTINH	Indicates whether race is Multi-Racial	Count of individuals reporting Multi- Racial	Num
OTHERNH	Indicates whether race is Other non-Hispanic	Count of individuals reporting Other Non-Hispanic	Num
SUCCESSFUL_RESCUE	Indicates whether the rescue was successful (Did the person live?)	Count of successful rescues	Num
HELP	Indicates whether help was called and/or present	Count of help called and/or present	Num
OVERDOSE2011	Indicates whether there was an overdose in 2011	Count of overdoses in 2011	Num
OVERDOSE2012	Indicates whether there was an overdose in 2012	Count of overdoses in 2012	Num
OVERDOSE2013	Indicates whether there was an overdose in 2013	Count of overdoses in 2013	Num
OVERDOSE2014	Indicates whether there was an overdose in 2014	Count of overdoses in 2014	Num
OVERDOSE2015	Indicates whether there was an overdose in 2015	Count of overdoses in 2015	Num
OVERDOSE2016	Indicates whether there was an overdose in 2016	Count of overdoses in 2016	Num
OVERDOSE2017	Indicates whether there was an overdose in 2017	Count of overdoses in 2017	Num
OVERDOSE2018	Indicates whether there was an overdose in 2018	Count of overdoses in 2018	Num
OVERDOSE2019	Indicates whether there was an overdose in 2019	Count of overdoses in 2019	Num
OVERDOSE2020	Indicates whether there was an overdose in 2020	Count of overdoses in 2020	Num

# OEND\_RescuesbyTown\_PHD\_Analytic Data Dictionary

PHDTOWN.OEND\_rescuesbytown

#### PHDZIP.OEND\_rescuestownzip

OEND Rescues by Town (PHDTOWN.OEND\_RESCUESBYTOWN) OEND Rescues by Zip Code (PHDZIP.OEND\_RESCUESTOWNZIP)

Variable Name	Variable Description	Meta Data	Format
RES_CODE OR ZIP CODE	City/town of rescue or zip code of rescue	1 -351 = valid MA city/town 999 = missing/unknown/invalid	Num for res_code
		lf zip code- 5 digit zip code 99999 = missing/unknown/invalid	Char for zipcode
DOSES	Indicates the number of doses distributed		Num
NUMBER_KITS_DISTRIBUTED	Indicates the number of kits distributed	This is calculated by doses/2	Num
TOTAL	Total rescues	Count of all rescues	Num
YEAR_ENCOUNTER	Year of encounter	Jan 2011 to Nov 2020	Num
FEMALE	Indicates whether gender is female	Count of females	Num
MALE	Indicates whether gender is male	Count of males	Num
OTHGENDER	Indicates whether gender is other	Count of other gender	Num
UNKGENDER	Indicates whether gender is unknown	Count of unknown gender	Num
MEANAGE	Mean Age	In years	Num
MEDIANAGE	Median Age	In years	Num
NON_USER	Indicates whether User Status is non-user	Count of non-users	Num
USER	Indicates whether User Status is user	Count of users	Num
AGES1159	Indicates whether Age is 11-59 (newer age group for women of reproductive age)	Count of individuals ages 11-59	Num
AGES1549	Indicates whether Age is Ages 15-49(women of reproductive age)	Count of individuals ages 15-49	Num
AGES1524	Indicates whether Age is 15-24	Count of individuals ages 15-24	Num
AGES2534	Indicates whether Age is 25-34	Count of individuals ages 25-34	Num
AGES3544	Indicates whether Age is 35-44	Count of individuals ages 35-44	Num
AGES4554	Indicates whether Age is 45-54	Count of individuals ages 45-54	Num
AGES5564	Indicates whether Age is 55-64	Count of individuals ages 55-64	Num
OVER65	Indicates whether Age is 65 and older	Count of individuals ages 65 plus	Num

## OEND\_RescuesbyTown\_PHD\_Analytic Data Dictionary

## PHDTOWN.OEND\_rescuesbytown

#### PHDZIP.OEND\_rescuestownzip

Variable Name	Variable Description	Meta Data	Format
WNH	White non-Hispanic	Count of individuals reporting White non- Hispanic	
BNH	Indicates whether race is Black/African American non-Hispanic	Count of individuals reporting Black/African American non-Hispanic	Num
HISPANIC	is Latino	Count of individuals reporting Latino/Hispanic	Num
AMERINDIANNH	Indicates whether race is American Indian non- Hispanic	Count of individuals reporting American Indian non-Hispanic	Num
APHNH	Indicates whether race is Asian or Hawaiian/Pacific Islander non-Hispanic	Count of individuals reporting Asian or Hawaiian/Pacific Islander non- Hispanic	Num
MISSINGRACE	Indicates whether race is missing	Count of missing race	Num
MULTINH	Indicates whether race is Multi-Racial	Count of individuals reporting Multi- Racial	Num
OTHERNH	Indicates whether race is Other non-Hispanic	Count of individuals reporting Other Non-Hispanic	Num
SUCCESSFUL_RESCUE	Indicates whether the rescue was successful (Did the person live?)	Count of successful rescues	Num
HELP	Indicates whether help was called and/or present	Count of help called and/or present	Num
OVERDOSE2011	Indicates whether there was an overdose in 2011	Count of overdoses in 2011	Num
OVERDOSE2012	Indicates whether there was an overdose in 2012	Count of overdoses in 2012	Num
OVERDOSE2013	Indicates whether there was an overdose in 2013	Count of overdoses in 2013	Num
OVERDOSE2014	Indicates whether there was an overdose in 2014	Count of overdoses in 2014	Num
OVERDOSE2015	Indicates whether there was an overdose in 2015	Count of overdoses in 2015	Num
OVERDOSE2016	Indicates whether there was an overdose in 2016	Count of overdoses in 2016	Num
OVERDOSE2017	Indicates whether there was an overdose in 2017	Count of overdoses in 2017	Num
OVERDOSE2018	Indicates whether there was an overdose in 2018	Count of overdoses in 2018	Num
OVERDOSE2019	Indicates whether there was an overdose in 2019	Count of overdoses in 2019	Num
OVERDOSE2020	Indicates whether there was an overdose in 2020	Count of overdoses in 2020	Num

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_MATRIS	CHIA Match level	<ul> <li>1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.</li> <li>2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches. Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for</li> </ul>	Num
AGE_MATRIS	The patient's age (either calculated from date of birth or best approximation) ***CHECK AGE_UNITS_MATRIS NOT ALWAYS IN YEARS***	Integer (limited between 0-110 for years)	Num
AGE_UNITS_MATRIS	The units which the age is documented in (Hours, Days, Weeks, Months, Years)	1=Minutes 2=Hours 3=Days 4=Weeks 5=Months 6=Years 9=Unknown Age Units	Num
CHIEF_COMPLAINT1- CHIEF_COMPLAINT3	The statement of the problem by the patient or the history provider in one or two words	free text	char
DEST_TYPE_MATRIS	The type of destination the patient was delivered or transferred to	1=Home 2=Hospital 3=Medical Office/Clinic 4=Morgue 5=Nursing Home 6=Hospice 7=Other 8=Other EMS Responder (air) 9=Other EMS Responder (ground)	Num

#### Massachusetts Ambulance Trip Record Information System (PHDEMS.MATRIS)

(PHDEMS.MAT	RIS)
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Variable Name	Variable Description	Meta Data	Format
		10=Police/Jail 99=Not Applicable, Not Available, Not Known, Not Recorded, Not Reporting, Not Transported	
DRUG_USE_MATRIS 1- DRUG_USE_MATRIS 5	Indicators for the potential use of Alcohol or Drugs by the patient. Patients can have more than one value, only one value per variable	<ul> <li>1= No Apparent Alcohol/Drug Use</li> <li>2=Patient Admits to Alcohol Use</li> <li>3=Smell of Alcoholic Beverage on</li> <li>Breath/About Person</li> <li>4=Patient Admits to Drug Use</li> <li>5=Alcohol and/or Drug Paraphernalia at</li> <li>Scene</li> <li>6=Patient Denies Alcohol/Drug Use</li> <li>7=Patient refuses drug or alcohol test</li> <li>8= Positive Level (of drug or alcohol)</li> <li>known from Law Enforcement or Hospital</li> <li>Record</li> <li>9=Not Applicable, Not Available, Not</li> <li>Known, Not Recorded, Not Reporting</li> <li>(Blank) = EMS did not record any value</li> </ul>	Num
EMS_SERVICE	The state-assigned provider Number of the responding agency	4 digit code	Num
FENTANYL_EMS	fentanyl given by EMS	1=Yes 0=No	Num
HEROIN_OD_MATRIS	Heroin-related EMS event? (please note that these are a subset of all opioid- related EMS events, i.e. where OPIOID ORI MATRIS = 1)	1=Yes 0=No	Num
HOMELESS_MATRIS	Was there an indication that the patient is homeless?	0=No indication of homeless 1=Homeless based on address match only 2=Homeless based on narrative only 3=Homeless based on both address and narrative	Num
INC_CODE_MATRIS	The city or township (if applicable) where the patient was found or to which the unit responded (or best approximation)	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num
INC_DATE_MATRIS	Incident date	Date Proxy – count of days between incident date and randomly chosen date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
INC_LOC_TYPE_MAT RIS	The kind of location where the incident happened	1=Airport 2=Farm 3=Health Care Facility (clinic, hospital 4=Home/Residence 5=Industrial Place and Premises	Num

## (PHDEMS.MATRIS)

Variable Name	Variable Description	Meta Data	Format
		6=Lake, River, Ocean 7=Mine or Quarry 8=Other Location 9=Place of Recreation or Sport 10=Public Building (schools, gov, offices) 11=Residential Institution (nursing home, jail/prison 12=Street or Highway 13=Trade or Service (Business, bars, restaurants, etc 14=Unspecified place 99=Not Applicable, Not Available, Not Known, Not Recorded, Not Reporting, Missing	
INC_MONTH_MATRIS	Month the incident occurred	Months, 1-12	Num
INC_YEAR_MATRIS	Year the incident occurred	Years, YYYY format (starts 2013)	Num
INC_ZIP_MATRIS	The ZIP code of the incident location	5 digit zip 99999=Unknown	char
INCARCERATED_MA TRIS	Was there an indication that the person was incarcerated?	0=No indication of incarceration 1=Incarcerated based on address match only 2=Incarcerated based on narrative only 3=Incarcerated based on both address and narrative	Num
MORPHINE_EMS	Was morphine given by EMS?	0=No 1=Yes	Num
NARCAN_MATRIS	Final flag for incident involving naloxone administration in either the medication administered, prior aid, or narrative report fields	1=Yes 0=No	Num
NARCAN_PRIOR_AID	Final flag that naloxone was administered prior to EMS arrival	1=Yes 0=No	Num
OPIOID_ORI_MATRIS	Opioid-related EMS incident? Please refer to full documentation titled "V2 Data: Case Definitions for Opioid-Related Incidents in MATRIS" and "V3 Data: Case Definitions for Opioid- Related Incidents in MATRIS" below	1=Yes 0=No	Num
OPIOID_ORISUBCAT _MATRIS	Severity grouping of opioid- related EMS incident. Please refer to full	0=(variable opioid_ori_matris=0) 1=DOA of opioid 2=acute overdose	Num

(PHDEMS.MATRIS)
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Variable Name	Variable Description	Meta Data	Format
	documentation titled - "EMS Opioid Incidents Categorization" below When OPIOID_ORI_MATRIS=1 THEN OPIOID_ORISUBCAT_MA TRIS WILL BE BETWEEN 1-5	3=opioid intoxicated 4=opioid withdrawal 5=opioid implicated	
OTC_PAIN_EMS	Was acetaminophen or ibuprofen (advil, motrin) given by EMS?	0=No 1=Yes	Num
PAYMENT_TYPE_MA TRIS	The primary method of payment or type of insurance associated with this EMS encounter	1=Insurance 2=Medicaid 3=Medicare 4=Other Government 5=Self Pay 6=Workers Comp 7=Not Billed 8=Not Applicable 9=Unknown	Num
PRIMARY_IMPRESSI ON	The EMS personnel's impression of the patient's primary problem or most significant condition which led to the management given to the patient (treatments, medications, or procedures).	Text field. See Primary_Impression for list of text values. Also can contain ICD 10 codes, which are not included in the appendix list	char
PT_DISP_MATRIS	Type of disposition treatment and/or transport of the patient.	1=No Treatment Required 2=Obvious Signs of Death 3=Patient Refused Care 4=Treated and Released 5=Treated, Transferred Care 6=Treated, Transported by EMS 7=Treated, Transported by Law Enforcement 8=Treated, Transported by Private Vehicle 9=Not Applicable or missing	Num
RACE_MATRIS		<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown/missing</li> </ol>	Num
RES_CODE_MATRIS	The patient's home city or township or residence	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num

(PHDEMS.MATRI	S)
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Variable Name	Variable Description	Meta Data	Format
RES_ZIP_MATRIS	The patient's home ZIP code of residence	5 digit zip 99999=Unknown	char
RX_NSAID_EMS	Was Ketorolac (toradol) given by EMS?	0=No 1=Yes	Num
SECOND_COMPLAIN T1- SECOND_COMPLAIN T12	Additional statement(s) of the problem by the patient or the history provider in one or two words	Free text	char
SECOND_IMPRESSI ON1- SECOND_IMPRESSI ON11	The EMS personnel's impression of the patient's secondary problem or which led to the management given to patient (treatments, medications, or procedures).	Text field. See appendix for Secondary_Impression. Also can contain ICD 10 codes, which are not included in the appendix	char
SEX_MATRIS	Patient's gender	1=Male 2=Female 9=Unknown	Num
TYPE_REQ_MATRIS	The type of service or category of service requested of the EMS service responding for this specific EMS incident.	1=911 Response (Scene) 2=Flagdown/Walk-in 3=Intercept 4=Mutual Aid 5=Standby 9=Missing	Num
VA_MATRIS		0=No indication of VA use 1=Indication of VA use	Num

#### Primary\_Impression

Secondary\_Impression

abdominal aortic aneurysm
abdominal pain/problems
acute abdomen
acute pain, not elsewhere classifie
airway obstruction
alcohol dependence with withdrawal,
alcohol use, unspecified
alcohol use, unspecified with intox
allergic reaction
altered level of consciousness
altered mental status
anaphylactic shock
aspiration pneumonia
asthma

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back pain	
back pain (non-traumatic)	
behavioral / psychiatric disorder	
behavioral/psychiatric disorder	
bowel obstruction	
cancer	
cardiac arrest	
cardiac arrhythmia/dysrhythmia	
cardiac rhythm disturbance	
chest pain	
chest pain, other [non-cardiac]	
chest pain/discomfort	
chf (congestive heart failure)	
chronic pain, not elsewhere classif	
cocaine related disorders	
common cold.	
copd (emphysema/chronic bronchitis)	
copd with exacerbation	
dehydration	
diabetes with hyperglycemia (1); or	
diabetic hyperglycemia	
diabetic symptoms (hypoglycemia)	
diarrhea	
electrocution	
epistaxis (non-traumatic)	
etoh abuse	
evaluation request	
exposure to excessive natural cold	
febrile seizure	
fever	
flank pain	
flu like symptoms	
foreign body in digestive system, p	
g.i. bleed	
general malaise	
generalized abdominal pain	
hallucinogen related disorders	
head bleed	
headache	
	_

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heat exhaustion/stroke
heroin overdose
hypertension
hyperthermia
hypotension
hypothermia
hypovolemia/shock
influenza, unspecified
inhalant related disorders
inhalation injury (toxic gas)
injury of ankle
injury of face
injury of finger
injury of foot
injury of forearm
injury of head
injury of knee
injury of lower back
injury of lower leg
injury of neck
injury of nose
injury of shoulder or upper arm
injury of thorax (upper chest)
laceration of arm
malaise
migraine
nausea/vomiting (unknown etiology)
near syncope
no apparent illness/injury
no patient complaint (adult)
no patient complaint (child)
non-specified sedative, hypnotic, o
not applicable
not available
not known
not recorded
not reporting
ob/delivery
obvious signs of death

	(PH
opioid related disorders	
other	
other abdominal/gi problem	
other cardiovascular problem	
other cns problem	
other endocrine/metabolic problem	
other gu problems	
other illness/injury	
other ob/gyn	
other reduced mobility	
overdose of ecstasy	
pain	
paraplegia	
patient assist only	
pneumonia, unspecified	
pneumothorax, traumatic	
poisoning by cannabis derivatives/s	
poisoning by cannabis inhaled/smoke	
poisoning/drug ingestion	
polysubstance overdose	
pregnancy with contractions	
pregnancy/ob delivery	
psychoactive substance related diso	
pulmonary edema, acute	
pulmonary embolism	
respiratory arrest	
respiratory condition due to chemic	
respiratory disorder, unspecified	
respiratory distress	
respiratory distress, acute	
seizure	
seizures with status epilepticus	
seizures without status epilepticus	
sepsis	
septicemia (1); or sepsis (2)	
sexual assault/rape	
smoke inhalation	
stings/venomous bites	
stroke	

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stroke/cva	
substance/drug abuse	
sudden death non-viable	
suicidal ideations	
suicide attempt	
syncope and collapse	
syncope/fainting	
tia (transient ischemic attack)	
toxic exposure	
traumatic injury	
unconscious	
unknown problem	
unspecified infectious disease	
vaginal hemorrhage	
weakness	

### Appendix

### V2 Data: Case Definitions for Opioid-Related Incidents in MATRIS

Suspected opioid-related EMS incidents (ORIs) were identified through a three stage process.

#### Stage 1: Defining EMS incidents included

Only EMS incidents meeting the following criteria were included in the analysis:

- In order to include only emergency responses and exclude incidents between health facilities, only EMS incidents involving 911 calls were included in the analysis.
- Remove transports where chief complaint is 'dialysis'
- Remove transports where the incident state or incident county is not in Massachusetts

#### Stage 2: Define EMS incidents that are not suspected opioid-related EMS incidents (ORIs)

In order to reduce false positive, an EMS incident was not classified as an ORI if it met any of the following criteria:

- Do not classify as an ORI when the EMS transport is not related to an emergency but involves transporting a patient or a Section 12. (Note: These transports are listed incorrectly as 911 responses)
  - "section 12", "sect 12", or "sec 12" (narrative, chief complaint, secondary complaint, other complaint)
  - "transport only" (chief complaint, secondary complaint, other complaint)
- Do not classify as an ORI when EMS incident is primarily related to a traffic issue/crash.
  - "traffic" (chief complaint, secondary complaint, other complaint)
- Do not classify as an ORI when the EMS incident is responding to a suspected alcohol poisonings.
  - The words "poison" occurs AND either of the following two words are present "Alcohol" and "etoh" (chief complaint, secondary complaint, other complaint)
- Do not classify as an ORI if EMS administered fentanyl unless the incidents meets inclusion category 3 or 4.

#### Stage 3: Prioritizing criteria

• Criteria indicates which criteria is run first (i.e., cases are selected based on Criteria 1 and then cases not selected are examined using Criteria 2)

EMS Variable	Suspected Opioid Related Incident (ORI) – More Refined, May Differ by Service
DPH SAS Variable Names	dph_opioid2
Chief Complaint (CC)	Criteria 1: Heroin, Herion, Opio, Opiat, Narcan, Nalox,
[E09.05]	Methadone, Opoid, Fentanyl, Phentanyl, or Fentynal
Secondary Complaint (SC)	Criteria 2: Heroin, Herion, Opio, Opiat, Narcan, Nalox,
[E09.08]	Methadone, Opoid, Fentanyl, Phentanyl, or Fentynal
Narrative Report (NR)	Criteria 3: Must find one word from <b>both</b> lists below.
[E13.01]	• List1: Heroin, Herion
	<ul> <li>List2: Overdos, OD, O.D, O/D, Drug intox, over dos</li> </ul>
	Criteria 9: Must find one word from List1 and List2 and
	no words from List 3
	List1: Heroin, Herion
	• List2: inject, snort, sniff, ingest, took, consum,
	shot, shoot, smok, swallow, intranasal, done,
	doing, abusing, using, used
	List3: deny, denies, denied
	PLEASE NOTE - List3 is overridden if the
	patient had a positive response to naloxone,
	i.e. a person would not be excluded if they
	denied use but had a positive response to naloxone
	Criteria 10: Must find one word from both lists below.
	List1: Heroin, Herion
	List2: needle, syringe, hypodermic,     paraphernalia
	<b>Criteria 11:</b> Must find one word from List1 <b>and</b> List2
	and <b>no</b> words from List 3
	List1: Heroin, Herion
	<ul> <li>List2: today, recent</li> <li>List3: deny, denies, denied</li> </ul>
	<ul> <li>List3: deny, denies, denied</li> <li>PLEASE NOTE - List3 is overridden if the</li> </ul>
	patient had a positive response to naloxone,
	i.e. a person would not be excluded if they
	denied use but had a positive response to
	naloxone
	Criteria 14: Must find one word from both lists below.
	List1: Heroin, Herion
	<ul> <li>List2: admit, admission</li> </ul>

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<ul> <li>List1: known ivda, known ivdu</li> <li>List2: needle, syringe, hypodermic, paraphernalia</li> <li>Criteria 16: Must find one word from each of the three lists below.         <ul> <li>List1: rigor, lividity, pulseless, nonviable</li> <li>List2: syringe, hypodermic, paraphernalia</li> <li>List2: syringe, hypodermic, paraphernalia</li> <li>List3: heroin, herion, Overdos, OD, O.D, O/D, Over dos, Drug Intox</li> </ul> </li> <li>Administered Naloxone* + NR     <ul> <li>[E18.03, E13.01, E09.01]</li> <li>Naloxone administered* and</li> <li>NR contains: heroin, herion, Overdos, OD,</li> </ul> </li> </ul>		
Administered Naloxone* + NR       Eriteria 15: Must find one word from each of the three lists below.         Administered Naloxone* + NR       Eit3.01, E09.01]         [E18.03, E13.01, E09.01]       Criteria 4: Two conditions must be met:         Naloxone administered* and       N R contains: heroin, herion, Overdos, OD, O. D.		• List2: needle, syringe, hypodermic,
• List1: rigor, lividity, pulseless, nonviable         • List2: syringe, hypodermic, paraphernalia         • List2: syringe, hypodermic, paraphernalia         • List2: stringe, hypodermic, paraphernalia         • Nalconce administered* and         • NR contains: heroin, herion, Overdos, OD, O, D, O/D, Over dos, Drug Intox         Criteria 12: Two conditions must be met:         • Nalconce administered* and         • NR contains: methadone, methodone, opio, opiat, opoid, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball         * Naloxone administrerd* field         • NR contains: Narcan or Nalox         NR + CC         [E13.01] +         [E09.05]         NR + CC         Criteria 5: Two conditions must be met:         • NR contains: Narcan or Nalox         NR + cotains: nething roblem, only, o, d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle         Criteria 8: Two conditions must be met:         • NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vic		Criteria 16: Must find one word from each of the
<ul> <li>List2: syringe, hypodermic, paraphernalia</li> <li>List3: heroin, heroin, Overdos, OD, O.D, O/D, Over dos, Drug Intox</li> <li>Administered Naloxone* + NR</li> <li>[E18.03, E13.01, E09.01] + Naloxone administered* and</li> <li>NR contains: heroin, herion, Overdos, OD, O.D, O/D, Over dos, Drug Intox</li> <li>Criteria 12: Two conditions must be met:         <ul> <li>Naloxone administered* and</li> <li>NR contains: heroin, herion, Overdos, OD, O.D, O/D, Over dos, Drug Intox</li> </ul> </li> <li>Criteria 12: Two conditions must be met:         <ul> <li>Naloxone administered* and</li> <li>NR contains: methadone, methodone, opio, opiat, opoid, subox, sabox, fentaryl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, mS04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>Naloxone administrered field</li> <li>Prior aid field</li> <li>Prior aid field</li> <li>Prior aid field</li> <li>Prior aid field</li> <li>Criteria 5: Two conditions must be met:</li> <li>NR contains: Heroin or Herion, and</li> <li>CCC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, od, substance use, substance abuse, sick person, unresponsive, unconscious, mad down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> </ul> <li>Criteria 8: Two conditions must be met:         <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, mS04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul> </li> </li></ul>		three lists below.
[E18.03, E13.01, E09.01]       • Naloxone administered* and         *       NR contains: heroin, herion, Overdos, OD, O.D, O/D, Over dos, Drug Intox         Criteria 12: Two conditions must be met:       • Naloxone administered* and         • Naloxone administered* and       • Naloxone administered* and         • NR contains: Heroin on Patient       • Naloxone administered* and         • NR contains: Heroin on theroin       • CC contain		<ul> <li>List2: syringe, hypodermic, paraphernalia</li> <li>List3: heroin, herion, Overdos, OD, O.D, O/D,</li> </ul>
<ul> <li>NR contains: heroin, herion, Overdos, OD, O.D, O/D, Over dos, Drug Intox</li> <li>Criteria 12: Two conditions must be met:         <ul> <li>Naloxone administered* and</li> <li>NR contains: methadone, methodone, opio, opiat, opoid, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>Naloxone administration is counted if any of the following three fields indicated naloxone:</li></ul></li></ul>	Administered Naloxone* + NR	Criteria 4: Two conditions must be met:
<ul> <li>NR contains: heroin, herion, Overdos, OD, O.D, O/D, Over dos, Drug Intox</li> <li>Criteria 12: Two conditions must be met:         <ul> <li>Naloxone administered* and</li> <li>NR contains: methadone, methodone, opio, opiat, opoid, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>Naloxone administration is counted if any of the following three fields indicated naloxone:</li></ul></li></ul>	[E18.03, E13.01, E09.01]	<ul> <li>Naloxone administered* and</li> </ul>
<ul> <li>Naloxone administered* and</li> <li>NR contains: methadone, methodone, opio, opiat, opoid, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>* Naloxone administration is counted if any of the following three fields indicated naloxone:         <ol> <li>Medication administered field</li> <li>Prior aid field</li> <li>NR contains: Narcan or Nalox</li> </ol> </li> <li>Criteria 5: Two conditions must be met:         <ol> <li>NR contains: Narcan or Nalox</li> <li>CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> </ol> </li> <li>Criteria 8: Two conditions must be met:         <ol> <li>NR contains: neethadone, methodone, opio, opiat, subox, sabox, fentanyl, hentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ol></li></ul>	+ [E13.01]	
<ul> <li>NR contains: methadone, methodone, opio, opiat, opoid, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percoset, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball</li> <li>Naloxone administration is counted if any of the following three fields indicated naloxone:         <ol> <li>Medication administered field</li> <li>Prior aid field</li> <li>NR contains: Narcan or Nalox</li> </ol> </li> <li>NR + CC         Criteria 5: Two conditions must be met:         <ol> <li>NR contains: Narcan or Nalox</li> <li>CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, od, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle         </li> <li>Criteria 8: Two conditions must be met:         <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, fentynal, vicod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul> </li> </ol></li></ul>		
<ul> <li>opiat, opoid, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>* Naloxone administration is counted if any of the following three fields indicated naloxone:         <ol> <li>Medication administered field</li> <li>Prior aid field</li> <li>NR contains: Narcan or Nalox</li> </ol> </li> <li>NR + CC         <ol> <li>Criteria 5: Two conditions must be met:</li> <li>NR contains: Narcan or Herion, and</li> <li>CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> </ol> </li> <li>Criteria 8: Two conditions must be met:         <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul> </li> </ul>		
phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball         * Naloxone administration is counted if any of the following three fields indicated naloxone: <ol> <li>Medication administered field</li> <li>Prior aid field</li> <li>NR contains: Narcan or Nalox</li> </ol> NR + CC       Criteria 5: Two conditions must be met: <ol> <li>NR contains: Heroin or Herion, and</li> <li>CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> </ol> Criteria 8: Two conditions must be met: <ul> <li>NR contains: methadone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul>		NR contains: methadone, methodone, opio,
oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball         * Naloxone administration is counted if any of the following three fields indicated naloxone: <ol> <li>Medication administered field</li> <li>Prior aid field</li> <li>NR contains: Narcan or Nalox</li> </ol> NR + CC       Criteria 5: Two conditions must be met: <ol> <li>NR contains: Heroin or Herion, and</li> <li>CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> </ol> Criteria 8: Two conditions must be met: <ol> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ol>		opiat, opoid, subox, sabox, fentanyl,
pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball* Naloxone administration is counted if any of the following three fields indicated naloxone:1.Medication administered field2.Prior aid field3.NR contains: Narcan or NaloxNR + CCCriteria 5: Two conditions must be met:[E09.05]• NR contains: Heroin or Herion, and• CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needleCriteria 8: Two conditions must be met:• NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball • CC or NR contains: Overdos, OD, O.D, O/D,		phentanyl, fentynal, vicod, oxycod, oxycont,
dilaudid, morphine, speedball, speed ball * Naloxone administration is counted if any of the following three fields indicated naloxone: 1. Medication administered field 2. Prior aid field 3. NR contains: Narcan or Nalox  NR + CC [E13.01] + [E09.05] Criteria 5: Two conditions must be met: • NR contains: over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle Criteria 8: Two conditions must be met: • NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball • CC or NR contains: Overdos, OD, O.D, O/D,		oxys, ms04, Percocet, percoset, hydromorph,
<ul> <li>* Naloxone administration is counted if any of the following three fields indicated naloxone:         <ol> <li>Medication administered field</li> <li>Prior aid field</li> <li>NR contains: Narcan or Nalox</li> </ol> </li> <li>NR + CC         <ol> <li>Image: Comparison of the following: alter, ams, overdose, over dose, drug abuse, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> </ol> </li> <li>Criteria 8: Two conditions must be met:         <ol> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ol> </li> </ul>		pain meds, tramadol, codeine, dialaudid,
following three fields indicated naloxone:1.Medication administered field2.Prior aid field3.NR contains: Narcan or NaloxNR + CCCriteria 5: Two conditions must be met:[E13.01] +• NR contains: Heroin or Herion, and• CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needleCriteria 8: Two conditions must be met:• NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball• CC or NR contains: Overdos, OD, O.D, O/D,		dilaudid, morphine, speedball, speed ball
1.       Medication administered field         2.       Prior aid field         3.       NR contains: Narcan or Nalox         NR + CC       Criteria 5: Two conditions must be met:         [E13.01] +       •         [E09.05]       CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle         Criteria 8: Two conditions must be met:       •         •       NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball         •       CC or NR contains: Overdos, OD, O.D, O/D,		* Naloxone administration is counted if any of the
2. Prior aid field3. NR contains: Narcan or NaloxNR + CC[E13.01] +[E09.05]CC contains therein or Herion, and• CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needleCriteria 8: Two conditions must be met:• NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball• CC or NR contains: Overdos, OD, O.D, O/D,		-
3. NR contains: Narcan or Nalox         NR + CC         [E13.01] +         [E09.05]         C CC contains: Heroin or Herion, and         • CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle         Criteria 8: Two conditions must be met:         • NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball         • CC or NR contains: Overdos, OD, O.D, O/D,		1. Medication administered field
<ul> <li>NR + CC</li> <li>[E13.01] +</li> <li>[E09.05]</li> <li>Criteria 5: Two conditions must be met: <ul> <li>NR contains: Heroin or Herion, and</li> <li>CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> </ul> </li> <li>Criteria 8: Two conditions must be met: <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul> </li> </ul>		
[E13.01] +• NR contains: Heroin or Herion, and[E09.05]• CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needleCriteria 8: Two conditions must be met: • NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball • CC or NR contains: Overdos, OD, O.D, O/D,		
<ul> <li>CC contains one of the following: alter, ams, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> <li>Criteria 8: Two conditions must be met:         <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul> </li> </ul>		
<ul> <li>Cerecontains one of the following: diter, dins, overdose, over dose, drug abuse, drug use, drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> <li>Criteria 8: Two conditions must be met:         <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul> </li> </ul>		
<ul> <li>drug ingestion, od, o.d, substance use, substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> <li>Criteria 8: Two conditions must be met: <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul> </li> </ul>	[E09.05]	
<ul> <li>substance abuse, sick person, unresponsive, unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle</li> <li>Criteria 8: Two conditions must be met: <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul> </li> </ul>		
unconscious, man down, ingestion/poisoning, breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle <b>Criteria 8:</b> Two conditions must be met: • NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball • CC or NR contains: Overdos, OD, O.D, O/D,		drug ingestion, od, o.d, substance use,
breathing problem, confusion, respiratory distress, respiratory arrest, iv drug, needle <b>Criteria 8:</b> Two conditions must be met: • NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball • CC or NR contains: Overdos, OD, O.D, O/D,		substance abuse, sick person, unresponsive,
distress, respiratory arrest, iv drug, needle <b>Criteria 8:</b> Two conditions must be met: • NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball • CC or NR contains: Overdos, OD, O.D, O/D,		unconscious, man down, ingestion/poisoning,
<ul> <li>Criteria 8: Two conditions must be met:         <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul> </li> </ul>		breathing problem, confusion, respiratory
<ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul>		distress, respiratory arrest, iv drug, needle
opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball CC or NR contains: Overdos, OD, O.D, O/D,		Criteria 8: Two conditions must be met:
fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball CC or NR contains: Overdos, OD, O.D, O/D,		<ul> <li>NR contains: methadone, methodone, opio,</li> </ul>
<ul> <li>Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul>		opiat, subox, sabox, fentanyl, phentanyl,
<ul> <li>tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul>		fentynal, vicod, oxycod, oxycont, oxys, ms04,
<ul> <li>morphine, speedball, speed ball</li> <li>CC or NR contains: Overdos, OD, O.D, O/D,</li> </ul>		Percocet, percoset, hydromorph, pain meds,
CC or NR contains: Overdos, OD, O.D, O/D,		tramadol, codeine, dialaudid, dilaudid,
CC or NR contains: Overdos, OD, O.D, O/D,		morphine, speedball, speed ball
Criteria 17: Two conditions must be met:		

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	<ul> <li>NR contains: needle, syringe, hypodermic, paraphernalia</li> </ul>
	• CC contains: Overdos, OD, O.D, O/D, Over dos
Response to Naloxone + CC [E18.03 E18.07] + [E09.05]	<ul> <li>Criteria 6 Two conditions must be met:         <ul> <li>Positive response to Naloxone was indicated and</li> <li>CC contains one of the following: alter, ams, overdose, over dose, od, o/d, o.d, aloc, change in mental, unresponsive, unconscious, change in mental, change in responsiveness</li> </ul> </li> </ul>
NR+ Primary Impression (PI) [E13.01] + [E09.15]	<ul> <li>Criteria 13 Two conditions must be met:         <ul> <li>NR contains: methadone, methodone, opio, opiat, subox, sabox, fentanyl, phentanyl, fentynal, vicod, oxycod, oxycont, oxys, ms04, Percocet, percoset, hydromorph, pain meds, tramadol, codeine, dialaudid, dilaudid, morphine, speedball, speed ball and</li> <li>PI = "poisoning/drug ingestion"</li> </ul> </li> </ul>
NR + PI + CC [E13.01] + [E09.15] + [E09.05]	<ul> <li>Criteria 7 Two conditions must be met:</li> <li>NR contains Narcan, Nalox and</li> <li>CC contains: Overdos, OD, O.D, O/D, Over dos or</li> <li>PI = poisoning/drug ingestion, obvious signs of death, or substance/drug abuse</li> </ul>
	<ul> <li>Criteria 18 Two conditions must be met:</li> <li>NR or CC or PI contains: cardiac, respiratory, cardioresp, arrest and</li> <li>NR contains: syringe, hypodermic, paraphernalia</li> </ul>

### V3 Data: Case Definitions for Opioid-Related Incidents in MATRIS

Suspected opioid-related EMS incidents (ORIs) were identified through a three stage process.

### Stage 1: Defining EMS incidents included

Only EMS incidents meeting the following criteria were included in the analysis:

- In order to include only emergency responses and exclude incidents between health facilities, only EMS incidents involving 911 calls were included in the analysis.
- Remove transports where chief complaint is 'dialysis'
- Remove transports where the incident state or incident county is not in Massachusetts

#### Stage 2: Define EMS incidents that are not suspected opioid-related EMS incidents (ORIs)

In order to reduce false positive, an EMS incident was not classified as an ORI if it met any of the following criteria:

- Do not classify as an ORI when the EMS transport is not related to an emergency but involves transporting a patient or a Section 12. (Note: These transports are listed incorrectly as 911 responses)
  - "section 12", "sect 12", or "sec 12" (narrative, chief complaint, secondary complaint, other complaint)
  - "transport only" (chief complaint, secondary complaint, other complaint)
- Do not classify as an ORI when EMS incident is primarily related to a traffic issue/crash.
  - "traffic" (chief complaint, secondary complaint, other complaint)
- Do not classify as an ORI when the EMS incident is responding to a suspected alcohol poisonings.
  - The words "poison" occurs AND either of the following two words are present "Alcohol" and "etoh" (chief complaint, secondary complaint, other complaint)
- Do not classify as an ORI if EMS administered fentanyl unless the incidents meets inclusion category 3 or 4.

#### Stage 3: Prioritizing criteria

• Criteria indicates which criteria is run first (i.e., cases are selected based on Criteria 1 and then cases not selected are examined using Criteria 2)

EMS Variable	Suspected Opioid Related Incident (ORI) – More Refined, May Differ by Service
DPH SAS Variable Names	dph_opioid2
Chief Complaint (CC)	<b>Criteria 1:</b> Heroin, Herion, Opio, Opiat, Narcan, Nalox, Methadone, Opoid, Fentanyl, Phentanyl, or Fentynal
[eSituation.03, eSituation.04]	
Secondary Complaint (SC)	<b>Criteria 2:</b> Heroin, Herion, Opio, Opiat, Narcan, Nalox, Methadone, Opoid, Fentanyl, Phentanyl, or Fentynal
[eSituation.03, eSituation.04]	
Narrative Report (NR)	Criteria 3: Must find one word from both lists below.

### Case Definition for Massachusetts EMS analysis (MATRIS)

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	A list1, Haroin Harian
[oNorrative 01]	List1: Heroin, Herion
[eNarrative.01]	<ul> <li>List2: Overdos, OD, O.D, O/D, Drug intox, over dos</li> </ul>
	Criteria 9: Must find one word from List1 and List2 and
	no words from List 3
	• List1: Heroin, Herion
	• List2: inject, snort, sniff, ingest, took, consum,
	shot, shoot, smok, swallow, intranasal, done,
	doing, abusing, using, used
	List3: deny, denies, denied
	<ul> <li>PLEASE NOTE - List3 is overridden if the</li> </ul>
	patient had a positive response to naloxone,
	i.e. a person would not be excluded if they
	denied use but had a positive response to
	naloxone
	Criteria 10: Must find one word from <b>both</b> lists below.
	List1: Heroin, Herion
	• List2: needle, syringe, hypodermic,
	paraphernalia
	Criteria 11: Must find one word from List1 and List2
	and <b>no</b> words from List 3
	List1: Heroin, Herion
	• List2: today, recent
	List3: deny, denies, denied
	PLEASE NOTE - List3 is overridden if the
	patient had a positive response to naloxone,
	i.e. a person would not be excluded if they
	denied use but had a positive response to
	naloxone
	Criteria 14: Must find one word from both lists below.
	List1: Heroin, Herion
	List2: admit, admission
	<b>Criteria 15:</b> Must find one word from <b>both</b> lists below.
	List1: known ivda, known ivdu
	<ul> <li>List1: known ivda, known ivda</li> <li>List2: needle, syringe, hypodermic,</li> </ul>
	paraphernalia
	parapricinaria
	Criteria 16: Must find one word from each of the
	three lists below.
	List1: rigor, lividity, pulseless, nonviable
	List2: syringe, hypodermic, paraphernalia
	• List3: heroin, herion, Overdos, OD, O.D, O/D,
	Over dos, Drug Intox
Administered Naloxone* + NR	Criteria 4: Two conditions must be met:
	<ul> <li>Naloxone administered* and</li> </ul>
[eMedications.03, eNarrative.01, eMedications.02]	

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+ [eNarrative.01]	<ul> <li>NR contains: heroin, herion, Overdos, OD,</li> <li>O.D, O/D, Over dos, Drug Intox</li> </ul>
	<b>Criteria 12:</b> Two conditions must be met:
	Naloxone administered* and
	• NR contains: methadone, methodone, opio,
	opiat, opoid, subox, sabox, fentanyl,
	phentanyl, fentynal, vicod, oxycod, oxycont,
	oxys, ms04, Percocet, percoset, hydromorph,
	pain meds, tramadol, codeine, dialaudid,
	dilaudid, morphine, speedball, speed ball
	* Naloxone administration is counted if any of the
	following three fields indicated naloxone:
	1. Medication administered field
	2. Prior aid field
	3. NR contains: Narcan or Nalox
NR + CC	Criteria 5: Two conditions must be met:
	NR contains: Heroin or Herion, and
[eNarrative.01] +	<ul> <li>CC contains one of the following: alter, ams,</li> </ul>
[eSituation.03, eSituation.04]	overdose, over dose, drug abuse, drug use,
	drug ingestion, od, o.d, substance use,
	substance abuse, sick person, unresponsive,
	unconscious, man down, ingestion/poisoning,
	breathing problem, confusion, respiratory
	distress, respiratory arrest, iv drug, needle
	or
	<ul> <li>NR contains either rescue breath or sternal rub</li> </ul>
	• (both NR terms exclude on inhaler or asthma)
	Criteria 8: Two conditions must be met:
	• NR contains: methadone, methodone, opio,
	opiat, subox, sabox, fentanyl, phentanyl,
	fentynal, vicod, oxycod, oxycont, oxys, ms04,
	Percocet, percoset, hydromorph, pain meds,
	tramadol, codeine, dialaudid, dilaudid,
	morphine, speedball, speed ball
	• CC or NR contains: Overdos, OD, O.D, O/D,
	Over dos
	<b>Criteria 17:</b> Two conditions must be met:
	• NR contains: needle, syringe, hypodermic,
	paraphernalia
	<ul> <li>CC contains: Overdos, OD, O.D, O/D, Over dos</li> </ul>
Response to Naloxone + CC	Criteria 6 Two conditions must be met:
	Positive response to Naloxone was indicated
[eMedications.03,	and
+eMedications.07]	
+	

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[eSituation.03, eSituation.04]	• CC contains one of the following: alter, ams,
	overdose, over dose, od, o/d, o.d, aloc,
	change in mental, unresponsive, unconscious,
	change in mental, change in responsiveness
NR+ Primary Impression/ Secondary Impression (PI/SI)	Criteria 13 Two conditions must be met:
	<ul> <li>NR contains: methadone, methodone, opio,</li> </ul>
[eNarrative.01]	opiat, subox, sabox, fentanyl, phentanyl,
+	fentynal, vicod, oxycod, oxycont, oxys, ms04,
[eSituation.11, eSituation.12]	Percocet, percoset, hydromorph, pain meds,
	tramadol, codeine, dialaudid, dilaudid,
	morphine, speedball, speed ball <b>and</b>
	• PI/SI = T40.1-T40.6, T50.9, F11 (ICD 10 codes
	for opioid poisoning/drug ingestion)
NR + PI/SI + CC	Criteria 7 Two conditions must be met:
[eNarrative.01]	NR contains Narcan, Nalox and
+	• CC contains: Overdos, OD, O.D, O/D, Over dos
[eSituation.11, eSituation.12]	or
+ [eSituation.03, eSituation.04]	• PI/SI = T40.1-T40.6, T50.9, F11 ( <i>ICD 10 codes</i>
[esituation.os, esituation.o4]	for opioid poisoning/drug ingestion, or
	substance/drug abuse), R99 (ICD 10 code for obvious signs of death)
	Criteria 18 Two conditions must be met:
	• NR or CC contains: cardiac, respiratory,
	cardioresp, arrest OR PI/SI contains I21, I46,
	147, 149, 150, J95, J96, J98, J80, R06, R09, R57
	(ICD 10 codes for cardiac, respiratory, and
	cardioresp conditions) and
	NR contains: syringe, hypodermic,
	paraphernalia
	parapricitiona

### **EMS Opioid Incidents Categorization**

Documentation reviewing the 5 buckets of Opioid-Involved EMS cases in MATRIS that DPH currently tracks and reports on. Last update Sept 18, 2019

Please note – buckets are filled in a cascade. Once a case is filtered into a bucket (which are searched for in the order presented below) it is not re-examined for another bucket EXCEPT for Acute ODs that are <u>only found</u> by a positive response to naloxone – those can be re-categorized to Intoxicated or Withdrawal depending on symptom presentation

### 1. DOA Bucket

- a. Covers opioid overdoses in which the patient is declared dead on arrival, dies before transport, or where resuscitative efforts are terminated (because the patient is non-viable)
- b. It is important to note that BLS can only declare death when there are obvious signs (such as rigor mortis or dependent lividity) or conditions inconsistent with life, so they may transport patients who would otherwise have been declared dead by another care provider (i.e. transport to a hospital does not mean the patient is still alive)
- c. Search terms:

### PT\_DISPOSITION=2 (this means the patient is DOA)

#### OR

Narrative report contains one of the following And patient cannot have a destination_type of "Hospital"	
Doa, d.o.a, dead on arrival	
Time of death, determination of death, time of	
declaration	
deceased	
order(s) for (field) termination, permission to stop	
effort, cessation of resuscitation	
Obvious signs of death, obvious death	
Nonviable, non viable, non-viable	
Medical examiner	

#### OR

Narrative report contains one from Column A and one from Column B: And patient cannot have a destination_type of "Hospital".	
Column A	Column B
cardiac arrest, no pulse, pulse less, pulseless, asystole, asystolic	Dead (excludes 'dead end')
cold to (the) touch	Death (excludes 'risk(s) of refusal', 'refusal obtain')
Apneic, apneic	
mottl, rigor, mortis, livid (excludes 'no mottl', 'no rigor', 'no mortis', 'no livid')	

### 2. Acute Overdose Bucket

a. Covers acute opioid overdoses, which are defined as opioid overdoses in which the patient would not likely survive on their own without intervention (whether bystander or EMS intervention).

i. Please note - Acute Overdoses do not necessarily survive even with intervention, and transport to hospital does not mean the patient is still alive

- b. Symptoms can include respiratory failure, loss of consciousness, blue/pale/cold skin, and cardiac failure
- c. Search terms:

If the patient gets naloxone from the EMS and has a positive improvement (please note, if this is the only identifying feature for Acute OD that is found for the patient then the patient would be regrouped to Intoxicated or Withdrawal if it meets those search terms)

OR

If the patient has opioid intoxication symptoms (outlined in section 3) and had naloxone administered by prior aid

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-	•••

Narrative contains one of the following inclusion terms (and none of its corresponding exclusion	
terms)	
Inclusion terms	Exclusion terms
cardiac arrest	no cardiac arrest, not in cardiac arrest
no pulse, pulse less, pulseless, asystole, asystolic	not pulse less, not pulseless, not asystolic
apenic, apneic, agonal, aganol	not apenic, not apneic, not agonal, not aganol
respiratory arrest	not in respiratory arrest, no respiratory arrest
not breathing	
cyanotic, cyanosis, cynotic	not cyanotic, no cyanosis, not cynotic
aed	no aed, items brought on scene, items brought o/s
cpr, chest compression	no cpr, no chest compression
intubation	no intubation, did not require intubation
Bagging, bagged	no bagging, did not require bagging, not bagged
mouth to mouth, mouth-to-mouth	no mouth to mouth, did not require mouth to mouth, no
	mouth-to-mouth, did not require mouth-to-mouth
uncons AND (nalox OR narcan)	not uncons
unrespons AND (nalox OR narcan)	not go unrespons, not unrespons
реа	no pea, not in pea
rescue breath	
[respiratory rate OR rr] [is OR was] 1-7	
Bvm, opa	
GCS 3, GCS=3, GCS = 3, GCS of 3, GCS is 3,	
GCS was 3	
Epinephrine, epi	Epi-pen, epi pen, hives, allerg, Benadryl, asthma,
	injection pen, epi gastric

### 3. Opioid Intoxicated Bucket

- a. Patients who are on opioids and displaying symptoms including bradycardia, hypothermia, sedation, pinpoint pupils, slurred speech, and head nodding
  - i. Intoxication is distinguished from acute overdose in that patients are likely to survive even without intervention
- b. Will override acute OD cases that were only selected because of positive response to naloxone and regroup them to intoxicated if the search terms are met
- c. Search terms:

Narrative contains one of the following inclusion terms (and none of its corresponding exclusion terms) **Inclusion terms Exclusion terms** nodding, on the nod, nod off, nodded off Somnolent, somulent, somulant, somnolence [slurr OR garbl OR incomprehens OR unintelligi] - slurring of speech, no slurring of speech, no AND [speech, speach, word, talk] slurred speech, without slurred incoherent, not coherent small pupil pupil AND [pinpoint, pin-point, pin point, not pinpoint, not pin-point, not pin point, not constricted] constricted miosis neg miosis, no miosis, - miosis semi cons, semicons, semi-cons, semi awake, semiawake, semi-awake sternal rub letharg, grogg drows not drows, non-drows, nondrows, non drows hypoxic, hypoxia no signs of hypoxia, not hypoxic, no hypoxia, neg hypoxia, hypoxic brain injur not uncons uncons unrespons, nonrespons, non-respons, non not go unrespons, not unrespons respons, not respons arousable hypotension, hypotensive no hypotension, neg hypotension, negative hypotension, not hypotensive loss of alert no loss of alert confused not confused, tbi, brain injur black out, pass out, passed out drunk decreased respiratory no decreased respiratory verbal stimu, painful stimu slugg decreased respiratory no decreased respiratory not breath allerg

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shallow AND breath	No shallow breath
npa	
Naltrexone AND [chill, tremor, vomit, nausea,	
sweat, shake, OR seizure]	
GCS 4-9, GCS=4-9, GCS =4-9, GCS of 4-9, GCS is 4-9,	
GCS was 4-9	

### 4. Opioid Detox Bucket

- a. Patients in the opioid detox bucket include those who intentionally or unintentionally are experiencing symptoms of opioid withdrawal
- b. These symptoms include tachycardia, tachypnea, chills, tremors, vomiting, nausea, sweating, shaking, hypertension, and anxiety.
- c. This will override acute ODs only found by naloxone improvement or cases of opioid intoxication and regroup them to detox if the search terms are met
- d. Search terms

Chief Complaint or Secondary Complaint contains one of the following inclusion terms (and none of its corresponding exclusion terms)

Inclusion terms	Exclusion terms
Detox, withdraw	Alcohol, etoh

OR

Narrative contains one of the following inclusion terms (and none of its corresponding exclusion terms)		
Inclusion terms Exclusion terms		
withdraw		
tachyp	Not tachyp, no tachyp	

### 5. Opioid Implicated Bucket

- a. This remaining bucket covers all other EMS calls in which opioids were involved but they do not fall into one of the above categories.
- b. Some examples of the most common types of calls that are in this bucket include:
  - i. Suicide attempts in which opioids are used
  - ii. Calls where patient symptoms involve multiple or unknown drug mixes
  - iii. Mental health-related calls where substance use is a comorbidity

### MAVEN – Hepatitis A Case Reports Analytic Data Dictionary (PHDHEPA.HAV)

### Hepatitis A – MAVEN (PHDHEPA.HAV)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_HAV	CHIA Match level	<ul> <li>1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.</li> <li>2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches.</li> <li>Candidates in this group could match on as little as SSN or date of birth and first and last name. These candidates are included for completeness</li> </ul>	Num
AGE_HAV	Age in years at time of event	Age in years Blank = missing (question not asked)	Num
EVENT_DATE_HAV	Date case counted for surveillance purposes. Based on hierarchy of available dates: 1) symptom onset, 2) earliest specimen collection date, 3) diagnosis date, 4) create date. If no symptom onset date, then event date based on earliest specimen collection date & so on	Date Proxy – count of days between event date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
EVENT_MONTH_HAV	Month case was counted	Months, 1-12	Num
EVENT_YEAR_HAV	Year case counted	Years, YYYY	Num
HOMELESS_HAV	Indicates if either address_status = "homeless shelter" or "homeless", cur_housing_status = "homeless", or homeless = "yes".	0=No 1=Yes	Num

### MAVEN – Hepatitis A Case Reports Analytic Data Dictionary (PHDHEPA.HAV)

Variable Name	Variable Description	Meta Data	Format
IDU_INCUBATION_HAV	During the incubation period, did the case inject drugs not prescribed by a doctor?	0=no 1=yes 9=unknown Blank = missing (question not asked)	Num
NON_US_BORN_HAV	Born outside the US?	0=no 1=yes 9=unknown	Num
RACE_HAV		<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = Other, non-Hispanic</li> <li>9 = Unknown</li> <li>Blank = missing (question not asked)</li> </ol>	Num
RES_CODE_HAV	City of residence received when the case was reported	1-351 = valid MA city/town 999 = missing/unknown/invalid Blank = missing (question not asked)	Num
RES_ZIP_HAV	Zip code of residence	5 character zip code	Char
SEX_HAV	Sex	1=Male 2=Female 9=Unknown or transgender	Num

## MAVEN – Hepatitis C Case Reports Analytic Data Dictionary (PHDHEPC.HCV)

### Hepatitis C - MAVEN (PHDHEPC.HCV)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_HCV	CHIA Match level	<ul> <li>1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.</li> <li>2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches. Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for completeness.</li> </ul>	Num
AGE_HCV	Age in years at time of event	Age in years Blank = missing (question not asked)	Num
DISEASE_STATUS_HCV	Cases are classified according to appropriate CSTE case definition	1=Confirmed 2=Probable	Num
DISEASE_TYPE_HCV	Acute or chronic disease type	1=Acute 2=Chronic 9=Missing or Perinatal	Num
EVENT_DATE_HCV	The date we count a case for surveillance purposes. This is based on a hierarchy of available dates: 1) symptom onset, 2) earliest specimen collection date, 3) diagnosis date, 4) create date. If there is no symptom onset date, then the event date would be based off earliest specimen collection date and so on.	Date Proxy – count of days between event date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
EVENT_MONTH_HCV	Month case was counted	Months, 1-12	Num
EVENT_YEAR_HCV	Year case was counted	Years, YYYY format	Num

## MAVEN – Hepatitis C Case Reports Analytic Data Dictionary (PHDHEPC.HCV)

Variable Name	Variable Description	Meta Data	Format
EVER_HOMELESS_HCV	Indicates if "homeless" was ever checked as a unique address condition.	0=No 1=Yes Note, 92% of records had none of the potential unique address conditions checked	Num
EVER_IDU_HCV	Has the case ever injected drugs not prescribed by a doctor?	0=no 1=yes 9=unknown Blank = missing (question not asked)	Num
NON_US_BORN_HCV	Born outside of the US?	0=no 1=yes 9=unknown Note: This is a checkbox option for Country of Birth: US or Other and ~70% of records have nothing checked	Num
RACE_HCV		<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = Other, non-Hispanic</li> <li>9 = Unknown</li> <li>Blank = missing (question not asked)</li> </ol>	Num
RES_CODE_HCV	City of residence received when the case was initially reported	1-351 = valid MA city/town 999 = missing/unknown/invalid Blank = missing (question not asked)	Num
RES_ZIP_HCV	Zip code of residence	5 character zip code 99999 = missing	Char
SEX_HCV	Sex	1=Male 2=Female 9=Unknown or transgender	Num

## MAVEN – HIV Case Reports Analytic Data Dictionary (PHDHIV.HIV\_INC)

HIV Incidence (PHDHIV.HIV\_INC)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9-character alphanumeric ID	Char
Match_level_HIV_INC	CHIA Match level	<ul> <li>1=These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.</li> <li>2=This group contains members within the APCD that received a</li> </ul>	Num
		lower score against the DPH input record yet are considered <i>possible</i> matches. Candidates in this group could match on as little as SSN or date of birth and first and last name. These candidates are included for completeness	
DIAGNOSIS_DATE_HIV	HIV disease diagnosis date. if month is missing then it is hardcoded to June. If day is missing then it is hardcoded to the 15 <sup>th</sup> of the month.	Date Proxy=Count of days between event date and randomly chosen date in the past	Num
DIAGNOSIS_MONTH_HIV	HIV disease diagnosis MONTH. If month is missing then it is hardcoded to June.	Months, 1-12	Num
DIAGNOSIS_YEAR_HIV	Incidence cohort year	4-digit year	Num
SEX_HIV	Sex	1=Male 2=Female	Num
RES_ZIP_HIV_INC	ZIP code of residence at diagnosis. Homeless indicator is not complete	5-digit ZIP code	Num
RES_CODE_HIV_INC	City/town of residence at diagnosis	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num
RACE_HIV	Race/Hispanic Ethnicity. The "Other/Unknown" category includes	1=White Non-Hispanic 2=Black non-Hispanic 3=Asian/PI non-Hispanic 4=Hispanic	Num

### **MAVEN – HIV Case Reports**

### Analytic Data Dictionary

### (PHDHIV.HIV\_INC)

category       2=IDU         3=MSM/IDU       3=MSM/IDU         4=Het Sex       5=Presumed Het         6=Other       7=No identified risk         AGE_HIV_INC       Age in years at time of diagnosis       Age in years       Num         /IRAL_SUPPRESSED_HIV_INC       Viral suppression status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed is defined as having a VL ≤200 copies/mL for the most recent VL drawn during the 12-month period after diagnosis.       0=Not virally suppressed       Num         ENGLISH_SPEAKING_HIV       Is the case English speaking?       0=No       1=Yes       Num         NCARCERATED_HIV_INC       Was the case       0=No       1=Yes       Num		-		
EXPOSURE_HIV       HIV exposure mode category       1=MSM 2=IDU 3=MSM/IDU 4=Het Sex S=Presumed Het 6=Other 7=No identified risk         AGE_HIV_INC       Age in years at time of diagnosis       Age in years at time of diagnosis among those diagnosed in 2018. Viral suppressed 1=Virally suppress		Native, Multi-Race, and		
category       2=IDU         3=MSM/IDU       3=MSM/IDU         4=Het Sex       5=Presumed Het         6=Other       7=No identified risk         AGE_HIV_INC       Age in years at time of diagnosis       Age in years       Num         /IRAL_SUPPRESSED_HIV_INC       Viral suppression status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed is defined as having a VL ≤200 copies/mL for the most recent VL drawn during the 12-month period after diagnosis.       0=Not virally suppression status unknown (no VL in time period of interest)       Num         ENGLISH_SPEAKING_HIV       Is the case English speaking?       0=No       1=Yes       Num         NCARCERATED_HIV_INC       Was the case of diagnosis?       0=No       Num         HOMELESS_HIV_INC       Was the case of O=No       0=No       Num         HOMELESS_HIV_INC       Was the case of D=No       0=No       Num		Unknown.		
AGE_HIV_INC       Age in years at time of diagnosis       3=MSM/IDU       Num         AGE_HIV_INC       Age in years at time of diagnosis       Age in years       Num         /IRAL_SUPPRESSED_HIV_INC       Viral suppression status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed 4=Not in care continuum 9=Viral suppressed 8=Not in care continuum 9=Viral suppression status unknown (no VL in time period of interest)       Num         ENGLISH_SPEAKING_HIV       Is the case English speaking?       0=No       1=Yes 9=Unknown       Num         NCARCERATED_HIV_INC       Was the case       0=No       1=Yes 9=Unknown       Num         HOMELESS_HIV_INC       Was the case       0=No       1=Yes 9=Unknown       Num         HOMELESS_HIV_INC       Was the case       0=No       1=Yes 9=Unknown       Num	EXPOSURE_HIV	HIV exposure mode	1=MSM	
AGE_HIV_INC       Age in years at time of diagnosis       4=Het Sex       Num         AGE_HIV_INC       Age in years at time of diagnosis       Age in years       Num         /IRAL_SUPPRESSED_HIV_INC       Viral suppression status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed (agnosed in 2019. Viral suppressed (agnosed in 2018. Virally suppressed (agnosed in 2019. Viral suppression status unknown)       0=Not virally suppressed (agnosed in 2018. Virally suppressed (agnosed in 2019. Viral suppression status unknown)       Num         ENGLISH_SPEAKING_HIV       Is the case English speaking?       0=No       1=Yes       Num         NCARCERATED_HIV_INC       Was the case       0=No		category	2=IDU	
AGE_HIV_INC       Age in years at time of diagnosis       Age in years       Age in years       Num         AGE_HIV_INC       Age in years at time of diagnosis       Age in years       Num         /IRAL_SUPPRESSED_HIV_INC       Viral suppression status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed is defined as having a VL ≤200 copies/mL for the most recent VL drawn during the 12-month period after diagnosis.       0=Not virally suppressed 8=Not in care continuum 9=Viral suppression status unknown (no VL in time period of interest)       Num         ENGLISH_SPEAKING_HIV       Is the case English speaking?       0=No 1=Yes 9=Unknown       Num         NCARCERATED_HIV_INC       Was the case 0=No incarcerated at the time of diagnosis?       9=Unknown       Num         HOMELESS_HIV_INC       Was the case 0=No homeless at the time of 1=Yes       Num			3=MSM/IDU	
AGE_HIV_INC       Age in years at time of diagnosis       Age in years       Num         AGE_HIV_INC       Age in years at time of diagnosis       Age in years       Num         /IRAL_SUPPRESSED_HIV_INC       Viral suppression status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed is defined as having a VL ≤200 copies/mL for the most recent VL drawn during the 12-month period after diagnosis.       0=Not virally suppressed 8=Not in care continuum 9=Viral suppression status unknown (no VL in time period of interest)       Num         ENGLISH_SPEAKING_HIV       Is the case English speaking?       0=No       1=Yes       Num         NCARCERATED_HIV_INC       Was the case of diagnosis?       0=No       1=Yes       Num         HOMELESS_HIV_INC       Was the case of diagnosis?       0=No       1=Yes       Num			4=Het Sex	Num
AGE_HIV_INCAge in years at time of diagnosisAge in years at time of diagnosisAge in yearsNumAGE_HIV_INCAge in years at time of diagnosisAge in yearsNum/IRAL_SUPPRESSED_HIV_INCViral suppression status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed is defined as having a VL ≤200 copies/mL for the most recent VL drawn during the 12-month period after diagnosis.0=Not virally suppressed 1=Virally suppressed 8=Not in care continuum 9=Viral suppression status unknown no VL in time period of interest)NumENGLISH_SPEAKING_HIVIs the case English speaking?0=No 1=YesNumNCARCERATED_HIV_INCWas the case incarcerated at the time of diagnosis?0=No 1=YesNumHOMELESS_HIV_INCWas the case homeless at the time of 1=Yes0=No 1=YesNum			5=Presumed Het	
AGE_HIV_INC       Age in years at time of diagnosis       Age in years       Num         /IRAL_SUPPRESSED_HIV_INC       Viral suppression status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed is defined as having a VL ≤200 copies/mL for the most recent VL drawn during the 12-month period after diagnosis.       0=Not virally suppressed 3=Not in care continuum 9=Viral suppression status unknown (no VL in time period of interest)       Num         ENGLISH_SPEAKING_HIV       Is the case English speaking?       0=No 1=Yes 9=Unknown       0=No 1=Yes 9=Unknown         NCARCERATED_HIV_INC       Was the case of diagnosis?       0=No 1=Yes 9=Unknown       Num         10MELESS_HIV_INC       Was the case of diagnosis?       0=No 1=Yes 9=Unknown       Num			6=Other	
			7=No identified risk	
Image: Status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed is defined as having a VL ≤200 copies/mL for the most recent VL drawn during the 12-month period after diagnosis.0=Not virally suppressed 8=Not in care continuum 9=Viral suppression status unknown (no VL in time period of interest)NumENGLISH_SPEAKING_HIVIs the case English speaking?0=No 1=Yes 9=UnknownNumNCARCERATED_HIV_INCWas the case incarcerated at the time of diagnosis?0=No 1=Yes 9=UnknownNumHOMELESS_HIV_INCWas the case homeless at the time of 1=Yes0=No 1=YesNum	AGE_HIV_INC		Age in years	Num
speaking?     1=Yes 9=Unknown     Num       NCARCERATED_HIV_INC     Was the case incarcerated at the time of diagnosis?     0=No 9=Unknown     Num       HOMELESS_HIV_INC     Was the case homeless at the time of 1=Yes     0=No     Num	VIRAL_SUPPRESSED_HIV_INC	status in the 12-month period after diagnosis among those diagnosed in 2018. Virally suppressed is defined as having a VL ≤200 copies/mL for the most recent VL drawn during the 12-month period after diagnosis.	1=Virally suppressed 8=Not in care continuum 9=Viral suppression status unknown	Num
incarcerated at the time     1=Yes     Num       of diagnosis?     9=Unknown     1       HOMELESS_HIV_INC     Was the case     0=No       homeless at the time of     1=Yes     Num	ENGLISH_SPEAKING_HIV		1=Yes	Num
of diagnosis?     9=Unknown       HOMELESS_HIV_INC     Was the case     0=No       homeless at the time of 1=Yes     Num	INCARCERATED_HIV_INC	Was the case	0=No	
HOMELESS_HIV_INC Was the case 0=No homeless at the time of 1=Yes Num		incarcerated at the time	1=Yes	Num
homeless at the time of 1=Yes Num		of diagnosis?	9=Unknown	
	HOMELESS_HIV_INC	Was the case	0=No	
diagnosis? 9=Unknown				Num
		diagnosis?	9=Unknown	

## MAVEN – HIV Case Reports - Prevelance Analytic Data Dictionary (PHDHIV.HIV\_PRE)

#### **<u>HIV Prevalence</u>** (PHDHIV.HIV\_PRE)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9-character alphanumeric ID	Char
Match_level_HIV_PREV	CHIA Match level	1=These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match. 2=This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches. Candidates in this group could match on as little as SSN or date of birth and first and last name. These candidates are included for completeness	Num
PREV_YEAR_HIV	Year of prevalence	YYYY	Num
SEX_HIV	Sex at birth	1=Male 2=Female	Num
RACE_HIV	Race/Hispanic Ethnicity. The "Other/Unknown" category includes American Indian/Alaska Native, Multi-Race, and Unknown.	1=White Non-Hispanic 2=Black non-Hispanic 3=Asian/PI non-Hispanic 4=Hispanic 5=American Indian or Other 9=Unknown	Num
EXPOSURE_HIV	HIV exposure mode category	1=MSM 2=IDU 3=MSM/IDU 4=Het Sex 5=Presumed Het 6=Other 7=No identified risk	Num
AGE_HIV_PREV	Age as of 12/31/2019	Age in years	Num

## MAVEN – HIV Case Reports - Prevelance Analytic Data Dictionary (PHDHIV.HIV\_PRE)

Variable Name	Variable Description	Meta Data	Format
RES_ZIP_HIV_PREV	ZIP code of residence as of 12/31 of the prevalence year indicator. Based on most recent residence data available. If we only have residence at diagnosis, then that information is pulled forward through future current residence variables. Homeless indicator is not complete	5-digit ZIP code 99999 = Unknown 88888 = Homeless indicator	Num
RES_CODE_HIV_PREV	City/town of residence as of 12/31 of the prevalence year indicator. Based on most recent residence data available. If we only have residence at diagnosis, then that information is pulled forward through future current residence variables.	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num
DIAGNOSIS_DATE_AIDS	AIDS diagnosis date. If day of the month is missing then it is hardcoded to 15; if month is missing then it is hardcoded to June. Values exist for cases that have an AIDS diagnosis.	Date Proxy: count of days between event date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
DIAGNOSIS_YEAR_AIDS	Year of AIDS diagnosis	4-digit year	Num
DIAGNOSIS_MONTH_AIDS	Month of AIDS diagnosis	Months 1-12	Num
VIRAL_SUPPRESSED_PREV	Viral suppression among individuals diagnosed through 12/31 the year prior to the prevalence year, alive through 12/31 of the prevalence year, and living in Massachusetts based on last known address. Virally suppressed is defined as having a VL ≤200 copies/mL for the most recent VL drawn in the prevalence year.	0=Not virally suppressed 1=Virally suppressed 8 = Not in care continuum 9 = Viral suppression status unknown (no VL in time period of interest)	Num
CD4	Categorization of most recent CD4 count	1= <200 2=200-499 3=500+	Num
CD4_DATE_PREV	Date associated with most recent CD4 count	Date Proxy – count of days between event date and randomly chosen date in the past	Num
CD4_MONTH_PREV	Month of most recent CD4 count	•	Num
CD4_YEAR_PREV	Year of most recent CD4 count	4-digit year	Num

## MAVEN – HIV Case Reports - Prevelance Analytic Data Dictionary (PHDHIV.HIV\_PRE)

Variable Name	Variable Description	Meta Data	Format
EARLIEST_OI_DATE	The earliest date of opportunistic illness (OI) diagnosis.	Date Proxy – count of days between event date and randomly chosen date in the past	Num
INCARCERATED_LAST12_HIV	Was the case incarcerated within the past 12 months?	0=No 1=Yes 9=Unknown/missing	Num
IDU_LAST12_HIV	Has the case reported injecting drugs within the past 12 months?	0=no 1=yes 9=unknown/missing	Num
CRACK_LAST12_HIV	Has the case used crack within the past 12 months?	0=no 1=yes 9=unknown/missing	Num
COCAINE_LAST12_HIV	Has the case used cocaine within the past 12 months?	0=no 1=yes 9=unknown/missing	Num
HEROIN_LAST12_HIV	Has the case used Heroin within the past 12 months?	0=no 1=yes 9=unknown/missing	Num
METH_LAST12_HIV	Has the case used methamphetamines within the past 12 months?	0=no 1=yes 9=unknown/missing	Num
FENTANYL_LAST12_HIV	Has the case used fentanyl within the past 12 months?	0=no 1=yes 9=unknown/missing	Num

### Massachusetts Cancer Registry (PHDMCR.MCR)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_MCR	CHIA Match level	<ul> <li>1= These are CHIA members that received a high score against the DPH input record. This group includes those that matched all elements of the DPH input record and those that had only one element mismatch. The group 1 individual match determination has been optimized based upon the input elements and their overall weight.</li> <li>2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches.</li> <li>Candidates in this group could match on as little as SSN or date of birth and first and last name. These candidates are included for completeness.</li> </ul>	Num
AGE_MCR	Age at diagnosis	0= Less than 1 year old; diagnosed in utero 1=1 year old, but less than 2 years 2=120-age in years 999=Unknown	Num
BEHAVIOR_CODE	Code for the behavior of the tumor being reported using ICD-O-3	0=Benign 1=Uncertain whether benign or malignant; borderline malignancy; low malignant potential; uncertain malignant potential 2=Carcinoma in situ; intraepithelial; noninfiltrating; noninvasive 3=Malignant	Num
BIRTH_MONTH_MC R	Month of birth	1-12 99=missing/unknown	Num
BIRTH_YEAR_MCR		ΥΥΥΥ	Num
CANCER_TYPE	Seer standard cancer type	5 digit code 20010-37000 99999=Unknown <u>See cancer_type codes below</u>	Num

Variable Name	Variable Description	Meta Data	Format
DIAGNOSIS_DATE_ MCR	Date of diagnosis	Date Proxy – count of days between diagnosis date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
DIAGNOSIS_MONTH _MCR	Month of diagnosis	1-12 99=Unknown	Num
DIAGNOSIS_YEAR_ MCR	Year of diagnosis	YYYY	Num
MARITAL_MCR	Marital status at diagnosis	<ul> <li>1=Single (never married)</li> <li>2=Married (including common law)</li> <li>3=Separated</li> <li>4=Divorced</li> <li>5=Widowed</li> <li>6=Unmarried or Domestic Partner</li> <li>(same sex or opposite sex, registered or unregistered, other than common law marriage)</li> <li>9=Unknown</li> </ul>	Num
PAYER_MCR	Primary payer at diagnosis	<ul> <li>1 = Not insured</li> <li>2 = Not insured, self-pay</li> <li>10= Insurance, NOS</li> <li>20 = Private Insurance: Managed care, HMO, or PPO</li> <li>21 = Private Insurance: Fee-for-Service</li> <li>31 = Medicaid</li> <li>35 = Medicaid - Administered through a</li> <li>Managed Care plan</li> <li>60 = Medicare/Medicare, NOS</li> <li>61 = Medicare with supplement, NOS</li> <li>62 = Medicare - Administered through a</li> <li>Managed Care plan</li> <li>63 = Medicare with private supplement</li> <li>64 = Medicare with Medicaid eligibility</li> <li>65 = TRICARE</li> <li>66 = Military</li> <li>67 = Veterans Affairs</li> <li>68 = Indian/Public Health Service</li> <li>99 = Insurance status unknown</li> </ul>	Num

Variable Name	Variable Description	Meta Data	Format
RACE_MCR	Race/ethnicity	<ol> <li>1 = White non-Hispanic</li> <li>2 = Black non-Hispanic</li> <li>3 = Asian/PI non-Hispanic</li> <li>4 = Hispanic</li> <li>5 = American Indian or Other</li> <li>9 = Unknown</li> </ol>	Num
RES_ZIP_MCR	Zip code of residence at diagnosis	5 digit zip 99999=Unknown	Char
RESCODE_MCR	DPH code for city/town of residence	1-351 999=Unknown	Num
SEX_MCR	Gender	1 = Male 2 = Female 3 = Other 9 = Unknown	Num
STAGE_MCR	This is a SEER Summary Stage 2000 code derived from the Collaborative Staging system	<ul> <li>0 = In-situ/Non-invasive</li> <li>1 = Localized</li> <li>2 = Regional by direct extension</li> <li>3 = Regional to lymph nodes</li> <li>4 = Regional by direct extension and to lymph nodes</li> <li>5 = Regional</li> <li>6 = NOS</li> <li>7 = Distant or disseminated</li> <li>8 = Benign or borderline brain/CNS</li> <li>9 = Unknown</li> </ul>	Num

Cancer_Ty pe	Site Group		
Oral Cavity and Pharynx			
20010	Lip		
20020	Tongue		
20030	Salivary Gland		
20040	Floor of Mouth		
20050	Gum and Other Mouth		
20060	Nasopharynx		
20070	Tonsil		
20080	Oropharynx		
20090	Hypopharynx		
20100	Other Oral Cavity and Pharynx		
	Digestive System		
21010	Esophagus		
21020	Stomach		
21030	Small Intestine		
C	Colon excluding Rectum		
21041	Cecum		
21042	Appendix		
21043	Ascending Colon		
21044	Hepatic Flexure		
21045	Transverse Colon		
21046	Splenic Flexure		
21047	Descending Colon		
21048	Sigmoid Colon		
21049	Large Intestine, NOS		
Rectur	n and Rectosigmoid Junction		
21051	Rectosigmoid Junction		
21052	Rectum		
21060	Anus, Anal Canal and Anorectum		

Cancer Ty	Site Group
	Corpus and Uterus, NOS
27020	Corpus Uteri
27030	Uterus, NOS
27040	Ovary
27050	Vagina
27060	Vulva
27070	Other Female Genital Organs
	Male Genital System
28010	Prostate
28020	Testis
28030	Penis
28040	Other Male Genital Organs
	Urinary System
29010	Urinary Bladder
29020	Kidney and Renal Pelvis
29030	Ureter
29040	Other Urinary Organs
	Eye and Orbit
30000	Eye and Orbit
Bra	in and Other Nervous System
31010	Brain
31040	Cranial Nerves Other Nervous System
	Endocrine System
32010	Thyroid
32020	Other Endocrine including Thymus
	Hodgkin Lymphoma
33011	Hodgkin - Nodal
33012	Hodgkin - Extranodal

te Group

Liver and Intrahepatic Bile Duct				
21071	Liver			
21072	Intrahepatic Bile Duct			
21080	Gallbladder			
21090	Other Biliary			
21100	Pancreas			
21110	Retroperitoneum			
21120	Peritoneum, Omentum and Mesentery			
21130	Other Digestive Organs			
	Respiratory System			
22010	Nose, Nasal Cavity and Middle Ear			
22020	Larynx			
22030	Lung and Bronchus			
22050	Pleura			
22060	Trachea, Mediastinum and Other Respiratory Organs			
	Bones and Joints			
23000	Bones and Joints			
So	ft Tissue including Heart			
24000	Soft Tissue including Heart			
Skin ex	ccluding Basal and Squamous			
25010	Melanoma of the Skin			
25020	Other Non-Epithelial Skin			
	Breast			
26000	Breast			
Female Genital System				
27010	Cervix Uteri			

	Non-Hodgkin Lymphoma			
33041	NHL - Nodal			
33042	NHL - Extranodal			
	Myeloma			
34000	Myeloma			
	Lymphocytic Leukemia			
35011	Acute Lymphocytic Leukemia			
35012	Chronic Lymphocytic Leukemia			
35013	Other Lymphocytic Leukemia			
Му	eloid and Monocytic Leukemia			
35021	Acute Myeloid Leukemia			
35031	Acute Monocytic Leukemia			
35022	Chronic Myeloid Leukemia			
35023	Other Myeloid/Monocytic Leukemia			
	Other Leukemia			
35041	Other Acute Leukemia			
35043	Aleukemic, subleukemic and NOS			
	Mesothelioma			
36010	Mesothelioma			
Kaposi Sarcoma				
36020	Kaposi Sarcoma			
Miscellaneous				
37000	Miscellaneous			
	Invalid			
99999	Invalid			

Site Group

### Prescription Monitoring Program – PMP (PHDPMP.PMP)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_PMP	CHIA Match level	1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.	Num
		2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered possible matches. Candidates in this group could match on as little as SSN or date of birth and first name. These candidates are included for completeness.	
AGE_PMP	Age of patient	Age in years. If less than 1 age = 0 (120 is the max age, anything older was set to missing) 999=missing	Num
BENZO_PMP	Is prescription a benzodiazepine?	0=no 1= yes	Num
BUP_WAIVER	Is prescriber buprenorphine waivered?	0=No Waiver 1=Waivered	Num
BUPRENORPHINE_P MP	Is prescription a buprenorphine product? Inclusion criteria below	0=no 1= yes	Num
BUSINESS_ACTIVITY	Code for type of registrant (e.g., pharmacy, hospital, prescriber, manufacturer, etc.)	1=Pharmacy 2=Hospital/clinic 3=Practitioner 4=Teaching institution 5=Researcher or canine handler 6=Midlevels and Misc. 9=Missing	Num
DATE_FILLED	Date prescription was filled.	Date Proxy – count of days between fill date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
DATE_FILLED_MONT H	Month the rx was filled	Months, 1-12	Num
DATE_FILLED_YEAR	Year the rx was filled	Years, YYYY format	Num
DATE_WRITTEN	Date Rx Written	Date Proxy – count of days between write date and randomly chosen date in the	Num

Variable Name	Variable Description	Meta Data	Format
		past NOTE: The larger the date proxy, the more recently the event occurred	
DATE_WRITTEN_MO	Month the RX was written	Months, 1-12	Num
DATE_WRITTEN_YEA R	Year the RX was written	Years, YYYY format	Num
DAYS_SUPPLY	Estimated Number of days the medication will last.	Integer 1-999	Num
DEA_CLASS	Indicates the class to which the Drug Enforcement Administration has assigned the product under the Controlled Substances Act of 1970.	2=Schedule 2 3=schedule 3 4=schedule 4 5=schedule 5 9=Other RX	Num
DOSE_UNITS	Drug Dosage Units Code: Identifies the unit of measure for the quantity dispensed.	1=Each 2=Milliliters 3=Grams 9=missing	Num
FORM_CODE	Designates the dosage form or the type of medical supply, with the following codes.	See code list	char
GENERIC_NAME	Generic name of the product	Text field	char
GFC_CODE	Generic Formulation Code: Supplies a unique 6-digit code identifying drugs with common active ingredients, master dosage form, strength, and route of administration. The GFC is not manufacturer or package size specific, and can therefore be used in preparation of drug utilization reports and analysis of generic alternatives for substitution and formulary development.	just Numbers, 6 digits	char
HOMELESS_PMP	Did patient's residence address match a known homeless shelter or was prescription written by prescriber who primarily sees homeless patients?	0=No indication of homeless 1=Homeless based on address match only 2=Homeless based on prescriber only 3=Homeless based on both address and prescriber	Num
MME_AVG	Average daily MME for the prescription	Strength_Per_Unit*(dose/dayssupply)*MM E_Factor range 0-46080 (no decimal points) Only calculated for opioids	Num

	•		
Variable Name	Variable Description	Meta Data	Format
MME_RX	Total MME for the prescription	Strength_Per_Unit*Dose*MME_Factor range 0-100000 (no decimal points) Only calculated for opioids	Num
NDC	Product ID	Character field holding 11 digit Numeric string	char
OPIOID_PMP	Inclusion and Exclusion criteria below	0=no 1= yes	Num
PAYMENT_TYPE_PM P	Classification Code for Payment Type: Code identifying the type of payment, i.e. how it was paid for, if required by the PMP	1=Private Pay (Cash, Charge, Credit Card) 2=Medicaid 3=Medicare 4=Commercial Insurance 5=Military Installations and VA 6=Workers' Compensation 7=Indian Nations 99=Other	Num
PHARM_CITY_CODE	Pharmacy city	1-351 for valid MA city/town 999=Unknown	Num
PHARM_DEA	DEA Number Identifier assigned to the pharmacy by the Drug Enforcement Administration.	9 character ID 2 alpha following by 7 Numeric i.e. AB1234567	char
PHARM_NAME	Name of pharmacy	Text field	char
PHARM_NCPDP	First 7 characters of the ASAP NCPDP/NABP Provider ID field. Identifier assigned to pharmacy by the National Council for Prescription Drug Programs. Used if required by the PMP.	Character field holding 7 digit Numeric string	char
PHARM_NPI	National Provider Identifier (NPI). Identifier assigned to the pharmacy by CMS. Used if required by the PMP.	Character field holding 10 digit Numeric string	char
PHARM_STATE	Pharmacy state	2 character state abbreviation	char
PHARM_ZIP	Pharmacy zip code	5 digit zip 99999=Unknown	char
PREGABALIN_PMP		0=no 1= yes	Num
PRESC_CITY_CODE	City	1-351 for valid MA city/town 999=Unknown	Num
PRESC_DEA	Prescriber DEA Number.	9 character ID 2 alpha following by 7 Numeric i.e. AB1234567	Char
PRESC_DEGREE	Professional degree of the provider.	1=MD 2=DO 3=Dentist 4=Podiatrist	Num

Variable Name	Variable Description	Meta Data	Format
		5=Pharmacist 6=Optometrist 7=Mid-level provider (NP, PA, APN, etc.) *If presc_degree is 7 but presc_role (in PHDPMP.PMP_RS) has a different value (like an MD), defer to presc_role. Missing values were assigned a value of 7 as they are almost always a midlevel provider, but presc_role may have additional information* 5 digit zip	
PRESC_ZIP	Zip code (First 5 characters)	99999=Unknown	char
PRODUCT_NAME	Supplies the name given to the product by the manufacturer.	Text field	char
QUANTITY	Quantity Dispensed: Number of metric units dispensed in metric decimal format.	Numeric value (may include up to 2 decimal places)	Num
REFILL_NUM	Refill Number: Number of the fill of the prescription.	0 indicates New Rx 1-99 is the refill Number.	Num
REFILL_WRITTEN	The Number of refills authorized by the prescriber.	Integer 0-99	Num
RELATION_TO_PATI ENT	Relationship of Person Dropping Off or Picking Up Rx. Code indicating the relationship of the person, if required by the PMP	1=Patient 2=Other	Num
RES_CODE_PMP	City of patient	1-351 for valid MA city/town 999=Unknown	Num
RES_ZIP_PMP	Abbreviated Zip code of patient	5 digit zip 99999=Unknown	char
ROA_CODE	Route of Administration Code: Identifies the product's intake or application method. Following are the codes and their interpretation.	<u>See code list</u>	char
SEX_PMP	Sex of patient	1=Male 2=Female 9=Unknown	Num
SOLID_LIQUID	Indicates the product's composition, and appears in all records.	1=Solid 2=Liquid 9=missing	Num
STRENGTH_NAME	Supplies the strength of the product.	Text field	char
SUBOPIOID_PMP		1= Butorphanol 2= Codeine 3= Difenoxin 4= Diphenoxylate 5= Eluxadoline	Num

Variable Name	Variable Description	Meta Data	Format
		6= FENTANYL 7= Hydrocodone 8= Hydromorphone 9= Levorphanol 10= Meperidine 11= Methadone 12= Morphine 13= Opium 14= Oxycodone 15= Oxymorphone 16= Pentazocine 17= Propoxyphene 18= Tapentadol 19= Tramadol 99= not an opioid	
THERA_CLASS_COD E	Supplies the therapeutic/pharmacologic category of the product.	See code list	Num
VA_PMP	Flag for whether or not prescription was filled via VA or had a VA provider	0=Not VA anything 1= VA Filled Script, VA provider, or VA paid	Num

Form Code	Form Desc	Form Code	Form Desc
AF	FOAM (GRAM)	KQ	PASTE (ML)
AJ	AEROSOL WITH ADAPTER (GRAM)	KW	CREAM WITH APPLICATOR
AL	AMPUL FOR NEBULIZATION (ML)	LK	TABLET, ORAL ONLY, IR AND ER, BIPHASIC
AN	VIAL, NEBULIZER (ML)	LP	LOZENGE ON A HANDLE
AO	AEROSOL, BREATH ACTIVATED	LY	TABLET, ORAL ONLY, EXTENDED RELEASE 24 HR
AQ	AEROSOL, SPRAY (GRAM)	MA	MUCOADHESIVE SYSTEM, EXTEND. RELEASE 12 H
AS	AEROSOL, SPRAY (ML)	MD	CAPSULE, ORAL ONLY, EXT. RELEASE PELLETS
AT	AEROSOL, SPRAY WITH PUMP (ML)	MH	CAPSULE, ORAL ONLY, EXTENDED RELEASE 12HR
AU	SPRAY, NON-AEROSOL (ML)	MJ	PATCH, TRANSDERMAL 3 DAY
AX	SPRAY, NON-AEROSOL (EA)	MS	TABLET, CHEW, IR AND ER BIPHASIC REL 24HR
AY	AEROSOL POWDER, BREATH ACTIVATED (EA)	MW	TABLET, DISINTEGRATING, ER BIPHASIC 24 HR
BJ	HFA AEROSOL WITH ADAPTER (GRAM)	MZ	SUSPENSION, IMMED, EXTEN REL BIPHASIC 24HR
BK	SPRAY, SUSPENSION	NB	CREAM WITH PERINEAL APPLICATOR
BL	SUSP FOR RECON, DELAYED REL. IN A PACKET	NF	CAPSULE SPRINKLE, ER 12 HR (TAMPER RESIST)
BN	AEROSOL, SPRAY WITH PUMP (GRAM)	NI	CAPSULE (WITH DELAYED RELEASE TABLETS)
BQ	SPRAY, SUSPENSION (ML)	OA	OINTMENT (GRAM)
CA	CAPSULE	OM	TABLET, ORAL ONLY, EXTENDED RELEASE
СВ	CAPSULE, EXTENDED RELEASE 12 HR	OW	OINTMENT WITH APPLICATOR
CC	CAPSULE, EXT RELEASE 24 HR	PA	POWDER (GRAM)
CD	CAPSULE, WITH INHALATION DEVICE	PC	CRYSTALS
CE	CAPSULE, DELAYED RELEASE (ENTERIC COATED)	PG	GRANULES (GRAM)
CG	CAPSULE, EXTENDED RELEASE BIPHASIC 30-70	PI	SOLUTION, RECONSTITUTED, ORAL
СН	CAPSULE, EXTENDED RELEASE BIPHASIC 50-50	PJ	SUSPENSION, EXTENDED RELEASE 12 HR
CI	CAPSULE, EXTENDED RELEASE MULTIPHASE 12HR	РК	PATCH, TRANSDERMAL WEEKLY
CJ	CAPSULE, EXTENDED RELEASE MULTIPHASE 24HR	PL	CLEANSER (GRAM)
СК	CAPSULE, SPRINKLE	РР	PACKET (EA)
CN	CAPSULE, EXTENDED RELEASE PELLETS	PQ	PATCH, TRANSDERMAL SEMIWEEKLY
СР	CAPSULE, EXTENDED RELEASE PELLETS 24 HR	PR	PATCH, TRANSDERMAL 72 HOURS
CR	CAPSULE, EXTENDED RELEASE 24HR	PS	ADHESIVE PATCH, MEDICATED
CS	CAPSULE, EXTENDED RELEASE	PV	PATCH, TRANSDERMAL 24 HOURS
СТ	CAPSULE, EXTENDED-RELEASE 24HR DEGRADABLE	QA	SUPPOSITORY, RECTAL
CU	CAPSULE, ER SPRINKLE, BIPHASIC 40-60	QB	INSERT
CX	CAPSULE, DELAYED RELEASE, BIPHASIC	QC	SUPPOSITORY, VAGINAL
DB	DROPPERETTE, GEL	QV	RING, VAGINAL
DF	CAPSULE, DELAYED, AND EXTENDED RELEASE	QY	CAPSULE, EXTENDED RELEASE TRIPHASIC 24HR
DH	GEL, EXTENDED RELEASE (ML)	QZ	SUSPENSION, EXTENDED RELEASE, RECONST. 24H
DJ	DROPS, GEL (ML)	RB	EMULSION (GRAM)
DL	CAPSULE, EXT. RELEASE 24 HR BIPHASIC 25-75	RL	LIQUID (GRAM)
DN	CAPSULE, EXT. RELEASE 24 HR BIPHASIC 17-83	RP	DROPS, WITH APPLICATOR (ML)
DO	AEROSOL, SPRAY WITH PUMP (EA)	SA	SOLUTION, NON-ORAL
DP	DROPPERETTE, SINGLE-USE DROP DISPENSER	SC	SUSPENSION, ORAL (FINAL DOSE FORM)
EA	EACH	SE	ELIXIR
ET	PADS, MEDICATED (EA)	SF	ENEMA (ML)
EX	TABLET, EXTENDED RELEASE 24 HR	SJ	SOLUTION, ORAL
EY	SOLUTION IN METERED-DOSE PUMP WITH APPL.	SK	LOTION (ML)
FF	TABLET, EXTENDED RELEASE 12 HR	SL	LIQUID (ML)
FI	FILM, MEDICATED (EA)	SM	MOUTHWASH

Form		Form		
Code	Form Desc	Code	Form Desc	
FJ	TABLET, ORAL ONLY	SN	SUSPENSION, DROPS(FINAL DOSAGE FORM)(ML)	
FT	TABLET, ORAL ONLY, EXTENDED RELEASE 12 HR	SO	DROPS	
FZ	CAPSULE SPRINKLE, EXTENDED RELEASE 24 HR	SQ	OIL (ML)	
GD	SPACER (EA)	SS	SHAMPOO	
GK	BLISTER, WITH INHALATION DEVICE	ST	SYRUP	
GN	MIST INHALER (GRAM)	SW	SOLUTION, IRRIGATION	
GQ	CAPSULE, DELAYED RELEASE SPRINKLE	SX	TINCTURE	
GR	DROPS, GEL (GRAM)	SY	CONCENTRATE, ORAL	
GW	NASAL SPRAY SYRINGE (EA)	SZ	LOTION (GRAM)	
GY	SYRINGE KIT (EA)	TA	TABLET	
НН	AMPUL (ML)	ТВ	TABLET, SOLUBLE	
HI	CARTRIDGE (EA)	TC	TABLET, CHEWABLE	
HJ	CARTRIDGE (ML)	TE	TABLET, DELAYED RELEASE (ENTERIC COATED)	
HJ	SYRINGE (ML)	TF	TABLET, DELATED RELEASE (ENTERIC COATED)	
HM	INTRAVENOUS SOLUTION	TG	GUM	
HQ	SYRINGE (ML)	TH	TABLET, HYPODERMIC	
HS	VIAL (EA)	TI	TABLET, EXTENDED RELEASE 24 HR	
HV	VIAL (ML)	TL	LOZENGE	
НХ	SYRINGE (EA)	TM	TABLET, EXTENDED RELEASE 12 HR	
HZ	PLASTIC BAG, INJECTION (ML)	TP	PELLET (EA)	
IA	IMPLANT (EA)	TQ	TABLET, EXT RELEASE, PARTICLES/CRYSTALS	
ID	PATIENT CONTROLLED ANALGESIA VIAL	TS	TABLET, EXTENDED RELEASE	
IG	VIAL WITH THREADED PORT (ML)	TT	TROCHE	
<u>II</u>	JELLY (ML)	TU	TABLET, SUBLINGUAL	
IJ	PEN INJECTOR (ML)	UB	TABLET, EXTENDED RELEASE MULTIPHASE	
IK	PEN INJECTOR KIT (EA)	UD	TABLET, DOSE PACK	
10	INSULIN PEN (ML)	UH	TABLET, DOSE PACK, 3 MONTHS	
IS	AUTO-INJECTOR (ML)	UJ	TABLET, DOSE FACK, S MONTHS	
IT	AUTO-INJECTOR (EA)	UL	TABLET, DISINTEGRATING	
JA	JELLY (GRAM)	UP	TABLET, EXTENDED RELEASE MULTIPHASE 24 HR	
JC	GEL (ML)		TABLET, CHEWABLE DISPERSIBLE	
JG	GEL (GRAM)	VG	HFA AEROSOL, BREATH ACTIVATED (GRAM)	
JL	POWDER IN PACKET (EA)	VK	SOLUTION, EXTENDED RELEASE SYRINGE (ML)	
JP	GEL IN PACKET (GRAM)	VQ	SUSPENSION, EXTENDED RELEASE SYRINGE (EA)	
JQ	GRANULES IN PACKET (EA)	VQ	TABLET FOR SUSPENSION	
JR	GLIN METERED-DOSE PUMP	VX	TABLET, SUSTAINED-RELEASE 12 HR	
JS	GEL-FORMING SOLUTION	YH	NEEDLE, DISPOSABLE	
1 <u>N</u>	GEL WITH APPLICATOR (GRAM)	YK	KIT	
KA	CREAM (GRAM)	YL	SYRINGE, EMPTY DISPOSABLE	
КН	CREAM IN PACKET (EA)	YR	STRIP	
KP	PASTE (GRAM)		- Stim	

ROA_Code	ROA_Code Description	ROA_Code	ROA_Code Description
BC	Buccal mucosa	MM	Mucous Membrane
DE or DT	Dental	NA	Route Not Applicable
EP	Epidural	NS	Nasal
IC	Intracavernosal	OP	Ophthalmic
ID	Intradermal	OT	Otic
IH	Inhalation	PL	Intrapleural
IJ	Injection	PO	Oral
IL	Urinary bladder	PT	Intraperitoneal
IM	Intramuscular	RC	Rectal
IN	Intrathecal	SC	Subcutaneous
10	Intraocular	SG	Gingival
IP	Implantation	SL	Sublingual
IR	Irrigation	SQ	Subcutaneous
IT	Intratracheal	TD	Transdermal
IU	Intrauterine	TP	Topical application
IV	Intravenous	UR	Urethral
MC	Miscellaneous	VG	Vaginal

Thera_Class_Code	Desc
1	Amphetamine Derivatives
2	Amphetamines
3	Analgesics And Antipyretics, Misc.
4	Androgens
5	Anticonvulsants, Miscellaneous
6	Antidiarrhea Agents
7	Antiemetics, Miscellaneous
8	Antimuscarinics /Antispasmodics
9	Antitussives
10	Anxiolytics, Sedatives & Hypnotics, Misc.
11	Barbiturates (Anticonvulsants)
12	Barbiturates (Anxiolytic, Sedative/Hyp)
13	Benzodiazepines (Anticonvulsants)
14	Benzodiazepines (Anxiolytic,Sedativ/Hyp)
15	Central Nervous System Agents, Misc.
16	Centrally Acting Skeletal Muscle Relaxnt
17	General Anesthetics, Miscellaneous
18	Gi Drugs, Miscellaneous
19	Local Anesthetics (Eent)
20	Opiate Agonists
21	Opiate Partial Agonists
22	Respiratory And Cns Stimulants
23	Salicylates
24	Selective Serotonin Receptor Agonists
25	Trycyclics & Other NorepinephRu Inhib
26	Wakefulness-Promoting Agents
99	Missing

#### Appendix Benzo PMP:

Includes: ALPRAZOLAM, CHLORDIAZEPOXIDE HCL, CHLORDIAZEPOXIDE HCL/METHSCOPOLAMINE NITRATE, CHLORDIAZEPOXIDE/CLIDINIUM BROMIDE, AMITRIPTYLINE HCL/CHLORDIAZEPOXIDE, CLOBAZAM, CLONAZEPAM, CLORAZEPATE DIPOTASSIUM, DIAZEPAM, ESTAZOLAM, FLURAZEPAM HCL, LORAZEPAM, MIDAZOLAM HCL, MIDAZOLAM HCL/PF, OXAZEPAM, QUAZEPAM, TEMAZEPAM, TRIAZOLAM

### Opioid\_PMP:

Excludes: BUPRENORPHINE, BUPRENORPHINE HCL, BUPRENORPHINE HCL/NALOXONE HCL

Includes: BUTORPHANOL TARTRATE, CODEINE PHOSPHATE; CODEINE SULFATE; CODEINE POLISTIREX; DIHYDROCODEINE BITARTRATE, DIFENOXIN HCI, DIPHENOXYLATE HCI, ELUXADOLINE, FENTANYL; FENTANYL CITRATE; FENTANYL CITRATE/PF, HYDROCODONE; HYDROCODONE BITARTRATE; HYDROCODONE POLISTIREX, HYDROMORPHONE HCL; HYDROMORPHONE HCL/PF, LEVORPHANOL TARTRATE, MEPERIDINE HCL; MEPERIDINE HCL/PF, METHADONE HCL, MORPHINE SULFATE, OPIUM/BELLADONNA ALKALOIDS; OPIUM TINCTURE; PAREGORIC, OXYCODONE HCL; OXYCODONE MYRISTATE, OXYMORPHONE HCL, PENTAZOCINE HCL, PROPOXYPHENE HCL; PROPOXYPHENE NAPSYLATE, TAPENTADOL HCL, TRAMADOL HCL

## Prescription Monitoring Program Role and Specialty Lookup Analytic Data Dictionary (PHDPMP.PMP\_RS)

### Prescription Monitoring Program Role Spec (PHDPMP.PMP\_RS)

Variable Name	Variable Description	Meta Data	Format
PRESC_DEA	Prescriber DEA Number.	9-character ID 2 alpha following by 7 Numeric i.e. AB1234567 (Link this variable in PHDPMP.PMP_RS to same variable in PHDPMP.PMP)	Char
PRESC_ROLE	All current MassPAT users have assigned roles. Legacy users, users prior to MassPAT and not using MassPAT due to job change or other reasons will have no MassPAT role	Text field	Char
PRESC_SPEC1	Level 1 specialty of the prescriber	Text field	Char
PRESC_SPEC2	Level 2 specialty of the prescriber	Text field	Char
PRESC_SPEC3	Level 3 specialty of the prescriber	Text field	Char

# Spine Demographic Variables Analytic Data Dictionary (PHDSPINE.DEMO)

#### Spine Demographic Variables (PHDSPINE.DEMO)

**Update V2** These preliminary variables have been created to allow for code development. They will be updated as we receive new data which will potentially change the values. Please refer to the "Last Updated" column to determine when each variable was last run. The following data are not yet in the PHD:

Dataset and years	Anticipated Ready Date
APCD 2011-2013	TBD 2022
APCD 2019-2020	January 2022
Early Intervention data (2017-2019)	November 2021
HOC (Sherriff's data)	currently includes Middlesex County HOC, Franklin HOC anticipated December 2021
HIV	November 2021

Variable Name	Variable Description	Meta Data	Format	Last Updated
ID	PHD ID	9 character alphanumeric ID	Char	N/A
DISABILITY_DD	What is the first year on record that this individual met the developmental disability definition?	YYYY 9999 = year missing (but definition met)	Num	11/08/2021
DISABILITY_HEAR	What is the first year on record that this individual met the hearing disability definition?	YYYY 9999 = year missing (but definition met)	Num	11/08/2021
DISABILITY_ID	What is the first year on record that this individual met the intellectual disability definition?	YYYY 9999 = year missing (but definition met)	Num	11/08/2021
DISABILITY_MENTAL	What is the first year on record that this individual met the mental health disability definition?	YYYY 9999 = year missing (but definition met)	Num	11/08/2021
DISABILITY_MOBILITY	What is the first year on record that this individual met the mobility disability definition?	YYYY 9999 = year missing (but definition met)	Num	11/08/2021
DISABILITY_VISION	What is the first year on record that this individual met the vision disability definition?	YYYY 9999 = year missing (but definition met)	Num	11/08/2021
DISABILITY_UNCAT	What is the first year on record that this individual met the uncategorized disability definition?	YYYY 9999 = year missing (but definition met)	Num	11/18/2021
DISABILITY_COMBO	What is the first year on record that this individual met the disability definition for one of the following variables: DISABILITY_DD, DISABILITY_HEAR, DISABILITY_ID, DISABILITY_MENTAL, DISABILITY_MOBILITY,	YYYY	Num	11/18/2021

### Spine Demographic Variables

# Analytic Data Dictionary

#### (PHDSPINE.DEMO)

		-		
	DISABILITY_VISION, or DISABILITY_UNCAT?			
EDUCATION	time of the event)	1 = HS or less 2 = 13+ years 9 = Unknown 10=Special Education	Num	09/13/2021
EVER_INCARCERATE D	Has person been incarcerated in MA's DOC or Middlesex HOC ?	1=Yes	Num	07/20/2021
FOREIGN_BORN	Born outside the US?	0=No 1=Yes	Num	09/13/2021
HOMELESS	Has the person been identified as homeless at the time of contact?	0=No 1=Yes 2=Yes, living in emergency shelter 3=suspected based on address	Num	11/10/2021
HOMELESS_HISTORY	Has the person been homeless at least once in the past?	0=No 1=Yes		11/10/2021
INDUSTRY_CODE	Do we have <u>an</u> industry code?	0=No 1=Yes	Num	11/08/2021
OCCUPATION_CODE	Do we have an industry or occupation code?	0=No 1=Yes	Num	11/08//2021
INDUSTRY_MANY	Do we have more than one industry code?	0=No 1=Yes	Num	11/19/2021
OCCUPATION_MANY	Do we have more than one occupation code?	0=No 1=Yes	Num	11/19/2021
LANGUAGE	ls a language other than English the primary language?	0 = No or missing	Num	10/18/2021
NON_MA	Is this individual likely not an MA resident?	0= individual found in at least one other dataset (including the APCD) 1=individual not found in any existing dataset in PHD	Num	11/18/2021
RACEETH_MANY	(For those where RaceEth_Never = 0). Is there more than one race/ethnicity value recorded for this PHD ID across all data sets or within a data set?	0=No 1= Yes, recorded race or ethnicity changes	Num	11/18/2021
RACEETH_NEVER	Is there no race or ethnicity recorded for this PHD ID across all data sets or within any data sets?	0=No 1=Yes, no race or ethnicity recorded	Num	11/18/2021
SELF_FUNDED	This flags individuals we can find in March 2016-2019 PHD data that we cannot find having an APCD record in March 2016- 2019 (but that also had an APCD record in 2014-Feb 2016) - what does that mean? It	insurance plan so they will not have APCD data	Num	11/18/2021

#### **Spine Demographic Variables**

# Analytic Data Dictionary

#### (PHDSPINE.DEMO)

	most likely means they are on a self-funded insurance plan (which no longer is required to report APCD data as of 2016) but that we can tell they are still present in the state after they stopped having visible APCD data			
SEX_MANY	Is there more than one sex value recorded for this PHD ID across all data sets or within a data set?	changes	Num	11/18/2021
SEX_NEVER	Is there no sex recorded for this PHD ID across all data sets or within any data sets?	0=No 1=Yes, no sex recorded	Num	11/18/2021
VETERAN		0 = No or missing information 1= Yes	Num	11/18/2021

### Postmortem Toxicology File Analytic Data Dictionary (PHDTOX.TOX)

#### Postmortem Toxicology Results (PHDTOX.TOX)

Variable Name	Variable Description	Meta Data	Format
ID	PHD ID	9 character alphanumeric ID	Char
Match_level_tox	CHIA Match level	1= These are members within the APCD that received a high score against the DPH input record. Candidates in this group are those that perfectly matched all elements of the DPH input record and those that generally had only one element mismatch. The threshold applied to group 1 candidates has been optimized based upon the input elements and their overall weight in determining a unique individual match.	Num
		2= This group contains members within the APCD that received a lower score against the DPH input record yet are considered <i>possible</i> matches. Candidates in this group could match on as little as SSN or date of birth and first and last name. These candidates are included for completeness	
TOX_ALCOHOL	Tox results included alcohol	0=No 1=Yes	Num
TOX_AMPHETAMINE	Tox results included an amphetamine	0=No 1=Yes	Num
TOX_ANTICONVULS ANT	Tox results included an anticonvulsant	0=No 1=Yes	Num
TOX_ANTIDEPRESSA NT	Tox results included an antidepressant	0=No 1=Yes	Num
TOX_ANTIPSYCHOTI C	Tox results included an antipsychotic	0=No 1=Yes	Num
TOX_ANXIOLYTIC	Tox results included an anxiolytic	0=No 1=Yes	Num
TOX_BARBITURATE	Tox results included a barbiturate	0=No 1=Yes	Num
TOX_BENZODIAZEPI NE	Tox results included a benzodiazepine	0=No 1=Yes	Num
TOX_BUPRENORPHI NE	Tox results included buprenorphine	0=No 1=Yes	Num
TOX_CLONIDINE	Tox results included clonidine	0=No 1=Yes	Num
TOX_COCAINE	Tox results included cocaine	0=No 1=Yes	Num
TOX_CODEINE	Tox results included codeine	0=No 1=Yes	Num
TOX_ECSTASY	Tox results included ecstasy	0=No 1=Yes	Num
TOX_FENTANYL	Tox results included fentanyl or a fentanyl analog	0=No 1=Yes	Num
TOX_GABAPENTIN	Tox results included gabapentin	0=No 1=Yes	Num

#### Postmortem Toxicology File Analytic Data Dictionary (PHDTOX.TOX)

Variable Name	Variable Description	Meta Data	Format
TOX_HEROIN_CONFI RMED	Tox results included heroin (MAM or codeine + morphine)	0=No 1=Yes	Num
TOX_HEROIN_LIKEL Y	Tox results included heroin (morphine included as heroin)	0=No 1=Yes	Num
TOX_HYDROCODON E	Tox results included hydrocodone	0=No 1=Yes	Num
TOX_HYDROMORPH ONE	Tox results included hydromorphone	0=No 1=Yes	Num
TOX_KETAMINE	Tox results included ketamine	0=No 1=Yes	Num
TOX_MAM	Tox results include MAM		
TOX_MARIJUANA	Tox results included marijuana or THC	0=No 1=Yes	Num
TOX_METHADONE	Tox results included methadone	0=No 1=Yes	Num
TOX_METHYLPHENI DATE	Tox results included methylphenidate	0=No 1=Yes	Num
TOX_MORPHINE	Tox results included morphine	0=No 1=Yes	Num
TOX_MUSCLERELAX	Tox results include a muscle relaxant	0=No 1=Yes	Num
TOX_NALOXONE	Tox results included naloxone	0=No 1=Yes	Num
TOX_OPIATE	Tox results included positive test for "opiates"	0=No 1=Yes	Num
TOX_OXYCODONE	Tox results included oxycodone	0=No 1=Yes	Num
TOX_OXYMORPHON E	Tox results included oxymorphone	0=No 1=Yes	Num
TOX_PROMETHAZIN E	Tox results included promethazine	0=No 1=Yes	Num
TOX_RX_OPI	Tox results included codeine (without morphine), hydromorphone, oxymorphone, hydrocodone, oxycodone, tramadol, or tapentadol	0=No 1=Yes	Num
TOX_TAPENTADOL	Tox results included tapentadol	0=No 1=Yes	Num
TOX_TRAMADOL	Tox results included tramadol	0=No 1=Yes	Num
TOX_ZOLPIDEM	Tox results included zolpidem	0=No 1=Yes	Num

#### PHDWIC.WIC\_KID

#### Women, Infants, and Children Program - Infant/Child (PHDWIC.WIC\_KID)

			Formet
Variable Name	Variable Description	Meta Data	Format
ID	Project Specific ID	9-character alphanumeric ID	Char
Match_level_WIC_KID	CHIA Match level	1= These are CHIA members that received a high score against the DPH input record. This group includes those that matched all elements of the DPH input record and those that had only one element mismatch. The group 1 individual match determination has been optimized based upon the input elements and their overall weight.	Num
		2= This group contains CHIA members that received a lower matching score yet are considered <i>possible</i> matches. These candidates could match on as little as SSN or date of birth and first and last name are included for completeness.	
ADJUNCT_PROOF_KID	A code denoting the type of proof provided to be adjunctly eligible.	1=MassHealth Internet 2=MassHealth Phone 3=MassHealth POS - DNU 4=SNAP Income Verification Letter 5=SNAP Printout 6=TAFDC Printout 7=Proof Pending - DNU 8=Active MassHealth EVS 9=DTA Connect App 99=Unknown	Num
AGE_EFFECTIVE_KID	Participant's age at time certification is effective	Age in years If less than 1 year, age = # days/365. (i.e 65 days = .18) Blank =missing or unknown	Num
AGE_EFFECTIVE_KID_U NIT	Unit of age, days or years	DY=days YR=years Blank=missing or unknown	Char
AGE_END_KID	Participant's age at time certification ends	Age in years If less than 1 year, age= days/365 days (i.e 300 days = .82) Blank=missing or unknown	Num
AGE_END_KID_UNIT	Unit of age, days or years	DY=days YR=years Blank=missing or unknown	Char
ANTHRO_MEAS_DATE_ KID	The date that anthropometric measurements were taken	Date Proxy – count of days between measurement date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
ANTHRO_MEAS_MONTH_ KID	The month that anthropometric measurements were taken	1-12 Blank=Unknown, missing	Num

PHD	WIC.	WIC	KID
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Variable Name	Variable Description	Meta Data	Format
ANTHRO_MEAS_YEAR_KID	The year that anthropometric measurements were taken	Үеаг, уууу	Num
BIRTH_LENGTH_KID	The length of the participant at birth	Length in inches Blank=missing or unknown	Num
BIRTH_MONTH_KID	Birth month of the participant	1-12. 99=missing or unknown	Num
BIRTH_WEIGHT_KID	The weight of the participant at birth	Weight in ounces Blank=missing or unknown	Num
BIRTH_YEAR_KID	The year the participant was born	YYYY 9999 = missing/unknown	Num
BLOOD_DATE_KID	The date the participant's bloodwork was taken	Date Proxy – count of days between bloodwork date and randomly chosen date in the past Blank = N/A (not tested) NOTE: The larger the date proxy, the more recently the event occurred	Num
BLOOD_MONTH_KID	The month the participant's bloodwork was taken	1-12 Blank=Unknown/Missing	Num
BLOOD_YEAR_KID	The year the participant's bloodwork was taken	уууу	Num
BMI_KID	Body Mass Index	XX.XXXX	Num
BREASTFED_EVER_WIC	An indicator denoting whether an infant or child has ever breastfed	0=No 1=Yes 9=Unknown or missing	Num
BREASTFED_SUPP_WE EKS_WIC	The number of weeks the participant was when first supplemented breastfeeding	Number of weeks Blank=missing or unknown	Num
BREASTFEED_TERM1_ WIC	A code denoting the reason why breastfeeding was stopped	See Codes"	Num
BREASTFEED_TERM2_ WIC	A code denoting a secondary reason why breastfeeding was stopped	See Codes"	Num
CATEGORY_KID	The participants category	2=Child 3=Infant 9=Unassigned	Num
EFFECTIVE_DATE_KID	The date the participants certification became effective	Date Proxy – count of days between certification start date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
EFFECTIVE_MONTH_KID	The month the participants certification became effective	1-12 Blank=Unknown, missing	Num
EFFECTIVE_YEAR_KID	The year the participants certification became effective	ΥΥΥΥ	Num

#### PHDWIC.WIC\_KID

Variable Name	Variable Description	Meta Data	Format
END_DATE_KID	The date the participants certification ended	Date Proxy – count of days between certification end date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
END_MONTH_KID	The month the participants certification ended	1-12 Blank=Unknown, missing	Num
END_YEAR_KID	The year the participants certification ended	YYYY	Num
ETHNICITY_WIC_KID	Ethnic affiliations of a participant	See Codes	Num
FIRST_DATE_KID	The date the participant was first certified	Date Proxy – count of days between first certification and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
FIRST_MONTH_KID	The month the participant was first certified	1-12 Blank=Unknown, missing	Num
FIRST_YEAR_KID	The year the participant was first certified	YYYY	Num
FOOD_STAMPS_KID	An indicator denoting whether or not the participant received food stamps at time of determination of WIC eligibility. This means that the proof of WIC eligibility was their receipt of food stamps	0=No 1=Yes 9=Unknown or missing	Num
FORMULA_SUPP_WEEK S_WIC	The number of weeks the infant first had a feeding supplement in the form of formula	Number of weeks, up to 52 Blank=missing or unknown	Num
FOSTER_CARE_WIC	An indicator denoting whether or not a participant is under foster care	0=No 1=Yes 9=Unknown or missing	Num
GUARDIAN_WIC	A code denoting the relationship a participant has to their caregiver	1=Birth Mother 2=Father 3=Adoptive Parent 4=Foster Parent 5=Grandparent 6=Aunt/Uncle 7=Self 8=Other 9=Unknown or missing	Num
HEALTH_CARE_SOURC E_KID	A code denoting the source of the participant's health care	See Codes"	Num

#### PHDWIC.WIC\_KID

Variable Name	Variable Description	Meta Data	Format
HEIGHT_KID	The height of the participant in inches	Height in inches Blank=missing or unknown	Num
HISPANIC_KID	An indicator denoting whether or not this participant is Hispanic	0=No 1=Yes 9=Unknown or missing	Num
HOMELESS_KID	Final homeless indicator for WIC	0=No 1=Yes 9=Unknown or missing	Num
HOUSEHOLD_KID	The number of people in the participant's household on WIC	Count (1-12) Blank=missing or unknown	Num
HOUSEHOLD_SMOKE_KI D	whether anyone in the household other than the participant smokes inside the home	0=No 1=Yes 9=Unknown or missing	Num
HOUSING_STATUS_KID	A code denoting the type of residency in which a participant is living	1=Permanent housing 2=Living with family/friend 3=Living in Shelter 4=No Housing 9=Unknown or missing	Num
INF_BIRTH_DATE_KID	The date the infant(s) were born from a pregnant woman's pregnancy	Date Proxy – count of days between delivery date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
INF_BIRTH_MONTH_KID	The month the infant(s) were born from a pregnant woman's pregnancy	1-12 Blank=Unknown, missing	Num
INF_BIRTH_YEAR_KID	The year the infant(s) were born from a pregnant woman's pregnancy	YYYY	Num
INSURANCE_ADJUNCT_ KID	A code denoting the type of insurance the participant has that provides adjunct eligibility	1=Household Member Adjunctive Eligibility 2=Standard 3=Buy-In 4=DNU Prenatal - MassHealth 5=Limited 6=DNU Limited-Healthy Start - MassHealth 7=DNU Basic - MassHealth 8=DNU Essential - MassHealth 9=CommonHealth 10=Family Assistance: MassHealthDNU 11=Limited/CMSP 12=DNU Emergency Aid to Elderly, Disabled, and Children (EAEDC) 13=CarePlus 14=Commonwealth Care with Limited 99=Unknown or missing	Num

#### PHDWIC.WIC\_KID

Variable Name	Variable Description	Meta Data	Format
INSURANCE_NO_ADJUN CT_KID	A code denoting the type of insurance the participant has that does not provide adjunct eligibility	1=Family Assistance 2=Premium Assistance 3=DNU Purchase of Medical Benefits - MassHealth 4=DNU Commonwealth Care 5=Children Medical Security Plan (CMSP) 6=Uncompensated Care Pool (Free Care) - MassHealth 7=Private Insurance:paid by self or employer 8=Government/Military 9=Workers' Compensation 10=No Health Insurance - Referred to MassHealth 11=No Health Insurance - Self Pay Medical Bills 12=Pending - MassHealth13=Common Health - MassHealth 14=Health Safety Net 15=ConnectorCare Plans 16=CommonHealth 99=Unknown or missing	Num
KID_ID_WIC	Randomized ID of the participant	12 digit number	Num
LEAD_DATE_WIC	The date the blood lead test was performed	Date Proxy – count of days between test date and randomly chosen date in the past Blank = N/A (not tested) NOTE: The larger the date proxy, the more recently the event occurred	Num
LEAD_MONTH_WIC	The month the blood lead test was performed	1-12 Blank=Missing	Num
LEAD_YEAR_WIC	The year the blood lead test was performed	үүүү	Num
LEAD_LEVEL_WIC	The amount of lead found in a participants blood	Micrograms per deciliter Integer, one decimal place possible Blank=N/A (not tested)	Num
LEAD_TEST_WIC	An indicator denoting whether or not the participant had a blood lead test	0=No 1=Yes 9=Unknown or missing	Num
MOM_ID_WIC	Randomized Participant ID of the participants mother	12 digit number	Num
MOM_ON_WIC	An indicator denoting whether or not the participant's mother is on WIC	0=No 1=Yes 9=Unknown or missing	Num

#### PHDWIC.WIC\_KID

Variable Name	Variable Description	Meta Data	Format
RACE_WIC_KID	The participant's race/ethnicity	1=White non-Hispanic 2=Black non-Hispanic 3=Asian non-Hispanic 4=Hispanic 5=American Indian or Alaskan Native 9=Unknown or missing	Num
RESCODE_KID	The participant's physical address city	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num
RES_ZIP_KID	The zip code where the participant lives	5 digit zip code 99999=Unknown	Char
SEX_KID	The participant's sex	1=Male 2=Female 9=Unknown or missing	Num
TAFDC_KID	An indicator denoting whether participant participates in TAFDC at the time of WIC eligibility determination. WIC eligibility based on TAFDC status	0=No 1=Yes 9=Unknown or missing	Num
TERM_CODE_KID	A code denoting the reason a participant's certification was terminated	See Codes	Num
TERM_DATE_KID	The date a participant's certification was terminated	Date Proxy: # days between termination date and randomly chosen future date NOTE: The larger the date proxy, the more recently the event occurred	Num
TERM_MONTH_KID	The month a participant's certification was terminated	1-12 Blank=Missing	Num
TERM_YEAR_KID	The year a participant's certification was terminated	ΥΥΥΥ	Num
VOC_KID	An indicator denoting whether a participant has had a VOC	0=No 1=Yes 9=Unknown or missing	Num
WEIGHT_KID	The participant's weight in ounces	Weight in ounces Blank=missing or unknown	Num
YEARLY_INCOME_KID	The total yearly income amount for an economic unit	Yearly income Blank=missing or unknown	Num

#### HEALTH\_CARE\_SOURCE

9=Bowdoin Street Community Health Center	57=Harbor Community Health Center

#### HEALTH\_CARE\_SOURCE

10-Paystate Medical Conter Health Conters Prightwood	E9-Military Eacility
10=Baystate Medical Center Health Centers - Brightwood	58=Military Facility
11=Cambridge Health Alliance - Broadway Health Center	59=Neponset Health Center
12=Brockton Neighborhood Health Center	60=None
13=Brookside Community Health Center	61=North Cambridge Health Center
14=Community Health Center of Cape Cod	62=North Shore Community Health Center
15=Caring Health Center	63=Other Community Health Ctr/DPH Funded Program
16=Community Health Programs - Great Barrington	64=Outer Cape Health Services
17=City/Town Health Department	65=Private Physician/Group
18=Codman Square Health Center	66=Riverside Health Center - Cambridge
19=Community Health Center of Franklin County	67=Roxbury Comprehensive Community Health Center
20=Dimock Community Health Center	68=North Shore Community Health Center - Salem
21=Dorchester House Multi-Service Center	69=Cambridge Health Alliance - Somerville Women's Health Center
22=Duffy Health Center	70=South Boston Community Health Center
23=East Boston Neighborhood Health Center	71=South County Pediatrics
24=Cambridge Health Alliance - East Cambridge Health Center	72=South Cove Community Health Center - Quincy
25=East Somerville Health Center	73=South Cove Community Health Center - Boston
26=Community Health Connections Family Health Center -	74-South End Community Health Contor
Fitchburg	74=South End Community Health Center
27=Family Health Center - Worcester	75=Southern Jamaica Plain Health Center
28=Framingham Community Health Center - DNU	76=Springfield Health Services for the Homeless
29=Geiger-Gibson Community Health Center	77=SSTAR Family Healthcare Center
30=Great Brook Valley Health Center - DNU	78=North Shore Community Health Center - Peabody
31=Greater Lawrence Family Health Center	79=Tri-River Family Health Center
32=Greater New Bedford Community Health Center	
33=Greater Roslindale Medical And Dental Center	81=Upham's Corner Health Center
34=Harbor Family Health Center	82=Wareham Health Center - DNU
35=Harvard Street Neighborhood Health Center	83=Whittier Street Health Center
36=Healthfirst Family Care Center	84=Cambridge Health Alliance - Windsor Street Health Center
37=Hilltown Community Health Centers	86=Edward M Kennedy Community Health Center – Framingham
	87=Edward M Kennedy Community Health Center –
38=Holyoke Health Center - Holyoke	Worcester
39=Hospital/Outpatient Care	100=Community Health Connections Family Health Center – Gardner
	101=Community Health Connections Family Health Center –
40=Island Health Care - Edgartown	Leominster
41=Charles River Community Health Center	102=North Shore Community Health Center - Gloucester
42=Lowell Community Health Center	103=Holyoke Health Center - Chicopee
12-1 ypp Community Health Contor	104=Manet Community Health Center - Quincy Medical
43=Lynn Community Health Center 44=Cambridge Health Alliance - Malden Family Medicine	Center
Center	105=MGH Everett Healthcare Center
45=Manet Community Health Center – Germantown	106=Cambridge Health Alliance - Revere Family Health Center

#### HEALTH\_CARE\_SOURCE

46=Manet Community Health Center – Hull	107=Community Health Programs - Lee
47=Manet Community Health Center - N. Quincy	108=Community Health Programs - Pittsfield
48=Manet Community Health Center – Quincy	109=Cambridge Health Alliance - Cambridge Family Health
49=Martha Eliot Health Center	110=Cambridge Health Alliance - Cambridge Family Health North
50=Baystate Medical Center Health Centers - Mason Square	111=Cambridge Health Alliance - Cambridge Teen Health Center
51=Mattapan Community Health Center	112=Cambridge Health Alliance - Everett Family Health Center
52=MGH Back Bay Healthcare Center	113=Cambridge Health Alliance - Everett Teen Health Center
53=MGH Charlestown Healthcare Center	114=Cambridge Health Alliance - Somerville Teen Connection
54=MGH Chelsea Healthcare Center	115=Cambridge Health Alliance - Union Square Family Health
55=MGH North End Community Health Center	116=Island Health Care - Martha's Vineyard
56=MGH Revere Healthcare Center	999=Unknown or Missing

BREASTFEED_TERM1_WIC
BREASTFEED_TERM2_WIC
1=Baby has teeth
2=Baby not gaining adequate weight
3=Baby refused breast
4=Breast problems (engorgement, etc)
5=Breastfeeding goal met
6=Baby weaned self
7= Embarrassment
8=Health care provider directed
9=Illness and/or medical condition
10=Inconvenient, felt tied down
11=Baby too hungry
12=Just didn't like it
13=Lack of support / encouragement
14=Medication/contraception
15=Milk supply concerns
16=Other
17=Returning to work or school
18=New pregnancy
20=Too tiring, stressful
99=Unknown, Missing

TERM CODE	
2=Over Income	

3=Child Turning Age 5 (Auto)
4=Non-Breastfeeding Woman/6 Months Postpartum (Auto)
5=Breastfeeding Woman/1 Year Postpartum (Auto)
8=End of Certification (Auto)
9=Missed Checks (2 Months) (Auto)
10=Transferred Out of State
11=Participant Transferred To Another LP (Auto)
12=Voluntary Withdrawal
13=Deceased
14=Dual Participation
15=Disqualification
16=Error
17=Pregnancy Not Verified (Auto)
18=Miscarriage
19=Left Foster Care/Guardian
20=Severe Illness
21=No Benefactor Letter on File/Zero Income (Auto)
22=Preliminary Certification No Health Record (Auto)
23=EXBF Infant Terminated (Auto)
24=Infant to Child (Auto)
25=Pregnant Woman/6 Weeks Postpartum (Auto)
26=Breastfeeding Woman > 6 months Stops BF
27=Breastfeeding Woman < 6 months Stops BF (Auto)
28=Missed Benefits (2 Months) (Auto)

ETHNICITY_WIC_MOM
ETHNICITY_WIC_KID
1=African American
2=African
3=American
4=Asian Indian
5=Brazilian
6=Cambodian
7=Cape Verdean
8=Caribbean Islander
9=Central American (other)
10=Chinese
11=Cuban
12=Dominican
13=Eastern European
14=Filipino
15=Haitian
16=Japanese
17=Korean
18=Laotian
19=Mexican/Mex. Amer./Chicano
20=Middle Eastern
21=European (other)
22=Other
23=Portuguese
24=Puerto Rican
25=Russian
26=Salvadorian
27=South American
28=Vietnamese
29=Unknown
30=Albanian
31=Asian (other)
32=Bengali
33=Burmese
34=Eritrean
35=Ethiopian
36=Ghanaian
37=Nepali
38=Romanian
39=Somali
40=Thai
41=Ukrainian
42=Guatemalan
43=Honduran

#### Women, Infants, and Children Program – Mom (PHDWIC.WIC\_MOM)

Variable Name	Variable Description	Meta Data	Format
ID	Project Specific ID	9 character alphanumeric ID	Char
Match_level_WIC_MOM	CHIA Match level	<ul> <li>1= These are CHIA members that received a high score against the DPH input record. This group includes those that matched all elements of the DPH input record and those that had only one element mismatch. The group 1 individual match determination has been optimized based upon the input elements and their overall weight.</li> <li>2= This group contains members within the APCD that received a lower score against the DPH input record, yet are considered <i>possible</i> matches. Candidates in this group could match on as little as SSN or date of</li> </ul>	Num
		birth and first and last name. These candidates are included for completeness.	
ADJUNCT_PROOF_MOM	A code denoting the type of proof provided to be adjunctly eligible.	1=MassHealth Internet 2=MassHealth Phone 3=MassHealth POS - DNU 4=SNAP Income Verification Letter 5=SNAP Printout 6=TAFDC Printout 7=Proof Pending - DNU 8=Active MassHealth EVS 9=DTA Connect App	Num
AGE_EFFECTIVE_MOM	Participant's age at time of certification is effective	Age in years Blank=unknown	Num
AGE_END_MOM		Age in years Blank=unknown	Num
ALC_NUM_LAST3MTHS_WI C	The average number of drinks per week during the last 3 months	Count Blank=unknown	Num
ALC_NUM_PREPREG_WIC	The average number of drinks per week during the 3 months prior to pregnancy	Count Blank=unknown	Num
ANTHRO_MEAS_DATE_MO M	The date that anthropometric measurements were taken	Date Proxy – count of days between measurement date and randomly chosen date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
ANTHRO_MEAS_MONTH_M OM	The month that anthropometric measurements were taken	1-12 blank=missing/unknown	Num

Variable Name	Variable Description	Meta Data	Format	
ANTHRO_MEAS_YEAR_MO M	The year that anthropometric measurements were taken	γγγγ	Num	
BIRTH_YEAR_MOM	The year the participant was born	YYYY	Num	
BIRTH_MONTH_MOM	The month the participant was born	1-12 blank=missing/unknown	Num	
BLOOD_DATE_MOM	The date the participant's bloodwork was taken	Date Proxy – count of days between bloodwork date and randomly chosen date in the past Blank = N/A (not tested) <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num	
BLOOD_MONTH_MOM	The month the participant's bloodwork was taken	1-12 Blank=missing/unknown	Num	
BLOOD_YEAR_MOM	The year the participant's bloodwork was taken	YYYY	Num	
BMI_MOM	Body Mass Index based on known height and weight – all ages included	XX.XXXX Blank=missing	Num	
BREASTFEED_INTENT_WIC	A code denoting the mother's intentions when it comes to breastfeeding the baby	1=Breast Milk 2=Formula 3=Breast Milk and Formula 4=Not Sure 9=Unknown	Num	
CATEGORY_MOM	The participants category	1=Pregnant woman 2=Breastfeeding woman 3=Non-breastfeeding woman 4=Infant 5=Child 9=Unassigned	Num	
CIG_NUM_CURRENT_WIC	The average number of cigarettes currently smoked per day	Count Blank=unknown	Num	
CIG_NUM_LAST3MTHS_WI C	The average number of cigarettes smoked per day during the last 3 months	Count Blank=unknown	Num	
CIG_NUM_PREPREG_WIC	The average number of cigarettes smoked per day during the 3 months prior to pregnancy	Count Blank=unknown	Num	
EDUCATION_WIC	A code denoting the number of the grade of school completed by the mother participant	Years of education 0-18 99=unknown	Num	

#### PHDWIC.WIC\_MOM

Variable Name	Variable Description	Meta Data	Format
EFFECTIVE_DATE_MOM	The date the participants certification became effective	Date Proxy – count of days between certification start date and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
EFFECTIVE_MONTH_MOM	The month the participants certification became effective	1-12 blank=Unknown, missing	Num
EFFECTIVE_YEAR_MOM	The year the participants certification became effective	YYYY	Num
END_DATE_MOM	The date the participants certification ended	Date Proxy – count of days between certification end date and randomly chosen date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
END_MONTH_MOM	The month the participants certification ended	1-12 blank=Unknown, missing	Num
END_YEAR_MOM	The year the participants certification ended	YYYY	Num
ETHNICITY_WIC_MOM	Ethnic affiliations of a participant	See code list	Num
EXPECTED_BIRTHS_WIC	The number of births expected from a pregnant woman's pregnancy	Count Blank=unknown	Num
FIRST_DATE_MOM	The date the participant was first certified	Date Proxy – count of days between first certification and randomly chosen date in the past NOTE: The larger the date proxy, the more recently the event occurred	Num
FIRST_MONTH_MOM	The month the participant was first certified	1-12 blank=Unknown, missing	Num
FIRST_YEAR_MOM	The year the participant was first certified	YYYY	Num
FOOD_STAMPS_MOM	An indicator denoting whether or not the participant received food stamps at time of determination of WIC eligibility. This means that the proof of WIC eligibility was their receipt of food stamps.	0=No 1=Yes 9=unknown	Num
GEST_DIAB_WIC	An indicator denoting whether or not the participant has gestational diabetes	0=No 1=Yes 9= unknown	Num

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Variable Name	Variable Description	Meta Data	Format
HEALTH_CARE_SOURCE_M OM	A code denoting the source of the participant's health care	<u>See code list</u>	Num
HEIGHT_MOM	The height of the participant in inches	Height in inches Blank=unknown	Num
HISPANIC_MOM	An indicator denoting whether or not this participant is Hispanic	0=No 1=Yes 9=unknown	Num
HOMELESS_MOM	Final homeless indicator for WIC	0=No 1=Yes 9=unknown	Num
HOUSEHOLD_MOM	The number of people in the participant's household on WIC	Count Blank= unknown	Num
HOUSEHOLD_SMOKE_MOM	An indicator denoting whether anyone in the household other than the participant smokes inside the home	0=No 1=Yes 9=unknown	Num
HOUSING_STATUS_MOM	A code denoting the type of residency in which a participant is living	1=permanent housing 2=living with family/friend 3=living in Shelter 4=no Housing 9=unknown	Num
HYPERTENSION_MOM	An indicator denoting whether or not the participant has hypertension	0=No 1=Yes 9=unknown	Num
INSURANCE_ADJUNCT_MO M	A code denoting the type of insurance the participant has that provides adjunct eligibility	1=Household Member Adjunctive Eligibility 2=Standard 3=Buy-In 4=DNU Prenatal - MassHealth 5=Limited 6=DNU Limited-Healthy Start - MassHealth 7=DNU Basic - MassHealth 8=DNU Essential - MassHealth 9=CommonHealth 10=Family Assistance - MassHealth - DNU 11=Limited/CMSP 12=DNU Emergency Aid to Elderly, Disabled, and Children (EAEDC) 13=CarePlus 14=Commonwealth Care with Limited 99=Unknown or missing	Num

Variable Name	Variable Description	Meta Data	Format
INSURANCE_NO_ADJUNCT _MOM	A code denoting the type of insurance the participant has that does not provide adjunct eligibility	1=Family Assistance 2=Premium Assistance 3=DNU Purchase of Medical Benefits - MassHealth 4=DNU Commonwealth Care 5=Children Medical Security Plan (CMSP) 6=Uncompensated Care Pool (Free Care) - MassHealth 7=Private Insurance - Paid By Self or Employer 8=Government/Military 9=Workers' Compensation 10=No Health Insurance - Referred to MassHealth 11=No Health Insurance - Self Pay Medical Bills 12=Pending – MassHealth 13=Common Health - MassHealth 14=Health Safety Net 15=ConnectorCare Plans 16=CommonHealth 99=Unknown or missing	Num
MOM_ID_WIC	Randomized Participant ID of the mom	12 digit number	Num
PARTICIPANT_LIVE_BIRTH_ NUM	The total number of babies born alive to this participant	Count provided through participant questionnaire, accuracy not verified	Num
PARTICIPANT_PREG_COUN T	The total number of times the participant has been pregnant including the current pregnancy	articipant has questionnaire, accuracy not verified.	
PREG_OUTCOME_WIC A code denoting the 0utcome of the pregnancy 5=Neonata		1=Live birth 2=Twins 3=Triplets or more 4=Stillborn, Miscarriage, Abortion 5=Neonatal death 9=unknown	Num
RACE_WIC_MOM	Participant's race/ethnicity	1=White non-Hispanic 2=Black non-Hispanic 3=Asian non-Hispanic 4=Hispanic 5=American Indian or Alaskan Native 9=Unknown	Num
RESCODE_MOM	The City of the participants physical address	1-351 = valid MA city/town 999 = missing/unknown/invalid	Num
RES_ZIP_MOM	The zip code component of an address	5 digit zip code 99999=unknown	Char
SEX_MOM	A code denoting the sex of a participant	1=Male 2=Female 9=unknown	Num

Variable Name	Variable Description	Meta Data	Format
CATEGORY_MOM	The participants category	1=Pregnant woman 2=Breastfeeding woman 3=Non-breastfeeding woman 4=Infant 5=Child 9=unassigned	Num
TAFDC_MOM	An indicator denoting whether a participant participates in TAFDC at the time of determination of WIC eligibility. This means that the reason for WIC eligibility was their TAFDC status	0=No 1=Yes 9=unknown	Num
TERM_CODE_MOM	A code denoting the reason why a participant's certification was terminated	<u>See code list</u>	Num
TERM_DATE_MOM	The date a participant's certification was terminated	Date Proxy – count of days between termination date and randomly chosen date in the past <b>NOTE: The larger the date proxy, the</b> <b>more recently the event occurred</b>	Num
TERM_MONTH_MOM	The month a participant's certification was terminated	1-12 blank=missing/unknown	
TERM_YEAR_MOM	The year a participant's certification was terminated	YYYY	Num
VOC_MOM	An indicator denoting whether or not a participant has had a VOC	0=No 1=Yes 9=unknown	Num
WEIGHT_MOM	The participant's weight in ounces	Weight in ounces Blank=missing	Num
YEARLY_INCOME_MOM	The total yearly income for an economic unit	Yearly income Blank=missing	Num

ETHNICITY_WIC_MOM_				
1=African American	11=Cuban	21=European (other)	31=Asian (other)	41=Ukrainian
2=African	12=Dominican	22=Other	32=Bengali	42=Guatemalan
3=American	13=Eastern European	23=Portuguese	33=Burmese	43=Honduran
4=Asian Indian	14=Filipino	24=Puerto Rican	34=Eritrean	
5=Brazilian	15=Haitian	25=Russian	35=Ethiopian	
6=Cambodian	16=Japanese	26=Salvadorian	36=Ghanaian	
7=Cape Verdean	17=Korean	27=South American	37=Nepali	
8=Caribbean Islander	18=Laotian	28=Vietnamese	38=Romanian	
9=Central American (other)	19=Mexican/Mex. Amer./Chicano	29=Unknown	39=Somali	
10=Chinese	20=Middle Eastern	30=Albanian	40=Thai	

HEALTH_CARE_SOURCE_MOM	
9=Bowdoin Street Community Health Center	57=Harbor Community Health Center
10=Baystate Medical Center Health Centers - Brightwood	58=Military Facility
11=Cambridge Health Alliance - Broadway Health Center	59=Neponset Health Center
12=Brockton Neighborhood Health Center	60=None
13=Brookside Community Health Center	61=North Cambridge Health Center
14=Community Health Center of Cape Cod	62=North Shore Community Health Center
15=Caring Health Center	63=Other Community Health Ctr/DPH Funded Program
16=Community Health Programs - Great Barrington	64=Outer Cape Health Services
17=City/Town Health Department	65=Private Physician/Group
18=Codman Square Health Center	66=Riverside Health Center - Cambridge
19=Community Health Center of Franklin County	67=Roxbury Comprehensive Community Health Center
20=Dimock Community Health Center	68=North Shore Community Health Center - Salem
21=Dorchester House Multi-Service Center	69=Cambridge Health Alliance - Somerville Women's Health Center
22=Duffy Health Center	70=South Boston Community Health Center
23=East Boston Neighborhood Health Center	71=South County Pediatrics
24=Cambridge Health Alliance - East Cambridge Health Center	72=South Cove Community Health Center - Quincy
25=East Somerville Health Center	73=South Cove Community Health Center - Boston
26=Community Health Connections Family Health Center - Fitchburg	74=South End Community Health Center
27=Family Health Center - Worcester	75=Southern Jamaica Plain Health Center
28=Framingham Community Health Center - DNU	76=Springfield Health Services for the Homeless
29=Geiger-Gibson Community Health Center	77=SSTAR Family Healthcare Center
30=Great Brook Valley Health Center - DNU	78=North Shore Community Health Center - Peabody

HEALTH_CARE_SOURCE_MOM	
	79=Tri-River Family Health Center
32=Greater New Bedford Community Health	
	80=Unknown
33=Greater Roslindale Medical And Dental Center	81=Upham's Corner Health Center
34=Harbor Family Health Center	82=Wareham Health Center - DNU
35=Harvard Street Neighborhood Health Center	83=Whittier Street Health Center
	84=Cambridge Health Alliance - Windsor Street Health
	Center 86=Edward M Kennedy Community Health Center -
37=Hilltown Community Health Centers	Framingham
38=Holyoke Health Center - Holyoke	87=Edward M Kennedy Community Health Center - Worcester
39=Hospital/Outpatient Care	100=Community Health Connections Family Health Center - Gardner
	101=Community Health Connections Family Health Center - Leominster
41=Charles River Community Health Center	102=North Shore Community Health Center - Gloucester
42=Lowell Community Health Center	103=Holyoke Health Center - Chicopee
	104=Manet Community Health Center - Quincy Medical Center
44=Cambridge Health Alliance - Malden Family Medicine Center	105=MGH Everett Healthcare Center
	106=Cambridge Health Alliance - Revere Family Health Center
46=Manet Community Health Center - Hull	107=Community Health Programs - Lee
47=Manet Community Health Center - N. Quincy	108=Community Health Programs - Pittsfield
	109=Cambridge Health Alliance - Cambridge Family Health
	110=Cambridge Health Alliance - Cambridge Family Health
	North 111=Cambridge Health Alliance - Cambridge Teen Health
-	Center
	112=Cambridge Health Alliance - Everett Family Health
· · ·	Center
	113=Cambridge Health Alliance - Everett Teen Health Center
53=MGH Charlestown Healthcare Center	114=Cambridge Health Alliance - Somerville Teen Connection
	115=Cambridge Health Alliance - Union Square Family Health
55=MGH North End Community Health Center	116=Island Health Care - Martha's Vineyard
56=MGH Revere Healthcare Center	

BREASTFEEDING_TERM_CODE_	-	
1=Baby has teeth	8=Health care provider directed	15=Milk supply concerns
2=Baby not gaining adequate weight	9=Illness and/or medical condition	16=Other
3=Baby refused breast	10=Inconvenient, felt tied down	17=Returning to work or school
4=Breast problems (engorgement, etc)	11=Baby too hungry	18=New pregnancy
5=Breastfeeding goal met	12=Just didn't like it	20=Too tiring, stressful
6=Baby weaned self	13=Lack of support / encouragement	21=Unknown
7=Embarrassment	14=Medication/contraception	

TERM_CODE_MOM
2=Over Income
3=Child Turning Age 5 (Auto)
4=Non-Breastfeeding Woman/6 Months Postpartum (Auto)
5=Breastfeeding Woman/1 Year Postpartum (Auto)
8=End of Certification (Auto)
9=Missed Checks (2 Months) (Auto)
10=Transferred Out of State
11=Participant Transferred To Another LP (Auto)
12=Voluntary Withdrawal
13=Deceased
14=Dual Participation
15=Disqualification
16=Error
17=Pregnancy Not Verified (Auto)
18=Miscarriage
19=Left Foster Care/Guardian
20=Severe Illness
21=No Benefactor Letter on File/Zero Income (Auto)
22=Preliminary Certification No Health Record (Auto)
23=EXBF Infant Terminated (Auto)
24=Infant to Child (Auto)
25=Pregnant Woman/6 Weeks Postpartum (Auto)
26=Breastfeeding Woman > 6 months Stops BF
27=Breastfeeding Woman < 6 months Stops BF (Auto)
28=Missed Benefits (2 Months) (Auto)

#### Appendix 1: APCD Files Linkage Table

APCD Files Linkage Table Claims to Insurance Carriers			
To link claims data (A correct carrier) use th	) to the APCD PROVIDER data (B) at the following:	the Insurance Carrier Leve	l (i.e. linking claims to the
APCDPHD.DENTAL	DENT_LINKORGIDPV	APCDPHD.PROVIDER	PROV_ORGID
APCDPHD.MEDICAL	MED_LINKORGIDPV	APCDPHD.PROVIDER	PROV_ORGID
APCDPHD.PHARMACY	PHARM_LINKORGIDPV	APCDPHD.PROVIDER	PROV_ORGID
To link claims data (A correct carrier) use th	) to the APCD PRODUCT data (B) at e following:	the Insurance Carrier Leve	l (i.e. linking claims to the
APCDPHD.DENTAL	DENT_LINKORGIDPR	APCDPHD.PRODUCT	PROD_ORGID
APCDPHD.MEDICAL	MED_LINKORGIDPR	APCDPHD.PRODUCT	PROD_ORGID
APCDPHD.PHARMACY	PHARM_LINKORGIDPR	APCDPHD.PRODUCT	PROD_ORGID
	Claims to Individual P	roducts or Provid	ders
Dataset Name A To link claims data (A	Variable Name A	Dataset Name B	Variable Name B
To link claims data (A	Variable Name A ) to the APCD PRODUCT data (B) at product that covered that claim) use	Dataset Name B the Individual Insurance Pr e the following:	Variable Name B roduct Level (i.e. linking
To link claims data (A	Variable Name A ) to the APCD PRODUCT data (B) at product that covered that claim) use DENT_PRODUCT_LINKID	Dataset Name B the Individual Insurance Pr	Variable Name B roduct Level (i.e. linking PROD_PRODUCT_LINKID
To link claims data (A claims to the correct	Variable Name A ) to the APCD PRODUCT data (B) at product that covered that claim) use	Dataset Name B the Individual Insurance Pr e the following:	Variable Name B roduct Level (i.e. linking
To link claims data (A claims to the correct APCDPHD.DENTAL	Variable Name A ) to the APCD PRODUCT data (B) at product that covered that claim) use DENT_PRODUCT_LINKID	Dataset Name B the Individual Insurance Pr e the following: APCDPHD.PRODUCT	Variable Name B roduct Level (i.e. linking PROD_PRODUCT_LINKID
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#### **Appendix 2: Spine Variable Components**

Spine Variable	Description	Dataset	Variable
DISABILITY_DD	What is the first year on record that this individual met the developmental disability definition?	PHDBirth.Birth_Infant	ANOMALY_ADACTYLY, ANOMALY_ANENCEPHALY , ANOMALY_CHD_CYANOTI C, ANOMALY_CLEFT, ANOMALY_CLUB_FT, ANOMALY_CHROM_DISO RDER, ANOMALY_CHROM_DISO RDER, ANOMALY_DIAPHRAGMAT IC_HERNIA, ANOMALY_DOWN, ANOMALY_DOWN, ANOMALY_GASTRO, ANOMALY_GASTRO, ANOMALY_HYDROCEPH, ANOMALY_HYDROCEPH, ANOMALY_HYPO, ANOMALY_HYPO, ANOMALY_HYPO, ANOMALY_UMENI_SB, ANOMALY_OTHER_HEART , ANOMALY_OTHER_HEART , ANOMALY_CTHER_MUSC, ANOMALY_RENAL_AGENE SIS, ANOMALY_TEF_EA
		PHDBSAS.BSAS	CLT_ENR_DEVEL_DIS
		PHDDHCD.DHCD	DEV_DISABILITY_DHCD
		PHDEI.EI_Evaluation	ASD_DIAG_YEAR Autism_EI CNS_ABNORMAL_EI FEEDING_DIFFICULTY_EI
		PHDAPCD.Medical14_18	MED_ADM_DIAGNOSIS, MED_DIS_DIAGNOSIS, MED_ECODE, MED_ICD1-MED_ICD25
DISABILITY HEAR	What is the first year on record	PHDBSAS.BSAS	CLT ENR HEAR IMPAIR
	that this individual met the hearing disability definition?	PHDAPCD.Medical14_18	MED_ADM_DIAGNOSIS, MED_DIS_DIAGNOSIS, MED_ECODE, MED_ICD1-MED_ICD25, MED_PROC_CODE
DISABILITY_ID	What is the first year on record that this individual met the intellectual disability definition?	PHDBirth.Birth_Infant	ANOMALY_ANENCEPHALY , ANOMALY_CHROM_DISO RDER, ANOMALY_DOWN, ANOMALY_HYDROCEPH
		PHDEI.EI_Evaluation	ASD_DIAG_YEAR Autism_EI CNS_ABNORMAL_EI
		PHDAPCD.Medical14_18	MED_ADM_DIAGNOSIS, MED_DIS_DIAGNOSIS, MED_ECODE,

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Spine Variable	Description	Dataset	Variable
			MED_ICD1-MED_ICD25
DISABILITY_MENTAL	What is the first year on record	PHDBSAS.BSAS	CLT_ENR_MH_TX
	that this individual met the mental health disability	PHDDOC.DOC	SMI_DOC
		PHDDMH.DMH	ID
	definition?	PHDAPCD.Medical14_18	MED_ADM_DIAGNOSIS, MED_DIS_DIAGNOSIS, MED_ECODE, MED_ICD1-MED_ICD25, MED_PROC_CODE
DISABILITY_MOBILIT Y	What is the first year on record that this individual met the mobility disability definition?	PHDBirth.Birth_Infant	ANOMALY_ADACTYLY, ANOMALY_CLUB_FT, ANOMALY_LIMB_REDUCTI ON, ANOMALY_MENI_SB, ANOMALY_OTHER_MUSC
		PHDBSAS.BSAS	CLT_ENR_MOB_AID_MAN _WC CLT_ENR_MOB_AID_NON E CLT_ENR_MOB_AID_WAL KER CLT_ENR_MOB_AID_WC
		PHDDHCD.DHCD	PHYS_DISABILITY_DHCD
		PHDAPCD.Medical14_18	MED_ADM_DIAGNOSIS, MED_DIS_DIAGNOSIS, MED_ECODE, MED_ICD1-MED_ICD25, MED_PROC_CODE
DISABILITY_VISION	What is the first year on record	PHDAPCD.MHEE14_18	MHEE_DisabilityCode
	that this individual met the vision	PHDBSAS.BSAS	CLT_ENR_VISION_IMPAIR
	disability definition?	PHDAPCD.edical14_18	MED_ADM_DIAGNOSIS, MED_DIS_DIAGNOSIS, MED_ECODE, MED_ICD1-MED_ICD25, MED_PROC_CODE
DISABILITY_UNCAT	What is the first year on record	PHDAPCD.dental14 18	DENT relation
	that this individual met the uncategorized disability definition?	PHDAPCD.MEDICAL14_18	MED_relation, MED_ADM_DIAGNOSIS, MED_DIS_DIAGNOSIS, MED_ECODE, MED_ICD1-MED_ICD25, MED_PROC_CODE
		PHDAPCD.PHARMACY14_1 8	PHARM_relation
		PHDAPCD.MHEE14_18	MHEE_DisabilityCat MHEE_DisabilityCode MHEE_DisabilityAidCatFlag MHEE_SSIAidFlag MHEE_KaleighMulliganAidFl ag
		PHDBIRTH.BIRTH_INFANT	ANOMALY_POLYDAC, ANOMALY_SYNDACTYLY
		PHDBSAS.BSAS	CLT_ENR_SELF_CARE_IM PAIR
		PHDDHCD.DHCD	DISABILITY_DHCD PHYS_DISABILITY_DHCD
		PHDDTA.DTA	DISABILITY_DTA INELIGIBILITY_REASON

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Spine Variable	Description	Dataset	Variable
EDUCATION	Education level of individual (at time of the event)	PHDBIRTH.BIRTH_MOM	MOTHER_EDU
		PHDBSAS.BSAS	CLT_ENR_EDUCATION
		PHDDEATH.DEATH	EDU_DEATH
		PHDDMH.DMH	EDUCATION_DMH
		PHDDTA.DTA	EDU_DTA
		PHDEI.EI Evaluation	MOM_EDU_EI
		 PHDFETAL.FETALDEATH	 MOTHER_EDU_FD
		PHDWIC.WIC_MOM	EDUCATION_WIC
EVER_INCARCERAT	Has person been incarcerated in MA's DOC or Middlesex HOC ?	PHDDOC.DOC	ID
		PHDHOC.HOC	ID
	Born outside the US?	PHDBIRTH.BIRTH_MOM	FOREIGN_BORN_BIRTH
		PHDDEATH.DEATH	FOREIGN_BORN_DEATH
		PHDFETAL.FETALDEATH	FOREIGN_BORN_FD
FOREIGN_BORN		PHDDMH.DMH	Citizen_DMH
		PHDHEPA.HAV	NON_US_BORN_HAV
		PHDHEPC.HCV	NON_US_BORN_HCV
	Has the person been identified as homeless at the time of	PHDAPCD.PHARMACY14_1 8	Medical Supplement
	contact?	PHDBSAS.BSAS	CLT_HOMELESS_AT_ENR
		PHDCM.ED PHDCM.HD	ED_HOMELESS HD_HOMELESS
		PHDCM.OO	OO_HOMELESS
		PHDDEATH.DEATH	HOMELESS_DEATH
HOMELESS		PHDDHCD.DHCD	HOMELESS_COUNT_LAST 3YRS HOMELESS_MONTHS_LAS T3YRS HOMELESS_START_DATE HOMELESS_MONTH HOMELESS_YEAR RES_TYPE_DHCD
		PHDDMH.DMH	LIVING_ARRANGEMENT_C LIENT_DMH
		PHDDTA.DTA	HOMELESS_DTA INELGIBILITY_REASON
		PHDEI.EI_Clients	HOMELESS_EI HOMELESS_Now_EI HOMELESS_Family
		PHDHEPA.HAV	HOMELESS_HAV
		PHDHIV.HIV_INC	HOMELESS_HIV_INC
		PHDHIV.HIV_PRE	RES_ZIP_HIV_PREV
		PHDEMS.MATRIS	HOMELESS_MATRIS
		PHDPMP.PMP	HOMELESS_PMP
		PHDWIC.WIC KID	HOMELESS KID

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Spine Variable	Description	Dataset	Variable
		PHDWIC.WIC_MOM	HOMELESS_MOM
		PHDBSAS.BSAS	CLT_ENR_CHRONIC_HOM ELESS
HOMELESS_HISTOR Y	Has the person been homeless at least once in the past?	PHDDHCD.DHCD	HOMELESS_COUNT_LAST 3YRS HOMELESS_MONTHS_LAS T3YRS
		PHDEI.EI_Clients	HOMELESS_NOW_EI HOMELESS_Recently_EI
		PHDHEPC.HCV	EVER_HOMELESS_HCV
		PHDDEATH.DEATH	BLS_OCC_DEATH CENSUS_OCC_DEATH
OCCUPATION	Is there at least one occupation code?	PHDBIRTH.BIRTH	BLS_OCC_BIRTH CENSUS_OCC_BIRTH
		PHDDIA.DIA	BLS_OCC_DIA CENSUS_OCC_DIA
		PHDDEATH.DEATH	NAICS_DEATH
INDUSTRY	Is there at least one industry code?	PHDBIRTH.BIRTH	NAICS_BIRTH
		PHDDIA.DIA	NAICS_DIA
		PHDDEATH.DEATH	BLS_OCC_DEATH CENSUS_OCC_DEATH
OCCUPATION_MANY	Is there more than one occupation code?	PHDBIRTH.BIRTH	BLS_OCC_BIRTH CENSUS_OCC_BIRTH
		PHDDIA.DIA	BLS_OCC_DIA CENSUS_OCC_DIA
		PHDDEATH.DEATH	NAICS_DEATH
INDUSTRY_MANY	Is more than one industry code?	PHDBIRTH.BIRTH	NAICS_BIRTH
		PHDDIA.DIA	NAICS_DIA
		PHDDMH.DMH	LANGUAGE_DMH INTERPRETER_DMH
LANGUAGE	Is a language other than English	PHDBIRTH.BIRTH_MOM	LANGUAGE_SPOKEN LANGUAGE_WRITTEN
	the primary language?	PHDDTA.DTA	LANGUAGE_DTA
		PHDEI.EI_Clients	PRIMARY_LANGUAGE_EI
		PHDHIV.HIV_INC	English_Speaking_HIV
		PHDAPCD.DENTAL14_18	ID, RES_ZIP_APCD_DENTAL
		PHDAPCD.MEDICAL14_18	ID, RES_ZIP_APCD_MED
		PHDAPCD.PHARMACY14_1 8	ID, RES_ZIP_APCD_PHARM
	Is this individual likely not an MA resident?	PHDBSAS.BSAS	ID
NON_MA		PHDCM.ED	ID
		PHDCM.ED_DIAG	ID
		PHDCM.ED_PROC	ID
		PHDCM.HD	ID
		PHDCM.HD_DIAG	ID
		PHDCM.HD_PROC	ID

Spine Variable	Description	Dataset	Variable
		PHDCM.OO	ID
		PHDDCF.DCF	ID
		PHDDEATH.DEATH	ID
		PHDDHCD.DHCD	ID
		PHDDIA.DIA	ID
		PHDDMH.DMH	ID
		PHDDOC.DOC	ID
		PHDDTA.DTA	ID
		PHDDVS.DVS	ID
		PHDEI.EI CLIENTS	
		_	ID
		PHDFETAL.FETALDEATH	ID
		PHDHEPA.HAV	ID
		PHDHEPC.HCV	ID
		PHDHIV.HIV_PREV	ID
		PHDHIV.HIV_INC	ID
		PHDHOC.HOC	ID
		PHDSPINE.DEMO	ID
		PHDEMS.MATRIS	ID
		PHDPMP.PMP	ID
		PHDTOX.TOX	ID
		PHDWIC.WIC_KID	ID
		PHDWIC.WIC_MOM	ID
		PHDBIRTH.BIRTH_MOM PHDBSAS.BSAS	MOTHER_RACE_BIRTH RACE BSAS
		PHDCM.ED	ED_RACE
		PHDCM.HD_HD	HD_RACE
		PHDCM.OO	OO_RACE
	RACEETH_MANY: (For those	PHDDEATH.DEATH	RACE_DEATH
	where RaceEth_Never = 0) Is there more than one	PHDDHCD.DHCD PHDDOC.DOC	RACE_DHCD RACE_DOC
	race/ethnicity value recorded for	PHDDMH.DMH	RACE_DOO
	this PHD ID across all data	PHDDTA.DTA	RACE_DTA
	sets or within a data set?	PHDDVS.DVS	RACE_DVS
	RACEETH_NEVER: Is there no	PHDEI.EI_CLIENTS	RACE_EI
	race or ethnicity recorded for this	PHDFETAL.FETALDEATH	MOTHER_RACE_FD
	PHD ID across all data sets or	PHDHOC.HOC	RACE_HOC
	within any data sets?	PHDEMS.MATRIS PHDHEPA.HAV	RACE_MATRIS RACE HAV
		PHDHEPC.HCV	RACE_HCV
		PHDHIV.HIV_INC	RACE_HIV
		PHDHIV.HIV_PRE	RACE_HIV

Spine Variable	Description	Dataset	Variable
		PHDMCR.MCR	RACE_MCR
		PHDWIC.WIC_KID	RACE_WIC_KID
		PHDWIC.WIC_MOM	RACE_WIC_MOM
SELF_FUNDED	This flags individuals we can find in March 2016-2019 PHD data that we cannot find having an APCD record in March 2016- 2019 (but that also had an APCD record in 2014-Feb 2016) - what does that mean? It most likely means they are on a self-funded insurance plan (which no longer	PHDBIRTH.BIRTH_INFANT	ID
		PHDBIRTH.BIRTH_MOM	ID
		PHDBSAS.BSAS	ID
		PHDCM.ED	ID
		PHDCM.ED_DIAG	ID
		PHDCM.ED_PROC	ID
	is required to report APCD data	PHDCM.HD	ID
	as of 2016) but that we can tell they are still present in the state	PHDCM.HD_DIAG	ID
	after they stopped having visible	PHDCM.HD_PROC	ID
	APCD data	PHDCM.OO	ID
		PHDDCF.DCF	ID
		PHDDEATH.DEATH	ID
		PHDDHCD.DHCD	ID
		PHDDIA.DIA	ID
		PHDDMH.DMH	ID
		PHDDOC.DOC	ID
		PHDDTA.DTA	ID
		PHDDVS.DVS	ID
		PHDEI.EI_CLIENTS	ID
		PHDFETAL.FETALDEATH	ID
		PHDHEPA.HAV	ID
		PHDHEPC.HCV	ID
		PHDHIV.HIV_PREV	ID
		PHDHIV.HIV_INC	ID
		PHDHOC.HOC	ID
		PHDSPINE.DEMO	ID
		PHDEMS.MATRIS	ID
		PHDMCR.MCR	ID
		PHDPMP.PMP	ID
		PHDTOX.TOX	ID
		PHDWIC.WIC_KID	ID
		PHDWIC.WIC_MOM PHDAPCD.DENTAL14 1	ID
		8	ID
		PHDAPCD.MEDICAL14_ 18	ID

Spine Variable	Description	Dataset	Variable
		PHDAPCD.PHARMACY 14_18	ID
SEX_MANY	SEX_MANY:	PHDAPCD.DENTAL14_18	DENT_SEX
SEX_NEVER	(For those where Sex_Never =	PHDAPCD.MEDICAL14_18	MED_SEX
	0) Is there more than one sex value recorded for this PHD ID across all data sets or within a	PHDAPCD.PHARMACY14_1 8	PHARM_SEX
		PHDBIRTH.BIRTH_INFANT	SEX_BIRTH
	data set?	PHDBSAS.BSAS	SEX_BSAS
		PHDCM.ED	ED_SEX
		PHDCM.HD_HD	HD_SEX
	SEX_NEVER:	PHDCM.OO	OO_SEX
	Is there no sex recorded for this	PHDDEATH.DEATH	SEX_DEATH
	PHD ID across all data sets or	PHDDHCD.DHCD	SEX_DHCD
	within any data sets?	PHDDIA.DIA	SEX_DIA
		PHDDOC.DOC	SEX_DOC
		PHDDMH.DMH	SEX_DMH
		PHDDTA.DTA	SEX_DTA
		PHDDVS.DVS	SEX_DVS
		PHDEI.EI_CLIENTS	SEX_EI
		PHDHOC.HOC	SEX_HOC
		PHDEMS.MATRIS	SEX_MATRIS
		PHDHEPA.HAV	SEX_HAV
		PHDHEPC.HCV	SEX_HCV
		PHDHIV.HIV_INC	SEX_HIV
		PHDHIV.HIV_PRE	SEX_HIV
		PHDMCR.MCR	SEX_MCR
		PHDPMP.PMP	SEX_PMP
		PHDWIC.WIC_KID	SEX_KID
		PHDWIC.WIC_MOM	SEX_MOM
VETERAN	Is the individual a US Veteran?	PHDBSAS.BSAS	clt_type_veteran_Bsas
		PHDDEATH.DEATH	veteran_death soc_death naics_death census_occ_death census_ind_death
		PHDDTA.DTA	MILITARY_SVC_FLG_DTA
		PHDPMP.PMP	pharm_name payment_type_pmp va_pmp
		PHDDVS.DVS	ID

Spine Variable	Description	Dataset	Variable
		8, PHDAPCD.PROVIDER14_18 , PHDAPCD.DENTAL14_18, PHDAPCD.PHARMACY14_1	PHARM_INSURANCE_TYP
		PHDDHCD.DHCD	VETERAN_DHCD
		PHDDMH.DMH	VETERAN_DMH DISCHARGE_DISP_DMH
		PHDMCR.MCR	PAYER_MCR
		PHDCM.HD	HD_VETERANSTATUS