

2022v1.0 Merative™ MarketScan®

Dental Database

Data Dictionary



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The file should be cited as follows:

SOURCE: Merative™ RED BOOK™ and MarketScan® Research Databases.

Format of Data Dictionary

Each standard field that may be found in MarketScan data is defined on the following pages. Seven columns of information are present for each field.

Name

The short (Two- to eight- character) name of the variable.

Long Name

Long name, or label of the variable. For example, the variable containing information about the type of provider who rendered the service is labeled **Provider Type**.

Description

A definition of the data in the variable.

Data Types/Formats

CHAR: Character

NUM: Integer Numeric

FLT: Decimal Numeric (CSV only)

DATE: Date (CSV only)

Valid Contents

The meaning of each valid term in the field. For example, the standard values for SEX (Gender of Patient) are **1** and **2**, with **1** meaning male and **2** meaning female.

Some variables have longer lists of standard values. For those, a separate attachment (which follows the alphabetical listing) has been created.

Notes

Information about the source of the data in the variable. The Note often relates to analytical uses of the data.

Tables

An abbreviation that indicates in which table the variable is found:

N: Dental Claims

A: Annual Summary Enrollment

T: Detail Enrollment

| MarketScan Dental Database | | | |
|------------------------------|--------------------------------------|------------|---------|
| Variable Summary | | | |
| Name | Long Name | SAS Format | Tables |
| Clinical Variables | | | |
| DX1 | Diagnosis 1 | CHAR(7) | N |
| DX2 | Diagnosis 2 | CHAR(7) | N |
| DXVER | Diagnosis Code ICD Version Indicator | CHAR(1) | N |
| MDC | Major Diagnostic Category | CHAR(2) | N |
| PROC1 | Procedure Code 1 | CHAR(7) | N |
| PROCGRP | Procedure Code Group | NUM(3) | N |
| PROCMOD | Procedure Code Modifier | CHAR(2) | N |
| PROCTYP | Procedure Code Type | CHAR(1) | N |
| TOOTHCD | Tooth Code | CHAR(2) | N |
| TOOTHSUR | Tooth Surface Code | CHAR(5) | N |
| Demographic Variables | | | |
| AGE | Age of Patient | NUM(3) | A, N, T |
| AGEGRP | Age Group | CHAR(1) | A, N, T |
| DATATYP | Data Type | NUM(3) | N, T |
| DATTYP1 | Data Type Month 1 | NUM(3) | A |
| DATTYP10 | Data Type Month 10 | NUM(3) | A |
| DATTYP11 | Data Type Month 11 | NUM(3) | A |
| DATTYP12 | Data Type Month 12 | NUM(3) | A |
| DATTYP2 | Data Type Month 2 | NUM(3) | A |
| DATTYP3 | Data Type Month 3 | NUM(3) | A |
| DATTYP4 | Data Type Month 4 | NUM(3) | A |
| DATTYP5 | Data Type Month 5 | NUM(3) | A |
| DATTYP6 | Data Type Month 6 | NUM(3) | A |
| DATTYP7 | Data Type Month 7 | NUM(3) | A |
| DATTYP8 | Data Type Month 8 | NUM(3) | A |
| DATTYP9 | Data Type Month 9 | NUM(3) | A |
| DENPTY1 | Dental Plan Type Indicator Month 1 | NUM(3) | A |
| DENPTY10 | Dental Plan Type Indicator Month 10 | NUM(3) | A |
| DENPTY11 | Dental Plan Type Indicator Month 11 | NUM(3) | A |
| DENPTY12 | Dental Plan Type Indicator Month 12 | NUM(3) | A |
| DENPTY2 | Dental Plan Type Indicator Month 2 | NUM(3) | A |
| DENPTY3 | Dental Plan Type Indicator Month 3 | NUM(3) | A |
| DENPTY4 | Dental Plan Type Indicator Month 4 | NUM(3) | A |

| MarketScan Dental Database | | | |
|-----------------------------|------------------------------------|------------|---------|
| Variable Summary | | | |
| Name | Long Name | SAS Format | Tables |
| DENPTY5 | Dental Plan Type Indicator Month 5 | NUM(3) | A |
| DENPTY6 | Dental Plan Type Indicator Month 6 | NUM(3) | A |
| DENPTY7 | Dental Plan Type Indicator Month 7 | NUM(3) | A |
| DENPTY8 | Dental Plan Type Indicator Month 8 | NUM(3) | A |
| DENPTY9 | Dental Plan Type Indicator Month 9 | NUM(3) | A |
| DENTPTYP | Dental Plan Type Indicator | NUM(3) | N, T |
| DOBYR | Patient Birth Year | NUM(3) | A, N, T |
| EECLASS | Employee Classification | CHAR(1) | A, N, T |
| EESTATU | Employment Status | CHAR(1) | A, N, T |
| INDSTRY | Industry | CHAR(1) | A, N, T |
| MSWGTKEY | MarketScan National Weight Key | CHAR(5) | A |
| PLANTYP | Plan Indicator | NUM(3) | N, T |
| PLNTYP1 | Plan Indicator Month 1 | NUM(3) | A |
| PLNTYP10 | Plan Indicator Month 10 | NUM(3) | A |
| PLNTYP11 | Plan Indicator Month 11 | NUM(3) | A |
| PLNTYP12 | Plan Indicator Month 12 | NUM(3) | A |
| PLNTYP2 | Plan Indicator Month 2 | NUM(3) | A |
| PLNTYP3 | Plan Indicator Month 3 | NUM(3) | A |
| PLNTYP4 | Plan Indicator Month 4 | NUM(3) | A |
| PLNTYP5 | Plan Indicator Month 5 | NUM(3) | A |
| PLNTYP6 | Plan Indicator Month 6 | NUM(3) | A |
| PLNTYP7 | Plan Indicator Month 7 | NUM(3) | A |
| PLNTYP8 | Plan Indicator Month 8 | NUM(3) | A |
| PLNTYP9 | Plan Indicator Month 9 | NUM(3) | A |
| SEX | Gender of Patient | CHAR(1) | A, N, T |
| Financial Variables | | | |
| COB | COB and Other Savings | NUM(6) | N |
| COINS | Coinsurance | NUM(6) | N |
| COPAY | Copayment | NUM(6) | N |
| DEDUCT | Deductible | NUM(6) | N |
| NETPAY | Payments Net | NUM(6) | N |
| PAY | Payment | NUM(6) | N |
| Geographic Variables | | | |
| EGEoloc | Geographic Location Employee | CHAR(2) | A, N, T |

| MarketScan Dental Database | | | |
|----------------------------|---------------------------------|------------|---------|
| Variable Summary | | | |
| Name | Long Name | SAS Format | Tables |
| MSA | Metropolitan Statistical Area | NUM(4) | A, N, T |
| REGION | Region | CHAR(1) | A, N, T |
| Patient Variables | | | |
| DENTINMS | Dental ENROLID in MarketScan | CHAR(1) | A, N, T |
| EFAMID | Enrolled Family ID | NUM(6) | A, N, T |
| EIDFLAG | Enrollee ID Derivation Flag | CHAR(1) | N |
| EMPREL | Relation to Employee | CHAR(1) | A, N, T |
| ENRFLAG | Enrollment Flag | CHAR(1) | N |
| ENROLID | Enrollee ID | NUM(6) | A, N, T |
| HLTHPLAN | Health Plan Indicator | CHAR(1) | A, N, T |
| MHSACOVG | Coverage Indicator MHSA | CHAR(1) | A, N, T |
| Provider Variables | | | |
| NPI | National Provider ID | CHAR(10) | N |
| NTWKPROV | Network Provider Indicator | CHAR(1) | N |
| PHYFLAG | Physician Specialty Coding Flag | CHAR(1) | A, N, T |
| PROVID | Provider ID | NUM(6) | N |
| STDPLAC | Place of Service | NUM(3) | N |
| STDPROV | Provider Type | NUM(3) | N |
| SVCSCAT | Service Sub-Category Code | CHAR(5) | N |
| Time Variables | | | |
| DTEND | Date Enrollment End | NUM(4) | T |
| DTSTART | Date Enrollment Start | NUM(4) | T |
| ENRIND1 | Enrollment Indicator Month 1 | NUM(3) | A |
| ENRIND10 | Enrollment Indicator Month 10 | NUM(3) | A |
| ENRIND11 | Enrollment Indicator Month 11 | NUM(3) | A |
| ENRIND12 | Enrollment Indicator Month 12 | NUM(3) | A |
| ENRIND2 | Enrollment Indicator Month 2 | NUM(3) | A |
| ENRIND3 | Enrollment Indicator Month 3 | NUM(3) | A |
| ENRIND4 | Enrollment Indicator Month 4 | NUM(3) | A |
| ENRIND5 | Enrollment Indicator Month 5 | NUM(3) | A |
| ENRIND6 | Enrollment Indicator Month 6 | NUM(3) | A |
| ENRIND7 | Enrollment Indicator Month 7 | NUM(3) | A |
| ENRIND8 | Enrollment Indicator Month 8 | NUM(3) | A |

| MarketScan Dental Database Variable Summary | | | |
|--|---------------------------------------|------------|---------|
| Name | Long Name | SAS Format | Tables |
| ENRIND9 | Enrollment Indicator Month 9 | NUM(3) | A |
| ENRMON | Enrollment Months | NUM(3) | A |
| MEMDAY1 | Member Days Month 1 | NUM(3) | A |
| MEMDAY10 | Member Days Month 10 | NUM(3) | A |
| MEMDAY11 | Member Days Month 11 | NUM(3) | A |
| MEMDAY12 | Member Days Month 12 | NUM(3) | A |
| MEMDAY2 | Member Days Month 2 | NUM(3) | A |
| MEMDAY3 | Member Days Month 3 | NUM(3) | A |
| MEMDAY4 | Member Days Month 4 | NUM(3) | A |
| MEMDAY5 | Member Days Month 5 | NUM(3) | A |
| MEMDAY6 | Member Days Month 6 | NUM(3) | A |
| MEMDAY7 | Member Days Month 7 | NUM(3) | A |
| MEMDAY8 | Member Days Month 8 | NUM(3) | A |
| MEMDAY9 | Member Days Month 9 | NUM(3) | A |
| MEMDAYS | Member Days | NUM(3) | A, T |
| PDDATE | Date Claim Paid | NUM(4) | N |
| SVCDATE | Date Service Incurred | NUM(4) | N |
| TSVCDAT | Date Service Ending | NUM(4) | N |
| YEAR | Date Year Incurred | NUM(3) | A, N, T |
| Other Variables | | | |
| CAP_SVC | Capitated Service-Claim Indicator | CHAR(1) | N |
| FACPROF | Facility-Professional Claim Indicator | CHAR(1) | N |
| MSCLMID | MarketScan Claim ID | NUM(6) | N |
| PAIDNTWK | Network Paid Indicator | CHAR(1) | N |
| QTY | Quantity of Services | NUM(4) | N |
| RX | Cohort Drug Indicator | CHAR(1) | A, N, T |
| SEQNUM | Sequence Number | NUM(6) | A, N, T |
| UNITS | Units of Service Count | NUM(4) | N |
| VERSION | Version | CHAR(2) | A, N, T |

| MarketScan Dental Database | | | |
|----------------------------|---------------------------------------|---------------|------------|
| Dental Services Table | | | |
| Name | Long Name | SAS Data Type | SAS Length |
| AGE | Age of Patient | NUM | 3 |
| AGEGRP | Age Group | CHAR | 1 |
| CAP_SVC | Capitated Service-Claim Indicator | CHAR | 1 |
| COB | COB and Other Savings | NUM | 6 |
| COINS | Coinsurance | NUM | 6 |
| COPAY | Copayment | NUM | 6 |
| DATATYP | Data Type | NUM | 3 |
| DEDUCT | Deductible | NUM | 6 |
| DENTINMS | Dental ENROLID in MarketScan | CHAR | 1 |
| DENTPTYP | Dental Plan Type Indicator | NUM | 3 |
| DOBYR | Patient Birth Year | NUM | 3 |
| DX1 | Diagnosis 1 | CHAR | 7 |
| DX2 | Diagnosis 2 | CHAR | 7 |
| DXVER | Diagnosis Code ICD Version Indicator | CHAR | 1 |
| EECLASS | Employee Classification | CHAR | 1 |
| EESTATU | Employment Status | CHAR | 1 |
| EFAMID | Enrolled Family ID | NUM | 6 |
| EGEOLOC | Geographic Location Employee | CHAR | 2 |
| EIDFLAG | Enrollee ID Derivation Flag | CHAR | 1 |
| EMPREL | Relation to Employee | CHAR | 1 |
| ENRFLAG | Enrollment Flag | CHAR | 1 |
| ENROLID | Enrollee ID | NUM | 6 |
| FACPROF | Facility-Professional Claim Indicator | CHAR | 1 |
| HLTHPLAN | Health Plan Indicator | CHAR | 1 |
| INDSTRY | Industry | CHAR | 1 |
| MDC | Major Diagnostic Category | CHAR | 2 |
| MHSACOVG | Coverage Indicator MHSA | CHAR | 1 |
| MSA | Metropolitan Statistical Area | NUM | 4 |
| MSCLMID | MarketScan Claim ID | NUM | 6 |
| NETPAY | Payments Net | NUM | 6 |
| NPI | National Provider ID | CHAR | 10 |
| NTWKPROV | Network Provider Indicator | CHAR | 1 |
| PAIDNTWK | Network Paid Indicator | CHAR | 1 |
| PAY | Payment | NUM | 6 |
| PDDATE | Date Claim Paid | NUM | 4 |
| PHYFLAG | Physician Specialty Coding Flag | CHAR | 1 |

| MarketScan Dental Database | | | |
|----------------------------|---------------------------|---------------|------------|
| Dental Services Table | | | |
| Name | Long Name | SAS Data Type | SAS Length |
| PLANTYP | Plan Indicator | NUM | 3 |
| PROC1 | Procedure Code 1 | CHAR | 7 |
| PROCGRP | Procedure Code Group | NUM | 3 |
| PROCMOD | Procedure Code Modifier | CHAR | 2 |
| PROCTYP | Procedure Code Type | CHAR | 1 |
| PROVID | Provider ID | NUM | 6 |
| QTY | Quantity of Services | NUM | 4 |
| REGION | Region | CHAR | 1 |
| RX | Cohort Drug Indicator | CHAR | 1 |
| SEQNUM | Sequence Number | NUM | 6 |
| SEX | Gender of Patient | CHAR | 1 |
| STDPLAC | Place of Service | NUM | 3 |
| STDPROV | Provider Type | NUM | 3 |
| SVCDATE | Date Service Incurred | NUM | 4 |
| SVCSCAT | Service Sub-Category Code | CHAR | 5 |
| TOOTHCD | Tooth Code | CHAR | 2 |
| TOOTHSUR | Tooth Surface Code | CHAR | 5 |
| TSVCDAT | Date Service Ending | NUM | 4 |
| UNITS | Units of Service Count | NUM | 4 |
| VERSION | Version | CHAR | 2 |
| YEAR | Date Year Incurred | NUM | 3 |

| MarketScan Dental Database Annual Enrollment Summary Table | | | |
|---|-------------------------------------|---------------|------------|
| Name | Long Name | SAS Data Type | SAS Length |
| AGE | Age of Patient | NUM | 3 |
| AGEGRP | Age Group | CHAR | 1 |
| DATTYP1 | Data Type Month 1 | NUM | 3 |
| DATTYP10 | Data Type Month 10 | NUM | 3 |
| DATTYP11 | Data Type Month 11 | NUM | 3 |
| DATTYP12 | Data Type Month 12 | NUM | 3 |
| DATTYP2 | Data Type Month 2 | NUM | 3 |
| DATTYP3 | Data Type Month 3 | NUM | 3 |
| DATTYP4 | Data Type Month 4 | NUM | 3 |
| DATTYP5 | Data Type Month 5 | NUM | 3 |
| DATTYP6 | Data Type Month 6 | NUM | 3 |
| DATTYP7 | Data Type Month 7 | NUM | 3 |
| DATTYP8 | Data Type Month 8 | NUM | 3 |
| DATTYP9 | Data Type Month 9 | NUM | 3 |
| DENPTY1 | Dental Plan Type Indicator Month 1 | NUM | 3 |
| DENPTY10 | Dental Plan Type Indicator Month 10 | NUM | 3 |
| DENPTY11 | Dental Plan Type Indicator Month 11 | NUM | 3 |
| DENPTY12 | Dental Plan Type Indicator Month 12 | NUM | 3 |
| DENPTY2 | Dental Plan Type Indicator Month 2 | NUM | 3 |
| DENPTY3 | Dental Plan Type Indicator Month 3 | NUM | 3 |
| DENPTY4 | Dental Plan Type Indicator Month 4 | NUM | 3 |
| DENPTY5 | Dental Plan Type Indicator Month 5 | NUM | 3 |
| DENPTY6 | Dental Plan Type Indicator Month 6 | NUM | 3 |
| DENPTY7 | Dental Plan Type Indicator Month 7 | NUM | 3 |
| DENPTY8 | Dental Plan Type Indicator Month 8 | NUM | 3 |
| DENPTY9 | Dental Plan Type Indicator Month 9 | NUM | 3 |
| DENTINMS | Dental ENROLID in MarketScan | CHAR | 1 |
| DOBYR | Patient Birth Year | NUM | 3 |
| EECLASS | Employee Classification | CHAR | 1 |
| EESTATU | Employment Status | CHAR | 1 |
| EFAMID | Enrolled Family ID | NUM | 6 |
| EGEOLOC | Geographic Location Employee | CHAR | 2 |
| EMPREL | Relation to Employee | CHAR | 1 |
| ENRIND1 | Enrollment Indicator Month 1 | NUM | 3 |
| ENRIND10 | Enrollment Indicator Month 10 | NUM | 3 |
| ENRIND11 | Enrollment Indicator Month 11 | NUM | 3 |

| MarketScan Dental Database Annual Enrollment Summary Table | | | |
|---|---------------------------------|---------------|------------|
| Name | Long Name | SAS Data Type | SAS Length |
| ENRIND12 | Enrollment Indicator Month 12 | NUM | 3 |
| ENRIND2 | Enrollment Indicator Month 2 | NUM | 3 |
| ENRIND3 | Enrollment Indicator Month 3 | NUM | 3 |
| ENRIND4 | Enrollment Indicator Month 4 | NUM | 3 |
| ENRIND5 | Enrollment Indicator Month 5 | NUM | 3 |
| ENRIND6 | Enrollment Indicator Month 6 | NUM | 3 |
| ENRIND7 | Enrollment Indicator Month 7 | NUM | 3 |
| ENRIND8 | Enrollment Indicator Month 8 | NUM | 3 |
| ENRIND9 | Enrollment Indicator Month 9 | NUM | 3 |
| ENRMON | Enrollment Months | NUM | 3 |
| ENROLID | Enrollee ID | NUM | 6 |
| HLTHPLAN | Health Plan Indicator | CHAR | 1 |
| INDSTRY | Industry | CHAR | 1 |
| MEMDAY1 | Member Days Month 1 | NUM | 3 |
| MEMDAY10 | Member Days Month 10 | NUM | 3 |
| MEMDAY11 | Member Days Month 11 | NUM | 3 |
| MEMDAY12 | Member Days Month 12 | NUM | 3 |
| MEMDAY2 | Member Days Month 2 | NUM | 3 |
| MEMDAY3 | Member Days Month 3 | NUM | 3 |
| MEMDAY4 | Member Days Month 4 | NUM | 3 |
| MEMDAY5 | Member Days Month 5 | NUM | 3 |
| MEMDAY6 | Member Days Month 6 | NUM | 3 |
| MEMDAY7 | Member Days Month 7 | NUM | 3 |
| MEMDAY8 | Member Days Month 8 | NUM | 3 |
| MEMDAY9 | Member Days Month 9 | NUM | 3 |
| MEMDAYS | Member Days | NUM | 3 |
| MHSACOVG | Coverage Indicator MHSA | CHAR | 1 |
| MSA | Metropolitan Statistical Area | NUM | 4 |
| MSWGTKEY | MarketScan National Weight Key | CHAR | 5 |
| PHYFLAG | Physician Specialty Coding Flag | CHAR | 1 |
| PLNTYP1 | Plan Indicator Month 1 | NUM | 3 |
| PLNTYP10 | Plan Indicator Month 10 | NUM | 3 |
| PLNTYP11 | Plan Indicator Month 11 | NUM | 3 |
| PLNTYP12 | Plan Indicator Month 12 | NUM | 3 |
| PLNTYP2 | Plan Indicator Month 2 | NUM | 3 |
| PLNTYP3 | Plan Indicator Month 3 | NUM | 3 |

| MarketScan Dental Database Annual Enrollment Summary Table | | | |
|---|------------------------|---------------|------------|
| Name | Long Name | SAS Data Type | SAS Length |
| PLNTYP4 | Plan Indicator Month 4 | NUM | 3 |
| PLNTYP5 | Plan Indicator Month 5 | NUM | 3 |
| PLNTYP6 | Plan Indicator Month 6 | NUM | 3 |
| PLNTYP7 | Plan Indicator Month 7 | NUM | 3 |
| PLNTYP8 | Plan Indicator Month 8 | NUM | 3 |
| PLNTYP9 | Plan Indicator Month 9 | NUM | 3 |
| REGION | Region | CHAR | 1 |
| RX | Cohort Drug Indicator | CHAR | 1 |
| SEQNUM | Sequence Number | NUM | 6 |
| SEX | Gender of Patient | CHAR | 1 |
| VERSION | Version | CHAR | 2 |
| YEAR | Date Year Incurred | NUM | 3 |

| MarketScan Dental Database Enrollment Detail Table | | | |
|---|---------------------------------|---------------|------------|
| Name | Long Name | SAS Data Type | SAS Length |
| AGE | Age of Patient | NUM | 3 |
| AGEGRP | Age Group | CHAR | 1 |
| DATATYP | Data Type | NUM | 3 |
| DENTINMS | Dental ENROLID in MarketScan | CHAR | 1 |
| DENTPTYP | Dental Plan Type Indicator | NUM | 3 |
| DOBYR | Patient Birth Year | NUM | 3 |
| DTEND | Date Enrollment End | NUM | 4 |
| DTSTART | Date Enrollment Start | NUM | 4 |
| EECLASS | Employee Classification | CHAR | 1 |
| EESTATU | Employment Status | CHAR | 1 |
| EFAMID | Enrolled Family ID | NUM | 6 |
| EGEOLOC | Geographic Location Employee | CHAR | 2 |
| EMPREL | Relation to Employee | CHAR | 1 |
| ENROLID | Enrollee ID | NUM | 6 |
| HLTHPLAN | Health Plan Indicator | CHAR | 1 |
| INDSTRY | Industry | CHAR | 1 |
| MEMDAYS | Member Days | NUM | 3 |
| MHSACOVG | Coverage Indicator MHSA | CHAR | 1 |
| MSA | Metropolitan Statistical Area | NUM | 4 |
| PHYFLAG | Physician Specialty Coding Flag | CHAR | 1 |
| PLANTYP | Plan Indicator | NUM | 3 |
| REGION | Region | CHAR | 1 |
| RX | Cohort Drug Indicator | CHAR | 1 |
| SEQNUM | Sequence Number | NUM | 6 |
| SEX | Gender of Patient | CHAR | 1 |
| VERSION | Version | CHAR | 2 |
| YEAR | Date Year Incurred | NUM | 3 |

MarketScan Dental Database Data Dictionary

| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
|---------|-----------------------------------|---|------------|--|---|---------|
| AGE | Age of Patient | Patient age in years at the time of service | NUM(3) | Each character = 0-9 | A table: calculated using DTSTART from the first enrollment detail (T) record of the year. I table: calculated using ADMDATE. D, F, N, O, S, R tables: calculated using SVCDATE. T table: calculated using DTSTART. Beginning in the 2016 data year: Age 0-6 - actual age as of the Date of Service/Enrollment Start Date/Admission Date. Age 7-16 - age as of the 15th of the month of the Date of Service/Enrollment Start Date/Admission Date. Age 17+ - age as of the July 1 of the year of the Date of Service/Enrollment Start Date/Admission Date. | A, N, T |
| AGEGRP | Age Group | A value identifying the patient or members age group | CHAR(1) | 1: 0-17 2: 18-34 3: 35-44 4: 45-54 5: 55-64 6: 65 and older | Age group or cohort of patient on admissions (I), services (S), outpatient services (O), prescription drug claims (D), and lab results (R); of covered life on populations (P); the mode of monthly AGEGRP for a member on Annual Enrollment Summary (A); of member as of the start of the enrollment period on Enrollment Detail (T) | A, N, T |
| CAP_SVC | Capitated Service-Claim Indicator | An indication of whether the individual service or claim was paid on a capitated basis | CHAR(1) | Y: Yes N: No | New in 2007 | N |
| COB | COB and Other Savings | All dollars not paid by the carrier, except deductible and copayment amounts. Includes COB, Medicare, third party payer and penalties. Total payments for the service minus Deductible, Copayment, Coinsurance, and COB/Savings equals employer net payments. | NUM(6) | Each character = 0-9; dollars and cents with explicit decimal | Set B: As coded on claim | N |
| COINS | Coinsurance | Payments made by the beneficiary to satisfy coinsurance plan provisions and/or apply to the stop-loss cap. Total payments for the service minus Deductible, Copayment, Coinsurance, and COB/Savings equals employer net payments. | NUM(6) | Each character = 0-9; dollars and cents with explicit decimal | Set B: As coded on claim | N |

| MarketScan Dental Database Data Dictionary | | | | | | |
|---|---|--|------------|--|--|---------|
| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
| COPAY | Copayment | Payments made by the beneficiary to satisfy copayment or coinsurance plan provisions and/or apply to the stop-loss cap. Total payments for the service minus Deductible, Copayment, Coinsurance, and COB/Savings equals employer net payments. | NUM(6) | Each character = 0-9; dollars and cents with explicit decimal | Set B: As coded on claim | N |
| DATATYP | Data Type | A value identifying whether the claim or eligible population is fee-for-service, encounter, Medicare, or Medicare encounter. This field was new in 1998 and was developed to identify claims formerly found in the Private Pay Fee-For-Service, Encounter, and Medicare databases. | NUM(3) | 1: Fee for Service 2: Encounter 3: Medicare 4: Medicare Encounter | - | N, T |
| DATTYP1 through DATTYP12 | Data Type Months 1 through 12 | A value identifying whether eligible population is fee-for-service, encounter, Medicare, or Medicare encounter, for a particular month of enrollment | NUM(3) | 1: Fee for Service 2: Encounter 3: Medicare 4: Medicare Encounter | - | A |
| DEDUCT | Deductible | Payments made by the beneficiary to satisfy the plan's deductible provisions. Total payments for the service minus Deductible, Copayment, Coinsurance, and COB/Savings equals employer net payments. | NUM(6) | Each character = 0-9; dollars and cents with explicit decimal | Set B: As coded on claim | N |
| DENPTY1 through DENPTY12 | Dental Plan Type Indicator Months 1 through 12 | The MarketScan-assigned value of the type of dental plan (e.g., PPO, HMO) assigned for a particular month of enrollment | NUM(3) | 1: Basic/major medical 2: Comprehensive 3: EPO 4: HMO 5: POS 6: PPO 7: POS with capitation 8: CDHP 9: HDHP | Mapped from client specific coding to Merative standard values. See "Plan Type Definition" in the MarketScan Database User's Guide. | A |
| DENTINMS | Dental ENROLID in MarketScan | Indicates whether the member is also present in the MarketScan database for the year | CHAR(1) | 0: No (the member is not in the MarketScan commercial data) 1: Yes (the member is in the MarketScan commercial data) | - | A, N, T |

| MarketScan Dental Database Data Dictionary | | | | | | |
|---|--|--|------------|--|---|---------|
| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
| DENTPTYP | Dental Plan Type Indicator | The MarketScan-assigned value of the type of dental plan (e.g., PPO, HMO) | NUM(3) | 1: Basic/major medical 2: Comprehensive 3: EPO 4: HMO 5: POS 6: PPO 7: POS with capitation 8: CDHP 9: HDHP | Mapped from client specific coding to Merative standard values. See "Plan Type Definition" in the MarketScan Database User's Guide. | N, T |
| DOBYR | Patient Birth Year | Year of patient birth | NUM(3) | CCYY | Calculated on the claims tables from the date of service and the patient age. Derived on the enrollment table from the date of birth recorded on the enrollment record. | A, N, T |
| DTEND | Date Enrollment End | End date of continuous enrollment period | NUM(4) | mmddyy10. | - | T |
| DTSTART | Date Enrollment Start | Start date of continuous enrollment period | NUM(4) | mmddyy10. | - | T |
| DX1 through DX2 | Diagnosis 1 through 2 | The principal diagnosis and one additional diagnosis. | CHAR(7) | See "Clinical Fields" in the MarketScan Database User's Guide. | - | N |
| DXVER | Diagnosis Code ICD Version Indicator | A code denoting which coding system is relevant to the value found in the DX1 field on the record | CHAR(1) | 0: ICD-10-CM 9: ICD-9-CM | New in 2015 | N |
| EECLASS | Employee Classification | The employment classification of the primary beneficiary also coded on spouse and dependent claims | CHAR(1) | 1: Salary Non-union 2: Salary Union 3: Salary Other 4: Hourly Non-union 5: Hourly Union 6: Hourly Other 7: Non-union 8: Union 9: Unknown | Mapped from carrier specific coding to Merative standard values. | A, N, T |

MarketScan Dental Database

Data Dictionary

| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
|---------|------------------------------|---|------------|---|---|---------|
| EESTATU | Employment Status | Employment status of the primary beneficiary, also coded on spouse and dependent claims | CHAR(1) | 1: Active Full Time 2: Active Part Time or Seasonal 3: Early Retiree 4: Medicare Eligible Retiree 5: Retiree (status unknown) 6: COBRA Continuee 7: Long Term Disability 8: Surviving Spouse/Depend. 9: Other/Unknown | Mapped from carrier specific coding to Merative standard values | A, N, T |
| EFAMID | Enrolled Family ID | A unique one to nine digit number identifying each family group in the data file | NUM(6) | Each character = 0-9 | New in 2011 | A, N, T |
| EGEOLOC | Geographic Location Employee | Geographic location (state, division, region) of primary beneficiary's residence | CHAR(2) | See Attachment A - EGEOLOC | Population supported Mapped from employee ZIP Code | A, N, T |
| EIDFLAG | Enrollee ID Derivation Flag | Describes the quality of ENROLID assignment | CHAR(1) | 1: ENRFLAG=1; ENROLID from enrollment 2: ENRFLAG=1; ENROLID from claims 3: ENRFLAG=1; ENROLID missing 4: ENRFLAG=0; ENROLID from claims 5: ENRFLAG=0; ENROLID missing 6: ENRFLAG=0; "pseudo" ENROLID | See Section 4. Person Level Identifiers in the MarketScan CCAE MDCR User's Guide. | N |
| EMPREL | Relation to Employee | Relationship of the patient to the primary beneficiary | CHAR(1) | 1: Employee 2: Spouse 3: Child/Other 4: Dependent-Relation Unknown | Mapped from carrier specific coding to Merative standard values | A, N, T |

MarketScan Dental Database

Data Dictionary

| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
|---------------------------------|---|--|------------|--|--|---------|
| ENRFLAG | Enrollment Flag | A flag that indicates that person-level enrollment information is available for a data contributor | CHAR(1) | 0: No person-level enrollment information available from this data contributor. 1: Person-level enrollment information is available from this data contributor. | See "The Enrollment Tables" in the MarketScan CCAE MDCR User's Guide. | N |
| ENRIND1 through ENRIND12 | Enrollment Indicator Months 1 through 12 | A flag that indicates that an individual was enrolled in the specified month | NUM(3) | 0: Individual was not enrolled during the specified month. 1: Individual was enrolled during the specified month. | - | A |
| ENRMON | Enrollment Months | Total number of months during the year in which an individual was enrolled | NUM(3) | 1 to 12 | - | A |
| ENROLID | Enrollee ID | A unique three to eleven digit number identifying each enrollee in the data file | NUM(6) | Each character = 0-9 | See Section 4. Person Level Identifiers in the MarketScan Database User's Guide. | A, N, T |
| FACPROF | Facility-Professional Claim Indicator | An indication of whether the claim is from a facility or professional claim | CHAR(1) | F=Facility Claim P=Professional Claim | New in 2003 | N |
| HLTHPLAN | Health Plan Indicator | An indicator as to whether the data supplier of a record was a large US employer or a Health Plan | CHAR(1) | 0: Employer 1: Health Plan | New in 2004 | A, N, T |

| MarketScan Dental Database Data Dictionary | | | | | | |
|---|---------------------------------|--|------------|--|--|---------|
| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
| INDSTRY | Industry | Industry classification of the employer responsible for payment of claim | CHAR(1) | 1: Oil & Gas Extraction, Mining 2: Manufacturing, Durable Goods 3: Manufacturing, Nondurable Goods 4: Transportation, Communications, Utilities 5: Retail Trade 6: Finance, Insurance, Real Estate 7: Services A: Agriculture, Forestry, Fishing C: Construction W: Wholesale O: Other | - | A, N, T |
| MDC | Major Diagnostic Category | Body-system or disease related groupings of clinical conditions, based on diagnosis codes | CHAR(2) | See Attachment B - MDC | Assigned by Merative using DRG Grouper v40.0 | N |
| MEMDAY1 through MEMDAY12 | Member Days Months 1 through 12 | The number of days an individual was enrolled during the specified month | NUM(3) | Each character = 0-9 | - | A |
| MEMDAYS | Member Days | The number of member days an enrollee was enrolled | NUM(3) | Each character = 0-9 | Calculated by DTEND less DTSTART plus 1. | A, T |
| MHSACOVG | Coverage Indicator MHSA | Identifies whether or not mental health/substance abuse claims for covered individuals are included for the current year of data | CHAR(1) | 0: Not Covered/Claims Not Present 1: Covered/Possible MHSA Claims | - | A, N, T |
| MSA | Metropolitan Statistical Area | Metropolitan Statistical Area of primary beneficiary | NUM(4) | See Attachment C - MSA | Mapped from 5 digit employee ZIP Code | A, N, T |
| MSCLMID | MarketScan Claim ID | MarketScan Claim Identifier | NUM(6) | Each character = 0-9 | New in 2015 | N |
| MSWGTKEY | MarketScan National Weight Key | A link to the MarketScan National Weights Tables | CHAR(5) | Each character = 0-9 | New in 2015 | A |

MarketScan Dental Database

Data Dictionary

| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
|----------|---------------------------------|---|------------|---|---|---------|
| NETPAY | Payments Net | Net payments as reported by the carrier. | NUM(6) | Each character = 0-9; dollars and cents with explicit decimal | As coded on claim | N |
| NPI | National Provider ID | An encrypted National Provider Identifier number | CHAR(10) | - | New in 2015. Encrypted. | N |
| NTWKPROV | Network Provider Indicator | An indication of whether the provider of an individual service was a member of the payer's network | CHAR(1) | Y: Yes N: No | New in 2007 | N |
| PAIDNTWK | Network Paid Indicator | An indication of whether an individual claim was paid as in-network or not | CHAR(1) | Y: Yes N: No | New in 2007 | N |
| PAY | Payment | Gross payments to a provider for a service. Payment equals the amount eligible for payment under the medical plan terms after applying rules such as discounts, but before applying COB, Copayments, and Deductibles. | NUM(6) | Each character = 0-9; dollars and cents with explicit decimal | Set B: As coded on claim | N |
| PDDATE | Date Claim Paid | The year, month, and day on which the claim was paid by the carrier/administrator | NUM(4) | mmddyy10. | - | N |
| PHYFLAG | Physician Specialty Coding Flag | A flag that identifies claims from data contributors with highly-differentiated physician specialist coding on claims. | CHAR(1) | 0: Fewer than 70% of Outpatient physician records have the physician's specialty indicated. 1: 70% or more of the Outpatient physician records have the physician's specialty indicated. | - | A, N, T |
| PLANTYP | Plan Indicator | Type of benefit plan | NUM(3) | 1: Basic/major medical 2: Comprehensive 3: EPO 4: HMO 5: POS 6: PPO 7: POS with capitation 8: CDHP 9: HDHP | Mapped from client specific coding to Merative standard values. See "Plan Type Definition" in the MarketScan CCAE MDCR User's Guide. | N, T |

MarketScan Dental Database Data Dictionary

| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
|--|---|---|------------|--|---|---------|
| PLNTYP1 through PLNTYP12 | Plan Indicator Months 1 through 12 | Type of benefit plan effective during a particular month of enrollment | NUM(3) | 1: Basic/major medical 2: Comprehensive 3: EPO 4: HMO 5: POS 6: PPO 7: POS with capitation 8: CDHP 9: HDHP | Mapped from client specific coding to Merative standard values. See "Plan Type Definition" in the MarketScan CCAE MDCR User's Guide. | A |
| PROC1 | Procedure Code 1 | The first procedure listed on the claim record | CHAR(7) | See "Clinical Fields" in the MarketScan Database User's Guide. | - | N |
| PROCGRP | Procedure Code Group | Groups of related outpatient procedures, based on CPT4, ICD-10-CM, or HCPCS procedure codes | NUM(3) | See Attachment D - PROCGRP | - | N |
| PROCMOD | Procedure Code Modifier | The 2-character code of the first procedure code modifier on the claim | CHAR(2) | - | Procedure modifiers only apply to CPT codes. | N |
| PROCTYP | Procedure Code Type | The type of procedure coding used by the carrier/administrator in the PROC1 (Procedure1) field | CHAR(1) | *: ICD-9-CM 0: ICD-10-CM 1: CPT 3: UB92 Revenue Code 6: NABSP 7: HCPC 8: CDT (ADA) | - | N |
| PROVID | Provider ID | Identifier for provider of service used by the carrier Encrypted as of 2001 data | NUM(6) | Each character = 0-9 | - | N |
| QTY | Quantity of Services | Number of services performed for an inpatient service or outpatient claim and number of prescriptions filled for prescription drug claims | NUM(4) | Each character = 0-9 | - | N |
| REGION | Region | Geographic Region of employee residence | CHAR(1) | 1: Northeast 2: North Central 3: South 4: West 5: Unknown | - | A, N, T |
| RX | Cohort Drug Indicator | Identifies whether or not Merative captures drug claims for an enrolled individual's plan group | CHAR(1) | 0: No drug benefit identified 1: Identifies drug benefit | See "Tables" in the MarketScan CCAE MDCR User's Guide. | A, N, T |

MarketScan Dental Database Data Dictionary

| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
|----------|---------------------------|--|------------|---|--|---------|
| SEQNUM | Sequence Number | A code indicating a unique identifier for every record on a table | NUM(6) | Each character = 0-9 | Normal values for a full dataset are 1 through the number of records (e.g. a table with 2,000,000 records will have SEQNUM values 1 to 2000000). For custom datasets, this range may vary. | A, N, T |
| SEX | Gender of Patient | Gender of the patient on admissions, services, outpatient claims and prescription drug claims; of covered life on populations | CHAR(1) | 1: Male 2: Female | As coded on claim | A, N, T |
| STDPLAC | Place of Service | Setting where service occurred | NUM(3) | See Attachment E - STDPLAC | Mapped from carrier specific coding to Merative standard values | N |
| STDPROV | Provider Type | 001-099 Facility 100-799 Physician 100-199 Non-admitting Physicians 200-499 Admitting Physicians 500-599 Surgeons 800-899 Professionals (Non-Physician) 900-999 Agencies | NUM(3) | See Attachment F - STDPROV | Mapped from carrier specific coding to Merative standard values. It is recommended that ranges be used rather than individual values, as coding quality is inconsistent between data contributors. | N |
| SVCDATE | Date Service Incurred | Date of dental service | NUM(4) | mmddyy10. | Represents the "from" date if service was provided over more than one day | N |
| SVCSCAT | Service Sub-Category Code | A code indicating a detailed category of service | CHAR(5) | See Attachment G - SVCSCAT | New in 2005 | N |
| TOOTHCD | Tooth Code | A code that indicates the tooth that was serviced | CHAR(2) | See Attachment H - TOOTHCD | Less than 15% of dental claims have tooth code populated. Some non-standard codes may be in use. | N |
| TOOTHSUR | Tooth Surface Code | A code that indicates the tooth surface that was serviced | CHAR(5) | A: All B: Buccal D: Distal F: Facial I: Incisal L: Lingual M: Mesial O: Occlusal | Less than 2% of dental claims have tooth surface populated. Some non-standard codes may be in use. | N |
| TSVCDAT | Date Service Ending | The end date for a service | NUM(4) | mmddyy10. | Represents the "to" date if service was provided over more than one day | N |
| UNITS | Units of Service Count | A numeric count of units or services rendered | NUM(4) | Each character = 0-9 | New in 2015. See also QTY | N |
| VERSION | Version | A Merative internal database version number | CHAR(2) | Whole Number | - | A, N, T |

| MarketScan Dental Database Data Dictionary | | | | | | |
|---|-----------------------|---|------------|----------------|-------|---------|
| Name | Long Name | Description | SAS Format | Valid Contents | Notes | Tables |
| YEAR | Date Year Incurred | The calendar year during which the service was rendered, the admission began or the population was eligible | NUM(3) | CCYY | - | A, N, T |

| Attachment A - EGEOLOC | |
|------------------------|--|
| Value | Label |
| 01 | Nation, unknown region |
| 02 | Northeast Region, unknown division |
| 03 | New England Division, unknown state |
| 04 | Connecticut |
| 05 | Maine |
| 06 | Massachusetts |
| 07 | New Hampshire |
| 08 | Rhode Island |
| 09 | Vermont |
| 10 | Middle Atlantic Division, unknown state |
| 11 | New Jersey |
| 12 | New York |
| 13 | Pennsylvania |
| 14 | North Central Region, unknown division |
| 15 | East North Central Division, unknown state |
| 16 | Illinois |
| 17 | Indiana |
| 18 | Michigan |
| 19 | Ohio |
| 20 | Wisconsin |
| 21 | West North Central Division, unknown state |
| 22 | Iowa |
| 23 | Kansas |
| 24 | Minnesota |
| 25 | Missouri |
| 26 | Nebraska |
| 27 | North Dakota |
| 28 | South Dakota |
| 29 | South Region, unknown division |
| 30 | South Atlantic Division, unknown state |
| 31 | Washington, DC |
| 32 | Delaware |
| 33 | Florida |
| 34 | Georgia |
| 35 | Maryland |
| 36 | North Carolina |
| 37 | South Carolina |

| Attachment A - EGEOLOC | |
|------------------------|--|
| Value | Label |
| 38 | Virginia |
| 39 | West Virginia |
| 40 | East South Central Division, unknown state |
| 41 | Alabama |
| 42 | Kentucky |
| 43 | Mississippi |
| 44 | Tennessee |
| 45 | West South Central Division, unknown state |
| 46 | Arkansas |
| 47 | Louisiana |
| 48 | Oklahoma |
| 49 | Texas |
| 50 | West Region, unknown division |
| 51 | Mountain Division, unknown state |
| 52 | Arizona |
| 53 | Colorado |
| 54 | Idaho |
| 55 | Montana |
| 56 | Nevada |
| 57 | New Mexico |
| 58 | Utah |
| 59 | Wyoming |
| 60 | Pacific Division, unknown state |
| 61 | Alaska |
| 62 | California |
| 63 | Hawaii |
| 64 | Oregon |
| 65 | Washington |
| 97 | Puerto Rico |

| Attachment B - MDC | |
|--------------------|-----------------------------|
| Value | Label |
| 00 | Missing/Invalid Diagnosis |
| 01 | Nervous |
| 02 | Eye |
| 03 | Ear, Nose, Mouth & Throat |
| 04 | Respiratory |
| 05 | Circulatory |
| 06 | Digestive |
| 07 | Liver, Pancreas |
| 08 | Musculoskeletal |
| 09 | Skin, Breast |
| 10 | Metabolic |
| 11 | Kidney |
| 12 | Male Reproductive |
| 13 | Female Reproductive |
| 14 | Pregnancy, Childbirth |
| 15 | Newborns |
| 16 | Blood |
| 17 | Myeloproliferative Diseases |
| 18 | Infections |
| 19 | Mental |
| 20 | Alcohol/Drug Use |
| 21 | Injuries, Poisonings |
| 22 | Burns |
| 23 | Health Status |
| 24 | Multiple Trauma |
| 25 | HIV Infections |

| Attachment C - MSA | |
|--------------------|-----------------------------------|
| Value | Label |
| 0 | Non-MSA |
| 10180 | Abilene, TX |
| 10380 | Aguadilla-Isabela, PR |
| 10420 | Akron, OH |
| 10500 | Albany, GA |
| 10540 | Albany, OR |
| 10580 | Albany-Schenectady-Troy, NY |
| 10740 | Albuquerque, NM |
| 10780 | Alexandria, LA |
| 10900 | Allentown-Bethlehem-Easton, PA-NJ |
| 11020 | Altoona, PA |
| 11100 | Amarillo, TX |
| 11180 | Ames, IA |
| 11244 | Anaheim-Santa Ana-Irvine, CA |
| 11260 | Anchorage, AK |
| 11460 | Ann Arbor, MI |
| 11500 | Anniston-Oxford-Jacksonville, AL |
| 11540 | Appleton, WI |
| 11640 | Arecibo, PR |
| 11700 | Asheville, NC |
| 12020 | Athens-Clarke County, GA |
| 12060 | Atlanta-Sandy Springs-Roswell, GA |
| 12100 | Atlantic City-Hammonton, NJ |
| 12220 | Auburn-Opelika, AL |
| 12260 | Augusta-Richmond County, GA-SC |
| 12420 | Austin-Round Rock, TX |
| 12540 | Bakersfield, CA |
| 12580 | Baltimore-Columbia-Towson, MD |
| 12620 | Bangor, ME |
| 12700 | Barnstable Town, MA |
| 12940 | Baton Rouge, LA |
| 12980 | Battle Creek, MI |
| 13020 | Bay City, MI |
| 13140 | Beaumont-Port Arthur, TX |
| 13220 | Beckley, WV |
| 13380 | Bellingham, WA |
| 13460 | Bend-Redmond, OR |

| Attachment C - MSA | |
|--------------------|---------------------------------------|
| Value | Label |
| 13740 | Billings, MT |
| 13780 | Binghamton, NY |
| 13820 | Birmingham-Hoover, AL |
| 13900 | Bismarck, ND |
| 13980 | Blacksburg-Christiansburg-Radford, VA |
| 14010 | Bloomington, IL |
| 14020 | Bloomington, IN |
| 14100 | Bloomsburg-Berwick, PA |
| 14260 | Boise City, ID |
| 14454 | Boston, MA |
| 14500 | Boulder, CO |
| 14540 | Bowling Green, KY |
| 14740 | Bremerton-Silverdale, WA |
| 14860 | Bridgeport-Stamford-Norwalk, CT |
| 15180 | Brownsville-Harlingen, TX |
| 15260 | Brunswick, GA |
| 15380 | Buffalo-Cheektowaga-Niagara Falls, NY |
| 15500 | Burlington, NC |
| 15540 | Burlington-South Burlington, VT |
| 15680 | California-Lexington Park, MD |
| 15764 | Cambridge-Newton-Framingham, MA |
| 15804 | Camden, NJ |
| 15940 | Canton-Massillon, OH |
| 15980 | Cape Coral-Fort Myers, FL |
| 16020 | Cape Girardeau, MO-IL |
| 16060 | Carbondale-Marion, IL |
| 16180 | Carson City, NV |
| 16220 | Casper, WY |
| 16300 | Cedar Rapids, IA |
| 16540 | Chambersburg-Waynesboro, PA |
| 16580 | Champaign-Urbana, IL |
| 16620 | Charleston, WV |
| 16700 | Charleston-North Charleston, SC |
| 16740 | Charlotte-Concord-Gastonia, NC-SC |
| 16820 | Charlottesville, VA |
| 16860 | Chattanooga, TN-GA |
| 16940 | Cheyenne, WY |

| Attachment C - MSA | |
|--------------------|--|
| Value | Label |
| 16974 | Chicago-Naperville-Arlington Heights, IL (no longer in use starting with 2022v1.0) |
| 16984 | Chicago-Naperville-Evanston, IL |
| 17020 | Chico, CA |
| 17140 | Cincinnati, OH-KY-IN |
| 17300 | Clarksville, TN-KY |
| 17420 | Cleveland, TN |
| 17460 | Cleveland-Elyria, OH |
| 17660 | Coeur d'Alene, ID |
| 17780 | College Station-Bryan, TX |
| 17820 | Colorado Springs, CO |
| 17860 | Columbia, MO |
| 17900 | Columbia, SC |
| 17980 | Columbus, GA-AL |
| 18020 | Columbus, IN |
| 18140 | Columbus, OH |
| 18580 | Corpus Christi, TX |
| 18700 | Corvallis, OR |
| 18880 | Crestview-Fort Walton Beach-Destin, FL |
| 19060 | Cumberland, MD-WV |
| 19124 | Dallas-Plano-Irving, TX |
| 19140 | Dalton, GA |
| 19180 | Danville, IL |
| 19300 | Daphne-Fairhope-Foley, AL |
| 19340 | Davenport-Moline-Rock Island, IA-IL |
| 19380 | Dayton, OH (no longer in use starting with 2022v1.0) |
| 19430 | Dayton-Kettering, OH |
| 19460 | Decatur, AL |
| 19500 | Decatur, IL |
| 19660 | Deltona-Daytona Beach-Ormond Beach, FL |
| 19740 | Denver-Aurora-Lakewood, CO |
| 19780 | Des Moines-West Des Moines, IA |
| 19804 | Detroit-Dearborn-Livonia, MI |
| 20020 | Dothan, AL |
| 20100 | Dover, DE |
| 20220 | Dubuque, IA |
| 20260 | Duluth, MN-WI |
| 20500 | Durham-Chapel Hill, NC |

| Attachment C - MSA | |
|--------------------|---|
| Value | Label |
| 20524 | Dutchess County-Putnam County, NY (no longer in use starting with 2022v1.0) |
| 20700 | East Stroudsburg, PA |
| 20740 | Eau Claire, WI |
| 20940 | El Centro, CA |
| 20994 | Elgin, IL |
| 21060 | Elizabethtown-Fort Knox, KY |
| 21140 | Elkhart-Goshen, IN |
| 21300 | Elmira, NY |
| 21340 | El Paso, TX |
| 21420 | Enid, OK |
| 21500 | Erie, PA |
| 21660 | Eugene, OR |
| 21780 | Evansville, IN-KY |
| 21820 | Fairbanks, AK |
| 22020 | Fargo, ND-MN |
| 22140 | Farmington, NM |
| 22180 | Fayetteville, NC |
| 22220 | Fayetteville-Springdale-Rogers, AR-MO |
| 22380 | Flagstaff, AZ |
| 22420 | Flint, MI |
| 22500 | Florence, SC |
| 22520 | Florence-Muscle Shoals, AL |
| 22540 | Fond du Lac, WI |
| 22660 | Fort Collins, CO |
| 22744 | Fort Lauderdale-Pompano Beach-Deerfield Beach, FL |
| 22900 | Fort Smith, AR-OK |
| 23060 | Fort Wayne, IN |
| 23104 | Fort Worth-Arlington, TX |
| 23224 | Frederick-Gaithersburg-Rockville, MD |
| 23420 | Fresno, CA |
| 23460 | Gadsden, AL |
| 23540 | Gainesville, FL |
| 23580 | Gainesville, GA |
| 23844 | Gary, IN |
| 23900 | Gettysburg, PA |
| 24020 | Glens Falls, NY |
| 24140 | Goldsboro, NC |

| Attachment C - MSA | |
|--------------------|--|
| Value | Label |
| 24220 | Grand Forks, ND-MN |
| 24260 | Grand Island, NE |
| 24300 | Grand Junction, CO |
| 24340 | Grand Rapids-Wyoming, MI |
| 24420 | Grants Pass, OR |
| 24500 | Great Falls, MT |
| 24540 | Greeley, CO |
| 24580 | Green Bay, WI |
| 24660 | Greensboro-High Point, NC |
| 24780 | Greenville, NC |
| 24860 | Greenville-Anderson-Mauldin, SC |
| 25020 | Guayama, PR |
| 25060 | Gulfport-Biloxi-Pascagoula, MS |
| 25180 | Hagerstown-Martinsburg, MD-WV |
| 25220 | Hammond, LA |
| 25260 | Hanford-Corcoran, CA |
| 25420 | Harrisburg-Carlisle, PA |
| 25500 | Harrisonburg, VA |
| 25540 | Hartford-West Hartford-East Hartford, CT |
| 25620 | Hattiesburg, MS |
| 25860 | Hickory-Lenoir-Morganton, NC |
| 25940 | Hilton Head Island-Bluffton-Beaufort, SC |
| 25980 | Hinesville, GA |
| 26140 | Homosassa Springs, FL |
| 26300 | Hot Springs, AR |
| 26380 | Houma-Thibodaux, LA |
| 26420 | Houston-The Woodlands-Sugar Land, TX |
| 26580 | Huntington-Ashland, WV-KY-OH |
| 26620 | Huntsville, AL |
| 26820 | Idaho Falls, ID |
| 26900 | Indianapolis-Carmel-Anderson, IN |
| 26980 | Iowa City, IA |
| 27060 | Ithaca, NY |
| 27100 | Jackson, MI |
| 27140 | Jackson, MS |
| 27180 | Jackson, TN |
| 27260 | Jacksonville, FL |

| Attachment C - MSA | |
|--------------------|-----------------------------------|
| Value | Label |
| 27340 | Jacksonville, NC |
| 27500 | Janesville-Beloit, WI |
| 27620 | Jefferson City, MO |
| 27740 | Johnson City, TN |
| 27780 | Johnstown, PA |
| 27860 | Jonesboro, AR |
| 27900 | Joplin, MO |
| 27980 | Kahului-Wailuku-Lahaina, HI |
| 28020 | Kalamazoo-Portage, MI |
| 28100 | Kankakee, IL |
| 28140 | Kansas City, MO-KS |
| 28420 | Kennewick-Richland, WA |
| 28660 | Killeen-Temple, TX |
| 28700 | Kingsport-Bristol-Bristol, TN-VA |
| 28740 | Kingston, NY |
| 28940 | Knoxville, TN |
| 29020 | Kokomo, IN |
| 29100 | La Crosse-Onalaska, WI-MN |
| 29180 | Lafayette, LA |
| 29200 | Lafayette-West Lafayette, IN |
| 29340 | Lake Charles, LA |
| 29404 | Lake County-Kenosha County, IL-WI |
| 29420 | Lake Havasu City-Kingman, AZ |
| 29460 | Lakeland-Winter Haven, FL |
| 29540 | Lancaster, PA |
| 29620 | Lansing-East Lansing, MI |
| 29700 | Laredo, TX |
| 29740 | Las Cruces, NM |
| 29820 | Las Vegas-Henderson-Paradise, NV |
| 29940 | Lawrence, KS |
| 30020 | Lawton, OK |
| 30140 | Lebanon, PA |
| 30300 | Lewiston, ID-WA |
| 30340 | Lewiston-Auburn, ME |
| 30460 | Lexington-Fayette, KY |
| 30620 | Lima, OH |
| 30700 | Lincoln, NE |

| Attachment C - MSA | |
|--------------------|---|
| Value | Label |
| 30780 | Little Rock-North Little Rock-Conway, AR |
| 30860 | Logan, UT-ID |
| 30980 | Longview, TX |
| 31020 | Longview, WA |
| 31084 | Los Angeles-Long Beach-Glendale, CA |
| 31140 | Louisville/Jefferson County, KY-IN |
| 31180 | Lubbock, TX |
| 31340 | Lynchburg, VA |
| 31420 | Macon-Bibb County, GA |
| 31460 | Madera, CA |
| 31540 | Madison, WI |
| 31700 | Manchester-Nashua, NH |
| 31740 | Manhattan, KS |
| 31860 | Mankato-North Mankato, MN |
| 31900 | Mansfield, OH |
| 32420 | Mayaguez, PR |
| 32580 | McAllen-Edinburg-Mission, TX |
| 32780 | Medford, OR |
| 32820 | Memphis, TN-MS-AR |
| 32900 | Merced, CA |
| 33124 | Miami-Miami Beach-Kendall, FL |
| 33140 | Michigan City-La Porte, IN |
| 33220 | Midland, MI |
| 33260 | Midland, TX |
| 33340 | Milwaukee-Waukesha-West Allis, WI |
| 33460 | Minneapolis-St. Paul-Bloomington, MN-WI |
| 33540 | Missoula, MT |
| 33660 | Mobile, AL |
| 33700 | Modesto, CA |
| 33740 | Monroe, LA |
| 33780 | Monroe, MI |
| 33860 | Montgomery, AL |
| 33874 | Montgomery County-Bucks County-Chester County, PA |
| 34060 | Morgantown, WV |
| 34100 | Morristown, TN |
| 34580 | Mount Vernon-Anacortes, WA |
| 34620 | Muncie, IN |

| Attachment C - MSA | |
|--------------------|--|
| Value | Label |
| 34740 | Muskegon, MI |
| 34820 | Myrtle Beach-Conway-North Myrtle Beach, SC-NC |
| 34900 | Napa, CA |
| 34940 | Naples-Immokalee-Marco Island, FL |
| 34980 | Nashville-Davidson--Murfreesboro--Franklin, TN |
| 35004 | Nassau County-Suffolk County, NY |
| 35084 | Newark, NJ-PA |
| 35100 | New Bern, NC |
| 35154 | New Brunswick-Lakewood, NJ |
| 35300 | New Haven-Milford, CT |
| 35380 | New Orleans-Metairie, LA |
| 35614 | New York-Jersey City-White Plains, NY-NJ |
| 35660 | Niles-Benton Harbor, MI |
| 35840 | North Port-Sarasota-Bradenton, FL |
| 35980 | Norwich-New London, CT |
| 36084 | Oakland-Hayward-Berkeley, CA |
| 36100 | Ocala, FL |
| 36140 | Ocean City, NJ |
| 36220 | Odessa, TX |
| 36260 | Ogden-Clearfield, UT |
| 36420 | Oklahoma City, OK |
| 36500 | Olympia-Tumwater, WA |
| 36540 | Omaha-Council Bluffs, NE-IA |
| 36740 | Orlando-Kissimmee-Sanford, FL |
| 36780 | Oshkosh-Neenah, WI |
| 36980 | Owensboro, KY |
| 37100 | Oxnard-Thousand Oaks-Ventura, CA |
| 37340 | Palm Bay-Melbourne-Titusville, FL |
| 37460 | Panama City, FL |
| 37620 | Parkersburg-Vienna, WV |
| 37860 | Pensacola-Ferry Pass-Brent, FL |
| 37900 | Peoria, IL |
| 37964 | Philadelphia, PA |
| 38060 | Phoenix-Mesa-Scottsdale, AZ |
| 38220 | Pine Bluff, AR |
| 38300 | Pittsburgh, PA |
| 38340 | Pittsfield, MA |

| Attachment C - MSA | |
|--------------------|--|
| Value | Label |
| 38540 | Pocatello, ID |
| 38660 | Ponce, PR |
| 38860 | Portland-South Portland, ME |
| 38900 | Portland-Vancouver-Hillsboro, OR-WA |
| 38940 | Port St. Lucie, FL |
| 39100 | Poughkeepsie-Newburgh-Middletown, NY |
| 39140 | Prescott, AZ (no longer in use starting with 2022v1.0) |
| 39150 | Prescott Valley-Prescott, AZ |
| 39300 | Providence-Warwick, RI-MA |
| 39340 | Provo-Orem, UT |
| 39380 | Pueblo, CO |
| 39460 | Punta Gorda, FL |
| 39540 | Racine, WI |
| 39580 | Raleigh, NC |
| 39660 | Rapid City, SD |
| 39740 | Reading, PA |
| 39820 | Redding, CA |
| 39900 | Reno, NV |
| 40060 | Richmond, VA |
| 40140 | Riverside-San Bernardino-Ontario, CA |
| 40220 | Roanoke, VA |
| 40340 | Rochester, MN |
| 40380 | Rochester, NY |
| 40420 | Rockford, IL |
| 40484 | Rockingham County-Strafford County, NH |
| 40580 | Rocky Mount, NC |
| 40660 | Rome, GA |
| 40900 | Sacramento--Roseville--Arden-Arcade, CA |
| 40980 | Saginaw, MI |
| 41060 | St. Cloud, MN |
| 41100 | St. George, UT |
| 41140 | St. Joseph, MO-KS |
| 41180 | St. Louis, MO-IL |
| 41420 | Salem, OR |
| 41500 | Salinas, CA |
| 41540 | Salisbury, MD-DE |
| 41620 | Salt Lake City, UT |

| Attachment C - MSA | |
|--------------------|---|
| Value | Label |
| 41660 | San Angelo, TX |
| 41700 | San Antonio-New Braunfels, TX |
| 41740 | San Diego-Carlsbad, CA |
| 41884 | San Francisco-Redwood City-South San Francisco, CA |
| 41900 | San German, PR |
| 41940 | San Jose-Sunnyvale-Santa Clara, CA |
| 41980 | San Juan-Carolina-Caguas, PR |
| 42020 | San Luis Obispo-Paso Robles-Arroyo Grande, CA |
| 42034 | San Rafael, CA |
| 42100 | Santa Cruz-Watsonville, CA |
| 42140 | Santa Fe, NM |
| 42200 | Santa Maria-Santa Barbara, CA |
| 42220 | Santa Rosa, CA |
| 42340 | Savannah, GA |
| 42540 | Scranton--Wilkes-Barre--Hazleton, PA |
| 42644 | Seattle-Bellevue-Everett, WA |
| 42680 | Sebastian-Vero Beach, FL |
| 42700 | Sebring, FL |
| 43100 | Sheboygan, WI |
| 43300 | Sherman-Denison, TX |
| 43340 | Shreveport-Bossier City, LA |
| 43420 | Sierra Vista-Douglas, AZ |
| 43524 | Silver Spring-Frederick-Rockville, MD (no longer in use starting with 2022v1.0) |
| 43580 | Sioux City, IA-NE-SD |
| 43620 | Sioux Falls, SD |
| 43780 | South Bend-Mishawaka, IN-MI |
| 43900 | Spartanburg, SC |
| 44060 | Spokane-Spokane Valley, WA |
| 44100 | Springfield, IL |
| 44140 | Springfield, MA |
| 44180 | Springfield, MO |
| 44220 | Springfield, OH |
| 44300 | State College, PA |
| 44420 | Staunton-Waynesboro, VA |
| 44700 | Stockton-Lodi, CA |
| 44940 | Sumter, SC |
| 45060 | Syracuse, NY |

| Attachment C - MSA | |
|--------------------|--|
| Value | Label |
| 45104 | Tacoma-Lakewood, WA |
| 45220 | Tallahassee, FL |
| 45300 | Tampa-St. Petersburg-Clearwater, FL |
| 45460 | Terre Haute, IN |
| 45500 | Texarkana, TX-AR |
| 45540 | The Villages, FL |
| 45780 | Toledo, OH |
| 45820 | Topeka, KS |
| 45940 | Trenton, NJ |
| 46060 | Tucson, AZ |
| 46140 | Tulsa, OK |
| 46220 | Tuscaloosa, AL |
| 46300 | Twin Falls, ID |
| 46340 | Tyler, TX |
| 46520 | Urban Honolulu, HI |
| 46540 | Utica-Rome, NY |
| 46660 | Valdosta, GA |
| 46700 | Vallejo-Fairfield, CA |
| 47020 | Victoria, TX |
| 47220 | Vineland-Bridgeton, NJ |
| 47260 | Virginia Beach-Norfolk-Newport News, VA-NC |
| 47300 | Visalia-Porterville, CA |
| 47380 | Waco, TX |
| 47460 | Walla Walla, WA |
| 47580 | Warner Robins, GA |
| 47664 | Warren-Troy-Farmington Hills, MI |
| 47894 | Washington-Arlington-Alexandria, DC-VA-MD-WV |
| 47940 | Waterloo-Cedar Falls, IA |
| 48060 | Watertown-Fort Drum, NY |
| 48140 | Wausau, WI |
| 48260 | Weirton-Steubenville, WV-OH |
| 48300 | Wenatchee, WA |
| 48424 | West Palm Beach-Boca Raton-Delray Beach, FL |
| 48540 | Wheeling, WV-OH |
| 48620 | Wichita, KS |
| 48660 | Wichita Falls, TX |
| 48700 | Williamsport, PA |

| Attachment C - MSA | |
|--------------------|-----------------------------------|
| Value | Label |
| 48864 | Wilmington, DE-MD-NJ |
| 48900 | Wilmington, NC |
| 49020 | Winchester, VA-WV |
| 49180 | Winston-Salem, NC |
| 49340 | Worcester, MA-CT |
| 49420 | Yakima, WA |
| 49500 | Yauco, PR |
| 49620 | York-Hanover, PA |
| 49660 | Youngstown-Warren-Boardman, OH-PA |
| 49700 | Yuba City, CA |
| 49740 | Yuma, AZ |

| Attachment D - PROCGRP | |
|------------------------|---------------------------------------|
| Value | Label |
| 0 | Missing/Unknown |
| 1 | Incision & drainage of cyst |
| 2 | Acne surgery |
| 3 | Nail debridement/avulsion |
| 4 | Skin lesion injection |
| 5 | Destruction, facial lesion |
| 6 | Destruction, non-facial lesion |
| 7 | Destruction of warts |
| 8 | Excision of breast tissue |
| 9 | Other minor skin & breast surgery |
| 10 | Arthrocentesis, sm/med joint |
| 11 | Arthrocentesis, large joint |
| 12 | Other major skin surgery |
| 13 | Other major breast surgery |
| 14 | Other major musculoskeletal surgery |
| 15 | Other minor musculoskeletal surgery |
| 16 | Bronchoscopy |
| 17 | Laryngoscopy |
| 19 | Other minor respiratory procedures |
| 20 | Other major respiratory procedures |
| 31 | Venipuncture (draw blood) |
| 38 | Other minor cardiovascular procedures |
| 39 | Other major cardiovascular procedures |
| 44 | Minor hemic & lymphatic procedures |
| 45 | Major hemic & lymphatic procedures |
| 46 | Upper GI endoscopy |
| 47 | Repair of inguinal hernia |
| 48 | Colonoscopy |
| 49 | Other major digestive procedures |
| 50 | Other minor digestive procedures |
| 51 | Cystourethroscopy |
| 52 | Transurethral surgery |
| 54 | Other minor urinary procedures |
| 55 | Other major urinary procedures |
| 58 | Minor male genital procedures |
| 59 | Major male genital procedures |
| 61 | Colposcopy |

| Attachment D - PROCGRP | |
|------------------------|---|
| Value | Label |
| 62 | Dilation & curettage |
| 63 | Laparoscopy, hysteroscopy |
| 64 | Minor female genital procedures |
| 65 | Major female genital procedures |
| 66 | Decompression, carpal tunnel |
| 68 | Minor endocrine system procedures |
| 69 | Major endocrine system procedures |
| 74 | Minor nervous system procedures |
| 75 | Major nervous system procedures |
| 76 | Cataract removal |
| 84 | Other minor eye/ocular procedures |
| 85 | Other major eye/ocular procedures |
| 94 | Other minor ear/auditory procedures |
| 95 | Other major ear/auditory procedures |
| 98 | Other minor surgery procedures |
| 99 | Other major surgery procedures |
| 101 | Office visits, new patient |
| 104 | Office visits, established patient |
| 109 | Office visits, other |
| 110 | Office visits, emergency |
| 111 | Emergency department visits |
| 113 | Telemedicine Visits |
| 114 | Telemedicine patient consultation |
| 115 | Preventive care visits |
| 116 | Facility visits |
| 120 | Outpatient consults |
| 121 | Inpatient consults |
| 122 | Other consults, location unspecified |
| 123 | Telemedicine Inter-Professional consult |
| 124 | Psychiatric diagnostic services |
| 127 | Specialty drugs other than chemotherapy |
| 128 | Telemedicine Other fees |
| 129 | Other medical services |
| 130 | Injections: immunizations |
| 131 | Injections: therapeutic/IV |
| 132 | Other injections/noninjectables |
| 133 | Other preventive medical services |

| Attachment D - PROCGRP | |
|------------------------|--|
| Value | Label |
| 135 | Psychotherapy, individual |
| 136 | Psychotherapy, family |
| 137 | Psychotherapy, group |
| 138 | Psych advice, non-patient |
| 139 | Therapeutic psychiatric services |
| 140 | Dialysis |
| 143 | Gastroenterology services (non-surgical) |
| 144 | General eye exams |
| 145 | General ophthalmology services |
| 147 | Ophthalmic diagnostic services |
| 148 | ENT diagnostic services |
| 149 | Speech/hearing therapy |
| 150 | Other ENT services (non-surgical) |
| 155 | EKG |
| 156 | EKG stress test |
| 157 | EKG monitoring |
| 158 | PTCA- percutaneous angioplasty |
| 160 | Echocardiogram |
| 161 | Cardiac catheterization |
| 162 | Dx radiology, other vascular |
| 163 | Other cardiovascular procedures |
| 165 | Non-invasive peripheral vascular studies |
| 166 | Spirometry |
| 167 | Bronchospasm evaluation |
| 168 | Pulmonary function tests |
| 169 | Other non-surgical pulmonary services |
| 170 | Respiratory Therapy |
| 171 | Allergy testing |
| 172 | Allergy therapy |
| 175 | Nerve conduction tests/EMG |
| 176 | Unlisted neurol Dx procedures |
| 177 | Other neurology dx services |
| 180 | Chemotherapy |
| 181 | Physical medicine: hot/cold packs |
| 182 | Physical medicine: elec stimulation |
| 183 | Physical medicine: other modes |
| 184 | Physical medicine: ultrasound |

| Attachment D - PROCGRP | |
|------------------------|-------------------------------------|
| Value | Label |
| 185 | Physical medicine: manipulation |
| 186 | Physical medicine: other procedures |
| 187 | Physical medicine: testing |
| 189 | Physical medicine: unlisted/other |
| 190 | Case management services |
| 191 | Spinal manipulation, chiro |
| 195 | Chiropractic services |
| 197 | Specimen handling |
| 198 | Medical supplies and devices |
| 199 | Other medicine procedures |
| 200 | Durable Medical Equipment |
| 201 | X-ray, head & neck |
| 202 | X-ray, chest |
| 204 | X-ray, spine/pelvis |
| 205 | X-ray, GI tract |
| 206 | X-ray, abdomen |
| 207 | X-ray, OB/Gyn |
| 208 | X-ray, extremities |
| 210 | CT scan, head & neck |
| 211 | CT scan, chest |
| 212 | CT scan, spine |
| 213 | CT scan, abdomen/pelvis |
| 214 | CT scan, extremities |
| 215 | PET scan |
| 216 | Magnetic resonance (NMR/MRI) |
| 220 | Myelograms/discograms |
| 221 | Cholecystograms/cholangiograms |
| 222 | Cholecysto/cholangiogram, inv |
| 223 | Mammograms |
| 225 | Aortograms |
| 226 | Angiograms |
| 227 | Lymphangiograms |
| 228 | Venograms |
| 229 | Dx radiology, misc/other |
| 241 | Dx ultrasound, abdominal |
| 242 | Dx ultrasound, pregnancy |
| 243 | Echocardiogram |

| Attachment D - PROCGRP | |
|------------------------|-----------------------------------|
| Value | Label |
| 249 | Dx ultrasound, other |
| 269 | Therapeutic radiology |
| 279 | Nuclear medicine, diagnostic |
| 289 | Nuclear medicine, therapeutic |
| 299 | Other radiology procedure |
| 301 | Blood chemistry tests, automated |
| 302 | Blood chemistry, Rx monitor |
| 303 | Lab tests, organ/disease panel |
| 304 | Clinical path, consultation |
| 306 | Routine urinalysis |
| 307 | Other urinalysis |
| 311 | Thyroid function tests (RIA) |
| 312 | Thyroid function tests (non-RIA) |
| 313 | Other radioimmunoassays (RIA) |
| 319 | Other chemistry tests |
| 320 | Other toxicology tests |
| 331 | Blood count, automated |
| 332 | Blood count, manual |
| 334 | Blood test: sedimentation rate |
| 335 | Blood count: platelet |
| 336 | Blood test: Hgb/Hct |
| 338 | Blood test: prothrombin time |
| 339 | Other hematology tests |
| 349 | Immunology tests |
| 361 | Definitive bacterial culture |
| 362 | Antibiotic sensitivity studies |
| 363 | Bacterial culture, urine |
| 364 | Bacterial culture, screening |
| 369 | Other microbiology tests |
| 371 | Pap smear |
| 372 | Surgical pathology |
| 378 | Molecular pathology |
| 379 | Other anatomic pathology services |
| 389 | Miscellaneous pathology tests |
| 399 | Other lab & path procedures |
| 440 | Cesarean section deliveries |
| 445 | Vaginal deliveries |

| Attachment D - PROCGRP | |
|------------------------|--------------------------------------|
| Value | Label |
| 449 | Major maternity procs & related care |
| 450 | Other maternity procs & related care |
| 470 | Anesthesia services |
| 478 | Home health PT/OT/ST |
| 480 | Other home health services |
| 485 | Transportation services |
| 490 | Dental: diagnostic & preventive |
| 491 | Dental: basic restorative |
| 492 | Dental: major restorative |
| 493 | Dental: orthodontics |
| 494 | Dental: other |
| 498 | Performance tracking codes |
| 499 | Unmapped codes |

| Attachment E - STDPLAC | |
|------------------------|--|
| Value | Label |
| 1 | Pharmacy |
| 2 | Telehealth |
| 3 | School |
| 4 | Homeless Shelter |
| 5 | Indian Hlth Svc Free-stand Fac |
| 6 | Indian Hlth Svc Prov-based Fac |
| 7 | Tribal 638 Free-standing Fac |
| 8 | Tribal 638 Provider-based Fac |
| 9 | Prison-Correctional Facility |
| 10 | Telehealth Provided in Pat Hm |
| 11 | Office |
| 12 | Patient Home |
| 13 | Assisted Living Facility |
| 14 | Group Home |
| 15 | Mobile Unit |
| 16 | Temporary Lodging |
| 17 | Walk-in Retail Health Clinic |
| 18 | Place of Employment-Worksite |
| 19 | Outpatient Hospital-Off Campus |
| 20 | Urgent Care Facility |
| 21 | Inpatient Hospital |
| 22 | Outpatient Hospital-On Campus |
| 23 | Emergency Room - Hospital |
| 24 | Ambulatory Surgical Center |
| 25 | Birth Center |
| 26 | Military Treatment Facility |
| 27 | Outreach Site/Street (Effective October 1, 2023); Inpatient Long-Term Care (NEC) (Claims incurred 2008 and prior only) |
| 28 | Other Inpatient Care (NEC) |
| 31 | Skilled Nursing Facility |
| 32 | Nursing Facility |
| 33 | Custodial Care Facility |
| 34 | Hospice |
| 35 | Adult Living Care Facility |
| 41 | Ambulance (land) |
| 42 | Ambulance (air or water) |
| 49 | Independent Clinic |
| 50 | Federally Qualified Health Ctr |

| Attachment E - STDPLAC | |
|------------------------|--------------------------------|
| Value | Label |
| 51 | Inpatient Psychiatric Facility |
| 52 | Psych Facility Partial Hosp |
| 53 | Community Mental Health Center |
| 54 | Intermed Care/Intellect Disab |
| 55 | Residential Subst Abuse Facil |
| 56 | Psych Residential Treatmnt Ctr |
| 57 | Non-resident Subst Abuse Facil |
| 60 | Mass Immunization Center |
| 61 | Comprehensive Inpt Rehab Fac |
| 62 | Comprehensive Outpt Rehab Fac |
| 65 | End-Stage Renal Disease Facil |
| 71 | State/Local Public Health Clin |
| 72 | Rural Health Clinic |
| 81 | Independent Laboratory |
| 95 | Outpatient (NEC) |
| 98 | Pharmacy |
| 99 | Other/Unknown |

| Attachment F - STDPROV | |
|------------------------|--------------------------------|
| Value | Label |
| 1 | Acute Care Hospital |
| 5 | Ambulatory Surgery Centers |
| 6 | Urgent Care Facility |
| 10 | Birth Center |
| 15 | Treatment Center |
| 20 | Mental Health/Chemical Dep NEC |
| 21 | Mental Health Facilities |
| 22 | Chemical Depend Treatment Ctr |
| 23 | Mental Hlth/Chem Dep Day Care |
| 25 | Rehabilitation Facilities |
| 30 | Longterm Care (NEC) |
| 31 | Extended Care Facility |
| 32 | Geriatric Hospital |
| 33 | Convalescent Care Facility |
| 34 | Intermediate Care Facility |
| 35 | Residential Treatment Center |
| 36 | Continuing Care Retirement Com |
| 37 | Day/Night Care Center |
| 38 | Hospice Facility |
| 40 | Other Facility (NEC) |
| 41 | Infirmity |
| 42 | Special Care Facility (NEC) |
| 100 | Dentist - MD & DDS (NEC) |
| 105 | Dental Specialist |
| 120 | Chiropractor/DCM |
| 130 | Podiatry |
| 140 | Pain Mgmt/Pain Medicine |
| 145 | Pediatric Anesthesiology |
| 150 | Anesthesiology |
| 160 | Nuclear Medicine |
| 170 | Pathology |
| 175 | Pediatric Pathology |
| 180 | Radiology |
| 185 | Pediatric Radiology |
| 200 | Medical Doctor - MD (NEC) |
| 202 | Osteopathic Medicine |
| 204 | Internal Medicine (NEC) |

| Attachment F - STDPROV | |
|------------------------|--------------------------------|
| Value | Label |
| 206 | MultiSpecialty Physician Group |
| 208 | Proctology |
| 210 | Urology |
| 215 | Dermatology |
| 220 | Emergency Medicine |
| 225 | Hospitalist |
| 227 | Palliative Medicine |
| 230 | Allergy & Immunology |
| 240 | Family Practice |
| 245 | Geriatric Medicine |
| 250 | Cardiovascular Dis/Cardiology |
| 260 | Neurology |
| 265 | Critical Care Medicine |
| 270 | Endocrinology & Metabolism |
| 275 | Gastroenterology |
| 280 | Hematology |
| 285 | Infectious Disease |
| 290 | Nephrology |
| 295 | Pulmonary Disease |
| 300 | Rheumatology |
| 320 | Obstetrics & Gynecology |
| 325 | Genetics |
| 330 | Ophthalmology |
| 340 | Otolaryngology |
| 350 | Physical Medicine & Rehab |
| 355 | Plastic/Maxillofacial Surgery |
| 360 | Preventative Medicine |
| 365 | Psychiatry |
| 380 | Oncology |
| 400 | Pediatrician (NEC) |
| 410 | Pediatric Specialist (NEC) |
| 413 | Pediatric Nephrology |
| 415 | Pediatric Ophthalmology |
| 418 | Pediatric Orthopaedics |
| 420 | Pediatric Otolaryngology |
| 423 | Pediatric Critical Care Med |
| 425 | Pediatric Pulmonology |

| Attachment F - STDPROV | |
|------------------------|--------------------------------|
| Value | Label |
| 428 | Pediatric Emergency Medicine |
| 430 | Pediatric Allergy & Immunology |
| 433 | Pediatric Endocrinology |
| 435 | Neonatal-Perinatal Medicine |
| 438 | Pediatric Gastroenterology |
| 440 | Pediatric Cardiology |
| 443 | Pediatric Hematology-Oncology |
| 448 | Pediatric Infectious Diseases |
| 450 | Pediatric Rheumatology |
| 453 | Sports Medicine (Pediatrics) |
| 455 | Pediatric Urology |
| 458 | Child Psychiatry |
| 460 | Pediatric Medical Toxicology |
| 500 | Surgeon (NEC) |
| 505 | Surgical Specialist (NEC) |
| 510 | Colon & Rectal Surgery |
| 520 | Neurological Surgery |
| 530 | Orthopaedic Surgery |
| 535 | Abdominal Surgery |
| 540 | Cardiovascular Surgery |
| 545 | Dermatologic Surgery |
| 550 | General Vascular Surgery |
| 555 | Head and Neck Surgery |
| 560 | Pediatric Surgery |
| 565 | Surgical Critical Care |
| 570 | Transplant Surgery |
| 575 | Traumatic Surgery |
| 580 | Cardiothoracic Surgery |
| 585 | Thoracic Surgery |
| 805 | Dental Technician |
| 810 | Dietitian |
| 815 | Medical Technician |
| 820 | Midwife |
| 822 | Nursing Services |
| 824 | Psychiatric Nurse |
| 825 | Nurse Practitioner |
| 827 | Nurse Anesthetist |

| Attachment F - STDPROV | |
|------------------------|----------------------------|
| Value | Label |
| 830 | Optometrist |
| 835 | Optician |
| 840 | Pharmacist |
| 845 | Physician Assistant |
| 850 | Therapy (Physical) |
| 853 | Therapists (Supportive) |
| 855 | Therapists (Alternative) |
| 857 | Renal Dialysis Therapy |
| 860 | Psychologist |
| 865 | Acupuncturist |
| 870 | Spiritual Healers |
| 900 | Health Educator/Agency |
| 905 | Transportation |
| 910 | Health Resort |
| 915 | Hearing Labs |
| 920 | Home Health Organiz/Agency |
| 925 | Imaging Center |
| 930 | Laboratory |
| 935 | Pharmacy |
| 940 | Supply Center |
| 945 | Vision Center |
| 950 | Public Health Agency |
| 955 | Unknown Clinic |
| 960 | Case Manager |

| Attachment G - SVCSCAT | |
|------------------------|--|
| Value | Label |
| 10110 | Facility IP Non Acute Room and Board |
| 10115 | Facility IP Non Acute Procedures |
| 10120 | Facility IP Non Acute ER |
| 10130 | Facility IP Non Acute Diagnostic Services |
| 10131 | Facility IP Non Acute Dialysis |
| 10132 | Facility IP Non Acute DME |
| 10134 | Facility IP Non Acute Pharmacy |
| 10135 | Facility IP Non Acute PT, OT, Speech Therapy |
| 10136 | Facility IP Non Acute Specialty Drugs |
| 10137 | Facility IP Non Acute Supplies and Devices |
| 10141 | Facility IP Non Acute Respiratory Therapy |
| 10142 | Facility IP Non Acute Hospice Care |
| 10151 | Facility IP Non Acute Chemistry Tests |
| 10152 | Facility IP Non Acute Hematology |
| 10153 | Facility IP Non Acute Immunology |
| 10154 | Facility IP Non Acute Microbiology |
| 10155 | Facility IP Non Acute Pathology |
| 10156 | Facility IP Non Acute Urinalysis Tests |
| 10159 | Facility IP Non Acute Laboratory Other |
| 10161 | Facility IP Non Acute CT Scans |
| 10162 | Facility IP Non Acute Mammograms |
| 10163 | Facility IP Non Acute MRIs |
| 10164 | Facility IP Non Acute Nuclear Medicine |
| 10165 | Facility IP Non Acute PET Scans |
| 10166 | Facility IP Non Acute Therapeutic Radiology |
| 10167 | Facility IP Non Acute Ultrasounds |
| 10168 | Facility IP Non Acute X-Rays |
| 10169 | Facility IP Non Acute Radiology Other |
| 10199 | Facility IP Non Acute Other |
| 10210 | Facility IP LTC Room and Board |
| 10215 | Facility IP LTC Procedures |
| 10220 | Facility IP LTC ER |
| 10230 | Facility IP LTC Diagnostic Services |
| 10231 | Facility IP LTC Dialysis |
| 10232 | Facility IP LTC DME |
| 10234 | Facility IP LTC Pharmacy |
| 10235 | Facility IP LTC PT, OT, Speech Therapy |

| Attachment G - SVCSCAT | |
|------------------------|--|
| Value | Label |
| 10236 | Facility IP LTC Specialty Drugs |
| 10237 | Facility IP LTC Supplies and Devices |
| 10241 | Facility IP LTC Respiratory Therapy |
| 10242 | Facility IP LTC Hospice Care |
| 10251 | Facility IP LTC Chemistry Tests |
| 10252 | Facility IP LTC Hematology |
| 10253 | Facility IP LTC Immunology |
| 10254 | Facility IP LTC Microbiology |
| 10255 | Facility IP LTC Pathology |
| 10256 | Facility IP LTC Urinalysis Tests |
| 10259 | Facility IP LTC Laboratory Other |
| 10261 | Facility IP LTC CT Scans |
| 10262 | Facility IP LTC Mammograms |
| 10263 | Facility IP LTC MRIs |
| 10264 | Facility IP LTC Nuclear Medicine |
| 10265 | Facility IP LTC PET Scans |
| 10266 | Facility IP LTC Therapeutic Radiology |
| 10267 | Facility IP LTC Ultrasounds |
| 10268 | Facility IP LTC X-Rays |
| 10269 | Facility IP LTC Radiology Other |
| 10299 | Facility IP LTC Other |
| 10310 | Facility IP Maternity Room and Board |
| 10315 | Facility IP Maternity Procedures |
| 10320 | Facility IP Maternity ER |
| 10330 | Facility IP Maternity Diagnostic Services |
| 10331 | Facility IP Maternity Dialysis |
| 10332 | Facility IP Maternity DME |
| 10334 | Facility IP Maternity Pharmacy |
| 10335 | Facility IP Maternity PT, OT, Speech Therapy |
| 10336 | Facility IP Maternity Specialty Drugs |
| 10337 | Facility IP Maternity Supplies and Devices |
| 10341 | Facility IP Maternity Respiratory Therapy |
| 10342 | Facility IP Maternity Hospice Care |
| 10351 | Facility IP Maternity Chemistry Tests |
| 10352 | Facility IP Maternity Hematology |
| 10353 | Facility IP Maternity Immunology |
| 10354 | Facility IP Maternity Microbiology |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 10355 | Facility IP Maternity Pathology |
| 10356 | Facility IP Maternity Urinalysis Tests |
| 10359 | Facility IP Maternity Laboratory Other |
| 10361 | Facility IP Maternity CT Scans |
| 10362 | Facility IP Maternity Mammograms |
| 10363 | Facility IP Maternity MRIs |
| 10364 | Facility IP Maternity Nuclear Medicine |
| 10365 | Facility IP Maternity PET Scans |
| 10366 | Facility IP Maternity Therapeutic Radiology |
| 10367 | Facility IP Maternity Ultrasounds |
| 10368 | Facility IP Maternity X-Rays |
| 10369 | Facility IP Maternity Radiology Other |
| 10399 | Facility IP Maternity Other |
| 10410 | Facility IP Surgical Room and Board |
| 10415 | Facility IP Surgical Procedures |
| 10420 | Facility IP Surgical ER |
| 10430 | Facility IP Surgical Diagnostic Services |
| 10431 | Facility IP Surgical Dialysis |
| 10432 | Facility IP Surgical DME |
| 10434 | Facility IP Surgical Pharmacy |
| 10435 | Facility IP Surgical PT, OT, Speech Therapy |
| 10436 | Facility IP Surgical Specialty Drugs |
| 10437 | Facility IP Surgical Supplies and Devices |
| 10441 | Facility IP Surgical Respiratory Therapy |
| 10442 | Facility IP Surgical Hospice Care |
| 10451 | Facility IP Surgical Chemistry Tests |
| 10452 | Facility IP Surgical Hematology |
| 10453 | Facility IP Surgical Immunology |
| 10454 | Facility IP Surgical Microbiology |
| 10455 | Facility IP Surgical Pathology |
| 10456 | Facility IP Surgical Urinalysis Tests |
| 10459 | Facility IP Surgical Laboratory Other |
| 10461 | Facility IP Surgical CT Scans |
| 10462 | Facility IP Surgical Mammograms |
| 10463 | Facility IP Surgical MRIs |
| 10464 | Facility IP Surgical Nuclear Medicine |
| 10465 | Facility IP Surgical PET Scans |

| Attachment G - SVCSCAT | |
|------------------------|--|
| Value | Label |
| 10466 | Facility IP Surgical Therapeutic Radiology |
| 10467 | Facility IP Surgical Ultrasounds |
| 10468 | Facility IP Surgical X-Rays |
| 10469 | Facility IP Surgical Radiology Other |
| 10499 | Facility IP Surgical Other |
| 10510 | Facility IP Medical Room and Board |
| 10515 | Facility IP Medical Procedures |
| 10520 | Facility IP Medical ER |
| 10530 | Facility IP Medical Diagnostic Services |
| 10531 | Facility IP Medical Dialysis |
| 10532 | Facility IP Medical DME |
| 10534 | Facility IP Medical Pharmacy |
| 10535 | Facility IP Medical PT, OT, Speech Therapy |
| 10536 | Facility IP Medical Specialty Drugs |
| 10537 | Facility IP Medical Supplies and Devices |
| 10541 | Facility IP Medical Respiratory Therapy |
| 10542 | Facility IP Medical Hospice Care |
| 10551 | Facility IP Medical Chemistry Tests |
| 10552 | Facility IP Medical Hematology |
| 10553 | Facility IP Medical Immunology |
| 10554 | Facility IP Medical Microbiology |
| 10555 | Facility IP Medical Pathology |
| 10556 | Facility IP Medical Urinalysis Tests |
| 10559 | Facility IP Medical Laboratory Other |
| 10561 | Facility IP Medical CT Scans |
| 10562 | Facility IP Medical Mammograms |
| 10563 | Facility IP Medical MRIs |
| 10564 | Facility IP Medical Nuclear Medicine |
| 10565 | Facility IP Medical PET Scans |
| 10566 | Facility IP Medical Therapeutic Radiology |
| 10567 | Facility IP Medical Ultrasounds |
| 10568 | Facility IP Medical X-Rays |
| 10569 | Facility IP Medical Radiology Other |
| 10588 | Facility IP Non-Claim Payments |
| 10599 | Facility IP Medical Other |
| 12210 | Facility OP Room and Board |
| 12215 | Facility OP Procedures |

| Attachment G - SVCSCAT | |
|------------------------|--|
| Value | Label |
| 12220 | Facility OP ER |
| 12245 | Facility OP Telemed |
| 12328 | Facility OP Clinic Services |
| 12330 | Facility OP Diagnostic Services |
| 12331 | Facility OP Dialysis |
| 12332 | Facility OP DME |
| 12333 | Facility OP Home Health |
| 12334 | Facility OP Pharmacy |
| 12335 | Facility OP PT, OT, Speech Therapy |
| 12336 | Facility OP Specialty Drugs |
| 12337 | Facility OP Supplies and Devices |
| 12338 | Facility OP Transportation |
| 12341 | Facility OP Respiratory Therapy |
| 12342 | Facility OP Hospice Care |
| 12388 | Facility OP Non-Claim Payments |
| 12399 | Facility OP Other |
| 20115 | Physician Specialty IP Procedures |
| 20120 | Physician Specialty IP ER |
| 20126 | Physician Specialty IP Facility Visits |
| 20151 | Physician Specialty IP Chemistry Tests |
| 20152 | Physician Specialty IP Hematology |
| 20153 | Physician Specialty IP Immunology |
| 20154 | Physician Specialty IP Microbiology |
| 20155 | Physician Specialty IP Pathology |
| 20156 | Physician Specialty IP Urinalysis Tests |
| 20159 | Physician Specialty IP Laboratory Other |
| 20161 | Physician Specialty IP CT Scans |
| 20162 | Physician Specialty IP Mammograms |
| 20163 | Physician Specialty IP MRIs |
| 20164 | Physician Specialty IP Nuclear Medicine |
| 20165 | Physician Specialty IP PET Scans |
| 20166 | Physician Specialty IP Therapeutic Radiology |
| 20167 | Physician Specialty IP Ultrasounds |
| 20168 | Physician Specialty IP X-Rays |
| 20169 | Physician Specialty IP Radiology Other |
| 20188 | Physician Specialty IP Non-Claim Payments |
| 20199 | Physician Specialty IP Other |

| Attachment G - SVCSCAT | |
|------------------------|--|
| Value | Label |
| 20215 | Physician Non-Specialty IP Procedures |
| 20220 | Physician Non-Specialty IP ER |
| 20226 | Physician Non-Specialty IP Facility Visits |
| 20251 | Physician Non-Specialty IP Chemistry Tests |
| 20252 | Physician Non-Specialty IP Hematology |
| 20253 | Physician Non-Specialty IP Immunology |
| 20254 | Physician Non-Specialty IP Microbiology |
| 20255 | Physician Non-Specialty IP Pathology |
| 20256 | Physician Non-Specialty IP Urinalysis Tests |
| 20259 | Physician Non-Specialty IP Laboratory Other |
| 20261 | Physician Non-Specialty IP CT Scans |
| 20262 | Physician Non-Specialty IP Mammograms |
| 20263 | Physician Non-Specialty IP MRIs |
| 20264 | Physician Non-Specialty IP Nuclear Medicine |
| 20265 | Physician Non-Specialty IP PET Scans |
| 20266 | Physician Non-Specialty IP Therapeutic Radiology |
| 20267 | Physician Non-Specialty IP Ultrasounds |
| 20268 | Physician Non-Specialty IP X-Rays |
| 20269 | Physician Non-Specialty IP Radiology Other |
| 20288 | Physician Non-Specialty IP Non-Claim Payments |
| 20299 | Physician Non-Specialty IP Other |
| 21115 | Physician Specialty OP Procedures |
| 21120 | Physician Specialty OP ER |
| 21122 | Physician Specialty OP Telemed Preventive Visits |
| 21124 | Physician Specialty OP Preventive Visits |
| 21125 | Physician Specialty OP Office Visits |
| 21126 | Physician Specialty OP Facility Visits |
| 21145 | Physician Specialty OP Telemed |
| 21188 | Physician Specialty OP Non-Claim Payments |
| 21199 | Physician Specialty OP Other |
| 21215 | Physician Non-Specialty OP Procedures |
| 21220 | Physician Non-Specialty OP ER |
| 21222 | Physician Non-Specialty OP Telemed Preventive Visits |
| 21224 | Physician Non-Specialty OP Preventive Visits |
| 21225 | Physician Non-Specialty OP Office Visits |
| 21226 | Physician Non-Specialty OP Facility Visits |
| 21245 | Physician Non-Specialty OP Telemed |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 21288 | Physician Non-Specialty OP Non-Claim Payments |
| 21299 | Physician Non-Specialty OP Other |
| 22115 | Professional IP Procedures |
| 22120 | Professional IP ER |
| 22126 | Professional IP Facility Visits |
| 22130 | Professional IP Diagnostic Services |
| 22131 | Professional IP Dialysis |
| 22132 | Professional IP DME |
| 22135 | Professional IP PT, OT, Speech Therapy |
| 22136 | Professional IP Specialty Drugs |
| 22137 | Professional IP Supplies and Devices |
| 22140 | Professional IP Injections |
| 22141 | Professional IP Respiratory Therapy |
| 22151 | Professional IP Chemistry Tests |
| 22152 | Professional IP Hematology |
| 22153 | Professional IP Immunology |
| 22154 | Professional IP Microbiology |
| 22155 | Professional IP Pathology |
| 22156 | Professional IP Urinalysis Tests |
| 22159 | Professional IP Laboratory Other |
| 22161 | Professional IP CT Scans |
| 22162 | Professional IP Mammograms |
| 22163 | Professional IP MRIs |
| 22164 | Professional IP Nuclear Medicine |
| 22165 | Professional IP PET Scans |
| 22166 | Professional IP Therapeutic Radiology |
| 22167 | Professional IP Ultrasounds |
| 22168 | Professional IP X-Rays |
| 22169 | Professional IP Radiology Other |
| 22199 | Professional IP Other |
| 22315 | Professional OP Procedures |
| 22320 | Professional OP ER |
| 22322 | Professional OP Telemed Preventive Visits |
| 22324 | Professional OP Preventive Visits |
| 22325 | Professional OP Office Visits |
| 22326 | Professional OP Facility Visits |
| 22327 | Professional OP Chiropractic Services |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 22330 | Professional OP Diagnostic Services |
| 22331 | Professional OP Dialysis |
| 22332 | Professional OP DME |
| 22333 | Professional OP Home Health |
| 22335 | Professional OP PT, OT, Speech Therapy |
| 22336 | Professional OP Specialty Drugs |
| 22337 | Professional OP Supplies and Devices |
| 22338 | Professional OP Transportation |
| 22340 | Professional OP Injections |
| 22341 | Professional OP Respiratory Therapy |
| 22345 | Professional OP Telemed |
| 22399 | Professional OP Other |
| 22588 | Professional Non-Claim Payments |
| 30110 | Mental Health Facility IP Room and Board |
| 30115 | Mental Health Facility IP Procedures |
| 30118 | Mental Health Facility IP Behavioral Health Therapy |
| 30120 | Mental Health Facility IP ER |
| 30130 | Mental Health Facility IP Diagnostic Services |
| 30131 | Mental Health Facility IP Dialysis |
| 30132 | Mental Health Facility IP DME |
| 30134 | Mental Health Facility IP Pharmacy |
| 30135 | Mental Health Facility IP PT, OT, Speech Therapy |
| 30136 | Mental Health Facility IP Specialty Drugs |
| 30137 | Mental Health Facility IP Supplies and Devices |
| 30141 | Mental Health Facility IP Respiratory Therapy |
| 30142 | Mental Health Facility IP Hospice Care |
| 30151 | Mental Health Facility IP Chemistry Tests |
| 30152 | Mental Health Facility IP Hematology |
| 30153 | Mental Health Facility IP Immunology |
| 30154 | Mental Health Facility IP Microbiology |
| 30155 | Mental Health Facility IP Pathology |
| 30156 | Mental Health Facility IP Urinalysis Tests |
| 30159 | Mental Health Facility IP Laboratory Other |
| 30161 | Mental Health Facility IP CT Scans |
| 30162 | Mental Health Facility IP Mammograms |
| 30163 | Mental Health Facility IP MRIs |
| 30164 | Mental Health Facility IP Nuclear Medicine |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 30165 | Mental Health Facility IP PET Scans |
| 30166 | Mental Health Facility IP Therapeutic Radiology |
| 30167 | Mental Health Facility IP Ultrasounds |
| 30168 | Mental Health Facility IP X-Rays |
| 30169 | Mental Health Facility IP Radiology Other |
| 30199 | Mental Health Facility IP Other |
| 30215 | Mental Health Physician IP Procedures |
| 30218 | Mental Health Physician IP Behavioral Health Therapy |
| 30220 | Mental Health Physician IP ER |
| 30226 | Mental Health Physician IP Facility Visits |
| 30251 | Mental Health Physician IP Chemistry Tests |
| 30252 | Mental Health Physician IP Hematology |
| 30253 | Mental Health Physician IP Immunology |
| 30254 | Mental Health Physician IP Microbiology |
| 30255 | Mental Health Physician IP Pathology |
| 30256 | Mental Health Physician IP Urinalysis Tests |
| 30259 | Mental Health Physician IP Laboratory Other |
| 30261 | Mental Health Physician IP CT Scans |
| 30262 | Mental Health Physician IP Mammograms |
| 30263 | Mental Health Physician IP MRIs |
| 30264 | Mental Health Physician IP Nuclear Medicine |
| 30265 | Mental Health Physician IP PET Scans |
| 30266 | Mental Health Physician IP Therapeutic Radiology |
| 30267 | Mental Health Physician IP Ultrasounds |
| 30268 | Mental Health Physician IP X-Rays |
| 30269 | Mental Health Physician IP Radiology Other |
| 30299 | Mental Health Physician IP Other |
| 30315 | Mental Health Professional IP Procedures |
| 30318 | Mental Health Professional IP Behavioral Health Therapy |
| 30320 | Mental Health Professional IP ER |
| 30326 | Mental Health Professional IP Facility Visits |
| 30330 | Mental Health Professional IP Diagnostic Services |
| 30331 | Mental Health Professional IP Dialysis |
| 30332 | Mental Health Professional IP DME |
| 30335 | Mental Health Professional IP PT, OT, Speech Therapy |
| 30336 | Mental Health Professional IP Specialty Drugs |
| 30337 | Mental Health Professional IP Supplies and Devices |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 30340 | Mental Health Professional IP Injections |
| 30341 | Mental Health Professional IP Respiratory Therapy |
| 30351 | Mental Health Professional IP Chemistry Tests |
| 30352 | Mental Health Professional IP Hematology |
| 30353 | Mental Health Professional IP Immunology |
| 30354 | Mental Health Professional IP Microbiology |
| 30355 | Mental Health Professional IP Pathology |
| 30356 | Mental Health Professional IP Urinalysis Tests |
| 30359 | Mental Health Professional IP Laboratory Other |
| 30361 | Mental Health Professional IP CT Scans |
| 30362 | Mental Health Professional IP Mammograms |
| 30363 | Mental Health Professional IP MRIs |
| 30364 | Mental Health Professional IP Nuclear Medicine |
| 30365 | Mental Health Professional IP PET Scans |
| 30366 | Mental Health Professional IP Therapeutic Radiology |
| 30367 | Mental Health Professional IP Ultrasounds |
| 30368 | Mental Health Professional IP X-Rays |
| 30369 | Mental Health Professional IP Radiology Other |
| 30399 | Mental Health Professional IP Other |
| 30410 | Mental Health Facility OP Room and Board |
| 30415 | Mental Health Facility OP Procedures |
| 30416 | Mental Health Facility OP Telemed Behavioral Health |
| 30418 | Mental Health Facility OP Behavioral Health Therapy |
| 30420 | Mental Health Facility OP ER |
| 30428 | Mental Health Facility OP Clinic Services |
| 30430 | Mental Health Facility OP Diagnostic Services |
| 30431 | Mental Health Facility OP Dialysis |
| 30432 | Mental Health Facility OP DME |
| 30433 | Mental Health Facility OP Home Health |
| 30434 | Mental Health Facility OP Pharmacy |
| 30435 | Mental Health Facility OP PT, OT, Speech Therapy |
| 30436 | Mental Health Facility OP Specialty Drugs |
| 30437 | Mental Health Facility OP Supplies and Devices |
| 30438 | Mental Health Facility OP Transportation |
| 30441 | Mental Health Facility OP Respiratory Therapy |
| 30442 | Mental Health Facility OP Hospice Care |
| 30445 | Mental Health Facility OP Telemed |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 30449 | Mental Health Facility OP Other |
| 30515 | Mental Health Physician OP Procedures |
| 30516 | Mental Health Physician OP Telemed Behavioral Health |
| 30518 | Mental Health Physician OP Behavioral Health Therapy |
| 30520 | Mental Health Physician OP ER |
| 30522 | Mental Health Physician OP Telemed Preventive Visits |
| 30524 | Mental Health Physician OP Preventive Visits |
| 30525 | Mental Health Physician OP Office Visits |
| 30526 | Mental Health Physician OP Facility Visits |
| 30545 | Mental Health Physician OP Telemed |
| 30549 | Mental Health Physician OP Other |
| 30615 | Mental Health Professional OP Procedures |
| 30616 | Mental Health Professional OP Telemed Behavioral Health |
| 30618 | Mental Health Professional OP Behavioral Health Therapy |
| 30620 | Mental Health Professional OP ER |
| 30622 | Mental Health Professional OP Telemed Preventive Visits |
| 30624 | Mental Health Professional OP Preventive Visits |
| 30625 | Mental Health Professional OP Office Visits |
| 30626 | Mental Health Professional OP Facility Visits |
| 30630 | Mental Health Professional OP Diagnostic Services |
| 30631 | Mental Health Professional OP Dialysis |
| 30632 | Mental Health Professional OP DME |
| 30633 | Mental Health Professional OP Home Health |
| 30635 | Mental Health Professional OP PT, OT, Speech Therapy |
| 30636 | Mental Health Professional OP Specialty Drugs |
| 30637 | Mental Health Professional OP Supplies and Devices |
| 30638 | Mental Health Professional OP Transportation |
| 30640 | Mental Health Professional OP Injections |
| 30641 | Mental Health Professional OP Respiratory Therapy |
| 30645 | Mental Health Professional OP Telemed |
| 30649 | Mental Health Professional OP Other |
| 30751 | Mental Health OP Chemistry Tests |
| 30752 | Mental Health OP Hematology |
| 30753 | Mental Health OP Immunology |
| 30754 | Mental Health OP Microbiology |
| 30755 | Mental Health OP Pathology |
| 30756 | Mental Health OP Urinalysis Tests |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 30759 | Mental Health OP Laboratory Other |
| 30761 | Mental Health OP CT Scans |
| 30762 | Mental Health OP Mammograms |
| 30763 | Mental Health OP MRIs |
| 30764 | Mental Health OP Nuclear Medicine |
| 30765 | Mental Health OP PET Scans |
| 30766 | Mental Health OP Therapeutic Radiology |
| 30767 | Mental Health OP Ultrasounds |
| 30768 | Mental Health OP X-Rays |
| 30769 | Mental Health OP Radiology Other |
| 30888 | MHSA Non-Claim Payments |
| 31110 | Substance Abuse Facility IP Room and Board |
| 31115 | Substance Abuse Facility IP Procedures |
| 31118 | Substance Abuse Facility IP Behavioral Health Therapy |
| 31120 | Substance Abuse Facility IP ER |
| 31130 | Substance Abuse Facility IP Diagnostic Services |
| 31131 | Substance Abuse Facility IP Dialysis |
| 31132 | Substance Abuse Facility IP DME |
| 31134 | Substance Abuse Facility IP Pharmacy |
| 31135 | Substance Abuse Facility IP PT, OT, Speech Therapy |
| 31136 | Substance Abuse Facility IP Specialty Drugs |
| 31137 | Substance Abuse Facility IP Supplies and Devices |
| 31141 | Substance Abuse Facility IP Respiratory Therapy |
| 31142 | Substance Abuse Facility IP Hospice Care |
| 31151 | Substance Abuse Facility IP Chemistry Tests |
| 31152 | Substance Abuse Facility IP Hematology |
| 31153 | Substance Abuse Facility IP Immunology |
| 31154 | Substance Abuse Facility IP Microbiology |
| 31155 | Substance Abuse Facility IP Pathology |
| 31156 | Substance Abuse Facility IP Urinalysis Tests |
| 31159 | Substance Abuse Facility IP Laboratory Other |
| 31161 | Substance Abuse Facility IP CT Scans |
| 31162 | Substance Abuse Facility IP Mammograms |
| 31163 | Substance Abuse Facility IP MRIs |
| 31164 | Substance Abuse Facility IP Nuclear Medicine |
| 31165 | Substance Abuse Facility IP PET Scans |
| 31166 | Substance Abuse Facility IP Therapeutic Radiology |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 31167 | Substance Abuse Facility IP Ultrasounds |
| 31168 | Substance Abuse Facility IP X-Rays |
| 31169 | Substance Abuse Facility IP Radiology Other |
| 31199 | Substance Abuse Facility IP Other |
| 31215 | Substance Abuse Physician IP Procedures |
| 31218 | Substance Abuse Physician IP Behavioral Health Therapy |
| 31220 | Substance Abuse Physician IP ER |
| 31226 | Substance Abuse Physician IP Facility Visits |
| 31251 | Substance Abuse Physician IP Chemistry Tests |
| 31252 | Substance Abuse Physician IP Hematology |
| 31253 | Substance Abuse Physician IP Immunology |
| 31254 | Substance Abuse Physician IP Microbiology |
| 31255 | Substance Abuse Physician IP Pathology |
| 31256 | Substance Abuse Physician IP Urinalysis Tests |
| 31259 | Substance Abuse Physician IP Laboratory Other |
| 31261 | Substance Abuse Physician IP CT Scans |
| 31262 | Substance Abuse Physician IP Mammograms |
| 31263 | Substance Abuse Physician IP MRIs |
| 31264 | Substance Abuse Physician IP Nuclear Medicine |
| 31265 | Substance Abuse Physician IP PET Scans |
| 31266 | Substance Abuse Physician IP Therapeutic Radiology |
| 31267 | Substance Abuse Physician IP Ultrasounds |
| 31268 | Substance Abuse Physician IP X-Rays |
| 31269 | Substance Abuse Physician IP Radiology Other |
| 31299 | Substance Abuse Physician IP Other |
| 31315 | Substance Abuse Professional IP Procedures |
| 31318 | Substance Abuse Professional IP Behavioral Health Therapy |
| 31320 | Substance Abuse Professional IP ER |
| 31326 | Substance Abuse Professional IP Facility Visits |
| 31330 | Substance Abuse Professional IP Diagnostic Services |
| 31331 | Substance Abuse Professional IP Dialysis |
| 31332 | Substance Abuse Professional IP DME |
| 31335 | Substance Abuse Professional IP PT, OT, Speech Therapy |
| 31336 | Substance Abuse Professional IP Specialty Drugs |
| 31337 | Substance Abuse Professional IP Supplies and Devices |
| 31340 | Substance Abuse Professional IP Injections |
| 31341 | Substance Abuse Professional IP Respiratory Therapy |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 31351 | Substance Abuse Professional IP Chemistry Tests |
| 31352 | Substance Abuse Professional IP Hematology |
| 31353 | Substance Abuse Professional IP Immunology |
| 31354 | Substance Abuse Professional IP Microbiology |
| 31355 | Substance Abuse Professional IP Pathology |
| 31356 | Substance Abuse Professional IP Urinalysis Tests |
| 31359 | Substance Abuse Professional IP Laboratory Other |
| 31361 | Substance Abuse Professional IP CT Scans |
| 31362 | Substance Abuse Professional IP Mammograms |
| 31363 | Substance Abuse Professional IP MRIs |
| 31364 | Substance Abuse Professional IP Nuclear Medicine |
| 31365 | Substance Abuse Professional IP PET Scans |
| 31366 | Substance Abuse Professional IP Therapeutic Radiology |
| 31367 | Substance Abuse Professional IP Ultrasounds |
| 31368 | Substance Abuse Professional IP X-Rays |
| 31369 | Substance Abuse Professional IP Radiology Other |
| 31399 | Substance Abuse Professional IP Other |
| 31410 | Substance Abuse Facility OP Room and Board |
| 31415 | Substance Abuse Facility OP Procedures |
| 31416 | Substance Abuse Facility OP Telemed Behavioral Health |
| 31418 | Substance Abuse Facility OP Behavioral Health Therapy |
| 31420 | Substance Abuse Facility OP ER |
| 31428 | Substance Abuse Facility OP Clinic Services |
| 31430 | Substance Abuse Facility OP Diagnostic Services |
| 31431 | Substance Abuse Facility OP Dialysis |
| 31432 | Substance Abuse Facility OP DME |
| 31433 | Substance Abuse Facility OP Home Health |
| 31434 | Substance Abuse Facility OP Pharmacy |
| 31435 | Substance Abuse Facility OP PT, OT, Speech Therapy |
| 31436 | Substance Abuse Facility OP Specialty Drugs |
| 31437 | Substance Abuse Facility OP Supplies and Devices |
| 31438 | Substance Abuse Facility OP Transportation |
| 31441 | Substance Abuse Facility OP Respiratory Therapy |
| 31442 | Substance Abuse Facility OP Hospice Care |
| 31445 | Substance Abuse Facility OP Telemed |
| 31449 | Substance Abuse Facility OP Other |
| 31515 | Substance Abuse Physician OP Procedures |

| Attachment G - SVCSCAT | |
|------------------------|---|
| Value | Label |
| 31516 | Substance Abuse Physician OP Telemed Behavioral Health |
| 31518 | Substance Abuse Physician OP Behavioral Health Therapy |
| 31520 | Substance Abuse Physician OP ER |
| 31522 | Substance Abuse Physician OP Telemed Preventive Visits |
| 31524 | Substance Abuse Physician OP Preventive Visits |
| 31525 | Substance Abuse Physician OP Office Visits |
| 31526 | Substance Abuse Physician OP Facility Visits |
| 31545 | Substance Abuse Physician OP Telemed |
| 31549 | Substance Abuse Physician OP Other |
| 31615 | Substance Abuse Professional OP Procedures |
| 31616 | Substance Abuse Professional OP Telemed Behavioral Health |
| 31618 | Substance Abuse Professional OP Behavioral Health Therapy |
| 31620 | Substance Abuse Professional OP ER |
| 31622 | Substance Abuse Professional OP Telemed Preventive Visits |
| 31624 | Substance Abuse Professional OP Preventive Visits |
| 31625 | Substance Abuse Professional OP Office Visits |
| 31626 | Substance Abuse Professional OP Facility Visits |
| 31630 | Substance Abuse Professional OP Diagnostic Services |
| 31631 | Substance Abuse Professional OP Dialysis |
| 31632 | Substance Abuse Professional OP DME |
| 31633 | Substance Abuse Professional OP Home Health |
| 31635 | Substance Abuse Professional OP PT, OT, Speech Therapy |
| 31636 | Substance Abuse Professional OP Specialty Drugs |
| 31637 | Substance Abuse Professional OP Supplies and Devices |
| 31638 | Substance Abuse Professional OP Transportation |
| 31640 | Substance Abuse Professional OP Injections |
| 31641 | Substance Abuse Professional OP Respiratory Therapy |
| 31645 | Substance Abuse Professional OP Telemed |
| 31649 | Substance Abuse Professional OP Other |
| 31751 | Substance Abuse OP Chemistry Tests |
| 31752 | Substance Abuse OP Hematology |
| 31753 | Substance Abuse OP Immunology |
| 31754 | Substance Abuse OP Microbiology |
| 31755 | Substance Abuse OP Pathology |
| 31756 | Substance Abuse OP Urinalysis Tests |
| 31759 | Substance Abuse OP Laboratory Other |
| 31761 | Substance Abuse OP CT Scans |

| Attachment G - SVCSCAT | |
|------------------------|--|
| Value | Label |
| 31762 | Substance Abuse OP Mammograms |
| 31763 | Substance Abuse OP MRIs |
| 31764 | Substance Abuse OP Nuclear Medicine |
| 31765 | Substance Abuse OP PET Scans |
| 31766 | Substance Abuse OP Therapeutic Radiology |
| 31767 | Substance Abuse OP Ultrasounds |
| 31768 | Substance Abuse OP X-Rays |
| 31769 | Substance Abuse OP Radiology Other |
| 40151 | Laboratory OP Chemistry Tests |
| 40152 | Laboratory OP Hematology |
| 40153 | Laboratory OP Immunology |
| 40154 | Laboratory OP Microbiology |
| 40155 | Laboratory OP Pathology |
| 40156 | Laboratory OP Urinalysis Tests |
| 40159 | Laboratory OP Other |
| 40188 | Laboratory OP Non-Claim Payments |
| 45161 | Radiology OP CT Scans |
| 45162 | Radiology OP Mammograms |
| 45163 | Radiology OP MRIs |
| 45164 | Radiology OP Nuclear Medicine |
| 45165 | Radiology OP PET Scans |
| 45166 | Radiology OP Therapeutic Radiology |
| 45167 | Radiology OP Ultrasounds |
| 45168 | Radiology OP X-Rays |
| 45169 | Radiology OP Other |
| 45188 | Radiology OP Non-Claim Payments |
| 50170 | Specialty Drugs Mail Order |
| 50171 | Specialty Drugs Retail |
| 50172 | Non-Specialty Drugs Mail Order |
| 50175 | Non-Specialty Drugs Retail |
| 50188 | Prescription Drugs Non-Claim Payments |
| 70180 | Administrative Fees |
| 70181 | Capitation Payments |
| 70182 | Premium Payments |
| 70183 | Employee Premium Contributions |
| 70187 | Bulk Adjustments |
| 70199 | Non-Claim Payments Other |

| Attachment G - SVCSCAT | |
|------------------------|----------------------------------|
| Value | Label |
| 80190 | Dental Diagnostic and Preventive |
| 80191 | Dental Basic Restorative |
| 80192 | Dental Major Restorative |
| 80193 | Dental Orthodontics |
| 80194 | Dental Other |
| 80196 | Vision |
| 80198 | Hearing and Other Benefits |

| Attachment H - TOOTHCD | |
|------------------------|---|
| Value | Label |
| 1 | Upper Right Third Molar (Wisdom Tooth) |
| 2 | Upper Right Second Molar |
| 3 | Upper Right First Molar |
| 4 | Upper Right Second Premolar (Second Bicuspid) |
| 5 | Upper Right First Premolar (First Bicuspid) |
| 6 | Upper Right Canine (Cuspid) |
| 7 | Upper Right Lateral Incisor |
| 8 | Upper Right Central Incisor |
| 9 | Upper Left Central Incisor |
| 10 | Upper Left Lateral Incisor |
| 11 | Upper Left Canine (Cuspid) |
| 12 | Upper Left First Premolar (First Bicuspid) |
| 13 | Upper Left Second Premolar (Second Bicuspid) |
| 14 | Upper Left First Molar |
| 15 | Upper Left Second Molar |
| 16 | Upper Left Third Molar (Wisdom Tooth) |
| 17 | Lower Left Third Molar (Wisdom Tooth) |
| 18 | Lower Left Second Molar |
| 19 | Lower Left First Molar |
| 20 | Lower Left Second Premolar (Second Bicuspid) |
| 21 | Lower Left First Premolar (First Bicuspid) |
| 22 | Lower Left Canine (Cuspid) |
| 23 | Lower Left Lateral Incisor |
| 24 | Lower Left Central Incisor |
| 25 | Lower Right Central Incisor |
| 26 | Lower Right Lateral Incisor |
| 27 | Lower Right Canine (Cuspid) |
| 28 | Lower Right First Premolar (First Bicuspid) |
| 29 | Lower Right Second Premolar (Second Bicuspid) |
| 30 | Lower Right First Molar |
| 31 | Lower Right Second Molar |
| 32 | Lower Right Third Molar (Wisdom Tooth) |
| A | Upper Right Second Primary Molar |
| B | Upper Right First Primary Molar |
| C | Upper Right Primary Canine (Cuspid) |
| D | Upper Right Primary Lateral Incisor |
| E | Upper Right Primary Central Incisor |

| Attachment H - TOOTHCD | |
|------------------------|-------------------------------------|
| Value | Label |
| F | Upper Left Primary Central Incisor |
| G | Upper Left Primary Lateral Incisor |
| H | Upper Left Primary Canine (Cuspid) |
| I | Upper Left First Primary Molar |
| J | Upper Left Second Primary Molar |
| K | Lower Left Second Primary Molar |
| L | Lower Left First Primary Molar |
| M | Lower Left Primary Canine (Cuspid) |
| N | Lower Left Primary Lateral Incisor |
| O | Lower Left Primary Central Incisor |
| P | Lower Right Primary Central Incisor |
| Q | Lower Right Primary Lateral Incisor |
| R | Lower Right Primary Canine (Cuspid) |
| S | Lower Right First Primary Molar |
| T | Lower Right Second Primary Molar |

| Appendix: CSV Schema | | | | | |
|----------------------|---------------|----------|---------------------------------|---------------|----------------------|
| Table | Column Number | Name | Long Name | CSV Data Type | Example Values |
| A | 1 | ENROLID | Enrollee ID | NUM(11) | Each character = 0-9 |
| A | 2 | SEQNUM | Sequence Number | NUM(11) | Each character = 0-9 |
| A | 3 | VERSION | Version | CHAR(2) | 01, 10, 20 |
| A | 4 | EFAMID | Enrolled Family ID | NUM(9) | Each character = 0-9 |
| A | 5 | MEMDAYS | Member Days | NUM(3) | Each character = 0-9 |
| A | 6 | YEAR | Date Year Incurred | NUM(4) | 1999, 2015, 2021 |
| A | 7 | AGE | Age of Patient | NUM(3) | 18, 52, 65 |
| A | 8 | DOBYR | Patient Birth Year | NUM(4) | 1965, 1984, 2005 |
| A | 9 | DENTINMS | Dental ENROLID in MarketScan | CHAR(1) | Each character = 0-9 |
| A | 10 | AGEGRP | Age Group | CHAR(1) | 1, 2, 3, 4, 5, 6 |
| A | 11 | EMPREL | Relation to Employee | CHAR(1) | 1, 2, 3, 4 |
| A | 12 | PHYFLAG | Physician Specialty Coding Flag | CHAR(1) | 0, 1 |
| A | 13 | RX | Cohort Drug Indicator | CHAR(1) | 0, 1 |
| A | 14 | SEX | Gender of Patient | CHAR(1) | 1, 2 |
| A | 15 | HLTHPLAN | Health Plan Indicator | CHAR(1) | 0, 1 |
| A | 16 | ENRMON | Enrollment Months | NUM(2) | 1, 6, 12 |
| A | 17 | DATTYP1 | Data Type Month 1 | NUM(1) | 1, 2, 3, 4 |
| A | 18 | DATTYP2 | Data Type Month 2 | NUM(1) | 1, 2, 3, 4 |
| A | 19 | DATTYP3 | Data Type Month 3 | NUM(1) | 1, 2, 3, 4 |
| A | 20 | DATTYP4 | Data Type Month 4 | NUM(1) | 1, 2, 3, 4 |
| A | 21 | DATTYP5 | Data Type Month 5 | NUM(1) | 1, 2, 3, 4 |
| A | 22 | DATTYP6 | Data Type Month 6 | NUM(1) | 1, 2, 3, 4 |
| A | 23 | DATTYP7 | Data Type Month 7 | NUM(1) | 1, 2, 3, 4 |
| A | 24 | DATTYP8 | Data Type Month 8 | NUM(1) | 1, 2, 3, 4 |
| A | 25 | DATTYP9 | Data Type Month 9 | NUM(1) | 1, 2, 3, 4 |
| A | 26 | DATTYP10 | Data Type Month 10 | NUM(1) | 1, 2, 3, 4 |
| A | 27 | DATTYP11 | Data Type Month 11 | NUM(1) | 1, 2, 3, 4 |
| A | 28 | DATTYP12 | Data Type Month 12 | NUM(1) | 1, 2, 3, 4 |
| A | 29 | ENRIND1 | Enrollment Indicator Month 1 | NUM(1) | 0, 1 |
| A | 30 | ENRIND2 | Enrollment Indicator Month 2 | NUM(1) | 0, 1 |
| A | 31 | ENRIND3 | Enrollment Indicator Month 3 | NUM(1) | 0, 1 |
| A | 32 | ENRIND4 | Enrollment Indicator Month 4 | NUM(1) | 0, 1 |
| A | 33 | ENRIND5 | Enrollment Indicator Month 5 | NUM(1) | 0, 1 |
| A | 34 | ENRIND6 | Enrollment Indicator Month 6 | NUM(1) | 0, 1 |
| A | 35 | ENRIND7 | Enrollment Indicator Month 7 | NUM(1) | 0, 1 |
| A | 36 | ENRIND8 | Enrollment Indicator Month 8 | NUM(1) | 0, 1 |
| A | 37 | ENRIND9 | Enrollment Indicator Month 9 | NUM(1) | 0, 1 |

Appendix: CSV Schema

| Table | Column Number | Name | Long Name | CSV Data Type | Example Values |
|-------|---------------|-----------------|-------------------------------------|---------------|----------------------|
| A | 38 | ENRIND10 | Enrollment Indicator Month 10 | NUM(1) | 0, 1 |
| A | 39 | ENRIND11 | Enrollment Indicator Month 11 | NUM(1) | 0, 1 |
| A | 40 | ENRIND12 | Enrollment Indicator Month 12 | NUM(1) | 0, 1 |
| A | 41 | MEMDAY1 | Member Days Month 1 | NUM(2) | Each character = 0-9 |
| A | 42 | MEMDAY2 | Member Days Month 2 | NUM(2) | Each character = 0-9 |
| A | 43 | MEMDAY3 | Member Days Month 3 | NUM(2) | Each character = 0-9 |
| A | 44 | MEMDAY4 | Member Days Month 4 | NUM(2) | Each character = 0-9 |
| A | 45 | MEMDAY5 | Member Days Month 5 | NUM(2) | Each character = 0-9 |
| A | 46 | MEMDAY6 | Member Days Month 6 | NUM(2) | Each character = 0-9 |
| A | 47 | MEMDAY7 | Member Days Month 7 | NUM(2) | Each character = 0-9 |
| A | 48 | MEMDAY8 | Member Days Month 8 | NUM(2) | Each character = 0-9 |
| A | 49 | MEMDAY9 | Member Days Month 9 | NUM(2) | Each character = 0-9 |
| A | 50 | MEMDAY10 | Member Days Month 10 | NUM(2) | Each character = 0-9 |
| A | 51 | MEMDAY11 | Member Days Month 11 | NUM(2) | Each character = 0-9 |
| A | 52 | MEMDAY12 | Member Days Month 12 | NUM(2) | Each character = 0-9 |
| A | 53 | PLNTYP1 | Plan Indicator Month 1 | NUM(1) | 1, 5, 9 |
| A | 54 | PLNTYP2 | Plan Indicator Month 2 | NUM(1) | 1, 5, 9 |
| A | 55 | PLNTYP3 | Plan Indicator Month 3 | NUM(1) | 1, 5, 9 |
| A | 56 | PLNTYP4 | Plan Indicator Month 4 | NUM(1) | 1, 5, 9 |
| A | 57 | PLNTYP5 | Plan Indicator Month 5 | NUM(1) | 1, 5, 9 |
| A | 58 | PLNTYP6 | Plan Indicator Month 6 | NUM(1) | 1, 5, 9 |
| A | 59 | PLNTYP7 | Plan Indicator Month 7 | NUM(1) | 1, 5, 9 |
| A | 60 | PLNTYP8 | Plan Indicator Month 8 | NUM(1) | 1, 5, 9 |
| A | 61 | PLNTYP9 | Plan Indicator Month 9 | NUM(1) | 1, 5, 9 |
| A | 62 | PLNTYP10 | Plan Indicator Month 10 | NUM(1) | 1, 5, 9 |
| A | 63 | PLNTYP11 | Plan Indicator Month 11 | NUM(1) | 1, 5, 9 |
| A | 64 | PLNTYP12 | Plan Indicator Month 12 | NUM(1) | 1, 5, 9 |
| A | 65 | DENPTY1 | Dental Plan Type Indicator Month 1 | NUM(3) | 2, 3, 6 |
| A | 66 | DENPTY2 | Dental Plan Type Indicator Month 2 | NUM(3) | 2, 3, 6 |
| A | 67 | DENPTY3 | Dental Plan Type Indicator Month 3 | NUM(3) | 2, 3, 6 |
| A | 68 | DENPTY4 | Dental Plan Type Indicator Month 4 | NUM(3) | 2, 3, 6 |
| A | 69 | DENPTY5 | Dental Plan Type Indicator Month 5 | NUM(3) | 2, 3, 6 |
| A | 70 | DENPTY6 | Dental Plan Type Indicator Month 6 | NUM(3) | 2, 3, 6 |
| A | 71 | DENPTY7 | Dental Plan Type Indicator Month 7 | NUM(3) | 2, 3, 6 |
| A | 72 | DENPTY8 | Dental Plan Type Indicator Month 8 | NUM(3) | 2, 3, 6 |
| A | 73 | DENPTY9 | Dental Plan Type Indicator Month 9 | NUM(3) | 2, 3, 6 |
| A | 74 | DENPTY10 | Dental Plan Type Indicator Month 10 | NUM(3) | 2, 3, 6 |

Appendix: CSV Schema

| Table | Column Number | Name | Long Name | CSV Data Type | Example Values |
|-------|---------------|----------|---------------------------------------|---------------|------------------------------------|
| A | 75 | DENPTY11 | Dental Plan Type Indicator Month 11 | NUM(3) | 2, 3, 6 |
| A | 76 | DENPTY12 | Dental Plan Type Indicator Month 12 | NUM(3) | 2, 3, 6 |
| A | 77 | EECLASS | Employee Classification | CHAR(1) | 1, 2, 3, 4, 5, 6, 7, 8, 9 |
| A | 78 | EESTATU | Employment Status | CHAR(1) | 1, 2, 3, 4, 5, 6, 7, 8, 9 |
| A | 79 | EGEOLOC | Geographic Location Employee | CHAR(2) | 01, 32, 64 |
| A | 80 | INDSTRY | Industry | CHAR(1) | 1, 2, 3, 4, 5, 6, 7, O |
| A | 81 | MHSACOVG | Coverage Indicator MHSA | CHAR(1) | 0, 1 |
| A | 82 | MSA | Metropolitan Statistical Area | NUM(5) | 0, 15190, 29404 |
| A | 83 | REGION | Region | CHAR(1) | 1, 2, 3, 4, 5 |
| A | 84 | MSWGTKEY | MarketScan National Weight Key | CHAR(5) | Each character = 0-9 |
| N | 1 | SEQNUM | Sequence Number | NUM(11) | Each character = 0-9 |
| N | 2 | VERSION | Version | CHAR(2) | 01, 10, 20 |
| N | 3 | DX1 | Diagnosis 1 | CHAR(7) | E119, Z01419, M069 |
| N | 4 | DX2 | Diagnosis 2 | CHAR(7) | E119, Z01419, M069 |
| N | 5 | PROC1 | Procedure Code 1 | CHAR(7) | 80061, 81000, 85014 |
| N | 6 | PROCTYP | Procedure Code Type | CHAR(1) | *, 0, 1, 3, 6, 7, 8 |
| N | 7 | EFAMID | Enrolled Family ID | NUM(9) | Each character = 0-9 |
| N | 8 | ENROLID | Enrollee ID | NUM(11) | Each character = 0-9 |
| N | 9 | SVCDATE | Date Service Incurred | DATE(10) | 04/04/1999, 11/3/2020, 07/11/2021 |
| N | 10 | DOBYR | Patient Birth Year | NUM(4) | 1965, 1984, 2005 |
| N | 11 | YEAR | Date Year Incurred | NUM(4) | 1999, 2015, 2021 |
| N | 12 | AGE | Age of Patient | NUM(3) | 18, 52, 65 |
| N | 13 | CAP_SVC | Capitated Service-Claim Indicator | CHAR(1) | N, Y |
| N | 14 | COB | COB and Other Savings | FLT(12.2) | 0.00, 70.87, 195.10 |
| N | 15 | COINS | Coinsurance | FLT(12.2) | 0.00, 6.24, 204.86 |
| N | 16 | COPAY | Copayment | FLT(12.2) | 0.00, 0.43, 100.00 |
| N | 17 | DEDUCT | Deductible | FLT(12.2) | 0.00, 14.77, 300.00 |
| N | 18 | DXVER | Diagnosis Code ICD Version Indicator | CHAR(1) | 0, 9 |
| N | 19 | FACPROF | Facility-Professional Claim Indicator | CHAR(1) | F, P |
| N | 20 | MHSACOVG | Coverage Indicator MHSA | CHAR(1) | 0, 1 |
| N | 21 | NETPAY | Payments Net | FLT(12.2) | 0.00, 154.98, 2409.72 |
| N | 22 | NTWKPROV | Network Provider Indicator | CHAR(1) | N, Y |
| N | 23 | PAIDNTWK | Network Paid Indicator | CHAR(1) | N, Y |
| N | 24 | PAY | Payment | FLT(12.2) | 0.00, 15.07, 234.19 |
| N | 25 | PDDATE | Date Claim Paid | DATE(10) | 01/06/1999, 05/04/2018, 10/12/2020 |
| N | 26 | PLANTYP | Plan Indicator | NUM(1) | 1, 2, 3, 4, 5, 6, 7, 8, 9 |
| N | 27 | PROCGRP | Procedure Code Group | NUM(3) | 0, 1, 114, 369, 499 |

| Appendix: CSV Schema | | | | | |
|----------------------|---------------|-----------------|---------------------------------|---------------|------------------------------------|
| Table | Column Number | Name | Long Name | CSV Data Type | Example Values |
| N | 28 | PROCMOD | Procedure Code Modifier | CHAR(2) | 26, TC, RR |
| N | 29 | PROVID | Provider ID | NUM(9) | Each character = 0-9 |
| N | 30 | QTY | Quantity of Services | NUM(5) | 1, 10, 100 |
| N | 31 | SVCSCAT | Service Sub-Category Code | CHAR(5) | 10110, 12336, 31218 |
| N | 32 | TSVCDAT | Date Service Ending | DATE(10) | 10/01/1998, 04/15/2009, 08/03/2019 |
| N | 33 | MDC | Major Diagnostic Category | CHAR(2) | 02, 11, 23 |
| N | 34 | REGION | Region | CHAR(1) | 1, 2, 3, 4, 5 |
| N | 35 | MSA | Metropolitan Statistical Area | NUM(5) | 0, 15190, 29404 |
| N | 36 | STDPLAC | Place of Service | NUM(2) | 1, 11, 81, 99 |
| N | 37 | STDPROV | Provider Type | NUM(3) | 1, 204, 930 |
| N | 38 | DATATYP | Data Type | NUM(1) | 1, 2, 3, 4 |
| N | 39 | AGEGRP | Age Group | CHAR(1) | 1, 2, 3, 4, 5, 6 |
| N | 40 | EECLASS | Employee Classification | CHAR(1) | 1, 2, 3, 4, 5, 6, 7, 8, 9 |
| N | 41 | EESTATU | Employment Status | CHAR(1) | 1, 2, 3, 4, 5, 6, 7, 8, 9 |
| N | 42 | EGEOLOC | Geographic Location Employee | CHAR(2) | 01, 32, 64 |
| N | 43 | EIDFLAG | Enrollee ID Derivation Flag | CHAR(1) | 1, 2, 3, 4, 5, 6 |
| N | 44 | EMPREL | Relation to Employee | CHAR(1) | 1, 2, 3, 4 |
| N | 45 | ENRFLAG | Enrollment Flag | CHAR(1) | 0, 1 |
| N | 46 | PHYFLAG | Physician Specialty Coding Flag | CHAR(1) | 0, 1 |
| N | 47 | RX | Cohort Drug Indicator | CHAR(1) | 0, 1 |
| N | 48 | SEX | Gender of Patient | CHAR(1) | 1, 2 |
| N | 49 | HLTHPLAN | Health Plan Indicator | CHAR(1) | 0, 1 |
| N | 50 | INDSTRY | Industry | CHAR(1) | 1, 2, 3, 4, 5, 6, 7, O |
| N | 51 | MSCLMID | MarketScan Claim ID | NUM(10) | Each character = 0-9 |
| N | 52 | NPI | National Provider ID | CHAR(10) | 10-byte alphanumeric |
| N | 53 | UNITS | Units of Service Count | FLT(12.2) | 1.00, 10.00, 100.00 |
| N | 54 | DENTINMS | Dental ENROLID in MarketScan | CHAR(1) | Each character = 0-9 |
| N | 55 | TOOTHCD | Tooth Code | CHAR(2) | 1, 22, P |
| N | 56 | TOOTHSUR | Tooth Surface Code | CHAR(5) | A, B, L |
| N | 57 | DENTPTYP | Dental Plan Type Indicator | NUM(3) | 2, 3, 6 |
| T | 1 | SEQNUM | Sequence Number | NUM(11) | Each character = 0-9 |
| T | 2 | VERSION | Version | CHAR(2) | 01, 10, 20 |
| T | 3 | EFAMID | Enrolled Family ID | NUM(9) | Each character = 0-9 |
| T | 4 | ENROLID | Enrollee ID | NUM(11) | Each character = 0-9 |
| T | 5 | DTEND | Date Enrollment End | DATE(10) | 01/31/1998, 06/30/2005, 10/31/2016 |
| T | 6 | DTSTART | Date Enrollment Start | DATE(10) | 02/01/1999, 04/01/2001, 11/01/2019 |
| T | 7 | MEMDAYS | Member Days | NUM(3) | Each character = 0-9 |

| Appendix: CSV Schema | | | | | |
|----------------------|---------------|----------|---------------------------------|---------------|---------------------------|
| Table | Column Number | Name | Long Name | CSV Data Type | Example Values |
| T | 8 | MHSACOVG | Coverage Indicator MHSA | CHAR(1) | 0, 1 |
| T | 9 | PLANTYP | Plan Indicator | NUM(1) | 1, 2, 3, 4, 5, 6, 7, 8, 9 |
| T | 10 | YEAR | Date Year Incurred | NUM(4) | 1999, 2015, 2021 |
| T | 11 | AGE | Age of Patient | NUM(3) | 18, 52, 65 |
| T | 12 | DOBYR | Patient Birth Year | NUM(4) | 1965, 1984, 2005 |
| T | 13 | REGION | Region | CHAR(1) | 1, 2, 3, 4, 5 |
| T | 14 | MSA | Metropolitan Statistical Area | NUM(5) | 0, 15190, 29404 |
| T | 15 | DATATYP | Data Type | NUM(1) | 1, 2, 3, 4 |
| T | 16 | AGEGRP | Age Group | CHAR(1) | 1, 2, 3, 4, 5, 6 |
| T | 17 | EECLASS | Employee Classification | CHAR(1) | 1, 2, 3, 4, 5, 6, 7, 8, 9 |
| T | 18 | EESTATU | Employment Status | CHAR(1) | 1, 2, 3, 4, 5, 6, 7, 8, 9 |
| T | 19 | EGEOLOC | Geographic Location Employee | CHAR(2) | 01, 32, 64 |
| T | 20 | EMPREL | Relation to Employee | CHAR(1) | 1, 2, 3, 4 |
| T | 21 | PHYFLAG | Physician Specialty Coding Flag | CHAR(1) | 0, 1 |
| T | 22 | RX | Cohort Drug Indicator | CHAR(1) | 0, 1 |
| T | 23 | SEX | Gender of Patient | CHAR(1) | 1, 2 |
| T | 24 | HLTHPLAN | Health Plan Indicator | CHAR(1) | 0, 1 |
| T | 25 | INDSTRY | Industry | CHAR(1) | 1, 2, 3, 4, 5, 6, 7, O |
| T | 26 | DENTPTYP | Dental Plan Type Indicator | NUM(3) | 2, 3, 6 |
| T | 27 | DENTINMS | Dental ENROLID in MarketScan | CHAR(1) | Each character = 0-9 |

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