

DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL
 RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PATIENT IDENTIFIER (DoD)			
RECORDS/LOCATOR NUMBERS			
RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-095	1	Yes
Non-Institutional	2-080	1	Yes
PRIMARY PICTURE (FORMAT) Ten (10) alphanumeric characters.			
DEFINITION The identifier associated with a particular patient. Download field from DEERS.			
CODE/VALUE SPECIFICATIONS N/A			
ALGORITHM N/A			
SUBORDINATE AND/OR GROUP ELEMENTS			
SUBORDINATE		GROUP	
N/A		N/A	
NOTES AND SPECIAL INSTRUCTIONS: N/A			

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PATIENT STATUS

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-270	1	Yes

PRIMARY PICTURE (FORMAT) Two (2) alphanumeric characters.

DEFINITION Code indicating patient status as of the end date of care on the TED Record.

CODE/VALUE SPECIFICATIONS		
	01	Discharged
	02	Transferred
	03	Discharged/transferred to skilled nursing facility (SNF)
	04	Discharged/transferred to intermediate care facility (ICF)
	05	Discharged/transferred to another type of institution (including distinct parts)
	06	Discharged/transferred to home under care of organized home health service organization
	07	Left against medical advice or discontinued care
	08	Discharged/transferred to home under care of a home IV provider
	20	Expired (or did not recover - Christian Science Patient)
	30	Still patient (remaining)
	40	Died at Home
	41	Died in a medical facility, such as a hospital, SNF, or free standing hospice
	42	Place of death unknown
	50	Discharged to Hospice - Home
	51	Discharged to Hospice - Medical Facility
	61	Discharged/transferred within this institution to a hospital-based Medicare approved swing bed

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA ELEMENT DEFINITION

ELEMENT NAME: PATIENT STATUS (CONTINUED)		
CODE/VALUE SPECIFICATIONS (CONTINUED)	62	Discharged/transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital
	63	Discharged/transferred to a long term care hospital
	71	Discharged/transferred/referred to another institution for outpatient services as specified by the discharge plan of care
	72	Discharged/transferred/referred to this institution for outpatient services as specified by the discharge plan of care
ALGORITHM N/A		
SUBORDINATE AND/OR GROUP ELEMENTS		
SUBORDINATE	GROUP	
N/A	N/A	
NOTES AND SPECIAL INSTRUCTIONS:		
N/A		

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PATIENT ZIP CODE

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-105	1	Yes
Non-Institutional	2-090	1	Yes

PRIMARY PICTURE (FORMAT) Nine (9) alphanumeric characters.

DEFINITION U.S. Postal Zip Code or foreign country code for patient's legal residence at the time service was rendered and must not be the zip code of a P.O. Box.

CODE/VALUE SPECIFICATIONS Must be a valid 5 or 9 digit zip code. If only 5 digit, left justify and blank fill to right. If foreign country, must be 3 character foreign country code, left justify and blank fill. Refer to [Chapter 2, Addendum A](#).

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PAY GRADE CODE (SPONSOR)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-056	1	Yes
Non-Institutional	2-291	Up to 99	Yes

PRIMARY PICTURE (FORMAT) Two (2) alphanumeric characters.

DEFINITION The code that represents the level of pay. (The combination of pay plan code and pay grade code represents the sponsor's pay category.) Download field from DEERS.

CODE/VALUE SPECIFICATIONS		
	00	Unknown
	00 - ZZ (not WW)	Used when pay plan is civil service
	01	Used when pay plan is cadet
	01 - 05	Used when pay plan is warrant office
	01 - 09	Used when pay plan is enlisted
	01 - 11	Used when pay plan is officer

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PAY PLAN CODE (SPONSOR)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-057	1	Yes
Non-Institutional	2-292	Up to 99	Yes

PRIMARY PICTURE (FORMAT) Five (5) alphanumeric characters.

DEFINITION The code that represents the type of pay category. (The combination of pay plan code and pay grade code represents the sponsor's pay category.) Download field from DEERS.

CODE/VALUE SPECIFICATIONS For valid values refer to [Addendum K](#).

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: **PCM LOCATION DMIS-ID (ENROLLMENT) CODE**

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-115	1	No
Non-Institutional	2-110	1	No

PRIMARY PICTURE (FORMAT) Four (4) alphanumeric characters.

DEFINITION This code identifies and distinguishes MTF/Clinic enrollments from network enrollments. The code designations vary based on type of Prime enrollment and begin work dates of new programs. The codes also vary based on the individual requirements of enrolling platforms used by the Managed Care Support Regions. **Download field from DEERS using Primary Care Manager Enrolling Division DMIS Identifier¹.**

CODE/VALUE SPECIFICATIONS Refer to [Chapter 3, Addendum E](#) for further instructions on how and when to use these codes.

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

¹ **Download from DEERS except for SHCP-MTF Referred care. The referring MTF/Clinic DMIS-ID (enrollment) must be reported if available in the PCM Location DMIS-ID Code (see the TRICARE Operations Manual, [Chapter 21](#)).**

Note: If not applicable blank fill.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON BIRTH CALENDAR DATE (PATIENT)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-085	1	Yes
Non-Institutional	2-070	1	Yes

PRIMARY PICTURE (FORMAT) Eight (8) alphanumeric characters, YYYYMMDD.

DEFINITION The date when a human being was born. Download field from DEERS.

CODE/VALUE SPECIFICATIONS		
YYYY	4 digit calendar year	
MM	2 digit calendar month	
DD	2 digit calendar day	

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON CADENCY NAME (PATIENT)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-079	1	Yes ¹
Non-Institutional	2-064	1	Yes ¹

PRIMARY PICTURE (FORMAT) Ten (10) alphanumeric characters.

DEFINITION The cadency name (i.e., Sr., Jr., III etc.) of the patient.
Download field from DEERS.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	PERSON NAME (PATIENT)

NOTES AND SPECIAL INSTRUCTIONS:

¹ Required if available on DEERS, if not available, blank fill.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON FIRST NAME (PATIENT)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-077	1	Yes
Non-Institutional	2-062	1	Yes

PRIMARY PICTURE (FORMAT) Twenty-Five (25) alphanumeric characters.

DEFINITION First name of patient. Download field from DEERS.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	PERSON NAME (PATIENT)

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON IDENTIFIER (PATIENT)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-080	1	Yes ¹
Non-Institutional	2-065	1	Yes ¹

PRIMARY PICTURE (FORMAT) Nine (9) alphanumeric characters.

DEFINITION The identifier that represents a human being. This attribute will usually contain the person's Social Security Number. Download field from DEERS.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

¹ Required if available on DEERS, if not available, blank fill.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON IDENTIFIER (SPONSOR)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-050	1	Yes
Non-Institutional	2-050	1	Yes

PRIMARY PICTURE (FORMAT) Nine (9) alphanumeric characters.

DEFINITION The identifier that represents a person who is a sponsor. This attribute will usually contain the sponsor's Social Security Number. Download field from DEERS.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON IDENTIFIER TYPE CODE (PATIENT)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-081	1	Yes ¹
Non-Institutional	2-066	1	Yes ¹

PRIMARY PICTURE (FORMAT) One (1) alpha numeric character.

DEFINITION The code that represents a specific kind of person identifier. Download field from DEERS.

CODE/VALUE SPECIFICATIONS		
	D	Special 9-digit code created for individuals (i.e. babies) who do not have or have not provided an SSN when the record is added to DEERS (dependents only).
	F	Special 9-digit code created for foreign military and nationals.
	P	Special 9-digit code created for U.S. military personnel from Service Numbers before the switch to Social Security Numbers.
	R	Special 9-digit code created for a DoD contractor who refused to give his or her SSN to RAPIDS. The associated PN_ID will begin with 99.
	S	Social Security Number

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

¹ Can be blank if Person Identifier (Patient) is not available.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON IDENTIFIER TYPE CODE (SPONSOR)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-051	1	Yes
Non-Institutional	2-051	1	Yes

PRIMARY PICTURE (FORMAT) One (1) alpha numeric character.

DEFINITION The code that represents a specific kind of person identifier. Download field from DEERS.

CODE/VALUE SPECIFICATIONS		
	D	Special 9-digit code created for individuals (i.e. babies) who do not have or have not provided an SSN when the record is added to DEERS (dependents only).
	F	Special 9-digit code created for foreign military and nationals.
	P	Special 9-digit code created for U.S. military personnel from Service Numbers before the switch to Social Security Numbers.
	R	Special 9-digit code created for a DoD contractor who refused to give his or her SSN to RAPIDS. The associated PN_ID will begin with 99.
	S	Social Security Number

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON LAST NAME (PATIENT)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-076	1	Yes
Non-Institutional	2-061	1	Yes

PRIMARY PICTURE (FORMAT) Thirty-Five (35) alphanumeric characters.

DEFINITION Last name of patient. Download field from DEERS.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	PERSON NAME (PATIENT)

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON MIDDLE NAME (PATIENT)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-078	1	Yes ¹
Non-Institutional	2-063	1	Yes ¹

PRIMARY PICTURE (FORMAT) Twenty-Five (25) alphanumeric characters.

DEFINITION Middle name of patient. Download field from DEERS.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	PERSON NAME (PATIENT)

NOTES AND SPECIAL INSTRUCTIONS:

¹ Required if available on DEERS, if not available, blank fill.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON NAME (PATIENT)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-075	1	Yes
Non-Institutional	2-060	1	Yes

PRIMARY PICTURE (FORMAT) Group

DEFINITION Name of patient. Download field from DEERS.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
PERSON LAST NAME	N/A
PERSON FIRST NAME	
PERSON MIDDLE NAME	
PERSON CADENCY NAME	

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PERSON SEX (PATIENT)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-100	1	Yes
Non-Institutional	2-085	1	Yes

PRIMARY PICTURE (FORMAT) One (1) alphanumeric character.

DEFINITION Code defining sex of patient. Download field from DEERS.

CODE/VALUE SPECIFICATIONS		
	F	Female
	M	Male

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PHYSICIAN REFERRAL NUMBER

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Non-Institutional	2-270	1	Yes ¹

PRIMARY PICTURE (FORMAT) Thirteen (13) alphanumeric characters.

DEFINITION The identifying number of the referring physician. This field will be made up of the NPI or PROVIDER TAXPAYER NUMBER and PROVIDER SUB-IDENTIFIER if applicable.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

¹ Required for all referred care (MTF and Civilian PCM). If not applicable blank fill.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PLACE OF SERVICE

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Non-Institutional	2-275	Up to 99	Yes
PRIMARY PICTURE (FORMAT)	Two (2) alphanumeric characters.		
DEFINITION	Code to indicate the location of provided health care.		
CODE/VALUE SPECIFICATIONS	11	Office	
	12	Home	
	19	Pharmacy	
	21	Inpatient Hospital	
	22	Outpatient Hospital	
	23	Emergency Room - Hospital	
	24	Ambulatory Surgical Center	
	25	Birthing Center	
	26	Military Treatment Facility	
	31	Skilled Nursing Facility	
	32	Nursing Facility	
	33	Custodial Care Facility	
	34	Hospice	
	41	Ambulance - Land	
	42	Ambulance - Air or Water	
	51	Inpatient Psychiatric Facility	
	52	Psychiatric Facility Partial Hospitalization	
	53	Community Mental Health Center	
	54	Intermediate Care Facility/ Mentally Retarded	
	55	Residential Substance Abuse Treatment Facility	
	56	Psychiatric Residential Treatment Center	
	61	Comprehensive Inpatient Rehabilitation Facility	
	62	Comprehensive Outpatient Rehabilitation Facility	

NOTES AND SPECIAL INSTRUCTIONS:

This data element must be '19' for Mail Order Pharmacy.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PLACE OF SERVICE (CONTINUED)		
CODE/VALUE SPECIFICATIONS (CONTINUED)	65	End Stage Renal Disease Treatment Facility
	71	State or Local public Health Clinic
	72	Rural Health Clinic
	81	Independent Laboratory
	99	Other Unlisted Facility
ALGORITHM N/A		
SUBORDINATE AND/OR GROUP ELEMENTS		
SUBORDINATE		GROUP
N/A		N/A

NOTES AND SPECIAL INSTRUCTIONS:
This data element must be '19' for Mail Order Pharmacy.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PRICING RATE CODE

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-190	1	Yes
Non-Institutional	2-325	Up to 99	Yes ¹

PRIMARY PICTURE (FORMAT) Two (2) alphanumeric characters.

DEFINITION The code indicating the contractor's pricing methodology used in determining the amount allowed for the service(s)/supplies.

CODE/VALUE SPECIFICATIONS	INSTITUTIONAL CODES
	⊖ No special rate
	D Discount rate agreement
	H TRICARE/CHAMPUS DRG reimbursement with SHORT STAY OUTLIER
	I TRICARE DRG reimbursement with COST OUTLIER
	J TRICARE DRG reimbursement with NO OUTLIER
	K Hospital-Specific psychiatric Per Diem Rate
	L Region-Specific psychiatric Per Diem Rate
	P Per diem rate agreement
	U Supplemental Health Care Program Claim or Active Duty Member TPR claim Paid Outside Normal Limits
	V Medicare Reimbursement Rate

NOTES AND SPECIAL INSTRUCTIONS:

¹ Code '0' for all allowed drug charges. Use Pricing Rate Code '1' (Priced Manually) for consultation procedures (procedure code* 906XX) for which the allowable charge is limited to that for a Limited Initial Visit, New Patient (procedure code* 90010).

Left justify and blank fill.

This data element must be '0' for Mail Order Pharmacy.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PRICING RATE CODE (CONTINUED)	
CODE/VALUE SPECIFICATIONS	NON-INSTITUTIONAL CODES
(CONTINUED)	0 Pricing not applicable (denied service/supplies and allowed drugs)
	1 Priced Manually
	2 Prevailing charge (state)
	3 Conversion Amount (state)
	4 Paid as billed
	5 Paid on negotiated rate
	A National prevailing charge
	B National conversion factor
	C Ambulatory surgery-facility payment rate
	D Discounted ambulatory surgery-facility payment rate
	E Ambulatory surgery-paid as billed
	F Claim Auditing Software-added procedure, priced manually
	G Claim Auditing Software-added procedure, prevailing charge (State)
	H Claim Auditing Software-added procedure, conversion factor (Contractor)
	I Claim Auditing Software-added procedure, paid as billed
	J Claim Auditing Software-added procedure, paid on negotiated rate
	N Claim Auditing Software-added procedure, national prevailing charge

NOTES AND SPECIAL INSTRUCTIONS:

¹ Code '0' for all allowed drug charges. Use Pricing Rate Code '1' (Priced Manually) for consultation procedures (procedure code* 906XX) for which the allowable charge is limited to that for a Limited Initial Visit, New Patient (procedure code* 90010).

Left justify and blank fill.

This data element must be '0' for Mail Order Pharmacy.

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DATA ELEMENT DEFINITION

ELEMENT NAME: PRICING RATE CODE (CONTINUED)		
CODE/VALUE SPECIFICATIONS (CONTINUED)	O	Claim Auditing Software-added procedure, national conversion factor
	P	Claim Auditing Software-added procedure, ambulatory surgery-facility payment rate
	Q	Claim Auditing Software-added procedure, discounted ambulatory surgery-facility payment rate
	R	Claim Auditing Software-added procedure, ambulatory surgery-paid as billed
	T	Claim Auditing Software-added procedure, allowed as billed but paid less than billed
	U	SHCP or Active Duty Member TPR claim paid outside normal limits
	V	Medicare Reimbursement Rate
	W	Priced over CMAC
	GG	Global Rate Agreement (used with corporate service providers only)
	GP	Per Diem Rate Agreement (used with corporate service providers only)
	LC	TRICARE Claim-added procedure, CMAC priced laboratory code

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	PROCESSING INFORMATION

NOTES AND SPECIAL INSTRUCTIONS:

¹ Code '0' for all allowed drug charges. Use Pricing Rate Code '1' (Priced Manually) for consultation procedures (procedure code* 906XX) for which the allowable charge is limited to that for a Limited Initial Visit, New Patient (procedure code* 90010).

Left justify and blank fill.

This data element must be '0' for Mail Order Pharmacy.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PRINCIPAL OPERATION/NON-SURGICAL PROCEDURE CODE

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-345	1	Yes ¹

PRIMARY PICTURE (FORMAT) Five (5) alphanumeric characters.

DEFINITION The code that identifies the principal procedure performed during the period covered by this TED Record as coded on the UB-92.

CODE/VALUE SPECIFICATIONS Use the most current procedure code edition (ICD-9-CM) as directed by TMA. Must provide the most detailed code. Must be left justified and blank filled. Do not code the decimal point.

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

¹ Required if one of the following Revenue Codes are present 36X or 72X.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PRINCIPAL TREATMENT DIAGNOSIS

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-300	1	Yes
Non-Institutional	2-115	1	Yes

PRIMARY PICTURE (FORMAT) Six (6) alphanumeric characters.

DEFINITION The condition established, after study, to be the major cause for the patient to obtain medical care as coded on the claim form or otherwise indicated by the provider.

CODE/VALUE SPECIFICATIONS Use the most current diagnosis code edition (ICD-9-CM), as directed by TMA. Must provide the most detailed code. Left justify and blank fill. Do not code the decimal point.

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

For Mail Order Pharmacy, if a more specific diagnosis code is not available, use 799.8.

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CHAPTER 2, SECTION 2.7

DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROCEDURE CODE			
RECORDS/LOCATOR NUMBERS			
RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Non-Institutional	2-160	Up to 99	Yes
PRIMARY PICTURE (FORMAT) Five (5) alphanumeric characters.			
DEFINITION	Code indicating the procedure which describes the care received.		
CODE/VALUE SPECIFICATIONS	Refer to Physician's Current Procedure Terminology ¹ (CPT-4), or HCPCS National Level II Medicare Codes or TMA approved codes (Figure 2-E-1).		
ALGORITHM	N/A		
SUBORDINATE AND/OR GROUP ELEMENTS			
SUBORDINATE	GROUP		
N/A	N/A		

NOTES AND SPECIAL INSTRUCTIONS:

¹ CPT codes, descriptions and other data only are copyright 2001 American Medical Association. All rights reserved. Applicable FARS/DFARS Restrictions Apply to Government use.

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CHAPTER 2, SECTION 2.7

DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROCEDURE CODE MODIFIER

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Non-Institutional	2-165	2/Up to 99	No

PRIMARY PICTURE (FORMAT) Two occurrences of two (2) alphanumeric characters per line item for non-institutional.

DEFINITION Two digit code which provides the means by which the health care professional can indicate that a service or procedure that has been performed has been altered by some specific circumstance but not changed in its definition or code. (Refer to Physician's Current Procedure Terminology¹ (CPT-4), or HCPCS National Level II Medicare Codes)

CODE/VALUE SPECIFICATIONS Must be 20-26, 27, 30, 32, 47, 50-59, 62, 66, 73-82, 90, 91, 99, D, E, G, H, I, J, N, P, R, S, X, AA, AB, AC, AD, AE, AF, AG, AH, AJ, AN, AP, AS, CC, DD, E1-E4, EE, EH, EJ, EM, EP, ER, ET, FA, FP, F1-F9, GM, HE, HH, HR, HT, JH, K0, KH, KI, KO, LC, LD, LL, LR, LS, LT, MS, NH, NR, NU, P1, P2, P3, P4, P5, PH, PL, QB, QC, QD, QE, QF, QG, QH, QK, QM, QN, QS, QT, QU, QX, QY, QZ, Q5, Q6, RA, RC, RE, RH, RP, RR, RT, SF, SH, T1-T9, TA, TC, UC, UE, VP, XX, or blank.

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

¹ CPT codes, descriptions and other data only are copyright 1999 American Medical Association. All rights reserved. Applicable FARS/DFARS Restrictions Apply to Government use.

NOTE: Can report from 0 to 2 codes. Left justify and blank fill. Do not duplicate. Each occurrence consists of two (2) characters left justify and blank fill to right.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROCESSING INFORMATION

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-155	1	Yes ¹

PRIMARY PICTURE (FORMAT) Group

DEFINITION Field containing multiple elements that describe processing related to the TED Record.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
OVERRIDE CODE TYPE OF SUBMISSION CA/NAS NUMBER CA/NAS REASON FOR ISSUANCE CA/NAS EXCEPTION REASON SPECIAL PROCESSING CODE PRICING RATE CODE	N/A

NOTES AND SPECIAL INSTRUCTIONS:

¹ Required if applicable to TED Record conditions.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROVIDER GROUP NPI NUMBER (RESERVED)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-215	1	Yes
Non-Institutional	2-230	Up to 99	Yes

PRIMARY PICTURE (FORMAT) Ten (10) alphanumeric characters.

DEFINITION Reserved for future use.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROVIDER INDIVIDUAL NPI NUMBER (RESERVED)

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-210	1	Yes
Non-Institutional	2-225	Up to 99	Yes

PRIMARY PICTURE (FORMAT) Ten (10) alphanumeric characters.

DEFINITION Reserved for future use.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROVIDER NETWORK STATUS INDICATOR

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-230	1	Yes
Non-Institutional	2-265	Up to 99	Yes

PRIMARY PICTURE (FORMAT) One (1) alphanumeric character.

DEFINITION Code indicating whether the provider is a network or non-network provider.

CODE/VALUE SPECIFICATIONS	1	Network Provider
	2	Non-Network Provider

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

This data element must be '1' for Mail Order Pharmacy.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROVIDER PARTICIPATION INDICATOR			
RECORDS/LOCATOR NUMBERS			
RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-225	1	Yes
Non-Institutional	2-260	Up to 99	Yes
PRIMARY PICTURE (FORMAT) One (1) alphanumeric character.			
DEFINITION Code indicating whether or not the provider accepted assignment of benefits for services rendered.			
CODE/VALUE SPECIFICATIONS	N	No	
	Y	Yes	
ALGORITHM N/A			
SUBORDINATE AND/OR GROUP ELEMENTS			
SUBORDINATE		GROUP	
N/A		N/A	
NOTES AND SPECIAL INSTRUCTIONS:			
This data element must be 'Y' for Mail Order Pharmacy.			

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROVIDER SPECIALTY

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Non-Institutional	2-255	Up to 99	Yes

PRIMARY PICTURE (FORMAT) Ten (10) alphanumeric characters.

DEFINITION Code describing the provider's specialty.

CODE/VALUE SPECIFICATIONS Refer to [Chapter 2, Addendum C](#).

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

This data element must be '333600000N' for Mail Order Pharmacy.

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROVIDER STATE OR COUNTRY CODE			
RECORDS/LOCATOR NUMBERS			
RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-195	1	Yes
Non-Institutional	2-235	Up to 99	Yes
PRIMARY PICTURE (FORMAT) Three (3) alphanumeric characters.			
DEFINITION Code assigned to identify the state or foreign country in which the care was received . State Code must be left justified and blank fill to right.			
CODE/VALUE SPECIFICATIONS Chapter 2, Addendum A and Addendum B .			
ALGORITHM N/A			
SUBORDINATE AND/OR GROUP ELEMENTS			
SUBORDINATE		GROUP	
N/A		N/A	
NOTES AND SPECIAL INSTRUCTIONS: N/A			

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROVIDER SUB-IDENTIFIER

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-205	1	Yes
Non-Institutional	2-245	Up to 99	Yes

PRIMARY PICTURE (FORMAT) Four (4) alphanumeric characters.

DEFINITION Identification number that uniquely identifies multiple providers using the same Taxpayer Identification Number (TIN). Refer to provider filing instructions.

CODE/VALUE SPECIFICATIONS Assigned as per TRICARE instructions. Must be zero-filled if there are no multiple providers within the TIN.

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROVIDER TAXPAYER NUMBER			
RECORDS/LOCATOR NUMBERS			
RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-200	1	Yes
Non-Institutional	2-240	Up to 99	Yes
PRIMARY PICTURE (FORMAT)	Nine (9) alphanumeric characters.		
DEFINITION	The IRS Taxpayer Identification Number (TIN) assigned to the institution/provider supplying the care.		
CODE/VALUE SPECIFICATIONS	For institutions must be 9-digit Employer Identification Number (EIN). For individual providers should be the 9-digit EIN or SSN, if available. If not available, report the contractor-assigned number. (Refer to Provider File Data Element PROVIDER TAXPAYER NUMBER 3-005 in the provider record for instructions). Report all nines for transportation services under Program for Persons with Disabilities and for Drug Program when the services are from a non-participating pharmacy.		
ALGORITHM	N/A		
SUBORDINATE AND/OR GROUP ELEMENTS			
SUBORDINATE			GROUP
N/A			N/A
NOTES AND SPECIAL INSTRUCTIONS:			
N/A			

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DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROVIDER ZIP CODE

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-220	1	Yes
Non-Institutional	2-250	Up to 99	Yes

PRIMARY PICTURE (FORMAT) Nine (9) alphanumeric characters.

DEFINITION Location of provider's business office where care is usually provided.

CODE/VALUE SPECIFICATIONS Must be a valid 5 or 9 digit zip code. If only 5 digits, left justify and blank fill to right. If a foreign country, must be 3 character foreign country code, left justify and blank fill to right. Refer to [Addendum A](#).

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

N/A