# Reporting Manual for Vermont Uniform Hospital Discharge Data System (VUHDDS)

Necessary Data and Reporting Schedule

The Green Mountain Care Board is the steward of the Vermont Uniform Hospital Discharge Data System ("VUHDDS") which contains information related to health care provided to patients at health care facilities in Vermont and health care provided to Vermont residents at health care facilities in other states. Under the statutory authority to collect these data (18 V.S.A. § 9410<sup>1</sup>, 18 V.S.A. § 9456<sup>2</sup>, and 18 V.S.A. § 9457<sup>3</sup>), the Vermont Green Mountain Care Board (GMCB) administers the program.

This reporting manual, as a companion to Green Mountain Care Board Rule 8.000, specifies data submission requirements for the VUHDDS data set, including the required data submission schedule, required fields, file layouts, file components, edit specifications, instructions, and other technical information.

<sup>&</sup>lt;sup>1</sup> <u>https://legislature.vermont.gov/statutes/section/18/221/09410</u>

<sup>&</sup>lt;sup>2</sup> https://legislature.vermont.gov/statutes/section/18/221/09456

<sup>&</sup>lt;sup>3</sup> https://legislature.vermont.gov/statutes/section/18/221/09457

## NECESSARY DATA

				Emergency	
Field Name	Field Description	Inpatient Discharges	Outpatient Discharges	Department Discharges**	Special Notes
UPI	Unique Person ID	•	•	•	
NPI	National Provider ID	•	•	•	
MRN	Medical Record Number*	•	•	•	
DKEY	Discharge Key	•	•	•	
BTYPE	Bill Type	•	•	•	
HOSP	Hospital Number	•	•	•	
AHR	Admission Hour*	•	•	•	
DDAT	Discharge Date (MMDDYYYY)*	•	•	•	
ADAT	Admission Date (MMDDYYYY)*	•	•	•	
DOB	Birth date (MMDDYYYY)*	•	•	•	
ACON	Admission Type	•	•	•	
AFRO	Admission Source	•	•	•	
READ	Readmission*	•			
ZIP	Zip Code*	•	•	•	
PA	Physical Address*	•	•	•	
CODE	Town Code*	•	•	•	
SEX	Sex Code	•	•	•	
RACE	Race Code*	•	•	•	
ETHNICITY	ETHNICITY Code*	•	•	•	
DISP	Discharge Status	•	•	•	
PPAY	Principal Payment Source	•	•	•	
SPAY	Secondary Payer	•	•	•	
CHRG	Total Charges	•	•	•	
APHY	Attending Physician*	•	•	•	Attending Physician - NPI
OPERP	Operating Physician*	•	•	•	Operating Physician – NPI New!
OPHY1	Other Physician 1*	•	•	•	Other Physician – NPI**
OPHY2	Other Physician 2*	•	•	•	Other Physician – NPI**
SCUD	SCU Days	•			
DRG	CMS Diagnosis Related Group	•			
MDC	CMS Major Diagnostic Category	•			
ECODE1	1st ECODE	•			Not collected for OBS
ECODE2	2nd ECODE	•			
ECODE3	3rd ECODE	•			
REASON	Reason for Visit	•	•	•	
ADX	Admitting Diagnosis Code	•	•	•	
PDX	Principal Diagnosis Code	•	•	•	
PDXPOA	Principal Diagnosis POA	•			
DX2	Second Diagnosis Code	•	•	•	Required if applicable
DX3	Third Diagnosis Code	•	•	•	Required if applicable
DX4	Fourth Diagnosis Code	•	•	•	Required if applicable
DX5	Fifth Diagnosis Code	•	•	•	Required if applicable

DX6	Sixth Diagnosis Code	•	•	•	Required if applicable
DX7	Seventh Diagnosis Code	•	•	•	Required if applicable
DX8	Eighth Diagnosis Code	•	•	•	Required if applicable
DX9	Ninth Diagnosis Code	•	•	•	Required if applicable
DX10	Tenth Diagnosis Code	•	•	•	Required if applicable
DX10 DX11	Eleventh Diagnosis Code	•	•	•	Required if applicable
	Twelfth Diagnosis Code				
DX12	Thirteenth Diagnosis Code		•		Required if applicable
DX13	8	•	•	•	Required if applicable
DX14	Fourteenth Diagnosis Code	•	•	•	Required if applicable
DX15	Fifteenth Diagnosis Code	•	•	•	Required if applicable
DX16	Sixteenth Diagnosis Code	•	•	•	Required if applicable
DX17	Seventeenth Diagnosis Code	•	•	•	Required if applicable
DX18	Eighteenth Diagnosis Code	•	•	•	Required if applicable
DX19	Nineteenth Diagnosis Code	•	•	•	Required if applicable
DX20 DX2POA –	Twentieth Diagnosis Code	•	•	•	Required if applicable
DX2POA – DX20POA	2 <sup>nd</sup> – 20 <sup>th</sup> Diagnosis POA	•			Required if applicable
PPX	Principal Procedure Code	•			
PPD	Principal Procedure Date*	•			
PX2	Second Procedure Code	•			Required if applicable
PX2D	Second Procedure Date*	•			Required if applicable
PX3	Third Procedure Code	•			Required if applicable
PX3D	Third Procedure Date*	•			Required if applicable
PX4	Fourth Procedure Code	•			Required if applicable
PX4D	Fourth Procedure Date*	•			Required if applicable
PX5	Fifth Procedure Code	•			Required if applicable
PX5D	Fifth Procedure Date*	•			Required if applicable
PX6	Sixth Procedure Code	•			Required if applicable
PX6D	Sixth Procedure Date*	•			Required if applicable
PX7	Seventh Procedure Code	•			Required if applicable
PX7D	Seventh Procedure Date*				Required if applicable
PX8	Eighth Procedure Code				Required if applicable
		•			Required if applicable
PX8D	Eighth Procedure Date*				Required if applicable
PX9	Ninth Procedure Code	•			Required if applicable
PX9D	Ninth Procedure Date*	•			Required if applicable
PX10	Tenth Procedure Code	•			Required if applicable
PX10D	Tenth Procedure Date*	•			Required if applicable
PX11	Eleventh Procedure Code	•			Required if applicable
PX11D	Eleventh Procedure Date*	•			Required if applicable
PX12	Twelfth Procedure Code	-			Required if applicable
PX12D	Twelfth Procedure Date*	•			Required if applicable
PX13	Thirteenth Procedure Code	•			
PX13D	Thirteenth Procedure Date*	•			Required if applicable
PX14	Fourteenth Procedure Code	•			Required if applicable
PX14D	Fourteenth Procedure Date*	•			Required if applicable
PX15	Fifteenth Procedure Code	•			Required if applicable

PX15D	Fifteenth Procedure Date*	•			Required if applicable
PX16	Sixteenth Procedure Code	•			Required if applicable
PX16D	Sixteenth Procedure Date*	•			Required if applicable
PX17	Seventeenth Procedure Code	•			Required if applicable
PX17D	Seventeenth Procedure Date*	•			Required if applicable
PX18	Eighteenth Procedure Code	•			Required if applicable
PX18D	Eighteenth Procedure Date*	•			Required if applicable
PX19	Nineteenth Procedure Code	•			Required if applicable
PX19D	Nineteenth Procedure Date*	•			Required if applicable
PX20	Twentieth Procedure Code	•			Required if applicable
PX20D	Twentieth Procedure Date*	•			Required if applicable
AGE	AGE*	•	•	•	
LOS	Length of Stay	•	•	•	
BIRTHWT	Birth weight of Newborn*	•			
UNIQ	Unique Record ID to link REV	•	•	•	
OVFLAG	Observation Bed Flag	•	•	•	Required if applicable
OSFLAG	Outpatient Surgery Flag		•	•	Required if applicable
EVFLAG	Emergency Dept. Flag	•	•	•	Required if applicable
PVFLAG	Cancelled Procedure Flag	•	•	٠	Required if applicable
HCPCS	HCPCS CPTCODE/RATE	•	•	•	All applicable codes
REVCODE	Revenue Code	•	•	•	All applicable codes
REVCHRGS	Revenue Charges	•	•	•	All applicable codes
REVDTE	Revenue Date*	•	•	•	All applicable codes
REVUNITS	Revenue Units	•	•	•	All applicable codes
HCPCS	HCPCS/CPTCODE/INP Rate	•	•	•	All applicable codes
LANG	Language*	•	•	•	Added starting 2011

	ECORD DESCRIPTION AND FILE LAYOUT: INPATIENT ecord Name: Inpatient Data File									
Record N										
		Legen	<b>d</b> : $^{1}A = Alpha N$	= Numeric b= Blank AN = Alphanumeric		VALID CONTENTS				
Starting Position	-		Field Name	English Description	Not Recorded	Recorded				
1	9	AN	FILLER	Blank fill	-					
10	3	N	BTYPE	Bill Type	-	<ul> <li>111 = Hospital based, inpatient, final bill</li> <li>117 = Hospital based, inpatient, Replacement</li> <li>121 = Hospital based, inpatient, final bill Part B</li> <li>127 = Hospital based, inpatient Replacement Part B</li> </ul>				
13	4	Ν	HOSP	Hospital Number (Inpatient and Ambulatory Surgery)	-	<ul> <li>6950 = Central Vermont Medical Center</li> <li>6952 = Southwest Medical Center</li> <li>6953 = Brattleboro Memorial Hospital</li> <li>6954 = University of Vermont Medical Center</li> <li>6955 = Copley Hospital</li> <li>6956 = North Country Hospital</li> <li>6957 = Gifford Medical Center</li> <li>6958 = Rutland Regional Medical Center</li> <li>6959 = Northwest Medical Center</li> <li>6961 = Northeastern Vermont Regional Hospital</li> <li>6962 = Springfield Hospital</li> <li>6963 = Grace Cottage Hospital</li> <li>6964 = Mt. Ascutney Hospital</li> <li>6967 = Porter Medical Center</li> <li>5188 = Veterans' Affairs Medical Center</li> </ul>				
17	2	Ν	AHR	Admission Hour	-	00 -23				

RECORE	ECORD DESCRIPTION AND FILE LAYOUT: INPATIENT								
Record N	ame: Inp	oatient 1	Data File						
<b>Legend</b> : ${}^{1}A$ = Alpha N = Numeric $b$ = Blank AN = Alphanumeric						VALID CONTENTS			
Starting Position	Length Chars	Field		English Description	Not Recorded	Recorded			
19	8	AN	DDAT	Discharge Date (MMDDYYYY)	0	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999			
27	8	AN	ADAT	Admission Date (MMDDYYYY)	0	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999			
35	8	AN	DOB	Birth Date (MMDDYYYY)	0	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999			
43	1	Ν	ACON	Admission Type	0	See Admit Codes Tab for Definitions			
44	1	AN	AFRO	Admission Source	0	See Admit Codes Tab for Definitions			
45	1	AN	READ	Readmission	0	Y = Yes $N = No$ $U = Unknown$			
46	9	AN	ZIP	Zip Code		Standard US or Canadian ZIP code XXXXX - Other Foreign resident YYYYY - Unknown			
Xx	Xxx	XX	XXX	Street Address					
55	4	Ν	CODE	Town Code	0	EC = 0 - 9			
59	1	AN	SEX	Sex Code	0	M = Male F = Female U = Unknown			
60	1	Ν	RACE	Race Code	0	<ul> <li>1 = American Indian/Alaska Native</li> <li>2 = Asian or Pacific Islander</li> <li>3 = Black/Non-Hispanic</li> <li>4 = White/Non-Hispanic</li> <li>5 = Other Race</li> <li>6 = Unknown</li> <li>7 = Hispanic-White</li> <li>8 = Hispanic-Black</li> <li>9 = Multiple Selections</li> </ul>			

	ECORD DESCRIPTION AND FILE LAYOUT: INPATIENT								
Record N	ecord Name: Inpatient Data File								
		Legen	<b>d</b> : <sup>1</sup> A = Alpha N	= Numeric b= Blank AN = Alphanumeric		VALID CONTENTS			
Starting Position			Field Name	English Description	Not Recorded	Recorded			
61	2	Ν	DISP (DSTAT)	Discharge Status	0	See Discharge Disposition Codes Tab for definitions			
63	2	AN	PPAY	Principal Payment Source	0	See Payer Codes Tab for Definitions			
65	4	N	SUBP1	Principal Payer Sub ID	0	See Payer Codes Tab for Sub ID Definitions			
69	2	AN	PAYR2	Secondary Payer	0	See Payer Codes Tab for Definitions			
71	4	N	SUBP2	Secondary Payer Sub ID	0	See Payer Codes Tab for Sub ID Definitions			
75	2	AN	PAYR3	Tertiary Payer	0	See Payer Codes Tab for Definitions			
77	4	N	SUBP3	Tertiary Payer Sub ID	0	See Payer Codes Tab for Sub ID Definitions			
81	10	Ν	CHRG	Total Charges	0	Number, includes two digit decimal			
91	22	AN	APHY	Attending Physician	0	Attending Physician - NPI			
113	22	AN	OPERP	Operating Physician	0	Operating Physician – NPI			
135	22	AN	OPHY1	Other Physician 1	0	Other Physician – NPI			
157	22	AN	OPHY2	Other Physician 2	0	Other Physician – NPI			
179	2	N	SCUD	SCU Days	0	00 – 99			
181	3	Ν	DRG	CMS Diagnosis Related Group	0	000 – 999 (Valid DRG based on fiscal year)			
184	2	AN	MDC	CMS Major Diagnostic Category	0	00 – 99 (Valid MDC based on fiscal year)			
186	7	AN	ADMDX	Admitting Diagnosis Code	b	ICD-10-CM Code			
193	7	AN	ECODE1	ECODE1	b	ICD-10-CM Code			
200	1	AN	EPOA1	Present on Admission Code for ECODE1	b	POA Code			
201	7	AN	ECODE2	ECODE2	b	ICD-10-CM Code			
208	1	AN	EPOA2	POA code for ECODE2	b	POA Code			

RECORD	ECORD DESCRIPTION AND FILE LAYOUT: INPATIENT									
Record N	ame: Inp	oatient I	Data File							
		Legen	d: <sup>1</sup> A = Alpha N	= Numeric += Blank AN = Alphanumeric	VALID CONTENTS					
Starting Position		Field	Field Name	English Description	Not Recorded	Recorded				
209	7	AN	ECODE3	ECODE3	b	ICD-10-CM Code				
216	1	AN	EPOA3	POA code for ECODE3	b	POA Code				
217	7	AN	PDX	Principal Diagnosis Code	b	ICD-10-CM Code				
224	1	AN	DPOA1	POA code for Principal Diagnosis	b	POA Code				
225	7	AN	DX2	Second Diagnosis Code	b	ICD-10-CM Code				
232	1	AN	DPOA2	POA code for DX2	b	POA Code				
233	7	AN	DX3	Third Diagnosis Code	b	ICD-10-CM Code				
240	1	AN	DPOA3	POA code for DX3	b	POA Code				
241	7	AN	DX4	Fourth Diagnosis Code	b	ICD-10-CM Code				
248	1	AN	DPOA4	POA code for DX4	b	POA Code				
249	7	AN	DX5	Fifth Diagnosis Code	b	ICD-10-CM Code				
256	1	AN	DPOA5	POA code for DX5	b	POA Code				
257	7	AN	DX6	Sixth Diagnosis Code	b	ICD-10-CM Code				
264	1	AN	DPOA6	POA code for DX6	b	POA Code				
265	7	AN	DX7	Seventh Diagnosis Code	b	ICD-10-CM Code				
272	1	AN	DPOA7	POA code for DX7	b	POA Code				
273	7	AN	DX8	Eighth Diagnosis Code	b	ICD-10-CM Code				
280	1	AN	DPOA8	POA code for DX8	b	POA Code				
281	7	AN	DX9	Ninth Diagnosis Code	b	ICD-10-CM Code				
288	1	AN	DPOA9	POA code for DX9	b	POA Code				
289	7	AN	DX10	Tenth Diagnosis Code	b	ICD-10-CM Code				
296	1	AN	DPOA10	POA code for DX10	b	POA Code				
297	7	AN	DX11	Eleventh Diagnosis Code	b	ICD-10-CM Code				
304	1	AN	DPOA11	POA code for DX11	b	POA Code				
305	7	AN	DX12	Twelfth Diagnosis Code	b	ICD-10-CM Code				
312	1	AN	DPOA12	POA code for DX12	b	POA Code				
313	7	AN	DX13	Thirteenth Diagnosis Code	b	ICD-10-CM Code				

RECORD	DESCH	RIPTIO	N AND FILE L	AYOUT: INPATIENT		
Record N	ame: Inp	oatient I	Data File			
		Legen	<b>d</b> : <sup>1</sup> A = Alpha N	= Numeric b= Blank AN = Alphanumeric	VALID CONTENTS	
Starting Position	Length Chars	Field	Field Name	English Description	Not Recorded	Recorded
320	1	AN	DPOA13	POA code for DX13	b	POA Code
321	7	AN	DX14	Fourteenth Diagnosis Code	b	ICD-10-CM Code
328	1	AN	DPOA14	POA code for DX14	b	POA Code
329	7	AN	DX15	Fifteenth Diagnosis Code	b	ICD-10-CM Code
336	1	AN	DPOA15	POA code for DX15	b	POA Code
337	7	AN	DX16	Sixteenth Diagnosis Code	b	ICD-10-CM Code
344	1	AN	DPOA16	POA code for DX16	b	POA Code
345	7	AN	DX17	Seventeenth Diagnosis Code	b	ICD-10-CM Code
352	1	AN	DPOA17	POA code for DX17	b	POA Code
353	7	AN	DX18	Eighteenth Diagnosis Code	b	ICD-10-CM Code
360	1	AN	DPOA18	POA code for DX18	b	POA Code
361	7	AN	DX19	Nineteenth Diagnosis Code	b	ICD-10-CM Code
368	1	AN	DPOA19	POA code for DX19	b	POA Code
369	7	AN	DX20	Twentieth Diagnosis Code	b	ICD-10-CM Code
376	1	AN	DPOA20	POA code fro DX20	b	POA Code
377	7	AN	PPX	Principal Procedure Code	b	ICD-10-CM Code
384	8	AN	PPD	Principal Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
392	7	AN	PX2	Second Procedure Code	b	ICD-10-CM Code
399	8	AN	PX2D	Second Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
407	7	AN	PX3	Third Procedure Code	b	ICD-10-CM Code
414	8	AN	PX3D	Third Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
422	7	AN	PX4	Fourth Procedure Code	b	ICD-10-CM Code
429	8	AN	PX4D	Fourth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
437	7	AN	PX5	Fifth Procedure Code	b	ICD-10-CM Code
444	8	AN	PX5D	Fifth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
452	7	AN	PX6	Sixth Procedure Code	b	ICD-10-CM Code
459	8	AN	PX6D	Sixth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999

	ECORD DESCRIPTION AND FILE LAYOUT: INPATIENT									
Record N	ame: Inp	oatient I	Data File							
	1	Legen	<b>d</b> : <sup>1</sup> A = Alpha N	= Numeric b= Blank AN = Alphanumeric		VALID CONTENTS				
Starting Position			Field Name	English Description	Not Recorded	Recorded				
467	7	AN	PX7	Seventh Procedure Code	b	ICD-10-CM Code				
474	8	AN	PX7D	Seventh Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999				
482	7	AN	PX8	Eighth Procedure Code	þ	ICD-10-CM Code				
489	8	AN	PX8D	Eighth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999				
497	7	AN	PX9	Ninth Procedure Code	b	ICD-10-CM Code				
504	8	AN	PX9D	Ninth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999				
512	7	AN	PX10	Tenth Procedure Code	þ	ICD-10-CM Code				
519	8	AN	PX10D	Tenth Procedure Date	-	MM = 01-12 DD = 01-31, YYYY = 0000 - 9999				
527	7	AN	PX11	Eleventh Procedure Code	þ	ICD-10-CM Code				
534	8	AN	PX11D	Eleventh Procedure Date	-	MM = 01-12 DD = 01-31, YYYY = 0000 - 9999				
542	7	AN	PX12	Twelfth Procedure Code	b	ICD-10-CM Code				
549	8	AN	PX12D	Twelfth Procedure Date	-	MM = 01-12 DD = 01-31, YYYY = 0000 - 9999				
557	7	AN	PX13	Thirteenth Procedure Code	þ	ICD-10-CM Code				
564	8	AN	PX13D	Thirteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999				
572	7	AN	PX14	Fourteenth Procedure Code	b	ICD-10-CM Code				
579	8	AN	PX14D	Fourteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999				
587	7	AN	PX15	Fifteenth Procedure Code	b	ICD-10-CM Code				
594	8	AN	PX15D	Fifteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999				
602	7	AN	PX16	Sixteenth Procedure Code	b	ICD-10-CM Code				
609	8	AN	PX16D	Sixteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999				
617	7	AN	PX17	Seventeenth Procedure Code	b	ICD-10-CM Code				

				AYOUT: INPATIENT				
Record N	ame: Inp			= Numeric b= Blank AN = Alphanumeric		VALID CONTENTS		
Starting Position	0	Field		English Description	Not Recorded	Recorded		
624	8	AN	PX17D	Seventeenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999		
632	7	AN	PX18	Eighteenth Procedure Code	b	ICD-10-CM Code		
639	8	AN	PX18D	Eighteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999		
647	7	AN	PX19	Nineteenth Procedure Code	b	ICD-10-CM Code		
654	8	AN	PX19D	Nineteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999		
662	7	AN	PX20	Twentieth Procedure Code	b	ICD-10-CM Code		
669	8	AN	PX20D	Twentieth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999		
677	3	Ν	AGE	AGE	b	EC = 0-9		
680	3	Ν	LOS	Length of Stay	-	EC = 0.9 999 = 999 days or longer		
683	30	AN	DKEY	Discharge Key	b	Unique identifier within each hospital		
713	1	AN	TYPE_A	Inpatient Procedure, per ICD-10 Proc Code with first character '0' or ICD-9 code between '003' and '8699'	-	1 = True  0 = False		
714	1	AN	TYPE_O	Observation revenue code is present (0760 or 0762) on any record type	-	1 = True  0 = False		
715	1	AN	TYPE_E	Emergency Room revenue code is present (045x) on any record type	-	$1 = \text{True} \qquad 0 = \text{False}$		
716	1	AN	Cancelled_PX	A procedure was cancelled (presence of V641, V642, or V643 (ICD-9) and DX Z5301, Z5309, Z531, Z5320, Z5321, Z5329, Z538, Z539 (ICD-10))	-	1 = True  0 = False		

Record N	ame: Inp	atient l	Data File			
	•	Legen	<b>d</b> : ${}^{1}A = Alpha N$	= Numeric b = Blank AN = Alphanumeric	VALID CONTENTS	
Starting Position			Field Name	English Description	Not Recorded	Recorded
717	1	AN	Type_AS	Surgery by Rev Code (036x, 037x, 049x)	-	$\underline{1 = \text{True}}  0 = \text{False}$
718	1	AN	SFLAG	Surgery Flag based on CPT code range Surgery 10021-69990		$1 = \text{True} \qquad 0 = \text{False}$
719	5	AN	BirthWeight		-	Integer greater than zero
724	10	AN	Uniq	Unique record identifier for linking to the revenue file	n/a	Sequential integer
734	15	AN	NPI	National Provider ID		
749	1	Ν	ETHNICITY	Ethnicity Code		1= Hispanic2=Non-Hispanic0= Unknown
750	7	AN	REASON	Reason for Visit		UB-04 FL 70 Patient Reason DX
757	24	AN	MRN	Medical Record Number		
781	30	AN	OP_ED_DKEY	DKEY of OP ED record associated with this IP record		<u>Unique identifier within each hospital</u>
811	9		PNUM	Unique Patient Identifier		
820	1	Ν	Readmit Flag	Flags record as a readmission - same patient, same hospital within 30 days of a previous discharge		$\underline{1 = \text{True}}  0 = \text{False}$
821	100	A	Street Address	Patient street address		

RECORD	DESCRIPT	<b>FION AND</b>	FILE LAYOUT:	OUTPATIENT		
Record Na	me: Outpat	ient Data Fil	le			
	Lege	$\mathbf{nd}: \mathbf{A} = \mathbf{A}$	pha N = Numeric	VALID CONTENTS		
Starting	Length	Field	Field Name	English Description	Not	Recorded
Position	Chars	Туре			Recorded	
1	9	AN	FILLER	Blank fill	-	
				Unique person ID		
10	3	Ν	BTYPE	Bill Type	-	131 = Hospital based, outpatient, final bill
						132 = Outpatient Interim - First Claim
						133 = Outpatient Interim - Continuing Claims
						134 = Outpatient Interim - Last Claim
						137 = Hospital based, outpatient Replacement
						141 = Hospital based, laboratory final bill
						147 = Hospital based, laboratory Replacement
						181 = Swing Bed final bill
						187 = Swing Bed Replacement
						721 = Hospital Renal Dialysis Clinic
						727 = Hospital Renal Dialysis Replacement
						831 = Ambulatory
						837 = Ambulatory Replacement
						851 = Critical Access
						857 = Critical Access Replacement
13	4	Ν	HOSP	Hospital Number (Inpatient and	-	6950 = Central Vermont Medical Center
				Ambulatory Surgery)		6952 = Southwest Medical Center
						6953 = Brattleboro Memorial Hospital
						6954 = University of Vermont Medical Center
						6955 = Copley Hospital
						6956 = North Country Hospital
						6957 = Gifford Medical Center
						6958 = Rutland Regional Medical Center
						6959 = Northwest Medical Center
						6961 = Northeastern Vermont Regional Hospital

						6962 = Springfield Hospital
						6963 = Grace Cottage Hospital
						6964 = Mt. Ascutney Hospital
						6967 = Porter Medical Center
						5188 = Veterans' Affairs Medical Center
17	2	N	AHR	Admission Hour	-	00 -23
19	8	AN	DDAT	Discharge Date (MMDDYYYY)	0	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
27	8	AN	ADAT	Admission Date (MMDDYYYY)	0	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
35	8	AN	DOB	Birth Date (MMDDYYYY)	0	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
43	1	Ν	ACON	Admission Type	0	See Admit Codes Tab for Definitions
44	1	AN	AFRO	Admission Source	0	See Admit Codes Tab for Definitions
45	1	AN	READ	Readmission	0	Y = Yes
						N = No
						U = Unknown
46	9	AN	ZIP	Zip Code		Standard US or Canadian ZIP code
						XXXXX - Other Foreign resident
						YYYYY - Unknown
55	4	N	CODE	Town Code	0	EC = 0 - 9
				Street Address		
59	1	AN	SEX	Sex Code		0 M = Male
						F = Female
						U = Unknown
60	1	Ν	RACE	Race Code	0	1 = American Indian/Alaska Native
						2 = Asian or Pacific Islander
						3 = Black/Non-Hispanic
						4 = White/Non-Hispanic
						5 = Other Race
						6 = Unknown
						7 = Hispanic-White
						8 = Hispanic-Black
						9 = Multiple Selections
61	2	Ν	DISP (DSTAT)	Discharge Status	0	See Discharge Disposition Codes Tab for definitions

63	2	AN	PPAY	Principal Payment Source	0	See Payer Codes Tab for Definitions
65	4	Ν	SUBP1	Principal Payer Sub ID	0	See Payer Codes Tab for Sub ID Definitions
69	2	AN	PAYR2	Secondary Payer	0	See Payer Codes Tab for Definitions
71	4	Ν	SUBP2	Secondary Payer Sub ID	0	See Payer Codes Tab for Sub ID Definitions
75	2	AN	PAYR3	Tertiary Payer	0	See Payer Codes Tab for Definitions
77	4	Ν	SUBP3	Tertiary Payer Sub ID	0	See Payer Codes Tab for Sub ID Definitions
81	10	Ν	CHRG	Total Charges	0	Number, includes two digit decimal
91	22	AN	APHY	Attending Physician	0	Attending Physician - NPI
113	22	AN	OPERP	Operating Physician	0	Operating Physician – NPI
135	22	AN	OPHY1	Other Physician 1	0	Other Physician – NPI
157	22	AN	OPHY2	Other Physician 2	0	Other Physician – NPI
179	2	Ν	SCUD	SCU Days	0	00 – 99
181	7	AN	ADMDX	Admitting Diagnosis Code	b	ICD-10-CM Code
188	7	AN	ECODE1	ECODE1	b	ICD-10-CM Code
195	1	AN	EPOA1	Present on Admission Code for	b	POA Code
196	7	AN	ECODE2	ECODE2	b	ICD-10-CM Code
203	1	AN	EPOA2	POA code for ECODE2	b	POA Code
204	7	AN	ECODE3	ECODE3	b	ICD-10-CM Code
211	1	AN	EPOA3	POA code for ECODE3	b	POA Code
212	7	AN	PDX	Principal Diagnosis Code	b	ICD-10-CM Code
219	7	AN	DX2	Second Diagnosis Code	b	ICD-10-CM Code
226	7	AN	DX3	Third Diagnosis Code	b	ICD-10-CM Code
233	7	AN	DX4	Fourth Diagnosis Code	b	ICD-10-CM Code
240	7	AN	DX5	Fifth Diagnosis Code	b	ICD-10-CM Code
247	7	AN	DX6	Sixth Diagnosis Code	b	ICD-10-CM Code
254	7	AN	DX7	Seventh Diagnosis Code	b	ICD-10-CM Code
261	7	AN	DX8	Eighth Diagnosis Code	b	ICD-10-CM Code
268	7	AN	DX9	Ninth Diagnosis Code	b	ICD-10-CM Code
275	7	AN	DX10	Tenth Diagnosis Code	b	ICD-10-CM Code
282	7	AN	DX11	Eleventh Diagnosis Code	b	ICD-10-CM Code
289	7	AN	DX12	Twelfth Diagnosis Code	b	ICD-10-CM Code
296	7	AN	DX13	Thirteenth Diagnosis Code	b	ICD-10-CM Code

303	7	AN	DX14	Fourteenth Diagnosis Code	b	ICD-10-CM Code
310	7	AN	DX15	Fifteenth Diagnosis Code	þ	ICD-10-CM Code
317	7	AN	DX16	Sixteenth Diagnosis Code	b	ICD-10-CM Code
324	7	AN	DX17	Seventeenth Diagnosis Code	þ	ICD-10-CM Code
331	7	AN	DX18	Eighteenth Diagnosis Code	þ	ICD-10-CM Code
338	7	AN	DX19	Nineteenth Diagnosis Code	þ	ICD-10-CM Code
345	7	AN	DX20	Twentieth Diagnosis Code	þ	ICD-10-CM Code
352	7	AN	PPX	Principal Procedure Code	þ	ICD-10-CM Code
359	8	AN	PPD	Principal Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
367	7	AN	PX2	Second Procedure Code	b	ICD-10-CM Code
374	8	AN	PX2D	Second Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
382	7	AN	PX3	Third Procedure Code	b	ICD-10-CM Code
389	8	AN	PX3D	Third Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
397	7	AN	PX4	Fourth Procedure Code	þ	ICD-10-CM Code
404	8	AN	PX4D	Fourth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
412	7	AN	PX5	Fifth Procedure Code	b	ICD-10-CM Code
419	8	AN	PX5D	Fifth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
427	7	AN	PX6	Sixth Procedure Code	b	ICD-10-CM Code
434	8	AN	PX6D	Sixth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
442	7	AN	PX7	Seventh Procedure Code	b	ICD-10-CM Code
449	8	AN	PX7D	Seventh Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
457	7	AN	PX8	Eighth Procedure Code	b	ICD-10-CM Code
464	8	AN	PX8D	Eighth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
472	7	AN	PX9	Ninth Procedure Code	b	ICD-10-CM Code
479	8	AN	PX9D	Ninth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
487	7	AN	PX10	Tenth Procedure Code	b	ICD-10-CM Code
494	8	AN	PX10D	Tenth Procedure Date	-	MM = 01-12 DD = 01-31, YYYY = 0000 - 9999
502	7	AN	PX11	Eleventh Procedure Code	b	ICD-10-CM Code
509	8	AN	PX11D	Eleventh Procedure Date	-	MM = 01-12 DD = 01-31, YYYY = 0000 - 9999
517	7	AN	PX12	Twelfth Procedure Code	b	ICD-10-CM Code
524	8	AN	PX12D	Twelfth Procedure Date	-	MM = 01-12 DD = 01-31, YYYY = 0000 - 9999
532	7	AN	PX13	Thirteenth Procedure Code	b	ICD-10-CM Code

539	8	AN	PX13D	Thirteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999	
547	7	AN	PX14	Fourteenth Procedure Code	b	ICD-10-CM Code	
554	8	AN	PX14D	Fourteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999	
562	7	AN	PX15	Fifteenth Procedure Code	b	ICD-10-CM Code	
569	8	AN	PX15D	Fifteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999	
577	7	AN	PX16	Sixteenth Procedure Code	b	ICD-10-CM Code	
584	8	AN	PX16D	Sixteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999	
592	7	AN	PX17	Seventeenth Procedure Code	b	ICD-10-CM Code	
599	8	AN	PX17D	Seventeenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999	
607	7	AN	PX18	Eighteenth Procedure Code	b	ICD-10-CM Code	
614	8	AN	PX18D	Eighteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999	
622	7	AN	PX19	Nineteenth Procedure Code	b	ICD-10-CM Code	
629	8	AN	PX19D	Nineteenth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999	
637	7	AN	PX20	Twentieth Procedure Code	b	ICD-10-CM Code	
644	8	AN	PX20D	Twentieth Procedure Date	-	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999	
652	3	Ν	AGE	AGE	b	EC = 0-9	
655	3	Ν	LOS	Length of Stay	-	EC = 0-9 999 = 999 days or longer	
658	30	AN	DKEY	Discharge Key	þ	<u>Unique identifier within each hospital</u>	
688	1	AN	TYPE_O	Observation revenue code is present (0760 or 0762) on any record type	-	<u>1 = True 0 = False</u>	
689	1	AN	TYPE_E	Emergency Room revenue code is present (045x) on any record type	-	<u>1 = True 0 = False</u>	
690	1	AN	Cancelled_PX	A procedure was cancelled (presence of V641, V642, or V643 (ICD-9) and DX Z5301, Z5309, Z531, Z5320, Z5321, Z5329, Z538, Z539 (ICD-10) or HCPCS modifier (53,73,74))	-	<u>1 = True 0 = False</u>	
691	1	AN	TYPE_AS	Ambulatory Surgery, per Rev Codes (036x, 037x, 049x)	-	$\underline{1 = \text{True}}  0 = \text{False}$	

692	1	AN	SFLAG	Surgery Flag based on CPT code range Surgery 10021-69990	-	<u>1 = True 0 = False</u> New flag beginning January 1st, 2010 Replaces TYPE_AS Flag for Ambulatory Surgery
693	10	AN	Uniq	Unique record identifier for linking to the revenue file	n/a	Sequential integer
703	15	AN	NPI	National Provider ID		
718	1	Ν	ETHNICITY	Ethnicity Code		1= Hispanic 2= Non Hispanic 0= Unknown
719	7	AN	REASON	Reason for Visit		UB-04 FL 70 Patient Reason DX
726	24	AN	MRN	Medical Record Number		
750	30	AN	IP_ED_DKEY	IP non-ED record DKEY associated with this OP ED record		Unique identifier within each hospital
780	9		PNUM	Unique Patient Identifier		
789	1	N	Readmit Flag	Flags record as a readmission - same patient, same hospital within 30 days		$1 = \text{True} \qquad 0 = \text{False}$
790	100	A	Street Address	Patient street address		

	EVENUE RECORD DESCRIPTION AND FILE LAYOUT: REVCODE Updated 6/16/2016 ecord Name: Revenue File								
			a N = Numeric	b= Blank AN = Alphanumeric		VALID CONTENTS			
Starting Position	Length Chars	Field Type	Field Name	English Description	Not Recorded	Recorded			
1	4	Ν	HOSP	Hospital Number (Inpatient and Ambulatory Surgery)	-	<ul> <li>6950 = Central Vermont Medical Center</li> <li>6952 = Southwest Medical Center</li> <li>6953 = Brattleboro Memorial Hospital</li> <li>6954 = University of Vermont Medical Center</li> <li>6955 = Copley Hospital</li> <li>6956 = North Country Hospital</li> <li>6957 = Gifford Medical Center</li> <li>6958 = Rutland Regional Medical Center</li> <li>6959 = Northwest Medical Center</li> <li>6961 = Northeastern Vermont Regional Hospital</li> <li>6962 = Springfield Hospital</li> <li>6963 = Grace Cottage Hospital</li> <li>6964 = Mt. Ascutney Hospital</li> <li>6967 = Porter Medical Center</li> <li>5188 = Veterans' Affairs Medical Center</li> </ul>			
5	30	AN	DKEY	Discharge Key	þ	Unique identifier within each hospital			
35	8	AN	DDAT	Discharge Date (MMDDYYYY)	0	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999			
43	1	AN	TYPE_O	Observation revenue code is present (0760 or 0762) on any record type	-	$\underline{1 = True \qquad 0 = False}$			
44	1	AN	TYPE_E	Emergency Room revenue code is present (045x) on any record type	-	$\underline{1 = \text{True}}  0 = \text{False}$			
45	1	AN	TYPE_A	Inpatient Procedure, per ICD- 10 Proc Code with first character '0' or ICD-9 code between '003' and '8699'	-	$\underline{1 = \text{True}}  0 = \text{False}$			
46	1	AN	TYPE_AS	Ambulatory Surgery, per Rev Codes (Ambulatory on OP, all surgery on IP) (036x, 037x, 049x)	-	<u>1 = True 0 = False</u>			
47	1	AN	SFLAG	Surgery Flag based on CPT code range Surgery 10021-69990	-	<u>1 = True 0 = False</u>			

48	3	Ν	BTYPE	Bill Type	-	111 = Hospital based, inpatient, final bill
	-			F_		117 = Hospital based, inpatient, Replacement
						121 = Hospital based, inpatient, final bill Part B
						127 = Hospital based, inpatient, final on 1 at B 127 = Hospital based, inpatient Replacement Part B
						131 = Hospital based, outpatient, final bill
						132 = Outpatient Interim - First Claim
						133 = Outpatient Interim - Continuing Claims
						134 = Outpatient Interim - Last Claim
						137 = Hospital based, outpatient Replacement
						141 = Hospital based, laboratory final bill
						147 = Hospital based, laboratory Replacement
						181 = Swing Bed final bill
						187 = Swing Bed Replacement
						721 = Hospital Renal Dialysis Clinic
						727 = Hospital Renal Dialysis Replacement
						831 = Ambulatory
						837 = Ambulatory Replacement
						851 = Critical Access
						857 = Critical Access Replacement
51	4	Ν	REVCODE	Revenue Code		
	10	Ŋ	DEVOUDO		0	
55	10	Ν	REVCHRG	Revenue Charge	0	Number, includes two digit decimal
65	8	AN	REVDATE	Revenue Date	0	MM = 01-12, DD = 01-31, YYYY = 0000 - 9999
				(MMDDYYYY)		
73	6	Ν	REVUNITS	Revenue Units		
70	5		LICDCS			
79	5	AN	HCPCS	HCPCS/CPTCODE/RATE		
84	2	AN	HCPCMOD	HCPC Modifer 1		
			1			
86	2	AN	HCPCMOD	HCPC Modifer 2		
88	2	AN	∠ HCPCMOD	HCPC Modifer 3	+	<u> </u>
			3			
90	2	AN	HCPCMOD	HCPC Modifer 4		
			4			
92	2	AN	HCPCMOD	HCPC Modifer 5	1	
)2	_		5			

94	10	AN	•	Unique record identifier for linking to the revenue file	n/a	Sequential integer
104	6	N	primary_flag	Primary Procedure Identifier		1 = Primary Procedure
110	7	N	RVU_Value	Relative Value Units		RVU values for corresponding HCPCS/CPT Codes

## **REPORTING SCHEDULE**

Data Period	Submitter Type	Submitter Deadline	Final Delivery Date to GMCB
First Quarter	Quarterly reporters		July 15 of Cycle Year
Second Quarter	Quarterly and semi- annual reporters		September 15 of Cycle Year
Third Quarter	Quarterly reporters		December 15 of Cycle Year
Draft Annual Cycle Year	All		March 15 of year following Cycle Year
Final Annual Cycle Year	All		June 15 of year following Cycle Year