

Data Set Documentation

I.	General Description.....	4
II.	Fixed-Width File Layout(s)	6
	Inpatient Discharge	6
	Outpatient Surgery (OPS) & Observation w/ Outpatient Surgery (OBS-OPS).....	7
	Emergency Department (ED) & Observation w/ Emergency Department (OBS-ED)	8
III.	Wipop Relational Data Set	10
	Standard Layout - Data Tables	10
	Standard Layout - Data Support Tables.....	12
	Physician Enhanced Layout – Additional Table	15
	Revenue Enhanced Layout – Additional Table	15
	Border State County Enhanced Layout – Additional Table	16
IV.	Detailed Description of Data Elements.....	17
1.	Age in Years.....	17
2.	Infant Age Groups – Inpatient and Outpatient Surgery data only.....	17
3.	ZIP Code	17
4.	County/State Code	18
5.	Gender	18
6.	Length of Stay – Inpatient data only.....	18
7.	Year/Quarter.....	18
8.	Admission Type – Inpatient data only	18
9.	Admission Source – Inpatient and Emergency data only	19
	Source Codes for Non-Newborn Admissions.....	19
	Source Codes for Newborn Admissions.....	20
10.	Discharge Status – Inpatient and Emergency data only.....	20
11.	Total Charges.....	21
12.	Leave Days – Inpatient data only	22
13.	First Payer Identifier Group	22
14.	First Payer Category Group.....	22
15.	Second Payer Identifier Group	22
16.	Second Payer Category Group	23
17.	Principal Diagnosis Code	23

Data Set Documentation

18.	Other Diagnosis Codes (First through Eighth for fixed-width layout, all codes submitted for relational layout)	23
19.	'E' Code	23
20.	Principal Procedure Code – ICD-9-CM	24
21.	Other Procedure Codes – ICD-9-CM (First through Fifth for fixed-width layout, all codes submitted for relational layout).....	24
22.	Principal Procedure Code – CPT	24
23.	Other Procedure Codes – CPT (First through Fifth for fixed-width layout, all codes submitted for relational layout).....	24
24.	Pre-Procedure Days – Inpatient data only.....	25
26.	Attending Physician Specialty Code – Emergency data only	25
27.	Other (Procedure) Physician Specialty Code – Emergency data only	25
28.	Major Diagnostic Category (MDC) – Inpatient data only	25
29.	Diagnosis Related Group (DRG) – Inpatient data only.....	25
30.	Admitting Diagnosis – Inpatient data only	26
31.	Reason for Visit Diagnoses – Emergency and Observation data only	26
32.	Facility Identification Number	26
33.	Record Number (fixed-width layout only)	26
34.	First Payer Combined Code	26
35.	Second Payer Combined Code	27
36.	Second Other (Procedure) Physician Specialty Code – Emergency data only ...	27
37.	Bilateral Principal Procedure – CPT	27
38.	Bilateral Other Procedure – CPT (First through Fifth for fixed-width layout, all codes submitted for relational layout).....	28
39.	Record ID (relational layout only)	28
40.	Data ID (relational layout only)	28
41.	Start Date (relational layout only)	28
42.	End Date (relational layout only)	28
43.	OPS (relational layout only).....	28
44.	ER (relational layout only)	28
45.	OBS (relational layout only).....	28
46.	All Patient Refined Diagnosis Related Group (APR-DRG) (relational layout only)	28

Data Set Documentation

47.	Severity of Illness (relational layout only)	29
48.	Risk of Mortality (ROM) (relational layout only)	29
V.	Facility Identification Codes.....	30
	Veteran Care Hospitals	30
	Facility Closings and Mergers and New Facilities.....	30
VI.	County Codes.....	32
	Border State County Codes	32
VII.	State Codes.....	37
VIII.	County Assignments for Multi-County ZIP Codes-Wisconsin.....	37
IX.	Specialty Codes – Alpha Order	42
X.	Specialty Codes – Numeric Order	44
XI.	Payer Information Submitted by Facilities	47
XII.	Payer Identifier & Payer Category Group Code Criteria.....	48
XIII.	Payer Combined Code Assignment	49
XIV.	Summary of All Codes – CodeSummary.xls	51
XV.	Type of Bill.....	51

I. General Description

The data contained in the data sets were reported to WHA Information Center pursuant to Chapter 153, Wis. Stats. That reported information contains patient demographic data, admission and discharge data, charge and payer data, and diagnostic and procedure data, among other data. Four types of data were reported:

1. Inpatient Data (INP) were reported by all of Wisconsin's acute care, non-federal hospitals, including General Medical/Surgical, Psychiatric, AODA, Rehabilitation, and State institutions pursuant to the above statutes.
 - Reportable hospital inpatient records were defined as ones with a UB-04 FL 4 "Type of Bill" codes 11x and 12x.
 - A record was submitted for each discharge.
2. Emergency Department (ED) Data were reported by all of Wisconsin's hospitals offering ED services pursuant to the above statutes.
 - Reportable emergency department visit records were selected by discharge date and revenue codes 0450, 0451, 0452, and 0459.
3. Outpatient Surgery Data (OPS) were reported by Wisconsin hospitals, affiliated ambulatory surgery centers, and freestanding ambulatory surgery centers pursuant to the above statutes.
 - Reportable hospital outpatient surgery records are reported by procedure date and outpatient surgery revenue codes that include one of the following: 036x, 0481, 049x, and 0750.
4. Observation Visit Data were reported by Wisconsin hospitals pursuant to the above statutes. There are 3 different data sets available: Observation Visit Data ONLY (OBS), Observation Visit Data with Outpatient Surgery Data (OBS-OPS), and Observation Visit Data with OBS-ED data. OBS data set available in the relational format only.
 - Reportable observation visit data ONLY (OBS) should be selected by the "through" date in the statement covers period (UB Form locator 6B) that include OBS revenue codes 0760 and/or 0762 only (observation only data available in the Relational Data Format)
 - The OBS-OPS should be selected by the "through" date in the statement covers period (UB Form locator 6B) that include OBS revenue codes 0760 and/or 0762 and outpatient Surgery revenue codes that include one of the following: 036x, 0480, 0481, 049x, and 0750.
 - The OBS-ED should be selected by the "through" date in the statement covers period (UB Form locator 6B) that include OBS revenue codes 0760 and/or 0762 and Emergency Department Data that include one of the following ED revenue codes: 0450, 0451, 0452, and 0459.

Definitions of data elements reported to WHA Information Center are based on uniform billing forms, either the Center for Medicare and Medicaid Services (CMS) Form 1500 or Uniform Billing Form 04 (UB-04). Freestanding Ambulatory Surgery Centers should submit a record for each surgical case that occurs within a specific quarter. Each submitted record contained items or aggregations of items from the billing forms.

The submitted data were edited for errors. During the submission process, errors were identified, and facilities were responsible for correcting all invalid records. After successful submission of verified data, a summary profile of each facility's data was provided for facility review and reconciliation with internal records. This sometimes led to further corrections, deletion of duplicate records, or the submission of additional discharge records. The editing process is substantially described in the Patient Data Submission Manual, which also details facilities' reporting requirements. The International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) Manual, the CPT Coding Manual, the HCPCS Level II Coding Manual, and the UB-04 Manual contain some additional descriptions or specifications for particular items.

The data sets consist of either raw data items obtained directly from facilities or computed and derived items calculated from the raw data items or derived from another source. Raw data items that could identify a patient are not included in the data sets. Some elements are regrouped.

CPT codes submitted in ED and AMB files were converted to ICD-9-CM procedure codes using the 2009 Thomson Reuters *Procedure Conversion Files*. Effective with Q1 2007 data, all Outpatient records are required to submit CPT procedure codes (not ICD-9-CM procedure codes).

In the fixed width data sets; when a CPT code does not convert to an ICD-9-CM code, four 'X' characters (XXXX) were placed in the ICD field. There are six (6) CPT code fields (Principal CPT and five Other CPT fields) which contain the CPT codes that are originally submitted on the record. Each quarter, the list of CPT codes that translate to more than one ICD-9-CM code appears as part of the CPT2ICD Conversion Caveats document that accompanies this documentation. When only one CPT code is submitted and converts to two ICD procedure codes on a record, both ICD codes appear on the record on the data file. When more than one CPT code is submitted, and one or more CPT code(s) converts to two ICD codes on a record, only one ICD procedure code (ICD1) appears for each CPT code submitted.

In the relational data sets; when a CPT code does not convert to an ICD-9-CM code, four 'X' characters (XXXX) were placed in the ICD1 field. An unlimited number of CPT code fields (Principal and Additional) contain the CPT codes that are originally submitted on the record, while the ICD1 and ICD2 fields contain codes converted from the Thomson Reuters cross-walk.

The body of the documentation includes a file layout as well as a more detailed description of each data item available on the data file. Other sections contain a list of facility identification numbers, and county and state codes.

NOTE: Definitions of data elements reported to WHA Information Center are based on uniform billing forms, either the Center for Medicare and Medicaid Services (CMS) Form 1450, also known as Uniform Billing Form 92 (UB-92), Uniform Billing Form 04 (UB-04), or CMS Form 1500 (CMS-1500). Beginning with Q1 2010, WHAIC will no longer provide reference to the UB-92. If you would like to obtain a crosswalk of the UB-92 to UB-04, please see: The National Uniform Billing Committee (NUBC) website at www.nubc.org.

Note: WHAIC assumed full responsibility for the collection, analysis and dissemination of health care information from hospitals and ambulatory surgery centers pursuant to s. 153, Stats., on July 1, 2004. Beginning with Q1 2010 data release, WHAIC will no longer provide reference to the BHI material. If you have questions, please contact the Information Center.

II. Fixed-Width File Layout(s)

Inpatient Discharge

Column(s)	Length	Data Element
01-03	03	Age in Years
04	01	Infant Age Groups
05-09	05	ZIP Code
10-11	02	County/State Code
12	01	Gender
13-15	03	Length of Stay
16-18	03	Discharge Year and Quarter
19	01	Admission Type
20	01	Admission Source
21-22	02	Discharge Status
23-34	12.2	Total Charges (explicit decimal)
35-37	03	Leave Days
38	01	First Payer Identifier Group
39	01	First Payer Category Group
40	01	Second Payer Identifier Group
41	01	Second Payer Category Group
42-46	05	Principal Diagnosis Code
47-51	05	First Other Diagnosis Code
52-56	05	Second Other Diagnosis Code
57-61	05	Third Other Diagnosis Code
62-66	05	Fourth Other Diagnosis Code
67-71	05	Fifth Other Diagnosis Code
72-76	05	Sixth Other Diagnosis Code
77-81	05	Seventh Other Diagnosis Code
82-86	05	Eighth Other Diagnosis Code
87-91	05	E Code
92-95	04	Principal Procedure Code (ICD-9-CM Code)
96-99	04	First Other Procedure Code (ICD-9-CM Code)
100-103	04	Second Other Procedure Code (ICD-9-CM Code)
104-107	04	Third Other Procedure Code (ICD-9-CM Code)
108-111	04	Fourth Other Procedure Code (ICD-9-CM Code)
112-115	04	Fifth Other Procedure Code (ICD-9-CM Code)
116-118	03	Pre-Procedure Days
119-120	02	Major Diagnostic Category
121-123	03	Diagnosis Related Group
124-126	03	Hospital or FASC Identification Number
127-131	05	Record Number
132-136	05	Admitting Diagnosis/Reason for Visit
137-139	03	First Payer Combined Code
140-142	03	Second Payer Combined Code

Fixed-Width Layout(s)**Outpatient Surgery (OPS) & Observation w/ Outpatient Surgery (OBS-OPS)**

Column(s)	Length	Data Element
01-03	03	Age in Years
04	01	Infant Age Groups
05-09	05	ZIP Code
10-11	02	County/State Code
12	01	Gender
13-15	03	Surgery Year and Quarter
16	01	Admission Type
17-28	12.2	Total Charges (explicit decimal)
29	01	First Payer Identifier Group
30	01	First Payer Category Group
31	01	Second Payer Identifier Group
32	01	Second Payer Category Group
33-37	05	Principal Diagnosis Code
38-42	05	First Other Diagnosis Code
43-47	05	Second Other Diagnosis Code
58-52	05	Third Other Diagnosis Code
53-57	05	Fourth Other Diagnosis Code
58-62	05	Fifth Other Diagnosis Code
63-67	05	Sixth Other Diagnosis Code
68-72	05	Seventh Other Diagnosis Code
73-77	05	Eighth Other Diagnosis Code
78-82	05	E Code
83-86	04	Principal Procedure Code (ICD-9-CM Code)
87-90	04	First Other Procedure Code (ICD-9-CM Code)
91-94	04	Second Other Procedure Code (ICD-9-CM Code)
95-98	04	Third Other Procedure Code (ICD-9-CM Code)
99-102	04	Fourth Other Procedure Code (ICD-9-CM Code)
103-106	04	Fifth Other Procedure Code (ICD-9-CM Code)
107-111	05	Principal Procedure Code (CPT-4 Code)
112-116	05	First Other Procedure Code (CPT-4 Code)
117-121	05	Second Other Procedure Code (CPT-4 Code)
122-126	05	Third Other Procedure Code (CPT-4 Code)
127-131	05	Fourth Other Procedure Code (CPT-4 Code)
132-136	05	Fifth Other Procedure Code (CPT-4 Code)
137	01	Blank (<i>Previously Reportable Procedure Category</i>)
138	01	Blank (<i>Previously Number of Reportable Procedures</i>)
139-141	03	Hospital or FASC Identification Number
142-146	05	Record Number
147-149	03	First Payer Combined Code
150-152	03	Second Payer Combined Code
153	01	Bilateral Principal Procedure (Yes/No)
154	01	Bilateral First Other Procedure (Yes/No)
155	01	Bilateral Second Other Procedure (Yes/No)
156	01	Bilateral Third Other Procedure (Yes/No)
157	01	Bilateral Fourth Other Procedure (Yes/No)
158	01	Bilateral Fifth Other Procedure (Yes/No)
159-163	05	Admitting Diagnosis/Reason for Visit

Last Updated: 05/26/2011 – added TOB

Fixed-Width Layout(s)

Emergency Department (ED) & Observation w/ Emergency Department (OBS-ED)

Column(s)	Length	Data Element
01-03	03	Age in Years
04-08	05	ZIP Code
09-10	02	County/State Code
11	01	Gender
12-14	03	Discharge Year and Quarter
15	01	Admission Source
16-17	02	Discharge Status
18-29	12.2	Total Charges (explicit decimal)
30	01	First Payer Identifier Group
31	01	First Payer Category Group
32	01	Second Payer Identifier Group
33	01	Second Payer Category Group
34-38	05	Principal Diagnosis Code
39-43	05	First Other Diagnosis Code
44-48	05	Second Other Diagnosis Code
49-53	05	Third Other Diagnosis Code
54-58	05	Fourth Other Diagnosis Code
59-63	05	Fifth Other Diagnosis Code
64-68	05	Sixth Other Diagnosis Code
69-73	05	Seventh Other Diagnosis Code
74-78	05	Eighth Other Diagnosis Code
79-83	05	E Code
84-87	04	Principal Procedure Code (ICD-9-CM Code)
88-91	04	First Other Procedure Code (ICD-9-CM Code)
92-95	04	Second Other Procedure Code (ICD-9-CM Code)
96-99	04	Third Other Procedure Code (ICD-9-CM Code)
100-103	04	Fourth Other Procedure Code (ICD-9-CM Code)
104-107	04	Fifth Other Procedure Code (ICD-9-CM Code)
108-110	03	Hospital or FASC Identification Number
111-115	05	Record Number
116-120	05	Admitting Diagnosis/Reason for Visit
121-123	03	Attending Physician Specialty Code
124-126	03	Other (Procedure) Physician 1 Specialty Code
127-131	05	Principal Procedure Code (CPT-4 Code)
132-136	05	First Other Procedure Code (CPT-4 Code)
137-141	05	Second Other Procedure Code (CPT-4 Code)
142-146	05	Third Other Procedure Code (CPT-4 Code)
147-151	05	Fourth Other Procedure Code (CPT-4 Code)
152-156	05	Fifth Other Procedure Code (CPT-4 Code)
157-159	03	First Payer Combined Code
160-162	03	Second Payer Combined Code
163	01	Bilateral Principal Procedure (Yes/No)
164	01	Bilateral First Other Procedure (Yes/No)
165	01	Bilateral Second Other Procedure (Yes/No)
166	01	Bilateral Third Other Procedure (Yes/No)

Emergency Department (ED) & Observation w/ Emergency Department (OBS-ED)

Column(s)	Length	Data Element
167	01	Bilateral Fourth Other Procedure (Yes/No)
168	01	Bilateral Fifth Other Procedure (Yes/No)
169-171	03	Second Other (Procedure) Physician Specialty Code

III. Wlpop Relational Data Set

Standard Layout - Data Tables

tblPrimary

FIELD	FIELD_DESCRIPTION
RECORD_ID	Unique Record Identifier
FACILITY_ID	Facility ID Number
AGE	Age in Years
NEWBORN	Infant Age Group
ZIP	ZIP Code
COUNTY	County/State Code
SEX	Sex
YYQ	Year & Quarter
LOS	Length of Stay
ATYPE	Admission Type
ASOURCE	Admission Source
ASRCNWBRN	Admission Source – Newborn
DSTATUS	Discharge Status
LDAYS	Leave Days
TC	Total Charges
PAYIDGRP1	First Payer Identifier Group Code
PAYIDCAT1	First Payer Category Group Code
PAYCC1	First Payer Combined Code
PAYIDGRP2	Second Payer Identifier Group Code
PAYIDCAT2	Second Payer Category Group Code
PAYCC2	Second Payer Combined Code
PREDAYS	Pre-Procedure Days
TOB	Type of Bill

tblDataType

FIELD	FIELD_DESCRIPTION
RECORD_ID	Unique Record Identifier
DATA_ID	Data Type Identifier
OPS	Outpatient – Outpatient Surgery Record? Y/N
ER	Outpatient – Emergency Room Record? Y/N
OBS	Outpatient – Observation Record? Y/N
YYQ	Year & Quarter

tblDiagnosis

FIELD	FIELD_DESCRIPTION
RECORD_ID	Unique Record Identifier
DX_ORDER	Diagnosis Order Code
DX_ICD	Diagnosis Code
DX_TYPE	Diagnosis Type Code

tblSpecialty

FIELD	FIELD_DESCRIPTION
RECORD_ID	Unique Record Identifier
ATT_SPEC	Specialty Code of Attending Physician

Last Updated: 05/26/2011 – added TOB

FIELD	FIELD DESCRIPTION
OTH1_SPEC	Specialty Code of First Other (Procedure) Physician
OTH2_SPEC	Specialty Code of Second Other (Procedure) Physician

tblProcedure

FIELD	FIELD DESCRIPTION
RECORD_ID	Unique Record Identifier
PR_ORDER	Procedure Order Code
PR_CPT	Procedure Code – CPT-4
PR_MOD1	Procedure Modifier 1 Code
PR_MOD2	Procedure Modifier 2 Code
PR_MOD3	Procedure Modifier 3 Code Added Q108
PR_MOD4	Procedure Modifier 4 Code Added Q108
PR_ICD1	Procedure Code1 – ICD-9-CM
PR_ICD2	Procedure Code2 – ICD-9-CM
PR_TYPE	Procedure Type

tblRevenue

FIELD	FIELD DESCRIPTION
RECORD_ID	Unique Record Identifier
REV_CTR	Revenue Center Code
REV_TC	Revenue Center Total Charge

tblDRG

FIELD	FIELD DESCRIPTION
RECORD_ID	Unique Record Identifier
MDC	Major Diagnostic Category
DRG	Diagnosis Related Group

tblAPR-DRG – available upon request and have 3M APR-DRG software contract

FIELD	FIELD DESCRIPTION
RECORD_ID	Unique Record Identifier
APRDRG	All Patient Refined Diagnosis Related Group
APRMDC	All Patient Refined Diagnosis Major Diagnostic Category
SEVERITY	Severity of Illness Code
ROM	Risk of Mortality Code

tblMSDRG **Added Q407**

FIELD	FIELD DESCRIPTION
RECORD_ID	Unique Record Identifier
MDC	Medicare Severity Diagnosis Related Group Major Diagnostic Category
DRG	Medicare Severity Diagnosis Related Group

Standard Layout - Data Support Tables

tlkNewborn (Infant Age Groups)

FIELD	FIELD DESCRIPTION
NEWBORN	Infant Age Group
NEWBORN_DESC	Infant Age Group Description

tlkCounty

FIELD	FIELD DESCRIPTION
COUNTY	County/State Code
COUNTY_DESC	County/State Code Description

tlkAdmitType

FIELD	FIELD DESCRIPTION
ATYPE	Admission Type
ATYPE_DESC	Admission Type Description
START_DATE	Start Date of Admission Type
END_DATE	End Date of Admission Type

tlkAdmitSource

FIELD	FIELD DESCRIPTION
ASOURCE	Admission Source
ASOURCE_DESC	Admission Source Description
START_DATE	Start Date of Admission Source
END_DATE	End Date of Admission Source

tlkAdmitSourceNewborn

FIELD	FIELD DESCRIPTION
ASRCNWBN	Newborn Admission Source
ASRCNWBRN_DESC	Newborn Admission Source Description
START_DATE	Start Date of Admission Source
END_DATE	End Date of Admission Source

tlkDischargeStatus

FIELD	FIELD DESCRIPTION
DSTATUS	Discharge Status
DSTATUS_DESC	Discharge Status Description
START_DATE	Start Date of Discharge Status
END_DATE	End Date of Discharge Status

tlkPayIdentifier

FIELD	FIELD DESCRIPTION
PAYID	Payer Identifier Group
PAYID_DESC	Payer Identifier Group Description

tlkPayCategory

FIELD	FIELD DESCRIPTION
PAYCAT	Payer Category Group
PAYCAT_DESC	Payer Category Group Description

Standard Layout - Data Support Tables (continued)

tlkPayCombinedCode

FIELD	FIELD_DESCRIPTION
PAYCC	Payer Combined Code
PAYCC_DESC	Payer Combined Code Description
START_DATE	Start Date of Payer Combined Code
END_DATE	End Date of Payer Combined Code

tlkDataType

FIELD	FIELD_DESCRIPTION
DATA_ID	Data Type Identifier
DATA_DESC	Data Type Description

tlkDxType **Added Q407**

FIELD	FIELD_DESCRIPTION
DX_TYPE	Diagnosis Type
DX_TYPE_DESC	Diagnosis Type Description

tlkDRG

FIELD	FIELD_DESCRIPTION
DRG	Diagnosis Related Group
DRG_DESC	Diagnosis Related Group Description
START_DATE	Start Date of Diagnosis Related Group
END_DATE	End Date of Diagnosis Related Group

tlkFacility

FIELD	FIELD_DESCRIPTION
FACILITY_ID	Facility Identifier
FACILITY_NAME	Facility Name
FACILITY_CITY	Facility City
OPENED	Open Date of Facility
CLOSED	Close Date of Facility
COMBINE	Combine Date of Facility
COMBINE_TO	Facility Number Combined Into

tlkMDC

FIELD	FIELD_DESCRIPTION
MDC	Major Diagnostic Category
MDC_DESC	Major Diagnostic Category Description
START_DATE	Start Date of Major Diagnostic Category
END_DATE	End Date of Major Diagnostic Category

tlkRevenueCenter

FIELD	FIELD_DESCRIPTION
REV_CTR	Revenue Center Code
REV_CTR_DESC	Revenue Center Code Description
START_DATE	Start Date of Revenue Center
END_DATE	End Date of Revenue Center

Standard Layout - Data Support Tables (continued)**tlkMSDRG Added Q4 07**

FIELD	FIELD DESCRIPTION
DRG	MS DRG Value (Medicare Severity Diagnostic Related Group)
DRG_DESC	MS DRG Description
START_DATE	Start Date of MSDRG
END_DATE	End Date of MSDRG

tlkPrType Added Q4 07

FIELD	FIELD DESCRIPTION
PR_TYPE	Procedure Type
PR_TYPE_DESC	Procedure Type Description

tlkSpecialty

FIELD	FIELD DESCRIPTION
SPECIALTY	Specialty Code
SPECIALTY_DESC	Specialty Code Description
START_DATE	Start Date of Specialty Code
END_DATE	End Date of Specialty Code

tlkAPR-DRG – available with APR-DRG data only

FIELD	FIELD DESCRIPTION
APRDRG	All Patient Refined Diagnosis Related Group
APRDRG_DESC	All Patient Refined Diagnosis Related Group Description
START_DATE	Start Date of All Patient Refined Diagnosis Related Group
END_DATE	End Date of All Patient Refined Diagnosis Related Group

tlkROM – available with APR-DRG data only

FIELD	FIELD DESCRIPTION
ROM	Risk of Mortality Code
ROM_DESC	Risk of Mortality Code Description

tlkSeverity – available with APR-DRG data only

FIELD	FIELD DESCRIPTION
SEVERITY	Severity of Illness Code
SEVERITY_DESC	Severity of Illness Code Description

Physician Enhanced Layout – Additional Table

tblPhysician – Data Table

FIELD	FIELD_DESCRIPTION
RECORD_ID	Unique Record Identifier
ATT_WI_LICENSE	Wisconsin License of Attending Physician
ATT_UPIN	UPIN of Physician
ATT_NPI	NPI of Physician
ATT_SPEC	Specialty Code of Attending Physician
ATT_NAME	Name of Physician
OTH1_WI_LICENSE	Wisconsin License of First Other (Procedure) Physician
OTH1_UPIN	UPIN of Physician
OTH1_NPI	NPI of Physician
OTH1_SPEC	Specialty Code of First Other (Procedure) Physician
OTH1_NAME	Name of Physician
OTH2_WI_LICENSE	Wisconsin License of Second Other (Procedure) Physician
OTH2_UPIN	UPIN of Physician
OTH2_NPI	NPI of Physician
OTH2_SPEC	Specialty Code of Second Other (Procedure) Physician
OTH2_NAME	Name of Physician

Revenue Enhanced Layout – Additional Table

tblRevenueDetail – Data Table

FIELD	FIELD_DESCRIPTION
RECORD_ID	Unique Record Identifier
REV_CODE	Revenue Line Item Code
HCPCS_RATE	HCPCS / Rate Code
HCPCS_MOD1	HCPCS Modifier 1 Code
HCPCS_MOD2	HCPCS Modifier 2 Code
HCPCS_MOD3	HCPCS Modifier 3 Code Added Q108
HCPCS_MOD4	HCPCS Modifier 4 Code Added Q108
UNIT_SERV	Units of Service
REV_CHG	Revenue Line Item Charge

tblRevenueCode – Data Support Table

FIELD	FIELD_DESCRIPTION
REV_ID	Revenue Line Item Code
REV_DESC	Revenue Line Item Code Description
START_DATE	Start Date of Revenue Code
END_DATE	End Date of Revenue Code

Border State County Enhanced Layout – Additional Table

tblBorder – **Data Table (Added Q210)** – This information identifies the county of all non-Wisconsin residents treated in Wisconsin facilities.

FIELD	FIELD_DESCRIPTION
RECORD_ID	Unique Record Identifier
BORDER_COUNTY	Border States County Name
COUNTY_NUM	County/State Code
STATE_ID	State Code
STATE_NAME	State Name

tlkBorder (**Added Q210**)

FIELD	FIELD_DESCRIPTION
BORDER_COUNTY	Border States County Code
COUNTY_NAME	Border States County Name
COUNTY_NUM	County/State Code
STATE_ID	State Code
STATE	State Name

IV. Detailed Description of Data Elements

1. Age in Years

Age in years for each patient is calculated as the number of days from the Date of Birth (UB-04 FL 10 or CMS-1500 FL 3) to:

- 1) the Admission Date (UB-04 FL12) for Inpatient and Emergency Department data,
- 2) the Date of Principal Procedure (UB-04 FL 74 or CMS-1500 FL 24A-1) for Outpatient Surgery Center data, or
- 3) The "from" date in the statement covers period (UB-04 FL 6A) for Observation Visit data

The number of days is then divided by 365.25 and truncated to a whole number.

To maintain patient confidentiality, ages greater than 96 years were recoded to 96.

2. Infant Age Groups – Inpatient and Outpatient Surgery data only

Infants' ages were coded into one of three groups based on days old at admission or date of procedure. Age in days was calculated as the number of days from the Date of Birth (UB-04 FL 10 or CMS-1500 FL 3) to:

- 1) the Admission Date (UB-04 FL 12) for Inpatient data, or
- 2) the Date of Principal Procedure (UB-04 FL 74 or CMS-1500 FL 24A) for Outpatient Surgery Center data and Observation with OPS data.

Code	Age Group
1	7 days or less
2	8 days through 28 days
3	29 days through 365 days
0	Over 1 year

- 3) the "from" date in the statement covers period (UB-04 FL 6A) for Observation Visit data

Infant Age Group codes and descriptions can be found in the relational data product data support table **tlkNewborn**.

3. ZIP Code

Indicates the USPS ZIP code of the patient's residence, derived from the Patient's ZIP code (UB-04 FL1 or CMS-1500 FL 5).

Values are suppressed to protect patient confidentiality as follows:

A blank is entered if:

1. The ZIP code has a residential population less than 1,000 per record type, or
2. The ZIP code appears on fewer than 30 discharges (Inpatient, Emergency Department, and Observation Visit data) or fewer than 30 outpatient surgeries in the current quarter.

Residences outside the United States are assigned the ZIP code '00000'. Missing (as when no permanent residence is available or the patient is homeless) ZIP codes are empty (NULL).

4. **County/State Code**

County or state of residence of patients derived from their USPS ZIP code.

- A. For Wisconsin residents, this is their county of residence. It is derived from their USPS ZIP code. Where a ZIP code straddles county boundaries, the patients from that ZIP code are assigned to the county containing the majority of the ZIP code's residents. Please see [Section VII](#).
- B. For non-Wisconsin residents, ZIP code is used to identify and code residents of bordering states: Illinois, Iowa, Michigan, and Minnesota. Patients with other ZIP codes, including the non-U.S. resident ZIP code of '00000', were assigned county code '99'. Patients with missing ZIP codes were assigned county code '98'.

See [Section V](#) for the full list of county codes. See [Section VI](#) for the full list of state codes. County and State codes and descriptions can be found in the relational data product data support table **tlkCounty**.

5. **Gender**

Indicates the patient's gender (UB-04 FL 11 or CMS-1500 FL 3).

Code	Gender
1	Male
2	Female
3	Unknown

6. **Length of Stay – Inpatient data only**

Indicates number of days of inpatient stay. This is calculated by determining the number of days between the Admission Date (UB-04 FL 12) and the Discharge Date (UB-04 FL 6) and subtracting the number of Leave Days (UB-04 FLs 42 and 46); total units of service for all 18X revenue codes). When no value was reported for Leave Days, it was assumed to be zero.

Length of Stay is zero when Discharge and Admission Dates are the same. Lengths of stay longer than 999 days were set to 999 days.

7. **Year/Quarter**

Indicates year and quarter (e.g., "041" for first quarter of 2004) of discharge, surgery, or "from" date in the statement covers period (UB Form locator 6) specified by data type. For Inpatient and, Emergency Department data, Discharge Year/Quarter is provided. For Outpatient Surgery Center data, Procedure Year/Quarter is provided. For Observation Visit data, "from" date in statement period covers date is provided.

8. **Admission Type – Inpatient data only**

Indicates priority code of the admission (UB-04 FL 14). Admission Type codes and descriptions can be found in the relational data product data support table **tlkAdmitType**.

Code	Priority	Definition
1	Emergency	The patient required immediate medical intervention as a result of severe, life threatening or potentially disabling conditions. Generally the patient is admitted through the emergency room
2	Urgent	The patient required immediate attention for the care and treatment of a physical or mental disorder. Generally the patient was admitted to the first available and suitable accommodation

Code	Priority	Definition
3	Elective	An admission that could be delayed without substantial risk to the health of the individual. This means the patient's condition permitted adequate time to schedule the availability of a suitable accommodation
4	Newborn	A baby's first admission to this facility. Use of this code requires use of special Source of Admission Codes - see Element No. 9 (for data purposes, a baby born in, or en route to, the hospital is considered a newborn)
5	Trauma Center	Visit to a trauma center/hospital as licensed or designated by the state or local government authority authorized to do so, or as verified by the American College of Surgeons and involving trauma activation

9. Admission Source – Inpatient and Emergency data only

Indicates the source of the admission (UB-04 FL 15). The meaning of this code is dependent on the Type of Admission that was coded. Emergency, Urgent, Elective or Trauma Center (Non-Newborn) admission types have one set of Admission Source codes; the Newborn admission type has another set. Admission Source codes and descriptions can be found in the relational data product data support table **tlkAdmitSource**.

Source Codes for Non-Newborn Admissions

Code	Source	Definition
1	Non-healthcare point of origin	The patient was admitted to this facility. For outpatients, the patient presented to this facility for outpatient services. Updated language 7/1/10.
2	Clinic or Physician office	The patient was admitted to this facility. For outpatients, the patient presented to this facility for outpatient services. Updated language 7/1/10
3	Reserved for NUBC	
4	Transfer from a Hospital	The patient was admitted as a transfer from an acute care facility where he or she was an inpatient. For outpatients, a physician of another acute care facility referred the patient to this facility for outpatient or referenced diagnostic services
5	Transfer from a Skilled Nursing Facility	The patient was admitted from a skilled nursing facility where he or she was an inpatient. For outpatients, the patient was referred to this facility for outpatient or referenced diagnostic services by the skilled nursing facility where he or she is an inpatient
6	Transfer from another Health Care Facility	The patient was admitted as a transfer from a health care facility other than an acute care facility or skilled nursing facility. For outpatients, the patient was referred to this facility for outpatient or referenced diagnostic services by another health care facility where he or she is an inpatient
7	Emergency Room	The patient was admitted upon recommendation of an emergency room physician. For outpatients, the patient received services in this facility's emergency room. Discontinued: 7/1/10
8	Court/Law Enforcement	The patient was admitted upon direction of a court of law, upon the request of a law enforcement agency representative, or referral from a 51.42/51.437 or 46.23 county board. For outpatients, the patient was referred to this facility upon the

Code	Source	Definition
		direction of a court of law, or upon the request of a law enforcement agency representative
9	Information not Available	This code is invalid for Medicare outpatient services
A	Reserved for NUBC	
B	Reserved for NUBC	
C	Reserved for NUBC	
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	The patient was admitted to this facility as a transfer from a hospital inpatient within this facility resulting in a separate claim to the payer. The admission source for the psych exempt unit record would be 'D'.
E	Transfer from Ambulatory Surgery Center	Patient was admitted to this facility as a transfer from an ambulatory surgery center.
F	Transfer from Hospice and is under a Hospice plan of care or enrolled in a hospice program	Patient was admitted to this facility as a transfer from a hospice.

Source Codes for Newborn Admissions

Newborn Admission Source codes and descriptions can be found in the relational data product data support table **tlkAdmitSourceNewborn**.

Code	Source	Definition
1	Reserved for NUBC	
2	Reserved for NUBC	
3	Reserved for NUBC	
4	Reserved for NUBC	
5	Born Inside this Hospital	A baby born inside this hospital.
6	Born Outside of this Hospital.	A baby born outside of this hospital.
9	Reserved for NUBC	

10. Discharge Status – Inpatient and Emergency data only

Indicates arrangement or event ending a patient's stay in the hospital or emergency room (UB-04 FL 17). Discharge Status codes and descriptions can be found in the relational data product data support table **tlkDischargeStatus**.

Code	Status
01	Discharged to home or self care (routine discharge)

Code	Status
02	Discharged/transferred to another short-term general hospital for inpatient care
03	Discharged/transferred to a skilled nursing facility (SNF) with Medicare Certification in anticipation of covered skilled care.
04	Discharged/transferred to a facility that provides Custodial or Supportive care (i.e. an intermediate care facility (ICF))
05	Discharged/transferred to designated Cancer Center or Children's Hospital
06	Discharged/transferred to home under care of organized home health service organization in anticipation of covered skilled care
07	Left against medical advice or discontinued care
08	Reserved for NUBC
09	Admitted as an inpatient to this hospital (used on Medicare outpatient claims only for services that begin greater than three days prior to an admission)
20	Expired
21	Discharges or Transfers to Court/Law Enforcement Q110
40-42	Expired Hospice – Removed Code options from data sets Q310
43	Discharged/transferred to a federal health care facility
50	Discharged to a Hospice-home
51	Discharged to Hospice-medical facility
61	Discharged/transferred to Medicare approved swing bed
62	Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital.
63	Discharged/transferred to a Medicare certified long-term care hospital
64	Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare
65	Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital
66	Discharged/transferred to a Critical Access Hospital. CMS approved for use for Medicare patients.
70	Discharged/transferred to another type of healthcare institution not defined elsewhere in this code list.

11. Total Charges

All data are provided in explicit decimal format, i.e., xxxxxxxxxx.xx. Inpatient, Emergency Department data and Observation data was derived from UB-04 Field 47. Outpatient Surgery Center data was derived from, UB-04 FL 47 or CMS-1500 FL 28.

For Inpatient data, this field indicates total facility charges for the entire length of stay. All of the charges should be either:

- 1) reported from admission through discharge; or
- 2) reported as accumulated across all of the interim bills for a stay

For Emergency Department data (not ED-INP, ED-OPS, or OBS-ED), this field indicates total facility charges for the emergency department visit only. Charges should be reported from admission through discharge from the emergency department. Charges in the ED-INP, ED-OPS, or OBS-ED may represent ED and inpatient, ED and outpatient surgery, or Observation Visit data with ED charges combined.

For Outpatient Surgery Center data (not OPS-INP or OBS-OPS), this indicates total facility charges for the outpatient surgery procedure. Charges in the OPS-INP or OBS-OPS files may

represent outpatient surgery and inpatient or observation care charges combined.

12. **Leave Days – Inpatient data only**

The total number of days a room was held for a patient while the patient was away from the facility. Leave days consist of the total units of service for all 018X revenue codes. These are the leave days for the entire length of stay. The 018X units of service are from the 018X units of service from an "Admit Through Discharge Claim". When no leave days were reported, the field is blank.

13. **First Payer Identifier Group**

Identifies expected primary payer. Developed from UB-04 FL 50(a) or CMS-1500 FL 1 – primary payer identifier and category. First Payer Identifier Group codes and descriptions can be found in the relational data product data support table **tlkPayIdentifier**.

Code	Description
1	Medicare
2	Medical Assistance/BadgerCare
3	Other Government (51.42/51.437/46.23 Board, CHAMPUS/CHAMPVA/TRICARE, General Relief, WisconCare, other government)
4	Private Insurance (includes self-funded plans and workers' compensation)
5	Self Pay
6	Other or unknown

When submitting data, facilities have a choice of assigning an 'Other' code and an 'Unknown' code to both Primary and Secondary payer information. WHA Information Center has assigned both identified 'Other' and 'Unknown' payers to Payer Identifier Group 6.

14. **First Payer Category Group**

Distinguishes between fee-for-service payers and alternative insurance plans such as HMOs. The payer category group is based on expected primary payer for the stay. Developed from, UB-04 FL 50(a) or CMS-1500 FL 1 – primary payer identifier and category. First Payer Category Group codes and descriptions can be found in the relational data product data support table **tlkPayCategory**.

Code	Description
1	Fee-for-service, non-HMO Medicare or non-HMO Medicaid
2	Alternative Health Care Insurance Plans (includes HMO, PPO)
3	CHAMPUS/CHAMPVA/TRICARE
9	Unable to determine (payer identifier known but category not known)

15. **Second Payer Identifier Group**

Identifies expected secondary payer. Developed from UB-04 FL 50(b) or CMS-1500 FL 1 – secondary payer identifier and category.

For codes and descriptions see [\(13\) First Payer Identifier Group](#). WHA Information Center does not assign a payer identifier or category group when a secondary payer is not reported. Second Payer Identifier Group codes and descriptions can be found in the relational data product data support table **tlkPayIdentifier**.

When submitting data, facilities have a choice of assigning an 'Other' code and an 'Unknown' code to both Primary and Secondary payer information. WHA Information Center has assigned both identified 'Other' and 'Unknown' payers to Payer Identifier Group 6.

16. **Second Payer Category Group**

Distinguishes between fee-for-service payers and alternative insurance plans such as HMOs. The payer category group is based on expected secondary payer. Developed from UB-04 FL 50 (b) or CMS-1500 FL 1 – secondary payer identifier and category.

For codes and description(s) see [\(14\) First Payer Category Group](#). Second Payer Category Group codes and descriptions can be found in the relational data product data support table **tlkPayCategory**. WHA Information Center does not assign a category group when a secondary payer is not reported.

17. **Principal Diagnosis Code**

The condition established, after study, to be chiefly responsible for occasioning the admission of the patient to the hospital for care reported from, UB-04 FL 67 or CMS-1500 FL 21(1) - coded according to the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM). Edit checks required fully specified codes, and age- and gender- consistent codes. Diagnosis codes specific to spontaneous, legally induced, illegally induced, or failed attempted termination of pregnancy were changed to unspecific termination of pregnancy codes to meet statutory requirements. The principal diagnosis code in the relational data product can be located in the data table **tblDiagnosis**. To identify the code, dx_order = 'P' for principal.

18. **Other Diagnosis Codes (First through Eighth for fixed-width layout, all codes submitted for relational layout)**

Other diagnoses were to be reported if the diagnoses contributed to substantiation of the length of stay, substantiation of total charges, or accurate classification of the DRG. Unlimited diagnosis codes were reported from each facility. Edit checks required fully specified codes, and age- and gender-consistent codes. Diagnosis codes specific to spontaneous, legally induced, illegally induced, or failed attempted termination of pregnancy were changed to unspecific termination of pregnancy codes to meet statutory requirements. Up to 8 'other' diagnosis codes are provided in the fixed-width data set. All submitted 'other' diagnosis codes are provided in the relational data product data table **tblDiagnosis**. The dx_type field denotes what type of diagnosis code was submitted by the facility, while the dx_order field denotes in which order the diagnoses were submitted by the facility. When multiple types of diagnoses were submitted, the first submitted diagnosis code has a '1' in the dx_order field, the second has a '2' in the dx_order field, and so forth.

DX_Type field values	DX_Type Descriptions
A	Admitting Diagnosis
E	External Cause of Injury Diagnosis
R	Reason for Visit Diagnosis
P	Principal Diagnosis
S	Additional (Other) Diagnosis

19. **'E' Code**

'E' code is a requirement if an injury diagnosis code in the range 800-995.89 (except codes 995.1, 995.2, 995.3, 995.60-995.69, and 995.7) is reported beginning with April 1, 1994, discharges reported from, UB-04 FL 72 or CMS-1500 FL 21. An 'E' Code is accepted when used appropriately with codes outside the injury range. Up to twelve E-Codes are now allowed on the Primary record, and can be found in their entirety in the relational data product data table **tblDiagnosis**. To identify the code, dx_type = 'E' for 'E' Code, dx_order = '1'. Additional 'E'

Codes submitted by a facility may also be found in the relational data product data table **tblDiagnosis**, with the dx_order attached according to the facility's submission order of the additional 'E' Code.

20. Principal Procedure Code – ICD-9-CM

Identifies the ICD-9-CM code for the patient's Principal Procedure, if any (UB-04 FL 74 for inpatient records). The Principal Procedure is one that was performed for definitive treatment rather than one performed for diagnostic or exploratory purposes, or which was necessary to take care of a complication. The Principal Procedure is usually that procedure most related to the Principal Diagnosis. If the procedure code originally submitted was a CPT code, and it did not get translated during the conversion process, the field is filled with four 'X' characters (XXXX). Procedure codes that explicitly referenced induced termination of pregnancy were modified to eliminate distinctions between induced and spontaneous termination, as required by statute. WHA Information Center does not convert codes in this range since they are not codes that are specific to induced termination of pregnancy. The principal procedure code in the relational data product can be located in the data table **tblProcedure**, in the pr_icd field. To identify the code, pr_order = 'P' for principal.

21. Other Procedure Codes – ICD-9-CM (First through Fifth for fixed-width layout, all codes submitted for relational layout)

Identifies the ICD-9-CM codes for unlimited additional other procedures. These are additional procedures performed during the principal operative episode or during the length of stay that may include diagnostic or exploratory procedures. Procedures that impact accurate DRG categorization were required (UB-04 FL 74 for inpatient records). If the procedure code originally submitted was a CPT code, and it did not get translated during the conversion process, the field is filled with four 'X' characters (XXXX). Procedure codes that explicitly referenced induced termination of pregnancy were modified to eliminate distinctions between induced and spontaneous termination, as required by statute. WHA Information Center does not convert codes in this range since they are not codes that are specific to induced termination of pregnancy. Up to 5 'other' procedure codes are provided in the fixed-width data set. All submitted 'other' procedure codes are provided in the relational data product data table **tblProcedure**. The pr_order field denotes in which order the procedures were submitted. The first additional or other procedure code has a '1' in the pr_order field, the second has a '2' in the pr_order field, and so forth.

22. Principal Procedure Code – CPT

Identifies the CPT code for the patient's Principal Procedure, if CPT code was submitted. The Principal Procedure is one that was performed for definitive treatment rather than one performed for diagnostic or exploratory purposes, or which was necessary to take care of a complication. The Principal Procedure is usually that procedure most related to the Principal Diagnosis. Procedure codes that explicitly referenced induced termination of pregnancy were modified to eliminate distinctions between induced and spontaneous termination, as required by statute. The principal procedure code in the relational data product is located in the data table **tblProcedure**, in the pr_cpt field. To identify the code, pr_order = 'P' for principal.

23. Other Procedure Codes – CPT (First through Fifth for fixed-width layout, all codes submitted for relational layout)

Identifies the CPT codes for additional other procedures, if CPT codes were submitted. These are additional procedures performed during the principal operative episode or during the length of stay that may include diagnostic or exploratory procedures. Procedures that impact accurate

DRG categorization were required (UB-04 FL 44 or CMS-1500 FL 24D). Procedure codes that explicitly referenced induced termination of pregnancy were modified to eliminate distinctions between induced and spontaneous termination, as required by statute. Up to 5 'other' procedure codes are provided in the fixed-width data set. All submitted 'other' procedure codes are located in the relational data product data table **tblProcedure**. The pr_order field denotes in which order the procedures were submitted. The first additional or other procedure code has a '1' in the pr_order field, the second has a '2' in the pr_order field, and so forth.

24. Pre-Procedure Days – Inpatient data only

The number of days between admission and the date of the principal procedure; calculated by subtracting the Admission Date from the Principal Procedure Date. Pre-procedure days exceeding 999 days were set to 999. The WHA Information Center enters a blank in this field when there are no pre-procedure days. When the procedure date is prior to the date of admission a negative value (i.e., -1) is entered in this field. This occurs when a procedure is performed in an outpatient surgery area or emergency department and the patient is subsequently admitted.

25. Type of Bill (TOB) Relational Only

A code indicating the specific type of bill (e.g. hospital inpatient, outpatient, replacement, voids, etc.). The first digit is a leading zero, the second digit is type of facility, the third digit is bill classification and the fourth digit is frequency definition. An example is 0111 – meaning Hospital Inpatient (including Medicare Part A) claim.

- 0 - leading zero
- 1 – Hospital
- 1 – Inpatient
- 1 – Admit Through Discharge Claim

26. Attending Physician Specialty Code – Emergency data only

The code assigned by the Wisconsin Department of Regulation and Licensing representing the attending physician's primary specialty. A description of the Physician Specialty codes is listed in [Section VIII](#) in alphabetical order, and numeric order in [Section IX](#). Specialty codes and descriptions can be found in the relational data product data support table **tkSpecialty**.

27. Other (Procedure) Physician Specialty Code – Emergency data only

The code assigned by the Wisconsin Department of Regulation and Licensing representing the other physician's primary specialty. A description of the Physician Specialty codes is listed in [Section VIII](#) in alphabetical order, and numeric order in [Section IX](#). Specialty codes and descriptions can be found in the relational data product data support table **tkSpecialty**.

28. Major Diagnostic Category (MDC) – Inpatient data only

Indicates Major Diagnostic Category, as computed by the DRG grouper program. As of Q1 10 WHA Information Center uses the DRG grouper marketed by Ingenix. In the relational data product, this information is contained within data table **tblDRG**. MDC codes and descriptions can be found in the relational data product data support table **tkMDC**.

29. Diagnosis Related Group (DRG) – Inpatient data only

Indicates Diagnosis Related Group, as computed by the DRG grouper program. As of Q1 10 WHA Information Center uses the DRG grouper marketed by Ingenix. In the relational data

product, this information is contained within data table **tblDRG**. MDC codes and descriptions can be found in the relational data product data support table **tlkDRG**.

30. Admitting Diagnosis – Inpatient data only

The ICD-9-CM Diagnosis Code provided at the time of admission as stated by the physician. Edit checks required fully specified codes, and age- and gender-consistent codes. Diagnosis codes specific to spontaneous, legally induced, illegally induced, or failed attempted termination of pregnancy were changed to unspecific termination of pregnancy codes to meet statutory requirements. The admitting diagnosis code in the relational data product can be located in the data table **tblDiagnosis**. To identify the code, dx_type = 'A' for admitting.

31. Reason for Visit Diagnoses – Emergency and Observation data only

The ICD-9-CM Diagnosis Code provided as the reason for visit (up to three diagnoses) as stated by the physician. Edit checks required fully specified codes, and age- and gender-consistent codes. Diagnosis codes specific to spontaneous, legally induced, illegally induced, or failed attempted termination of pregnancy were changed to unspecific termination of pregnancy codes to meet statutory requirements. The first submitted reason for visit diagnosis code in the fixed width data product can be found in the **Admitting Diagnosis/Reason for Visit** field. The reason for visit codes in the relational data product can be located in the data table **tblDiagnosis**. To identify the code, dx_type = 'R' for reason for visit, and dx_order identifies the order in which the diagnosis data were submitted.

32. Facility Identification Number

A three-digit identification number assigned to each reporting unit. A list of Facility Identification Numbers and their corresponding facilities is presented in [Section IV](#). Facility openings, closings, and mergers, in addition to facility demographic information can be found in the relational data product data support table **tlkFacility**.

33. Record Number (fixed-width layout only)

A five-digit number that, when used in conjunction with "Facility Identification Number" and "Discharge Year/Quarter" or "Surgery Year/Quarter", uniquely identifies a record in WHA Information Center's permanent data base. This allows records to be linked so that data items such as physician license number/NPI can be added at a later date. In the relational data product, this field is not provided. A unique identifier is provided as a Generated Globally Unique ID, or GUID.

34. First Payer Combined Code

Identifies expected primary payer. Developed from UB-04 FL 50(a) or CMS-1500 FL 1 – primary payer identifier and category. First Payer Combined Codes and descriptions can be found in the relational data product data support table **tlkPayCombinedCode**.

tlkPayCombinedCode

Code	Description
11	Medicare, Fee for Service
12	Medicare, HMO/PPO
14	Medicare, Unknown Type
21	Medicaid, Fee for Service
22	Medicaid, HMO/PPO
24	Medicaid, Unknown Type

Code	Description
25	Medicaid, Other State
33	CHAMPUS/CHAMPVA/TRICARE
41	WPS/Blue Cross/Workers Comp, Fee for Service
42	WPS/Blue Cross/Workers Comp, HMO/PPO
44	WPS/Blue Cross/Workers Comp, Unknown Type
61	BadgerCare, Fee for Service
62	BadgerCare, HMO/PPO
64	BadgerCare, Unknown Type
65	BadgerCare Expansion, Fee for Service (2010)
66	BadgerCare Expansion, HMO/PPO (2010)
68	BadgerCare Expansion, Unknown Type (2010)
71	Other Commercial or Private Insurance, Fee for Service
72	Other Commercial or Private Insurance, HMO/PPO
74	Other Commercial or Private Insurance, Unknown Type
81	Employer Self-Funded, Fee for Service
82	Employer Self-Funded, HMO/PPO
84	Employer Self-Funded, Unknown
91	Other Organization Self-Funded, Fee for Service
92	Other Organization Self-Funded, HMO/PPO
94	Other Organization Self-Funded, Unknown Type
101	Other Government, Fee for Service
102	Other Government; GAMP
111	HIRSP, Fee for Service
121	Self Pay, Fee for Service
122	Research Grant, Subsidized
131	Other or Unknown, Fee for Service
134	Other or Unknown, Unknown Type
NULL	Missing – Data Not Submitted – Second Payer only

35. **Second Payer Combined Code**

Identifies expected secondary payer. Developed from UB-04 FL 50(b) or CMS-1500 FL 1 – secondary payer identifier and category.

For codes and descriptions see [\(31\) First Payer Combined Code](#). Second Payer Combined Code codes and descriptions can be found in the relational data product data support table **tlkPayCombinedCode**.

36. **Second Other (Procedure) Physician Specialty Code – Emergency data only**

The code assigned by the Wisconsin Department of Regulation and Licensing representing the second other (procedure) physician's primary specialty. A description of the Physician Specialty codes is listed in [Section VIII](#) in alphabetical order, and numeric order in [Section IX](#). Specialty codes and descriptions can be found in the relational data product data support table **tlkSpecialty**.

37. **Bilateral Principal Procedure – CPT**

For CPT code submissions only, identifies bilateral principal procedure based upon submission

of modifier '50' on outpatient surgery or emergency department records. If CPT code submitted has bilateral procedure modifier, then field equals 'Y', otherwise field equals 'N'. In the relational data product, actual modifier information (up to four modifiers per CPT code) submitted by facilities is included for all procedures submitted. For the principal procedure, this information can be found in relational data product data table **tblProcedure**. In **tblProcedure**, principal procedures are indicated by a 'P' in the pr_order field.

38. Bilateral Other Procedure – CPT (First through Fifth for fixed-width layout, all codes submitted for relational layout)

For CPT code submissions only, identifies bilateral principal procedure based upon submission of modifier '50' on outpatient surgery or emergency department records. If CPT code submitted has bilateral procedure modifier, then field equals 'Y', otherwise field equals 'N'. In the relational data product, actual modifier information (up to four modifiers per CPT code) submitted by facilities is included for all procedures submitted. For additional procedures, this information can be found in relational data product data table **tblProcedure**. In **tblProcedure**, the order of the other procedures submitted by a facility is contained within the pr_order field.

39. Record ID (relational layout only)

Unique record identifier for linking individual records across relational database tables provided as a Generated Globally Unique ID, or GUID.

40. Data ID (relational layout only)

Unique data type identifier for identifying records that cross data types. For example, a record of a patient who presents at the emergency department and is admitted as an inpatient would have a record in **tblDatatype** with a data_id of 0 (Inpatient) with 'Y' in the ER field in **tblDataType**. Data Type codes and descriptions can be found in the relational data product data support table **tblkDataType**.

41. Start Date (relational layout only)

Date identified code was effective.

42. End Date (relational layout only)

Date identified code was no longer effective (delete date).

43. OPS (relational layout only)

Record flag that identifies an Outpatient Surgery Revenue Code was submitted on record, if data type identifier does not signify Outpatient Surgery data type.

44. ER (relational layout only)

Record flag that identifies an Emergency Room Revenue Code was submitted on record, if data type identifier does not signify Emergency Room data type.

45. OBS (relational layout only)

Record flag that identifies an Observation Revenue Code was submitted on record, if data type identifier does not signify Observation data type.

46. All Patient Refined Diagnosis Related Group (APR-DRG) (relational layout only)

All Patient Refined Diagnosis Related Group assigned to record utilizing 3M APR-DRG Grouper software. (Available upon request and must have contract with 3M for APR-DRG Grouper

software)

47. Severity of Illness (relational layout only)

Severity of Illness indicator assigned to record utilizing 3M APR-DRG Grouper software.
(Available upon request and must have contract with 3M for APR-DRG Grouper software)

48. Risk of Mortality (ROM) (relational layout only)

Risk of Mortality indicator assigned to record utilizing 3M APR-DRG Grouper software.
(Available upon request and must have contract with 3M for APR-DRG Grouper software)

V. Facility Identification Codes¹

This information can be found in the relational data product data support table **tlkFacility**. For a current list of facility information please [Click here](#)

Veteran Care Hospitals

No patient record data is available for the following:

Code	City	Hospital Name
175	Tomah	<i>Veterans Affairs Medical Center</i>
176	Milwaukee	<i>Clement J. Zablocki VA Medical Center</i>
177	Madison	<i>Wm. S. Middleton Memorial VA Hospital</i>

Facility Closings and Mergers and New Facilities

*Due to facility closings and mergers, data has been combined from certain facilities and assigned a new facility identification number for purposes of analysis. Purchasers of data may find it useful to know the dates when such changes have occurred. Note: All facility closings and mergers prior to Q1 02 have been excluded from this table. For historical information prior to 2009, click the following link [.historical facility changes 2002 to 2008.xlsx](#). For more information or clarification, please contact WHA Information Center. This information can also be found in the relational data product data support table **tlkFacility**.

Date	Individual Facility ID Numbers	Combined Facility ID Number
Q1 09	252- Associated Surgical & Medical Specialists	Acquired by 280- The Surgery Center
Q1 09	278-Northwoods Surgery Center	
Q1 09	279-BJOSC, LLC	
Q1 09	281-ProHealth Care Moreland Surgery Center	
Q2 09	282-Surgery Center of Sheboygan	
Q3 09	191-Children's Hospital of Wisconsin-Kenosha	CLOSED
Q3 09	313-Midwest Orthopedic Specialty Hospital	New Facility
Q4 09	265 – Fond du Lac Surgery Center	Merged with 034 – St. Agnes Hospital
Q4 09	283-Metropolitan Medical Center	Started reporting
Q4 09	284-Urban Foot Care Surgical Center	Started reporting
Q1 10	285-Pain Centers of Wisconsin – Green Bay	New Facility
Q1 10	314-Aurora Medical Center in	New Facility

¹ Because of facility closings, mergers, and openings, all Facility Identification numbers may not appear in all quarters.

Date	Individual Facility ID Numbers	Combined Facility ID Number
	Summit	
Q2 10	286-Pain Centers of Wisconsin - Franklin	New Facility
Q4 10	287 – Pine Ridge Surgery Center	New Facility
Q4 10	315 – Aurora Medical Center in Grafton	New Facility
Q4 10	316 – Columbia St. Mary's Hospital Milwaukee	Merged 089 - Columbia St. Mary's Inc - Milwaukee Campus and 076 - Columbia St. Mary's Inc - Columbia Campus
Q1 11	267 – Paragon Surgical Center	Facility Closed 03-18-2011
Q1 11	291 - Southeast Wisconsin Ambulatory Surgical Center	New Facility
Q2 11	005 - Franciscan Skemp Healthcare - Mayo Health System - Arcadia	Facility Closed 04-01-2011
Q2 11	288 – Bellin Orthopedic Surgery Center	New Facility
Q2 11	289 – Alexander Eye Surgery Center	New Facility
Q2 11	290 – GI Specialists, LLC d/b/a Moreland Endoscopy Center	New Facility

VI. County Codes

This information can also be found in the relational data product data support table **tlkCounty**.

Code	County	Code	County	Code	County
01	Adams	25	Iowa County	49	Polk
02	Ashland	26	Iron	50	Portage
03	Barron	27	Jackson	51	Price
04	Bayfield	28	Jefferson	52	Racine
05	Brown	29	Juneau	53	Richland
06	Buffalo	30	Kenosha	54	Rock
07	Burnett	31	Kewaunee	55	Rusk
08	Calumet	32	La Crosse	56	St. Croix
09	Chippewa	33	Lafayette	57	Sauk
10	Clark	34	Langlade	58	Sawyer
11	Columbia	35	Lincoln	59	Shawano
12	Crawford	36	Manitowoc	60	Sheboygan
13	Dane	37	Marathon	61	Taylor
14	Dodge	38	Marinette	62	Trempealeau
15	Door	39	Marquette	63	Vernon
16	Douglas	40	Menominee	64	Vilas
17	Dunn	41	Milwaukee	65	Walworth
18	Eau Claire	42	Monroe	66	Washburn
19	Florence	43	Oconto	67	Washington
20	Fond du Lac	44	Oneida	68	Waukesha
21	Forest	45	Outagamie	69	Waupaca
22	Grant	46	Ozaukee	70	Waushara
23	Green	47	Pepin	71	Winnebago
24	Green Lake	48	Pierce	72	Wood

Border State County Codes

This information identifies all counties within the bordering states of Wisconsin. This information can also be found in the relational data product data support table **tlkBorder**.

Code	County	State Code	State	Code	County	State Code	State
100	Adair	82	Iowa	138	Guthrie	82	Iowa
101	Adams	82	Iowa	139	Hamilton	82	Iowa
102	Allamakee	82	Iowa	140	Hancock	82	Iowa
103	Appanoose	82	Iowa	141	Hardin	82	Iowa
104	Audubon	82	Iowa	142	Harrison	82	Iowa
105	Benton	82	Iowa	143	Henry	82	Iowa
106	Black Hawk	82	Iowa	144	Howard	82	Iowa
107	Boone	82	Iowa	145	Humboldt	82	Iowa
108	Bremer	82	Iowa	146	Ida	82	Iowa

Code	County	State Code	State	Code	County	State Code	State
109	Buchanan	82	Iowa	147	Iowa	82	Iowa
110	Buena Vista	82	Iowa	148	Jackson	82	Iowa
111	Butler	82	Iowa	149	Jasper	82	Iowa
112	Calhoun	82	Iowa	150	Jefferson	82	Iowa
113	Carroll	82	Iowa	151	Johnson	82	Iowa
114	Cass	82	Iowa	152	Jones	82	Iowa
115	Cedar	82	Iowa	153	Keokuk	82	Iowa
116	Cerro Gordo	82	Iowa	154	Kossuth	82	Iowa
117	Cherokee	82	Iowa	155	Lee	82	Iowa
118	Chickasaw	82	Iowa	156	Linn	82	Iowa
119	Clarke	82	Iowa	157	Louisa	82	Iowa
120	Clay	82	Iowa	158	Lucas	82	Iowa
121	Clayton	82	Iowa	159	Lyon	82	Iowa
122	Clinton	82	Iowa	160	Madison	82	Iowa
123	Crawford	82	Iowa	161	Mahaska	82	Iowa
124	Dallas	82	Iowa	162	Marion	82	Iowa
125	Davis	82	Iowa	163	Marshall	82	Iowa
126	Decatur	82	Iowa	164	Mills	82	Iowa
127	Delaware	82	Iowa	165	Mitchell	82	Iowa
128	Des Moines	82	Iowa	166	Monona	82	Iowa
129	Dickinson	82	Iowa	167	Monroe	82	Iowa
130	Dubuque	82	Iowa	168	Montgomery	82	Iowa
131	Emmet	82	Iowa	169	Muscatine	82	Iowa
132	Fayette	82	Iowa	170	O'Brien	82	Iowa
133	Floyd	82	Iowa	171	Osceola	82	Iowa
134	Franklin	82	Iowa	172	Page	82	Iowa
135	Fremont	82	Iowa	173	Palo Alto	82	Iowa
136	Greene	82	Iowa	174	Plymouth	82	Iowa
137	Grundy	82	Iowa	175	Pocahontas	82	Iowa
176	Polk	82	Iowa	218	De Kalb	81	Illinois
177	Pottawattamie	82	Iowa	219	Dewitt	81	Illinois
178	Poweshiek	82	Iowa	220	Douglas	81	Illinois
179	Ringgold	82	Iowa	221	DuPage	81	Illinois
180	Sac	82	Iowa	222	Edgar	81	Illinois
181	Scott	82	Iowa	223	Edwards	81	Illinois
182	Shelby	82	Iowa	224	Effingham	81	Illinois
183	Sioux	82	Iowa	225	Fayette	81	Illinois
184	Story	82	Iowa	226	Ford	81	Illinois
185	Tama	82	Iowa	227	Franklin	81	Illinois
186	Taylor	82	Iowa	228	Fulton	81	Illinois
187	Union	82	Iowa	229	Gallatin	81	Illinois
188	Van Buren	82	Iowa	230	Greene	81	Illinois

Code	County	State Code	State	Code	County	State Code	State
189	Wapello	82	Iowa	231	Grundy	81	Illinois
190	Warren	82	Iowa	232	Hamilton	81	Illinois
191	Washington	82	Iowa	233	Hancock	81	Illinois
192	Wayne	82	Iowa	234	Hardin	81	Illinois
193	Webster	82	Iowa	235	Henderson	81	Illinois
194	Winnebago	82	Iowa	236	Henry	81	Illinois
195	Winneshiek	82	Iowa	237	Iroquois	81	Illinois
196	Woodbury	82	Iowa	238	Jackson	81	Illinois
197	Worth	82	Iowa	239	Jasper	81	Illinois
198	Wright	82	Iowa	240	Jefferson	81	Illinois
200	Adams	81	Illinois	241	Jersey	81	Illinois
201	Alexander	81	Illinois	242	Jo Daviess	81	Illinois
202	Bond	81	Illinois	243	Johnson	81	Illinois
203	Boone	81	Illinois	244	Kane	81	Illinois
204	Brown	81	Illinois	245	Kankakee	81	Illinois
205	Bureau	81	Illinois	246	Kendall	81	Illinois
206	Calhoun	81	Illinois	247	Knox	81	Illinois
207	Carroll	81	Illinois	248	La Salle	81	Illinois
208	Cass	81	Illinois	249	Lake	81	Illinois
209	Champaign	81	Illinois	250	Lawrence	81	Illinois
210	Christian	81	Illinois	251	Lee	81	Illinois
211	Clark	81	Illinois	252	Livingston	81	Illinois
212	Clay	81	Illinois	253	Logan	81	Illinois
213	Clinton	81	Illinois	254	Macon	81	Illinois
214	Coles	81	Illinois	255	Macoupin	81	Illinois
215	Cook	81	Illinois	256	Madison	81	Illinois
216	Crawford	81	Illinois	257	Marion	81	Illinois
217	Cumberland	81	Illinois	258	Marshall	81	Illinois
259	Mason	81	Illinois	300	Winnebago	81	Illinois
260	Massac	81	Illinois	301	Woodford	81	Illinois
261	Mcdonough	81	Illinois	400	Alcona	83	Michigan
262	Mchenry	81	Illinois	401	Alger	83	Michigan
263	Mclean	81	Illinois	402	Allegan	83	Michigan
264	Menard	81	Illinois	403	Alpena	83	Michigan
265	Mercer	81	Illinois	404	Antrim	83	Michigan
266	Monroe	81	Illinois	405	Arenac	83	Michigan
267	Montgomery	81	Illinois	406	Baraga	83	Michigan
268	Morgan	81	Illinois	407	Barry	83	Michigan
269	Moultrie	81	Illinois	408	Bay	83	Michigan
270	Ogle	81	Illinois	409	Benzie	83	Michigan
271	Peoria	81	Illinois	410	Berrien	83	Michigan
272	Perry	81	Illinois	411	Branch	83	Michigan

Code	County	State Code	State	Code	County	State Code	State
273	Piatt	81	Illinois	412	Calhoun	83	Michigan
274	Pike	81	Illinois	413	Cass	83	Michigan
275	Pope	81	Illinois	414	Charlevoix	83	Michigan
276	Pulaski	81	Illinois	415	Cheboygan	83	Michigan
277	Putnam	81	Illinois	416	Chippewa	83	Michigan
278	Randolph	81	Illinois	417	Clare	83	Michigan
279	Richland	81	Illinois	418	Clinton	83	Michigan
280	Rock Island	81	Illinois	419	Crawford	83	Michigan
281	Saint Clair	81	Illinois	420	Delta	83	Michigan
282	Saline	81	Illinois	421	Dickinson	83	Michigan
283	Sangamon	81	Illinois	422	Eaton	83	Michigan
284	Schuyler	81	Illinois	423	Emmet	83	Michigan
285	Scott	81	Illinois	424	Genesee	83	Michigan
286	Shelby	81	Illinois	425	Gladwin	83	Michigan
287	Stark	81	Illinois	426	Gogebic	83	Michigan
288	Stephenson	81	Illinois	427	Grand Traverse	83	Michigan
289	Tazewell	81	Illinois	428	Gratiot	83	Michigan
290	Union	81	Illinois	429	Hillsdale	83	Michigan
291	Vermilion	81	Illinois	430	Houghton	83	Michigan
292	Wabash	81	Illinois	431	Huron	83	Michigan
293	Warren	81	Illinois	432	Ingham	83	Michigan
294	Washington	81	Illinois	433	Ionia	83	Michigan
295	Wayne	81	Illinois	434	Iosco	83	Michigan
296	White	81	Illinois	435	Iron	83	Michigan
297	Whiteside	81	Illinois	436	Isabella	83	Michigan
298	Will	81	Illinois	437	Jackson	83	Michigan
299	Williamson	81	Illinois	438	Kalamazoo	83	Michigan
439	Kalkaska	83	Michigan	480	Washtenaw	83	Michigan
440	Kent	83	Michigan	481	Wayne	83	Michigan
441	Keweenaw	83	Michigan	482	Wexford	83	Michigan
442	Lake	83	Michigan	500	Aitkin	84	Minnesota
443	Lapeer	83	Michigan	501	Anoka	84	Minnesota
444	Leelanau	83	Michigan	502	Becker	84	Minnesota
445	Lenawee	83	Michigan	503	Beltrami	84	Minnesota
446	Livingston	83	Michigan	504	Benton	84	Minnesota
447	Luce	83	Michigan	505	Big Stone	84	Minnesota
448	Mackinac	83	Michigan	506	Blue Earth	84	Minnesota
449	Macomb	83	Michigan	507	Brown	84	Minnesota
450	Manistee	83	Michigan	508	Carlton	84	Minnesota
451	Marquette	83	Michigan	509	Carver	84	Minnesota
452	Mason	83	Michigan	510	Cass	84	Minnesota
453	Mecosta	83	Michigan	511	Chippewa	84	Minnesota

Code	County	State Code	State	Code	County	State Code	State
454	Menominee	83	Michigan	512	Chisago	84	Minnesota
455	Midland	83	Michigan	513	Clay	84	Minnesota
456	Missaukee	83	Michigan	514	Clearwater	84	Minnesota
457	Monroe	83	Michigan	515	Cook	84	Minnesota
458	Montcalm	83	Michigan	516	Cottonwood	84	Minnesota
459	Montmorency	83	Michigan	517	Crow Wing	84	Minnesota
460	Muskegon	83	Michigan	518	Dakota	84	Minnesota
461	Newaygo	83	Michigan	519	Dodge	84	Minnesota
462	Oakland	83	Michigan	520	Douglas	84	Minnesota
463	Oceana	83	Michigan	521	Faribault	84	Minnesota
464	Ogemaw	83	Michigan	522	Fillmore	84	Minnesota
465	Ontonagon	83	Michigan	523	Freeborn	84	Minnesota
466	Osceola	83	Michigan	524	Goodhue	84	Minnesota
467	Oscoda	83	Michigan	525	Grant	84	Minnesota
468	Otsego	83	Michigan	526	Hennepin	84	Minnesota
469	Ottawa	83	Michigan	527	Houston	84	Minnesota
470	Presque Isle	83	Michigan	528	Hubbard	84	Minnesota
471	Roscommon	83	Michigan	529	Isanti	84	Minnesota
472	Saginaw	83	Michigan	530	Itasca	84	Minnesota
473	Saint Clair	83	Michigan	531	Jackson	84	Minnesota
474	Saint Joseph	83	Michigan	532	Kanabec	84	Minnesota
475	Sanilac	83	Michigan	533	Kandiyohi	84	Minnesota
476	Schoolcraft	83	Michigan	534	Kittson	84	Minnesota
477	Shiawassee	83	Michigan	535	Koochiching	84	Minnesota
478	Tuscola	83	Michigan	536	Lac Qui Parle	84	Minnesota
479	Van Buren	83	Michigan	537	Lake	84	Minnesota
538	Lake Of The Woods	84	Minnesota	563	Redwood	84	Minnesota
539	Le Sueur	84	Minnesota	564	Renville	84	Minnesota
540	Lincoln	84	Minnesota	565	Rice	84	Minnesota
541	Lyon	84	Minnesota	566	Rock	84	Minnesota
542	Mahnomen	84	Minnesota	567	Roseau	84	Minnesota
543	Marshall	84	Minnesota	568	Saint Louis	84	Minnesota
544	Martin	84	Minnesota	569	Scott	84	Minnesota
545	Mcleod	84	Minnesota	570	Sherburne	84	Minnesota
546	Meeker	84	Minnesota	571	Sibley	84	Minnesota
547	Mille Lacs	84	Minnesota	572	Stearns	84	Minnesota
548	Morrison	84	Minnesota	573	Steele	84	Minnesota
549	Mower	84	Minnesota	574	Stevens	84	Minnesota
550	Murray	84	Minnesota	575	Swift	84	Minnesota
551	Nicollet	84	Minnesota	576	Todd	84	Minnesota
552	Nobles	84	Minnesota	577	Traverse	84	Minnesota
553	Norman	84	Minnesota	578	Wabasha	84	Minnesota

Code	County	State Code	State	Code	County	State Code	State
554	Olmsted	84	Minnesota	579	Wadena	84	Minnesota
555	Otter Tail	84	Minnesota	580	Waseca	84	Minnesota
556	Pennington	84	Minnesota	581	Washington	84	Minnesota
557	Pine	84	Minnesota	582	Watonwan	84	Minnesota
558	Pipestone	84	Minnesota	583	Wilkin	84	Minnesota
559	Polk	84	Minnesota	584	Winona	84	Minnesota
560	Pope	84	Minnesota	585	Wright	84	Minnesota
561	Ramsey	84	Minnesota	586	Yellow Medicine	84	Minnesota
562	Red Lake	84	Minnesota				

VII. State Codes

This information can also be found in the relational data product data support table **tlkCounty**.

Code	State
81	Illinois
82	Iowa
83	Michigan
84	Minnesota
98	Missing/Homeless
99	Other State or Country

VIII. County Assignments for Multi-County ZIP Codes-Wisconsin

ZIP Code	County Code	County Name	Post Office Name	ZIP Code	County Code	County Name	Post Office Name
53001*	60	Sheboygan	Adell	53040	67	Washington	Kewaskum
53002*	67	Washington	Allenton	53042*	36	Manitowoc	Kiel
53004*	46	Ozaukee	Belgium	53048*	14	Dodge	Lomira
53006	14	Dodge	Brownsville	53049	20	Fond du Lac	Malone
53010*	20	Fond du Lac	Campbellsport	53061*	08	Calumet	New Holstein
53011*	60	Sheboygan	Cascade	53065*	20	Fond du Lac	Oakfield
53012	46	Ozaukee	Cedarburg	53066	68	Waukesha	Oconomowoc
53013*	60	Sheboygan	Cedar Grove	53075*	60	Sheboygan	Random Lake
53014	08	Calumet	Chilton	53079*	20	Fond du Lac	Saint Cloud
53015*	36	Manitowoc	Cleveland	53090*	67	Washington	West Bend
53017	67	Washington	Colgate	53091*	14	Dodge	Theresa
53020*	60	Sheboygan	Elkhart Lake	53095*	67	Washington	West Bend
53021	46	Ozaukee	Fredonia	53098*	14	Dodge	Watertown
53023*	60	Sheboygan	Glenbeulah	53105	52	Racine	Burlington
53027	67	Washington	Hartford	53114	65	Walworth	Darien
53029*	68	Waukesha	Hartland	53118*	68	Waukesha	Dousman
53035*	14	Dodge	Iron Ridge	53119*	68	Waukesha	Eagle
53036	28	Jefferson	Ixonia	53120	65	Walworth	East Troy

ZIP Code	County Code	County Name	Post Office Name	ZIP Code	County Code	County Name	Post Office Name
53128*	65	Walworth	Genoa City	53572	13	Dane	Mount Horeb
53132*	41	Milwaukee	Franklin	53573	22	Grant	Muscoda
53139*	52	Racine	Kansasville	53574*	23	Green	New Glarus
53144*	30	Kenosha	Kenosha	53578*	57	Sauk	Prairie du Sac
53149	68	Waukesha	Mukwonago	53583	57	Sauk	Sauk City
53150	68	Waukesha	Muskego	53585	65	Walworth	Sharon
53156*	28	Jefferson	Palmyra	53588	57	Sauk	Spring Green
53177*	52	Racine	Sturtevant	53589*	13	Dane	Stoughton
53178*	28	Jefferson	Sullivan	53594	28	Jefferson	Waterloo
53182	52	Racine	Union Grove	53805	22	Grant	Boscobel
53185*	52	Racine	Waterford	53807	22	Grant	Cuba City
53190	65	Walworth	Whitewater	53811	22	Grant	Hazel Green
53217*	41	Milwaukee	Milwaukee	53818	22	Grant	Platteville
53225*	41	Milwaukee	Milwaukee	53821	12	Crawford	Prairie du Chien
53403*	52	Racine	Racine	53901*	11	Columbia	Portage
53502*	23	Green	Albany	53911*	11	Columbia	Arlington
53504	33	Lafayette	Argyle	53913*	57	Sauk	Baraboo
53505*	54	Rock	Avalon	53919*	20	Fond du Lac	Brandon
53507*	25	Iowa	Barneveld	53920*	39	Marquette	Briggsville
53508	13	Dane	Belleville	53923	11	Columbia	Cambria
53515*	13	Dane	Black Earth	53924	53	Richland	Cazenovia
53516	33	Lafayette	Blanchardville	53925	11	Columbia	Columbus
53517	13	Dane	Blue Mounds	53926*	24	Green Lake	Dalton
53518	53	Richland	Blue River	53929	29	Juneau	Elroy
53520	23	Green	Brodhead	53932	11	Columbia	Fall River
53521	23	Green	Brooklyn	53937	57	Sauk	Hillpoint
53522	23	Green	Browntown	53941	57	Sauk	La Valle
53523	13	Dane	Cambridge	53944	29	Juneau	Lyndon Station
53525*	54	Rock	Clinton	53946*	24	Green Lake	Markesan
53532*	13	Dane	Deforest	53949*	39	Marquette	Montello
53534	54	Rock	Edgerton	53952	39	Marquette	Oxford
53536*	54	Rock	Evansville	53954	11	Columbia	Pardeeville
53538	28	Jefferson	Fort Atkinson	53956	14	Dodge	Randolph
53543	25	Iowa	Highland	53960*	11	Columbia	Rio
53544*	25	Iowa	Hollandale	53963	14	Dodge	Waupun
53554	22	Grant	Livingston	53964	39	Marquette	Westfield
53555	11	Columbia	Lodi	53965	11	Columbia	Wisconsin Dells
53556	53	Richland	Lone Rock	53968	29	Juneau	Wonewoc
53559*	13	Dane	Marshall	54004	49	Polk	Clayton
53560	13	Dane	Mazomanie	54005	49	Polk	Clear Lake
53561	57	Sauk	Merrimac	54007*	56	St. Croix	Deer Park
53563*	54	Rock	Milton	54017	56	St. Croix	New Richmond
53565	25	Iowa	Mineral Point	54020*	49	Polk	Osceola
53569	22	Grant	Montfort	54022	48	Pierce	River Falls

ZIP Code	County Code	County Name	Post Office Name	ZIP Code	County Code	County Name	Post Office Name
54026*	49	Polk	Star Prairie	54412*	72	Wood	Auburndale
54103*	21	Forest	Armstrong Creek	54414	59	Shawano	Birnamwood
54104*	38	Marinette	Athelstane	54420*	10	Clark	Chili
54106*	45	Outagamie	Black Creek	54421	10	Clark	Colby
54107*	59	Shawano	Bonduel	54422	10	Clark	Curtiss
54110	08	Calumet	Brillion	54423*	50	Portage	Custer
54111	59	Shawano	Cecil	54425	10	Clark	Dorchester
54112	38	Marinette	Coleman	54427	37	Marathon	Eland
54114*	38	Marinette	Crivitz	54428	34	Langlade	Elcho
54115	05	Brown	De Pere	54433	61	Taylor	Gilman
54120*	19	Florence	Fence	54435	35	Lincoln	Gleason
54124*	43	Oconto	Gillett	54443*	50	Portage	Junction City
54125*	38	Marinette	Goodman	54447*	61	Taylor	Lublin
54126	05	Brown	Greenleaf	54449	72	Wood	Marshfield
54130	45	Outagamie	Kaukauna	54451*	37	Marathon	Taylor
54137	59	Shawano	Krakow	54452	35	Lincoln	Merrill
54139*	43	Oconto	Lena	54454*	72	Wood	Milladore
54151	38	Marinette	Niagara	54455	37	Marathon	Mosinee
54153*	43	Oconto	Oconto	54457	72	Wood	Nekoosa
54154*	43	Oconto	Oconto Falls	54459	51	Price	Ogema
54155	05	Brown	Oneida	54460	10	Clark	Owen
54157*	38	Marinette	Peshtigo	54463*	44	Oneida	Pelican Lake
54161	38	Marinette	Pound	54465*	34	Langlade	Pickerel
54162	59	Shawano	Pulaski	54466	72	Wood	Pittsville
54165*	45	Outagamie	Seymour	54470*	61	Taylor	Rib Lake
54166*	59	Shawano	Shawano	54473	50	Portage	Rosholt
54170	45	Outagamie	Shiocton	54475*	72	Wood	Rudolph
54174*	43	Oconto	Suring	54479	37	Marathon	Spencer
54175*	43	Oconto	Townsend	54480*	61	Taylor	Stetsonville
54180*	05	Brown	Wrightstown	54486	59	Shawano	Tigerton
54201	31	Kewaunee	Algoma	54487	35	Lincoln	Tomahawk
54205*	31	Kewaunee	Casco	54488	10	Clark	Unity
54208	05	Brown	Denmark	54490*	61	Taylor	Westboro
54213	15	Door	Forestville	54491	34	Langlade	White Lake
54216*	31	Kewaunee	Kewaunee	54494*	72	Wood	Wisconsin Rapids
54217	31	Kewaunee	Luxemburg	54498	10	Clark	Withee
54227*	36	Manitowoc	Maribel	54499*	59	Shawano	Wittenberg
54230*	36	Manitowoc	Reedsville	54501	44	Oneida	Rhineland
54241*	36	Manitowoc	Two Rivers	54514	02	Ashland	Butternut
54313*	05	Brown	Green Bay	54520*	21	Forest	Crandon
54405	10	Clark	Abbotsford	54521	64	Vilas	Eagle River
54408	37	Marathon	Aniwa	54530	55	Rusk	Hawkins
54409	34	Langlade	Antigo	54538	64	Vilas	Lac du Flambeau
54411	37	Marathon	Athens	54540	64	Vilas	Land O Lakes

ZIP Code	County Code	County Name	Post Office Name	ZIP Code	County Code	County Name	Post Office Name
54542	21	Forest	Long Lake	54730	17	Dunn	Colfax
54545*	64	Vilas	Manitowish Waters	54734*	17	Dunn	Downing
54548	44	Oneida	Minocqua	54736	47	Pepin	Durand
54552	51	Price	Park Falls	54737	17	Dunn	Eau Galle
54558	64	Vilas	Saint Germain	54738	18	Eau Claire	Eleva
54559*	26	Iron	Saxon	54739	17	Dunn	Elk Mound
54562	44	Oneida	Three Lakes	54740*	48	Pierce	Elmwood
54564	44	Oneida	Tripoli	54741	18	Eau Claire	Fairchild
54566*	21	Forest	Wabeno	54745*	09	Chippewa	Holcombe
54568	64	Vilas	Oneida	54746	10	Clark	Humbird
54612	62	Trempealeau	Arcadia	54747	62	Trempealeau	Independence
54615*	27	Jackson	Black River Falls	54749	17	Dunn	Knapp
54616*	62	Trempealeau	Blair	54754	27	Jackson	Merrillan
54618*	29	Juneau	Camp Douglas	54755	06	Buffalo	Mondovi
54619*	42	Monroe	Cashton	54757	09	Chippewa	New Auburn
54623	63	Vernon	Coon Valley	54758	62	Trempealeau	Osseo
54624	63	Vernon	De Soto	54762*	03	Barron	Prairie Farm
54627*	62	Trempealeau	Ettrick	54763*	17	Dunn	Ridgeland
54628	12	Crawford	Ferryville	54766	55	Rusk	Sheldon
54634	63	Vernon	Hillsboro	54767	48	Pierce	Spring Valley
54635*	27	Jackson	Hixton	54768	09	Chippewa	Stanley
54638	42	Monroe	Kendall	54769*	47	Pepin	Stockholm
54639*	63	Vernon	La Farge	54770	62	Trempealeau	Strum
54642	27	Jackson	Melrose	54771	10	Clark	Thorp
54644*	32	La Crosse	Mindoro	54801	66	Washburn	Spooner
54651	63	Vernon	Ontario	54806	02	Ashland	Ashland
54652	63	Vernon	Readstown	54813	03	Barron	Barronett
54653*	32	La Crosse	Rockland	54817	66	Washburn	Birchwood
54655	12	Crawford	Soldiers Grove	54820	16	Douglas	Brule
54656*	42	Monroe	Sparta	54821*	04	Bayfield	Cable
54658	63	Vernon	Stoddard	54826*	03	Barron	Comstock
54659	27	Jackson	Taylor	54829	03	Barron	Cumberland
54664	53	Richland	Viola	54830	07	Burnett	Danbury
54665	63	Vernon	Viroqua	54835	58	Sawyer	Exeland
54666	42	Monroe	Warrens	54837	49	Polk	Frederic
54667*	63	Vernon	Westby	54840	07	Burnett	Grantsburg
54701*	18	Eau Claire	Eau Claire	54843	58	Sawyer	Hayward
54703	18	Eau Claire	Eau Claire	54853*	49	Polk	Luck
54721*	47	Pepin	Arkansaw	54856*	04	Bayfield	Mason
54724*	09	Chippewa	Bloomer	54859*	66	Washburn	Minong
54726	09	Chippewa	Boyd	54868*	03	Barron	Rice Lake
54727	09	Chippewa	Cadott	54870*	66	Washburn	Sarona
54728	03	Barron	Chetek	54871	66	Washburn	Shell Lake
54729*	09	Chippewa	Chippewa Falls	54872*	07	Burnett	Siren

ZIP Code	County Code	County Name	Post Office Name	ZIP Code	County Code	County Name	Post Office Name
54873	04	Bayfield	Solon Springs	54950	69	Waupaca	Marion
54876	58	Sawyer	Stone Lake	54952	71	Winnebago	Menasha
54889	03	Barron	Turtle Lake	54956*	71	Winnebago	Neenah
54890*	16	Douglas	Wascott	54960	39	Marquette	Neshkoro
54904*	71	Winnebago	Oshkosh	54961	69	Waupaca	New London
54909	50	Portage	Almond	54963*	71	Winnebago	Omro
54913*	45	Outagamie	Appleton	54964	71	Winnebago	Pickett
54914*	45	Outagamie	Appleton	54965	70	Waushara	Pine River
54915	45	Outagamie	Appleton	54966	70	Waushara	Plainfield
54921	50	Portage	Bancroft	54968	24	Green Lake	Princeton
54922	45	Outagamie	Bear Creek	54971*	20	Fond du Lac	Ripon
54923	24	Green Lake	Berlin	54977	69	Waupaca	Scandinavia
54929	69	Waupaca	Clintonville	54979*	20	Fond du Lac	Van Dyne
54930*	70	Waushara	Coloma	54981	69	Waupaca	Waupaca
54940	69	Waupaca	Fremont	54982*	70	Waushara	Wautoma
54943	70	Waushara	Hancock	54983	69	Waupaca	Weyauwega
54944*	45	Outagamie	Hortonville	54984*	70	Waushara	Wild Rose
54945	69	Waupaca	Iola	54986*	71	Winnebago	Winneconne
54947*	71	Winnebago	Larsen				

IX. Specialty Codes – Alpha Order

This information can also be found in the relational data product data support table **tlkSpecialty**.

Code	Description	MD or DO
037	Academic Medicine	X
516	Acute Care	
071	Administrative Medicine	X
503	Adult	
509	Adult Psychiatric/Mental Health	
033	Aerospace Medicine	X
049	Alcoholism – Chemical Dependency	X
001	Allergy – Immunology	X
002	Anesthesiology	X
032	Aviation Medicine	X
510	Child/Adolescent Psychiatric/Mental Health	
507	Community Health	
003	Dermatology	X
517	Diabetes Management	
300	DX Pharm Agent Certified	
031	Emergency Medicine	X
056	Endocrinology	X
502	Family	
041	Family Practice	X
006	Gastroenterology	X
008	General Practice	X
061	Genetics	X
029	Geriatrics	X
505	Gerontology	
512	Gynecology	
064	Hand Surgery	X
046	Hebiatrics	X
007	Hematology	X
065	Hyperbaric Medicine	X
047	Immunology – Infectious Diseases	X
039	Institutional Medicine	X
004	Internal Medicine	X
005	Internal Medicine – Cardiology	X
045	Internal Medicine – Pulmonary Medicine	X
508	Medical/Surgical	
513	Neonatal	
063	Neonatology	X
040	Nephrology	X
010	Neurology	X
051	Neurophysiology	X

Code	Description	MD or DO
023	Nuclear Medicine	X
500	Nurse Anesthetist	
501	Nurse Mid-Wife	
514	OB/GYN (Women's Health)	
511	Obstetric	
012	Obstetrics and Gynecology	X
030	Occupational Medicine	X
038	Oncology	X
515	Oncology	
013	Ophthalmology	X
014	Orthopedic Surgery	X
067	Otolaryngology	X
015	Otorhinolaryngology – ENT	X
066	Pain	X
518	Palliative Care	
016	Pathology	X
017	Pathology – Clinical	X
072	Pathology – Surgical Anatomic	X
018	Pediatrics	X
506	Pediatrics	
060	Pediatrics – Other	X
062	Perinatology	X
048	Pharmacology – Clinical	X
019	Physical Medicine and Rehabilitation	X
009	Preventive Medicine	X
036	Proctology	X
020	Psychiatry	X
021	Psychiatry – Child	X
022	Public Health	X
053	Radiology	X
043	Radiology – Diagnostic	X
068	Radiology – Nuclear Medicine	X
070	Radiology – Oncology	X
069	Radiology – Ultrasound	X
034	Research	X
024	Retired	X
057	Rheumatology	X
600	RX Pharm Agent Certified	
504	School	
052	School Physician	X
044	Surgery – Cardiovascular	X
054	Surgery – Colon and Rectal	X
025	Surgery – General	X
058	Surgery – Maxillofacial	X

Code	Description	MD or DO
011	Surgery – Neurological	X
059	Surgery – Peripheral Vascular	X
026	Surgery – Plastic	X
027	Surgery – Thoracic	X
900	Ultrasound/Galvanic TX Approved	
028	Urology	X

X. Specialty Codes – Numeric Order

This information can also be found in the relational data product data support table **tlkSpecialty**.

Code	Description	MD or DO
001	Allergy – Immunology	X
002	Anesthesiology	X
003	Dermatology	X
004	Internal Medicine	X
005	Internal Medicine – Cardiology	X
006	Gastroenterology	X
007	Hematology	X
008	General Practice	X
009	Preventive Medicine	X
010	Neurology	X
011	Surgery – Neurological	X
012	Obstetrics and Gynecology	X
013	Ophthalmology	X
014	Orthopedic Surgery	X
015	Otorhinolaryngology – ENT	X
016	Pathology	X
017	Pathology – Clinical	X
018	Pediatrics	X
019	Physical Medicine and Rehabilitation	X
020	Psychiatry	X
021	Psychiatry – Child	X
022	Public Health	X
023	Nuclear Medicine	X
024	Retired	X
025	Surgery – General	X
026	Surgery – Plastic	X
027	Surgery – Thoracic	X
028	Urology	X
029	Geriatrics	X
030	Occupational Medicine	X
031	Emergency Medicine	X
032	Aviation Medicine	X
033	Aerospace Medicine	X

Code	Description	MD or DO
034	Research	X
036	Proctology	X
037	Academic Medicine	X
038	Oncology	X
039	Institutional Medicine	X
040	Nephrology	X
041	Family Practice	X
043	Radiology – Diagnostic	X
044	Surgery – Cardiovascular	X
045	Internal Medicine – Pulmonary Medicine	X
046	Hebiatrics	X
047	Immunology – Infectious Diseases	X
048	Pharmacology – Clinical	X
049	Alcoholism – Chemical Dependency	X
051	Neurophysiology	X
052	School Physician	X
053	Radiology	X
054	Surgery – Colon and Rectal	X
056	Endocrinology	X
057	Rheumatology	X
058	Surgery – Maxillofacial	X
059	Surgery – Peripheral Vascular	X
060	Pediatrics – Other	X
061	Genetics	X
062	Perinatology	X
063	Neonatology	X
064	Hand Surgery	X
065	Hyperbaric Medicine	X
066	Pain	X
067	Otolaryngology	X
068	Radiology – Nuclear Medicine	X
069	Radiology – Ultrasound	X
070	Radiology – Oncology	X
071	Administrative Medicine	X
072	Pathology – Surgical Anatomic	X
300	DX Pharm Agent Certified	
500	Nurse Anesthetist	
501	Nurse Mid-Wife	
502	Family	
503	Adult	
504	School	
505	Gerontology	
506	Pediatrics	
507	Community Health	

Code	Description	MD or DO
508	Medical/Surgical	
509	Adult Psychiatric/Mental Health	
510	Child/Adolescent Psychiatric/Mental Health	
511	Obstetric	
512	Gynecology	
513	Neonatal	
514	OB/GYN (Women's Health)	
515	Oncology	
516	Acute Care	
517	Diabetes Management	
518	Palliative Care	
600	RX Pharm Agent Certified	
900	Ultrasound/Galvanic TX Approved	

XI. Payer Information Submitted by Facilities

Codes for the primary and secondary payers who are expected to pay the greater share for the inpatient stay, ambulatory surgery, or emergency department visit.

UB-04 FL 50(a) and 50(b); CMS-1500 FL 1

- ❖ This element has a field length of 5 characters and consists of two components – the payer identifier and the payer type. The primary payer is required, the secondary payer is required only if there is an additional payer. Compatibility between the Payer Identifier and the Payer Type components is checked.
- ❖ Payer Identifier has a field length of 3 characters and consists of the first three positions of the payer identification from the UB billing claim form. All Wisconsin Medical Assistance (Medicaid) patients must be coded as “T19”, whether payer type is fee-for-service or HMO.

Code Structure for Payer Identifier

Code	Description
MED	Medicare
T19	Wisconsin Medical Assistance (Medicaid)
nnn	3-digit plan code or BCS for Blue Cross/Blue Shield
WPS	Non-Medicaid Wisconsin Physicians Service
CHA	CHAMPUS/CHAMPVA/TRICARE ²
MAX	Badger Care Expansion (childless adults) Effective Q1 10
BGR	BadgerCare (family coverage)
OTH	Payer not identified above

- ❖ Payer Type has a field length of 2 and constitutes the fourth and fifth positions of the payer code. Fee-for-service in all of the codes below is defined as whether the billing is fee-for-service and whether the insured is free to choose any provider to perform the needed service.
- ❖ Payer Type code depends on the Payer Identification code. A Payer Identification code of MED, T19, nnn (Blue Cross/Blue Shield), WPS, CHA, BGR or MAX requires a Payer Type code of 01, 02, 03, or 09. However, these Payer Type codes can never be used with a Payer Identification code of OTH. For the appropriate Payer Type codes, see the following tables:

Code Structure for Payer Type for use with MED, T19, nnn (Blue Cross/Blue Shield), WPS, CHA, BGR or MAX

Code	Description
01	Fee-for-service, non-HMO Medicare, or non-HMO Medicaid
02	Alternative Health Care Insurance Plans (HMO, PPO)
03	CHAMPUS/CHAMPVA/TRICARE
09	Unable to determine insurance type ³ .

² This must be used with Payer Type Code 03.

³ To be used when it is unknown if the coverage is fee-for-service/non-HMO Medicare or HMO, PPO.

Code Structure for Payer Type for use with OTH

Code	Description
11	Commercial or private insurance – fee-for-service
12	Commercial or private insurance – alternative health care insurance plan ⁴
19	Commercial or private insurance – unable to determine insurance type
21	Employer self-funded – fee-for-service
22	Employer self-funded – alternative health care insurance plan ⁵
29	Employer self-funded – unable to determine insurance type
31	Other organization self-funded – fee-for-service
32	Other organization self-funded – alternative health care insurance plan ⁶
39	Other organization self-funded – unable to determine insurance type
41	Workers' Compensation
51	Non-Wisconsin Medicaid
52	51.42/ 51.437/ 46.23 County Board
53	General Relief
54	WisconCare
55	CHAMPUS/CHAMPVA/TRICARE supplement
56	HIRSP
59	Other government agency or program
61	Self-pay
71	Research Grant
98	Other
99	Unknown

XII. Payer Identifier & Payer Category Group Code Criteria

This information can also be found in the relational data product data support tables **tlkPayIdentifier** and **tlkPayCategory**.

– First & Second Payer

Payer Identifier	Payer Type	Payer Identifier Group	Payer Category Group	Description
MED	01	1	1	Medicare, Fee for Service
MED	02	1	2	Medicare, HMO/PPO
MED	09	1	4	Medicare, Unknown Type
T19	01	2	1	Medicaid, Fee for Service
T19	02	2	2	Medicaid, HMO/PPO
T19	09	2	4	Medicaid/ Unknown Type
nnn ⁷	01	4	1	Private Insurance, Fee for Service
nnn	02	4	2	Private Insurance, HMO/PPO
nnn	09	4	4	Private Insurance, Unknown Type
WPS	01	4	1	Private Insurance, Fee for Service
WPS	02	4	2	Private Insurance, HMO/PPO

⁴ For example, HMO, PPO.

⁵ For example, HMO, PPO.

⁶ For example, HMO, PPO.

⁷ nnn represents Blue Cross/Blue Shield plan number

– First & Second Payer

Payer Identifier	Payer Type	Payer Identifier Group	Payer Category Group	Description
WPS	09	4	4	Private Insurance, Unknown Type
CHA	03	3	3	Other Government, CHAMPUS/CHAMPVA/TRICARE
BGR	01	2	1	BadgerCare, Fee for Service
BGR	02	2	2	BadgerCare, HMO/PPO
BGR	09	2	4	BadgerCare, Unknown Type
MAX	01	2	1	BadgerCare, Fee for Service
MAX	02	2	2	BadgerCare, HMO/PPO
MAX	09	2	4	BadgerCare, Unknown Type
OTH	21	4	1	Private Insurance, Fee for Service
OTH	22	4	2	Private Insurance, HMO/PPO
OTH	29	4	4	Private Insurance, Unknown Type
OTH	31	4	1	Private Insurance, Fee for Service
OTH	32	4	2	Private Insurance, HMO/PPO
OTH	39	4	4	Private Insurance, Unknown Type
OTH	41	4	1	Private Insurance, Fee for Service
OTH	51	2	1	BadgerCare, Fee for Service
OTH	52	3	1	Other Government, Fee for Service
OTH	53	3	1	Other Government; GAMP
OTH	54	3	1	Other Government, Fee for Service
OTH	55	3	3	Other Government, CHAMPUS/CHAMPVA/TRICARE
OTH	56	3	1	Other Government, Fee for Service
OTH	59	3	1	Other Government, Fee for Service
OTH	61	5	1	Self-Pay, Fee for Service
OTH	78	6	1	Other or Unknown, Fee For Service
OTH	98	6	1	Other or Unknown, Fee for Service
OTH	99	6	4	Other or Unknown, Unknown Type
NULL	NULL	NULL	NULL	Missing – Data Not Submitted – Second Payer Only

XIII. Payer Combined Code Assignment

This information can also be found in the relational data product data support tables **tlkPayCombinedCode**.

– First & Second Payer

Payer Identifier	Payer Type	Payer Combined Code	Description
MED	01	11	Medicare, Fee for Service
MED	02	12	Medicare, HMO/PPO
MED	09	14	Medicare, Unknown Type
T19	01	21	Medicaid, Fee for Service
T19	02	22	Medicaid, HMO/PPO
T19	09	24	Medicaid, Unknown Type

– First & Second Payer

Payer Identifier	Payer Type	Payer Combined Code	Description
OTH	51	25	Medicaid, Other State
CHA	03	33	CHAMPUS/CHAMPVA/TRICARE
OTH	55	33	CHAMPUS/CHAMPVA/TRICARE
nnn	01	41	WPS/Blue Cross/Workers Comp, Fee for Service
OTH	41	41	WPS/Blue Cross/Workers Comp, Fee for Service
WPS	01	41	WPS/Blue Cross/Workers Comp, Fee for Service
nnn	02	42	WPS/Blue Cross/Workers Comp, HMO/PPO
WPS	02	42	WPS/Blue Cross/Workers Comp, HMO/PPO
nnn	09	44	WPS/Blue Cross/Workers Comp, Unknown Type
WPS	09	44	WPS/Blue Cross/Workers Comp, Unknown Type
BGR	01	61	BadgerCare, Fee for Service
BGR	02	62	BadgerCare, HMO/PPO
BGR	09	64	BadgerCare, Unknown Type
MAX	01	65	BadgerCare Expansion, Fee for Service
MAX	02	66	BadgerCare Expansion, HMO/PPO
MAX	09	68	BadgerCare Expansion, Unknown Type
OTH	11	71	Other Commercial or Private Insurance, Fee for Service
OTH	12	72	Other Commercial or Private Insurance, HMO/PPO
OTH	19	74	Other Commercial or Private Insurance, Unknown Type
OTH	21	81	Employer Self-Funded, Fee for Service
OTH	22	82	Employer Self-Funded, HMO/PPO
OTH	29	84	Employer Self-Funded, Unknown Type
OTH	31	91	Other Organization Self-Funded, Fee for Service
OTH	32	92	Other Organization Self-Funded, HMO/PPO
OTH	39	94	Other Organization Self-Funded, Unknown Type
OTH	52	101	Other Government, Fee for Service
OTH	53	102	Other Government; GAMP*
OTH	54	101	Other Government, Fee for Service
OTH	59	101	Other Government, Fee for Service
OTH	56	111	HIRSP, Fee for Service
OTH	61	121	Self-Pay, Fee for Service
OTH	71	122	Research Grant, Subsidized
OTH	98	131	Other or Unknown, Fee for Service
OTH	99	134	Other or Unknown, Unknown Type
NULL	NULL	NULL	Missing Data – data not submitted – Second Payer only

* Effective 3Q 05, combined code of '102' signifies Other Government; GAMP records. In previous quarters, Other Government; GAMP was part of the 'Other Government, Fee for Service' category with a combined code of '101'.

Data Set Documentation

XIV. Summary of All Codes – CodeSummary.xls⁸

For a complete listing of the Code Summary, please refer to the CodeSummary excel spreadsheet in the data set documentation folder or online:

http://www.whainfocenter.com/products/DataSetDocumentation_codesummary.pdf

XV. Type of Bill

For a complete list of codes, please refer to the following link:

http://www.whainfocenter.com/wipop_07/Appendix_VIII.pdf

⁸ All information in this section can also be found in the relational data product in various data support tables.