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CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

OUTPATIENT SURGICAL DATA

DATA FILE UPLOAD USER GUIDE

Release 3.1

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Department of Public Health
Office of Health Care Access
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www.ct.gov/ohca

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1.1	06/2015	DPH OHCA	Diagnosis pointer field size increased to 4
2.0	04/2016	DPH OHCA	Updated Notepad/Excel sample file views Updated ICD-10 diagnosis codes instructions Updated Appendix 3 with ICD-10 Updated Appendix 4 with new payers Updated Appendix 6 with retired/new revenue codes
3.0	06/2017	DPH OHCA	Updated Secure File Transfer instructions Updated link for file transfer Updated payer identification codes in Appendix 4
3.1	06/2017	DPH OHCA	Updated Appendix 2 with facilities' current location

Welcome

Welcome to the Department of Public Health Outpatient Surgical Data File Upload User Guide. Connecticut General Statutes Section 19a-654, **Appendix 1**, requires licensed outpatient surgical facilities and hospital outpatient surgical departments to report patient identifiable encounter data beginning July 1, 2015 and thereafter, to the Office of Health Care Access (OHCA), a division of the Department of Public Health (DPH).

OHCA utilizes such data to fulfil its responsibilities such as assessing availability and utilization of health care services; evaluating unmet needs and gaps in services; developing and maintaining a statewide health care facilities and services plan; decision-making in certificate of need; and public health planning. The statute also authorizes OHCA to provide access to the data to qualified entities and individuals.

Purpose of the User Guide

The goal of this instruction guide is to assist an authorized user to access the State's network to upload data files using secure file transfer web client (SFT). Reporting facilities must transfer the data electronically utilizing DPH-provided credentials for access to a secure site to upload and transmit the data.

Authorized User

An authorized user is a representative(s) of an outpatient surgical facility or hospital outpatient surgical department, authorized to provide the facility's or department's patient identifiable data to OHCA. The facility must be DPH licensed and the user, knowledgeable in and having access to one of the following internet browser (Internet Explorer, Firefox or Google Chrome).

Outpatient Data File Upload Key Features	
Outpatient surgical data collection	Provides a simple, convenient and secure method for uploading confidential outpatient patient data files
Filing outpatient surgical data	Enables filings by January 2 and July 1 of each year
Outpatient Data Upload Site Functionality	
Ability to upload outpatient information to DPH and complete on-line filings	Streamlined process
Access to DPH Secure File Transfer Web Client with login credentials	https://sft.ct.gov/

Upon completion of the guide, the user will be able to:

- Connect to the State's Secure File Transfer
- Register as a new user
- Append data files
- File/submit data

1. Data Filing Requirement

Section 19a-654 of the Connecticut General Statutes (see Appendix 1) requires that beginning July 1, 2015 certain health care facilities submit patient-identifiable data to OHCA. Facilities must provide six (6) months of historical patient demographic, clinical and financial data twice a year, July 1 and January 2 (or the first business day of the year).

The July data must include encounters that occur 10/1/ - 3/31 and January data must consist of encounters for 4/1 – 9/30.

DPH is providing two pathways for transmitting the data:

1. Secure File Transfer (SFT) for file uploads – for large volume facilities or facilities that have the technical staff or a vendor to create a data file extract or export from the facility’s patient medical record and billing system. The facility’s authorized representative must upload the file extract through the State’s Secure File Transfer Web Client. All related instructions are provided in this guide.
2. Secure web portal for direct entry – for small and low volume facilities that lack the technical resources to create an automated data export. The office administrator or designated staff connects to the State’s Virtual Private Network (VPN), registers and logs in to the web portal/application to key in and file the required patient data. Details for this process are provided in a separate document, the “Web Portal User Guide.”

DPH will utilize the contact information on the following page:

- To facilitate user access to the State’s SFT Web Client;
- To confirm the user is the authorized and designated contact for the facility at registration;
- To facilitate securing and protecting the confidential data;
- As medium for communicating with users regarding correcting errors in the data, system or process changes and updates; and
- To mail or prepare for pick up, the VPN token assigned to the user.

Note: Fill out the form on the following page and fax or email it to the contact below to enable DPH to grant a new user access to the State’s network:

Contact	Phone/Fax	Email
DPH Help Desk	Phone: (860) 509-7777 Fax: (860) 418-7053	DPH.OSFHelpdesk@ct.gov

Upon receiving access, the authorized user must see the other sections of this guide for how to upload and file the data.



• Outpatient Surgical Facility/Department Contact Information

Facility Information

Facility Name: Click here to enter text.

Address: Click here to enter text. Click here to enter text.
 • *Street Address* • *Suite/Unit #*

Click here to enter text. Click here to enter text. Click here to enter text.
 • *City* • *State* • *ZIP Code*

Facility Phone: Click here to enter text. Facility Fax: Click here to enter text.

Facility Email: Click here to enter text.

Office Administrator Contact Information

Office Admin: Click here to enter text. Click here to enter text. Click here to enter text.
 • *Last* • *First* • *M.I.*

Admin Phone: Click here to enter text.

Admin Email: Click here to enter text.

Primary Data Contact Information

(This refers to the technical staff or vendor responsible for configuring the data extract to be sent to DPH)

Data Contact: Click here to enter text.

Address: Click here to enter text. Click here to enter text.
 • *Street Address* • *Suite/Unit #*

Click here to enter text. Click here to enter text. Click here to enter text.
 • *City* • *State* • *ZIP Code*

Data Phone: Click here to enter text.

Data Email: Click here to enter text.

Method of Data Submission (Select One)

- SFT - This method applies to larger facilities that have the technical staff or a vendor capable of creating a patient data export from the facility's record keeping system which can be directly uploaded to the Department of Public Health via SFT.
- VPN/Manual Entry* – This method applies to smaller facilities that lack the technical resources to create an automated data export. The office administrator, or other designated staff, would connect to the State's VPN, log in to the online data filing application and key in the patient data for submission.

*This method requires the facility to obtain a VPN token from the State of Connecticut. The token will be shipped to the facility at their own expense. There is also an annual fee of \$22.56 for the token's use.

Shipper Info: Click here to enter text. Click here to enter text.
 • *FedEx or UPS Only* • *Account Number* •

2. Accessing and Using DPH’s Secure File Transfer Web Client

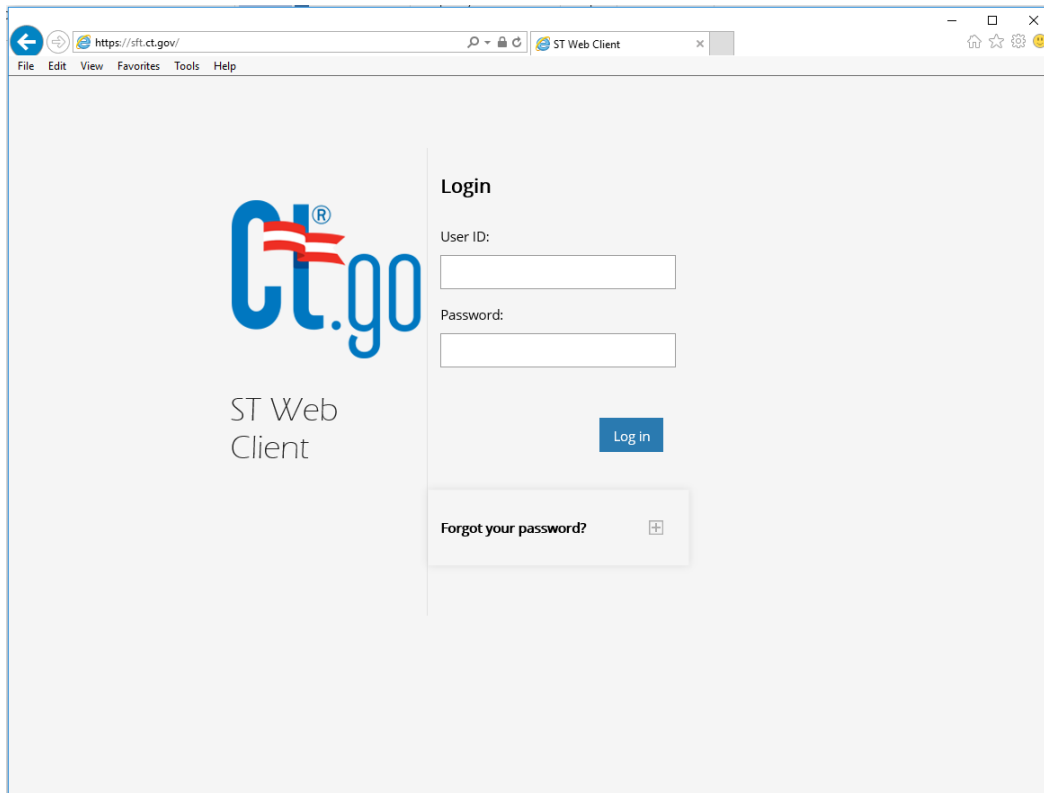
To transfer files containing confidential data to and from DPH, DPH employs a tool called the Secure File Transfer (SFT) Web Client. SFT is a secure, encrypted, web-based, file transfer protocol service with auditing capability.

If you have any questions regarding your account, password resets, account lockouts or other such issues please contact the Department of Public Health IT support desk at [860-509-7777](tel:860-509-7777) or email HelpDesk.DPH@ct.gov.

1. Connecting to the SFT Web Client

To connect to the SFT Web Client to upload or download files:

1. **Open your Web Browser**, clear the address bar and then **type in the following URL:**
<https://sft.ct.gov/>
2. **Enter your Login Name and Password** as supplied by E-mail or phone.
Note: Both the Login Name and Password are “CaSe SensiTive”.



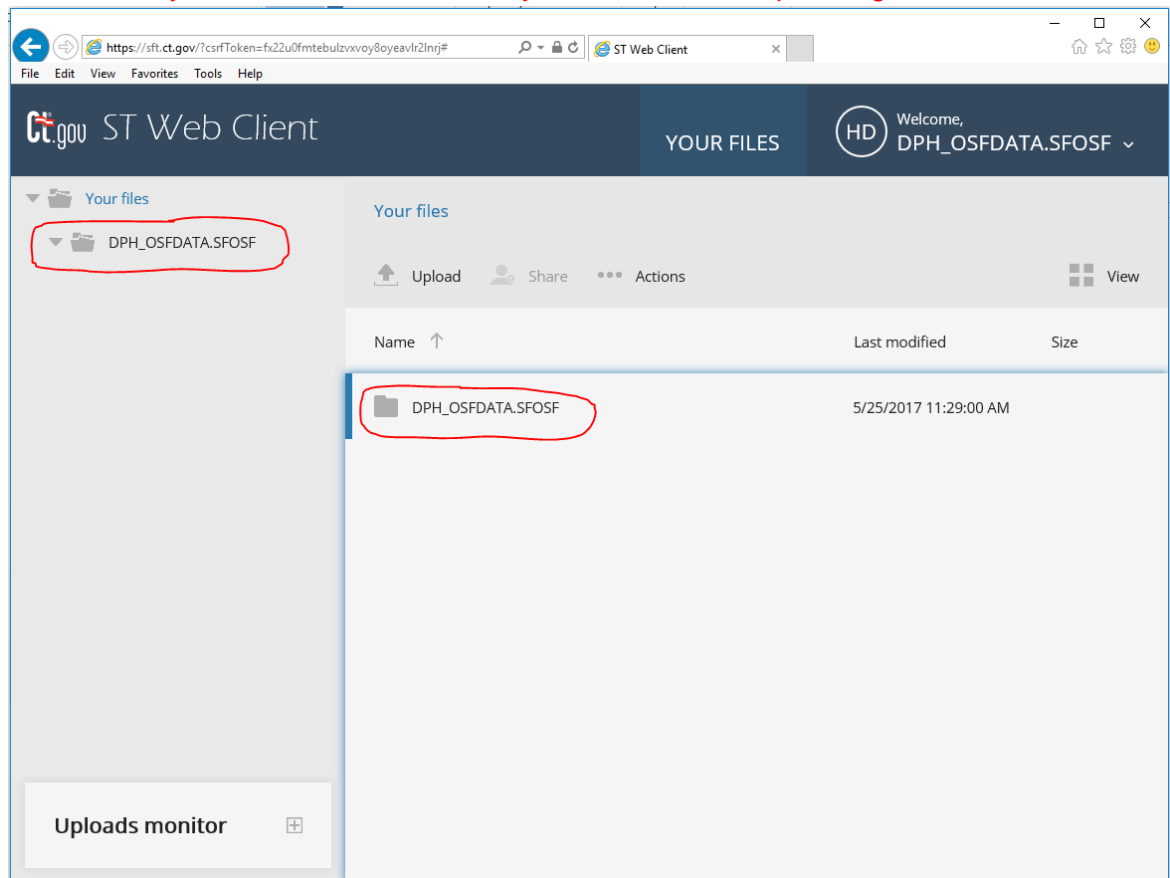
2. Uploading Files to the SFT Web Client

To upload a file to the SFT Web Client:

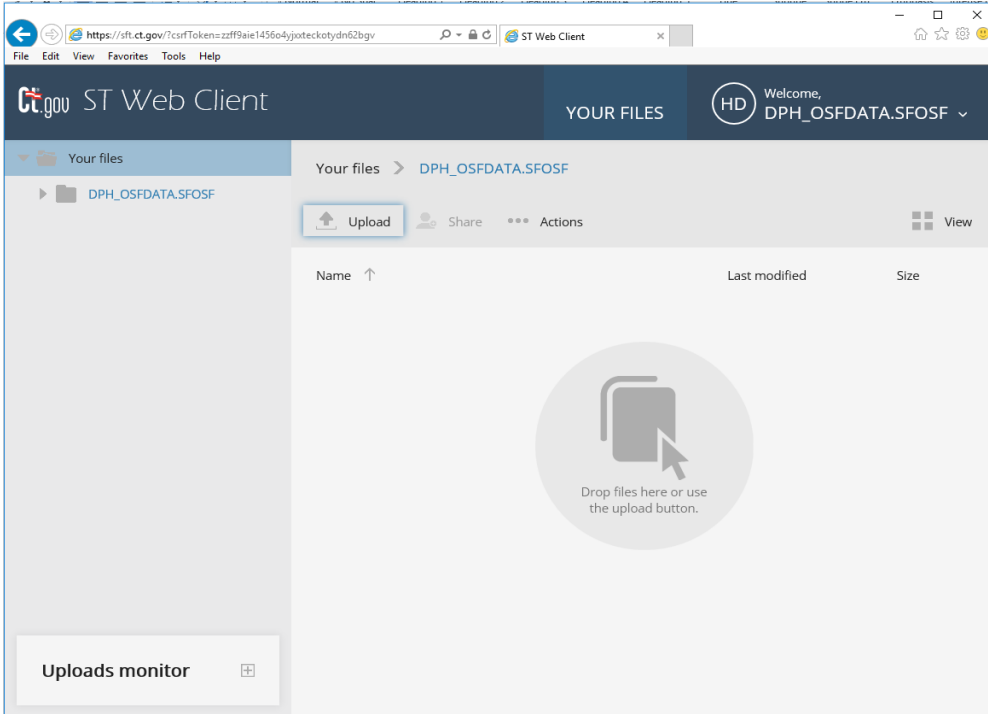
1. First, make sure you are logged into the SFT Web Client.

***Please note: When using Internet Explorer, if after logging on, the screen appears to be blank, please make sure to remove ct.gov from your compatibly view list.*

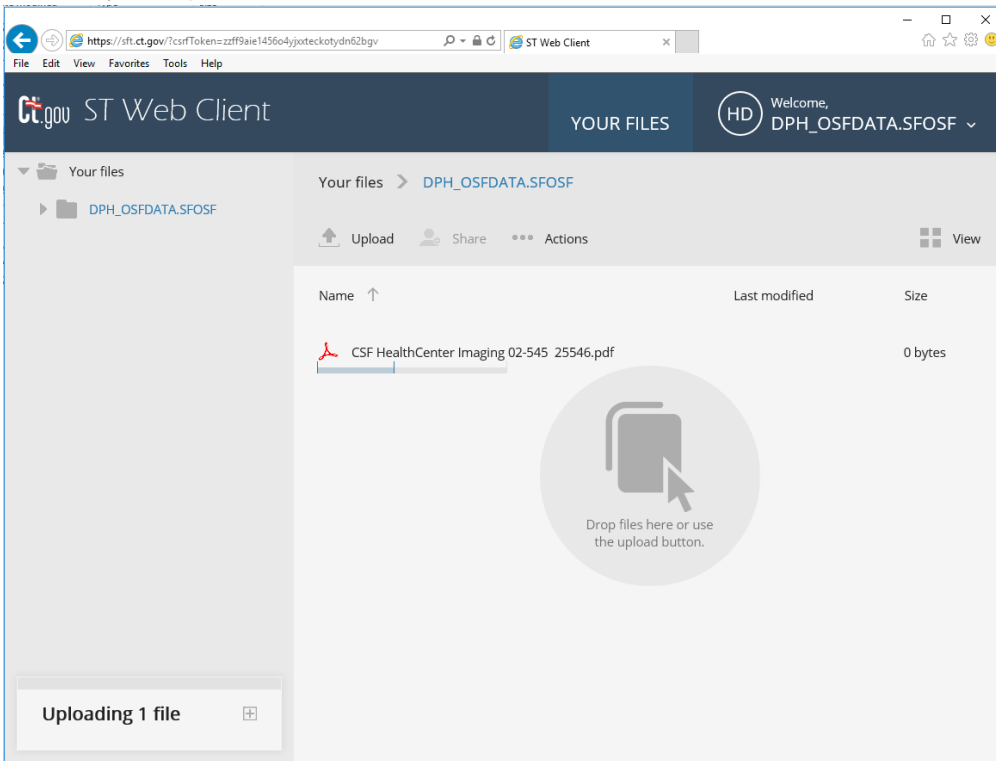
2. You should see a folder that was created for your facility. Click on the folder to enter into that directory. ****Anything that is uploaded onto the main logon screen is not accessible by DPH. You need to select your folder before uploading****



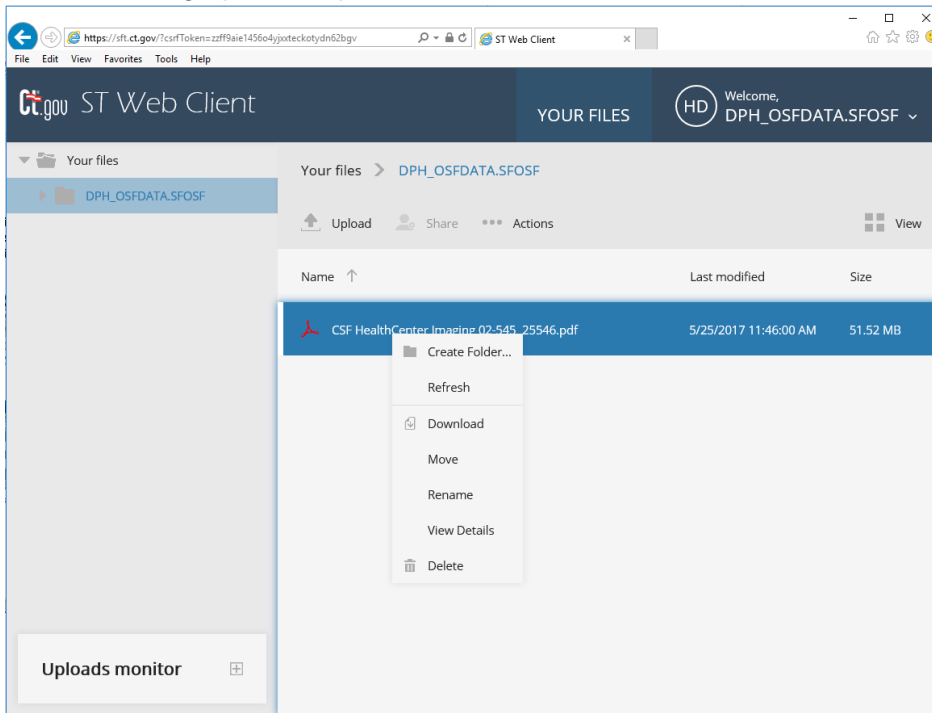
3. You may upload your file by clicking on the 'Upload' button and browsing to the file you wish to send OR simply drag and drop your file into the designated area on the screen.



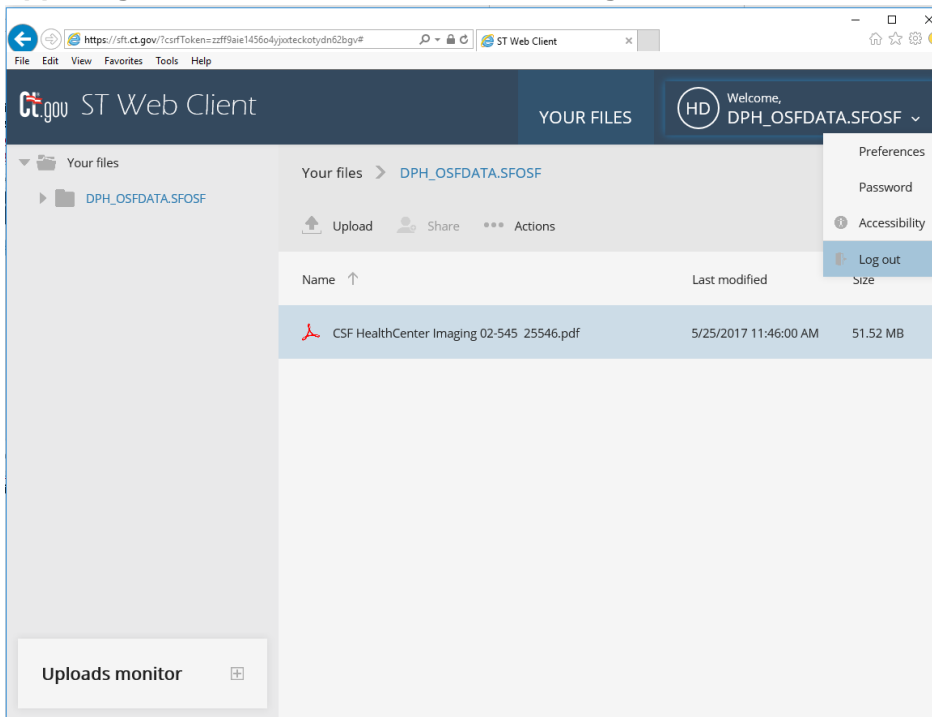
4. You will see the file name along with an upload status bar showing the progress of the file transfer. This may take some time to complete depending on the size of the file and your upstream bandwidth.



5. Once the file has been completely uploaded you will see the screen refresh with the filename listed under the “Name” heading and the progress bar will disappear. You will be able to click on the file to view or download it. You may also ‘right-click’ on the file to bring up other options, such as to delete it or rename it.



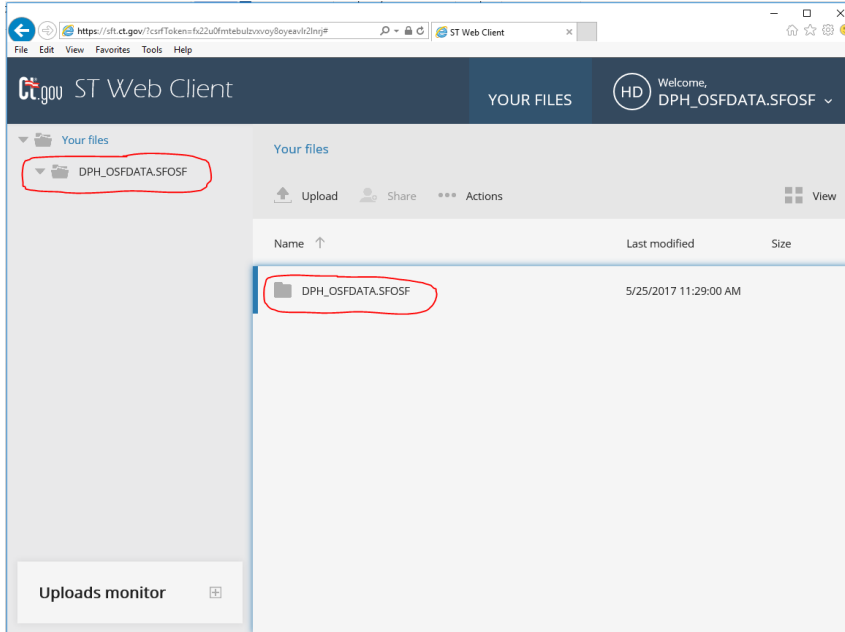
6. Once you have completed the file transfer you may click on your username in the upper right-hand corner and select the “Log Out” button.



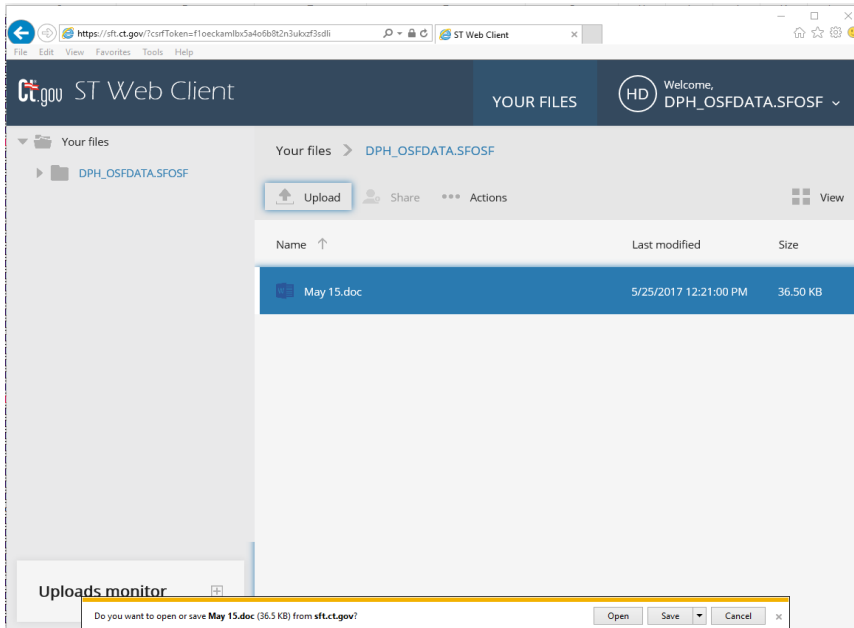
3. Downloading Files from the Secure File Transfer Web Client

To download a file from the SFT Web Client:

1. **First, Log into the Secure File Transfer Web Client** using the procedure found in the “Connecting to the SFT Web Client” section of this document.
2. Once you are logged in you will see a screen similar to the one shown below. **Click on your folder to enter inside of it and see the list of files.**



3. You can then simply click on the file and **you should be presented with an open or save file dialog window.**



4. **Save the file to a safe place for future use.**
5. **Log out by clicking on your username and selecting 'Log Out'.**

3. Data File Name, Layout and Edit Specifications

A health care facility that selects the file upload option must submit a complete comma-separated values (.csv) data set for all patient encounters that occurred at each location of the facility for the January 2 and July 1 reporting periods specified in Section 1.

1. Data file name format

The naming convention for each .csv data set for a reporting period must be made up of the following:

- i. The five-letter DPH assigned abbreviation for facility name, e.g., DPHSF (see **Appendix 2** for reporting facility's abbreviation);
- ii. The corresponding federal fiscal year (October 1 to March 31) for the filing period (e.g., FY2015); and
- iii. The corresponding federal fiscal quarters for the filing period e.g. Q1Q2, where Q1Q2 = Oct 1-Mar 31; Q3Q4 = Apr 1- Sep 30

These must be put together as **DPHSF_FFY2015_Q1Q2**.

2. Data File Layout

A record for each encounter must contain complete encounter and billing data for all the data elements in the record types specified in the data layout (Appendix 3) and (a) to (c) below.

- a. A record for each patient encounter must include: a type 2 data record for the patient's demographic information; followed by a type 3 data record for diagnoses information; and then at least one type 4 data record(s) for procedural and billing information. This means that multiple type 4 data records may be filed for an encounter.
- b. A type 2 data record must never immediately follow another type 2 data record. A type 3 data record for a given encounter must never immediately follow a type 3 data record for a different encounter.
- c. Each facility must submit a single header data record, data record type 1, and a single trailer data record, data record type 5, which must enclose the data records for all encounters contained in any submission, if more than one facility's data set is submitted on a file, each facility's data set must be delimited by its own type 1 and type 5 data records.

Merge all record types in a single set of data records for an encounter. Below is a sample file Notepad or Microsoft Excel:

Notepad:

```

test file - Notepad
File Edit Format View Help
01,1588681373,272,1373,Surgery Center,410 CAPITOL AVE,HARTFORD,CT,6385,DOE,JANE,8605091111,8605092222,,2/28/2014,9/1/2013,9/30/2013,
02,1588681373,272,3,3,831,9/3/2013,Doe,John,,47301023,31436,31436,79 HARBOR DRIVE,APT
320,109,CT,6940,,4/22/1940,M,1,,7,2,3,5,16685,1245334877,,,13101,MEDICARE PART B,,1,813,AARP,,53,,,,,6063.78
03,1588681373,272,31436,31436,0,H2510,
04,1588681373,272,31436,31436,9/3/2013,9/3/2013,490,66984,RT,,,1,,,,,1,5963.76,16685,1245334877,
04,1588681373,272,31436,31436,9/3/2013,9/3/2013,490,V2632,,,,,1,,,,,1,100,16685,1245334877,
04,1588681373,272,31436,31436,9/3/2013,9/3/2013,490,G8907,,,,,1,,,,,1,0.01,16685,1245334877,
04,1588681373,272,31436,31436,9/3/2013,9/3/2013,490,G8918,,,,,1,,,,,1,0.01,16685,1245334877,
02,1588681373,272,3,3,831,9/18/2013,Abcd,John,,45368403,31165,31165,135 My ROAD,,110,CT,6444,,7/18/1946,F,1,,,7,2,3,5,33284,1255335113,,,816,BLUE CROSS
FEDERAL,,6,00CHP,CIGNA,,53,,,,,6063.76
03,1588681373,272,31165,31165,0,H2510,H2510,
04,1588681373,272,31165,31165,9/18/2013,9/18/2013,490,66984,LT,,,1,2,,,1,5963.76,33284,1255335113,
04,1588681373,272,31165,31165,9/18/2013,9/18/2013,490,V2632,,,,,1,2,,,1,100,33284,1255335113,
05,1588681373,272,1373,455,4161410.91,

```

Microsoft Excel

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P				
1	01	1588681373	272	1373	Surgery Center	410 CAPITOL AVE	HARTFORD	CT		6385	DOE	JANE	8605091111	8605092222		2/28/2014	9/1/2013	9/30/2013		
2	02	1588681373	272	3	3	831	9/3/2013	Doe	John		47301023	31436	31436	79 HARBOR DRIVE	APT 320		109	CT		
3	03	1588681373	272	31436	31436															
4	04	1588681373	272	31436	31436	9/3/2013	9/3/2013	490	66984	RT									1	
5	04	1588681373	272	31436	31436	9/3/2013	9/3/2013	490	V2632										1	
6	04	1588681373	272	31436	31436	9/3/2013	9/3/2013	490	G8907										1	
7	04	1588681373	272	31436	31436	9/3/2013	9/3/2013	490	G8918										1	
8	02	1588681373	272	3	3	831	9/18/2013	Abcd	John		45368403	31165	31165	135 My ROAD					110	CT
9	03	1588681373	272	31165	31165															
10	04	1588681373	272	31165	31165	9/18/2013	9/18/2013	490	66984	LT									1	2
11	04	1588681373	272	31165	31165	9/18/2013	9/18/2013	490	V2632										1	2
12	05	1588681373	272	1373	455	4161410.91														
13																				
14																				

4. Data Edits, Error Notification and Correction

1. Data fields definitions and error checking adopted in the web portal/application conform to current standards and definitions, as from time to time amended, of the following:
 - a. National Uniform Billing Committee (NUBC) UB-04 or CMS 1450 Uniform Billing Manual;
 - b. National Uniform Claim Committee (NUCC) 1500 Claim Form Instruction Manual;
 - c. Accredited Standards Committee X12 (ASC X12) Health Care Claim: Professional (837P);
 - d. Accredited Standards Committee X12 (ASC X12) Health Care Claim: Institutional (837I);
 - e. Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS) International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM);
 - f. Physician's Current Procedural Terminology (CPT®) of the American Medical Association;
 - g. Centers for Medicare and Medicaid (CMS) Common Procedure Coding System (HCPCS)
 - h. NCHS, Centers for Disease Control and Prevention (CDC) Source of Payment Typology Codes;
 - i. ICD-10-CM Official Guidelines for Coding and Reporting;
 - j. CMS Medicare Code Editor (MCE) Guidelines;
 - k. CMS Medicare Outpatient Code Editor (OCE);
 - l. CMS National Correct Coding Initiative Policy Manual for Medicare Services; and
 - m. The Health Insurance Portability and Accountability Act (HIPAA).

2. Rules for diagnosis coding¹

Adhere to the Official Guidelines, a summary of which is as follows:

- a. Record reported diagnosis and complications according to the conventions governing the coding of diagnoses for same day or outpatient surgeries and as contained in the most current version of the International Classification of Diseases, 10th Revision, Clinical Modification ("ICD-10-CM") and general and disease specific guidelines.
- b. Identify diagnoses, symptoms, conditions, problems, complaints and other reason(s) for the encounter/visit with the appropriate code(s) from A00.0 through T88.9, Z00-Z99.
- c. First listed condition or principal diagnosis and complications refer to diagnoses that affect the encounter.

¹ ICD-10-CM Official Guidelines for Coding and Reporting

- d. The first listed condition or principal diagnosis refers to the reason the patient presented for surgery even if the surgery was not performed due to a contraindication.
- e. Complications or secondary diagnoses refer to those conditions, exclusive of the first listed or principal diagnosis which exist at the time of the encounter or develop after the patient presents for outpatient surgery and require admission to observation.
- f. For a confirmed diagnosis, if the postoperative diagnosis is different from the preoperative diagnosis, then report the postoperative diagnosis as the first listed or principal diagnosis.
- g. Code diagnoses in the most specific category available for that diagnosis at the time of the encounter. Do not assign a less specific diagnosis if a more specific code is available for that diagnosis.
- h. Diagnosis codes must be the unique and valid highest number of characters ICD-10-CM codes. Enter diagnosis codes as a 3-7 character code. The 1st is always alpha and uses all letters except U; the 2nd character is numeric; and the 3rd to 7th characters can be alpha or numeric; alpha characters are not case sensitive and decimal points are to be implied, not explicit.
- i. Record all diagnoses consistent with what is on the patient's bill or medical record for the encounter. For a given encounter if there are more than nine unique secondary diagnoses on either the bill or medical record, then report nine diagnoses on the data record. If there are fewer than nine unique secondary diagnoses on both the patient's bill and encounter abstract, then leave the unused space reserved for the additional diagnoses blank.

3. Rules for procedure coding²

Adhere to the official guidelines, a summary of which is as follows:

- a. Procedure means a significant procedure that is surgical in nature; carries a procedural or anesthetic risk; or requires specialized training or special facilities or equipment.
- b. Principal procedure means that procedure most closely related to the principal diagnosis which is performed for the definitive treatment of the patient.
- c. The principal procedure cannot be a procedure performed for a diagnostic or exploratory purpose only or to resolve a complication, unless these are the only types of procedures performed on the patient for the encounter.
- d. Other procedures are other significant procedures in addition to the principal procedure.

² American Medical Association Official Coding Guidelines

- e. Enter procedure codes as a 5-digit CPT or HCPCS code. Leave other procedure fields blank if not applicable.
- f. If a procedure has been reported to diagnose or treat a complication, then report the complication as a secondary diagnosis.
- g. Report procedures consistently with those contained on the patient's bill and medical record for the encounter or visit.
- h. The first two other procedures must be consistent with those contained on the patient's CMS 1500 bill for the encounter being recorded. The remaining seven procedures must be taken from either the patient bill or the patient encounter abstract.
- i. Record all procedures consistent with what is on the patient's bill or medical record for the encounter. For a given encounter if there are more than nine unique secondary procedures on either the bill or medical record, then report nine procedures on the data record. If there are fewer than nine unique secondary procedures on both the patient's bill and encounter abstract, then leave the unused space reserved for the additional procedures blank.
- j. Report the date on which the procedure was performed for each procedure. Leave a procedure date field blank if there is no corresponding procedure.
- k. The service or procedure may be further described by using the 2-position CPT/HCPCS modifiers.

4. Revenue data elements coding for procedures, services and supplies

- a. For two or more surgical procedures, include an itemized charge for each procedure or roll up surgery charges to one line and indicate zero charges for line items included in the global charge.
- b. For multiple procedures itemized separately, repeat revenue codes with respective CPT codes, unit of service and charges.
- c. If you "roll up" the charges for multiple surgeries to the primary surgical procedure, report zero charges for the other procedures performed in the same surgical setting. Do not report greater than one unit on each surgery procedure.
- d. If grouping services, the place of service, procedure code, charges, and individual provider for each line must be identical for that service line. Group services only if the services were on consecutive days.
- e. Report revenue codes to the fourth digit within the 0200-0999 range of the UB-04 billing manual maintained by the National Uniform Billing Committee (NUBC), **Appendix 2**. Report total units of service and total charges corresponding to individual CPT/HCPCS for an encounter as reported on the CMS 1500 claim form.

- f. Report billing (or revenue) data elements, units of service and accrued charges consistent with CPT/HCPCS codes reporting.
- g. The combination of a revenue code and a CPT code must be unique for each encounter type 4 data records. Aggregate charges and units of services at the revenue/CPT code combination level.

5. Payer and Source of Payment Coding

- a. Report payer name or identification and code using **Appendix 3**. Report HIPAA National Plan Identifier instead when the federal mandate becomes effective.
- b. Report the expected source of payment code using **Appendix 4** and the greatest level of detail, if the information exists. **Appendix 5** is the crosswalk between payer typology and the source of payments codes OHCA currently utilizes.

6. OHCA Data Review

OHCA will review each data set submitted and notify a health care facility whose filed data does not satisfy the following standards for any filing period:

- a. Values or codes for each data element in the filing are consistent with the values or codes provided by OHCA;
- b. Data elements related to other data elements within an individual record are consistent in substantive content;
- c. Coding values indicating “not available,” “unknown,” or any other such value or term indicating that the valid code, value or range of values for a particular data element is not available or missing are not used unless permitted by the office; and
- d. The number of individual records in the filing containing errors specified do not exceed one percent of the total number of individual records filed.

7. The notification from OHCA will:

- a. Indicate if the data is unusable because it was corrupted or failed to conform to specifications;
- b. Identify the data elements for any encounter which are in error, suspected of being in error, or otherwise do not satisfy the standards set by the office; and
- c. Indicate if the facility has to submit a new data file for the period or make corrections to specific records or data fields in error.

- 8. The notified health care facility must correct the errors according to the standards set by the office and submit the corrections, via SFTP, to OHCA not later than twenty business days after the notification (for the process see Section 2).

9. If OHCA finds errors not discovered during the initial review of the filing, the health care facility must file revisions OHCA requests not later than twenty business days after the notification.

5. Glossary

Terms and Abbreviations

Term	Meaning
CT-DPH	State of Connecticut Department of Public Health
OHCA	Office of Health Care Access a division of DPH
SFT	Secure file transfer web for facilities with IT resources to automate data filing
VPN	Virtual Private Network
VPN key	Facilitates access to the State's VPN
Web portal	The secure web application that enables keying in the required data directly

6. Appendices

Appendix 1: Connecticut General Statutes Section 19a-654

Sec. 19a-654. (Formerly Sec. 19a-167k). Data submission requirements. Memorandum of understanding. Regulations.

(a) As used in this section:

- (1) "Patient-identifiable data" means any information that identifies or may reasonably be used as a basis to identify an individual patient; and
- (2) "De-identified patient data" means any information that meets the requirements for de-identification of protected health information as set forth in 45 CFR 164.514.

(b) Each short-term acute care general or children's hospital shall submit patient-identifiable inpatient discharge data and emergency department data to the Office of Health Care Access division of the Department of Public Health to fulfill the responsibilities of the office. Such data shall include data taken from patient medical record abstracts and bills. The office shall specify the timing and format of such submissions. Data submitted pursuant to this section may be submitted through a contractual arrangement with an intermediary and such contractual arrangement shall (1) comply with the provisions of the Health Insurance Portability and Accountability Act of 1996 P.L. 104-191 (HIPAA), and (2) ensure that such submission of data is timely and accurate. The office may conduct an audit of the data submitted through such intermediary in order to verify its accuracy.

(c) An outpatient surgical facility, as defined in section 19a-493b, a short-term acute care general or children's hospital, or a facility that provides outpatient surgical services as part of the outpatient surgery department of a short-term acute care hospital shall submit to the office the data identified in subsection (c) of section 19a-634. The office shall convene a working group consisting of representatives of outpatient surgical facilities, hospitals and other individuals necessary to develop recommendations that address current obstacles to, and proposed requirements for, patient-identifiable data reporting in the outpatient setting. On or before February 1, 2012, the working group shall report, in accordance with the provisions of section 11-4a, on its findings and recommendations to the joint standing committees of the General Assembly having cognizance of matters relating to public health and insurance and real estate. Additional reporting of outpatient data as the office deems necessary shall begin not later than July 1, 2015. On or before July 1, 2012, and annually thereafter, the Connecticut Association of Ambulatory Surgery Centers shall provide a progress report to the Department of Public Health, until such time as all ambulatory surgery centers are in full compliance with the implementation of systems that allow for the reporting of outpatient data as required by the commissioner. Until such additional reporting requirements take effect on July 1, 2015, the department may work with the Connecticut Association of Ambulatory Surgery Centers and the Connecticut Hospital Association on specific data reporting initiatives

provided that no penalties shall be assessed under this chapter or any other provision of law with respect to the failure to submit such data.

- (d) Except as provided in this subsection, patient-identifiable data received by the office shall be kept confidential and shall not be considered public records or files subject to disclosure under the Freedom of Information Act, as defined in section 1-200. The office may release de-identified patient data or aggregate patient data to the public in a manner consistent with the provisions of 45 CFR 164.514. Any de-identified patient data released by the office shall exclude provider, physician and payer organization names or codes and shall be kept confidential by the recipient. The office may release patient-identifiable data (1) as provided for in section 19a-25 and regulations adopted pursuant to section 19a-25, and (2) to (A) a state agency for the purpose of improving health care service delivery, (B) a federal agency or the office of the Attorney General for the purpose of investigating hospital mergers and acquisitions, or (C) another state's health data collection agency with which the office has entered into a reciprocal data-sharing agreement for the purpose of certificate of need review or evaluation of health care services, upon receipt of a request from such agency, provided, prior to the release of such patient-identifiable data, such agency enters into a written agreement with the office pursuant to which such agency agrees to protect the confidentiality of such patient-identifiable data and not to use such patient-identifiable data as a basis for any decision concerning a patient. No individual or entity receiving patient-identifiable data may release such data in any manner that may result in an individual patient, physician, provider or payer being identified. The office shall impose a reasonable, cost-based fee for any patient data provided to a nongovernmental entity.
- (e) Not later than October 1, 2011, the Office of Health Care Access shall enter into a memorandum of understanding with the Comptroller that shall permit the Comptroller to access the data set forth in subsections (b) and (c) of this section, provided the Comptroller agrees, in writing, to keep individual patient and provider data identified by proper name or personal identification code and submitted pursuant to this section confidential.
- (f) The Commissioner of Public Health shall adopt regulations, in accordance with the provisions of chapter 54, to carry out the provisions of this section.
- (g) The duties assigned to the Department of Public Health under the provisions of this section shall be implemented within available appropriations.

Appendix 2: Outpatient Surgical Facilities OHCA-Assigned Abbreviations

SURGICAL SERVICES LOCATED ON MAIN HOSPITAL CAMPUSES

Facility Name	OHCA Abbreviation	CT Facility License ID	Facility Address	City	Zip code
Bridgeport Hospital	BHHBS	40	267 Grant Street	Bridgeport	06610
Bristol Hospital	BRHBS	41	41 Brewster Road	Bristol	06010
Charlotte Hungerford Hospital, The	CHHBS	42	540 Litchfield Street	Torrington	06791
Connecticut Children's Medical Center	CCHBS	2CH	282 Washington Street	Hartford	06106
Danbury Hospital	DHHBS	39	24 Hospital Ave	Danbury	06810
Day Kimball Hospital	DKHBS	43	320 Pomfret Street	Putnam	06260
Greenwich Hospital	GHHBS	45	5 Perryridge Road	Greenwich	06830
Griffin Hospital	GRHBS	34	130 Division Street	Derby	06484
Hartford Hospital	HHHBS	46	80 Seymour Street	Hartford	06102
Hospital of Central Connecticut, The	HCHBS	52	100 Grand Street	New Britain	06050
John Dempsey Hospital	JDHBS	65	263 Farmington Avenue	Farmington	06030
Johnson Memorial Hospital	JMHBS	72	201 Chestnut Hill Road	Stafford	06076
Lawrence and Memorial Hospital	LMHBS	47	365 Montauk Avenue	New London	06320
Manchester Memorial Hospital	MMHBS	48	71 Haynes Street	Manchester	06040
Middlesex Hospital	MHHBS	69	28 Crescent Street	Middletown	06457
MidState Medical Center	MDHBS	70	435 Lewis Avenue	Meriden	06451
Milford Hospital, Inc.	MIHBS	31	300 Seaside Avenue	Milford	06460
Norwalk Hospital	NHHBS	53	34 Maple Street	Norwalk	06856
Rockville General Hospital	RGHBS	36	31 Union Street	Vernon	06066
Saint Francis Hospital and Medical Center	SFHBS	54	114 Woodland Street	Hartford	06105
Saint Mary's Hospital, Inc.	SMHBS	55	56 Franklin Street	Waterbury	06706
Saint Vincent's Medical Center	SVHBS	57	2800 Main Street	Bridgeport	06606
Sharon Hospital	SHHBS	71	50 Hospital Hill Road	Sharon	06069
Stamford Hospital, The	STHBS	59	30 Shelburne Road	Stamford	06904
Waterbury Hospital	WHHBS	60	64 Robbins Street	Waterbury	06708
William W. Backus Hospital, The	WBHBS	37	326 Washington Street	Norwich	06360
Windham Community Memorial Hospital	WCHBS	61	112 Mansfield Avenue	Windham	06226
Yale-New Haven Hospital, Inc.	YNHBS	44	20 York Street	New Haven	06519

Total of 28 hospitals providing surgery services at a main hospital campus (includes 27 general hospitals and a children's hospital).

SURGICAL SERVICES AT HOSPITAL SATELLITE LOCATIONS (Indicate Campus in the Data)

Facility Name	OHCA Abbreviation	CT Facility License ID	Facility Address	City	Zip code
Connecticut Children's Ambulatory Surgery Center	CCASC	2CH	505 Farmington Avenue	Farmington	06032
Endoscopy Center of Greenwich Hospital	ECGNH	45	500 West Putnam Avenue	Greenwich	06830
Hartford Hospital's Eye Surgery Center	HHESC	46	505 Willard Avenue	Newington	06111
Hartford Hospital - West Hartford Surgery Center	HWHSC	46	65 Memorial Road	West Hartford	06107
Hospital of Central Connecticut, The (Bradley Memorial Campus)	HOCBM	52	81 Meriden Avenue	Southington	06489
Johnson Surgery Center	JMHSC	33	148 Hazard Avenue	Enfield	06076
Lawrence and Memorial Hospital - Outpatient Surgery Center	LMHSS	47	52 Hazelnut Hill Road	Groton	06340
Leona M. and Harry B. Helmsley Ambulatory Surgical Center	LHHSC	45	55 Holly Hill Lane	Greenwich	06830
Middlesex Hospital-Surgical Center	MHHSC	69	530 Saybrook Road	Middletown	06457
New Milford Hospital Campus	NMHCS	39	21 Elm Street	New Milford	06776
Saint Mary's Hospital- Naugatuck Valley Surgical Center	NVHSS	70	160 Robbins Street	Waterbury	06708
Ridgefield Surgical Center	RSHSS	39	901 Ethan Allen Highway	Ridgefield	06877
Tully Surgery Center	SHTSS	273	32 Strawberry Hill Court	Stamford	06902
Yale New Haven Hospital (GI Lab – St. Raphael Campus)	YGISR	44	1450 Chapel Street	New Haven	06511
Yale New Haven Hospital (St. Raphael Campus)	YNHSR	44	1450 Chapel Street	New Haven	06511
Yale New Haven Hospital (Temple Street Endoscopy Center)	YNTEC	44	40 Temple Street	New Haven	06510
Yale New Haven Hospital - Women's Surgical Center	YNHSS	44	40 Temple Street	New Haven	06510
Yale New Haven Hospital -Temple Surgical Center	YNHTS	44	60 Temple Street	New Haven	06510

Total of 18 satellite locations of hospitals providing surgery services (noting that Yale has four centers at two satellite locations).

LICENSED OUTPATIENT SURGICAL FACILITIES

Facility Name	OHCA Abbreviations	CT Facility License ID	Facility Address	City	Zip code
Aesthetic Surgery Center	ASOSF	318	330 Orchard Street	New Haven	06511
Bloomfield ASC, LLC	DFOSF	350	580 Cottage Grove Road	Bloomfield	06002
Brucato Plastic Surgery Center, LLC	BPOSF	313	38 B Grove Street	Ridgefield	06877
Center for Advanced Reproductive Services, PC	CAOSF	344	263 Farmington Avenue	Farmington	06030
Central Connecticut Endoscopy Center, LLC	CCOSF	291	440 New Britain Avenue	Plainville	06062
Coastal Digestive Care Center, LLC	CDOSF	303	234 A Bank Street	New London	06320
Connecticut Eye Surgery Center South, L.L.C.	CEOSF	277	60 Wellington Road	Milford	06460
CT Fertility P.C.	CFOSF	332	4920 Main Street	Bridgeport	06606
Connecticut Foot Surgery Center	FSOSF	161	318 New Haven Avenue	Milford	06460
Connecticut Orthopaedic Specialists, P.C.	OSOSF	339	84 North Main Street	Branford	06405
Connecticut Surgery Center, LP	SCOSF	270	81 Gillett Street	Hartford	06105
Constitution Surgery Center East, LLC	COOSF	272	174 Cross Road	Waterford	06385
CT GI Endoscopy Center, LLC	CTOSF	300	4 Northwestern Drive	Bloomfield	06002
CVW Body Design Center- Stamford	CVWSF	349	2001 West Main St. Suite 155	Stamford	06902
Danbury Surgical Center	DCOSF	269	73 Sandpit Road	Danbury	06810
Aesthetic Surgery Center, LLC (D/B/A Darien Medical Arts)	DMOSF	317	722 Post Road	Darien	06820
Diagnostic Endoscopy, LLC	DEOSF	301	778 Long Ridge Road	Stamford	06902
Digestive Disease Associates Endoscopy Suite	DDOSF	322	229 Montowese Street	Branford	06405
Eastern Connecticut Endoscopy Center, LLC	ECOSF	295	79 Wawecus Street	Norwich	06360
Endoscopy Center of Connecticut, LLC,	ECCTF	296	1591 Boston Post Road	Guilford	06437
Endoscopy Center of Connecticut, LLC	ENOSF	279	2200 Whitney Avenue	Hamden	06518
Endoscopy Center of Fairfield, The	EFOSF	282	425 Post Road	Fairfield	06824
Endoscopy Center of Northwest Connecticut, LLC, The	NWOSF	278	245 Alvord Park Road	Torrington	06790
Evergreen Endoscopy Center, LLC	EEOSF	324	2400 Tamarack Avenue	South Windsor	06074
Eye Surgery Center, The	EYOSF	271	4 Northwestern Drive	Bloomfield	06002
Fairfield County Endoscopy Center	FCECF	347	888 White Plains Road	Trumbull	06611
Fairfield Surgery Center, LLC	FAOSF	268	305 Black Rock Turnpike	Fairfield	06825
Gary J. Price, M.D., Center for Aesthetic Surgery	GJOSF	312	5 Durham Road	Guilford	06437

Facility Name	OHCA Abbreviations	CT Facility License ID	Facility Address	City	Zip code
Glastonbury Endoscopy Center, LLC	GEOSF	327	300 Western Boulevard	Glastonbury	06033
Glastonbury Surgery Center, LLC	GLOSF	328	195 Eastern Boulevard	Glastonbury	06033
Guilford Surgery Center	GSCSF	346	5 Durham Road	Guilford	06437
HHC Surgery Center	HHHSC	355	31 Seymore Street	Hartford	06106
Laser and Vision Surgery Center, LLC	LVOSF	163	178 Hartford Road	Manchester	06040
Leif Nordberg, MD, Office of	LNOSF	316	166 West Broad Street	Stamford	06902
Litchfield Hills Surgery Center	LHOSF	285	245 Alvord Park Road	Torrington	06790
Middlesex Center for Advanced Orthopedic Surgery, LLC	MCOSF	329	510 Saybrook Road	Middletown	06457
Middlesex Endoscopy Center, LLC	MEOSF	287	410 Saybrook Road	Middletown	06457
Naugatuck Valley Endoscopy Center, LLC Db a Waterbury Surgery Center	NVOSF	284	1312 West Main Street	Waterbury	06708
New Vision Cataract Center	NVCSF	267	605 West Avenue	Norwalk	06850
North Haven Surgery Center, LLC	NHOSF	306	52 Washington Avenue	North Haven	06473
Norwalk Surgery Center, LLC	NSOSF	335	40 Cross Street	Norwalk	06856
Opticare Eye Health Centers, Inc. - Waterbury Outpatient Surgery Center	OEHSF	71	87 Grandview Avenue	Waterbury	06708
Orthopaedic and Neurosurgery Center of Greenwich, LLC	ONOSF	333	55 Holly Hill Lane	Greenwich	06830
Orthopedic Associates Surgery Center, LLC	OAOSF	280	1111 Cromwell Avenue	Rocky Hill	06067
Personal Choice Surgical Center, LLC	PCOSF	325	85 Church Street	Middletown	06457
Plastic Surgery of Southern Connecticut, LLC	PSOSF	293	208 Post Road West	Westport	06880
Reproductive Medicine Associates of Connecticut	RMOSF	345	10 Glover Avenue	Norwalk	06850
River Valley ASC LLC	RVOSF	338	45 Salem Turnpike	Norwich	06360
Robbins Eye Center, PC	REOSF	162	4695 Main Street	Bridgeport	06606
Saint Francis GI Endoscopy, LLC	SFOSF	321	360 Bloomfield Avenue	Windsor	06095
Shoreline Colonoscopy Suites	SHOSF	307	929 Boston Post Road	Old Saybrook	06475
Shoreline Surgery Center, LLC	SLOSF	281	111 Goose Lane	Guilford	06437
Southington Surgery Center	HOCBM	341	81 Meriden Ave. Ste. C301	Southington	06489
Split Rock Surgical Associates D/B/A Neil Gordon Office in Wilton	SROSF	297	539 Danbury Road	Wilton	06897
SSC II, LLC	SSOSF	323	111 Goose Lane	Guilford	06437
Stamford ASC, LLC	SAOSF	351	200 First Stamford Place	Stamford	06902
Summer Street Ambulatory Surgery Center, The	SUOSF	299	1290 Summer Street, Suite 3100	Stamford	06905

Facility Name	OHCA Abbreviations	CT Facility License ID	Facility Address	City	Zip code
Surgery Center of Fairfield County	FFOSF	337	111 Quarry Road	Trumbull	06611
Surgical Center of Connecticut, LLC	SCTSF	340	3101 Main Street	Bridgeport	06606
Western Connecticut Orthopedic Surgical Center, LLC	WCOSF	342	226 White Street	Danbury	06810
Wilton Surgery Center, LLC	WSOSF	289	195 Danbury Road	Wilton	06897
Yale Health Center Outpatient Services	YHOSF	331	55 Lock Street	New Haven	06520
Total of 62 licensed Outpatient Surgical Facility Providers					

Primary Sources: *DPH licensure files and e-licensure database as of May 2017 and survey process undertaken during 2014*

Appendix 3: Data File Layout and Field Edits

Record Type 1: Header

Field #	Data Element Name	Field Type and Size	Description	Valid Contents		SOURCE			Edits
						1500 Form Locator	837 Loop	837 Segment	
1	Record Type	AN(2)	File type identifier	01					Missing or invalid
2	Facility National Provider ID	AN(10)	National Provider Identification (NPI) of the billing provider			32a	2310D	NM109	Missing or invalid
3	CT Facility License ID	AN(9)	Connecticut license number						Missing or invalid
4	Medicare Provider ID	AN(4)	Last four characters of ID						
5	Facility Name	AN(50)							Missing or invalid
6	Facility Address	AN(25)	Service facility location information			32	2310D	N301	Missing or invalid
7	Facility City	AN(16)	<i>Same description as field #6</i>			32	2310D	N401	Missing or invalid
8	Facility State	AN(2)	<i>Same description as field #6</i>			32	2310D	N402	Missing or invalid
9	Facility Zip Code	AN(5)	<i>Same description as field #6</i>			32	2310D	N403	Missing or invalid
10	Facility Contact _Last Name	AN(20)							Missing
11	Facility Contact_First Name	AN(20)							Missing
12	Facility Contact_Phone Number	N(10)							Missing, invalid no spaces or special characters
13	Facility Contact_Fax Number	N(10)							Missing, invalid no spaces or special characters
14	Facility Contact_Email Address	AN(25)							Missing or invalid
15	Processing Date	mm/dd/yyyy	Date file was created						Missing or invalid
16	Period Start Date	mm/dd/yyyy							Missing or invalid
17	Period End Date	mm/dd/yyyy							Missing or invalid

Record Type 2: Encounter Table

Field#	Data Element Name	Field Type and Size	Description	Valid Contents		SOURCE			Edits
						1500 Form Locator	837 Loop	837 Segment	
1	Record Type	AN(2)	File type identifier	02					Missing or invalid
2	Facility National Provider ID	AN(10)	National Provider Identification (NPI) of the billing provider			32a	2310D	NM109	Missing or invalid
3	CT Facility License ID	AN(9)	Connecticut license number						Missing or invalid
4	Account Type	A(1)		<u>Code</u>	<u>Description</u>				
				3	Outpatient Surgery Center				
5	Facility Type	A(1)	The type of facility	<u>Code</u>	<u>Description</u>				Missing or invalid
				1	Hospital				
				2	Hospital Satellite				
				3	Freestanding Center				
6	Bill Type	AN(4)	4th character is type of bill frequency code = 1	<u>Code</u>	<u>Description</u>				
				131	Hospital outpatient				
				831	Ambulatory surgery center				
7	Date of Service	mm/dd/yyyy	The actual month, day, and year the service was provided. Grouping services refers to a charge for a series of identical services without listing each date of service			24A	2400	DTO(472)	Missing
8	Patient Last Name	AN(50)	Last name of the person who received the treatment or supplies			2	2010CA	NM103	Missing
9	Patient First Name	AN(50)	First name of the person who received the treatment or supplies			2	2010CA	NM104	Missing
10	Patient Middle Initial	AN(1)	Subscriber middle initial			2	2010CA	NM105	
11	Patient Social Security Number	AN(9)	Social security number of the patient						Missing

12	Medical Record Number	AN(24)	The number assigned to the patient's medical/health record by the provider				2300	REF02	Missing
13	Patient Control Number	AN(24)	The identifier assigned by the provider as the patient account number			26	2300	CLM01	Missing Up to 20 characters
14	Patient Street Address1	AN(50)	The patient's permanent residence			5	2010CA	N301	No punctuations or symbols e.g 123 N Main Street 101 instead of 123 N. Main Street, #101
15	Patient Street Address2	AN(50)	A continuation of the patient's permanent residence			5	2010CA	N302	
16	Patient Address – City	AN(30)	The city/town of the patient's permanent residence			5	2010CA	N401	
17	Patient Address – State	AN(2)	The patient's permanent US states or territories residence.	<u>Code</u>	<u>Description</u>	5	2010CA	N402	Missing or Invalid
				Use valid US states and territories abbreviations in addition to:					
				98	Homeless				
				99	Unknown				
18	Patient Address - Zip	AN(5)	The US states and territories zip code of the patient's permanent residence	<u>Code</u>	<u>Description</u>	5	2010CA	N403	Missing or Invalid
				Use valid US zip codes in addition to:					
				00000	Unknown				
				99997	Canada				
				99998	Mexico				
				99999	Other country				
19	Patient Address – Zip code Ext	AN(4)	A continuation of the patient's zip code			5	2010CA	N403	
20	Patient Birth Date	mm/dd/yyyy	The patient's birth date			3	2010CA	DMG02	Missing
21	Patient Sex	AN(1)	The patient's sex	<u>Code</u>	<u>Description</u>	3	2010CA	DMG03	Missing or Invalid
				M	Male				
				F	Female				
				O	Other				
22	Point of Origin for Visit	AN(1)		<u>Code</u>	<u>Description</u>		2300	CL101	Missing or

			A code indicating the point of patient origin for this admission or visit.	0	Information not available				Invalid
				1	Non-health care facility point of origin				
				2	Clinic or physician's office				
				4	Transfer from a hospital (acute care facility)				
				6	Transfer from another health care facility				
				8	Court/law enforcement				
23	Patient Discharge Status	AN(2)	A code indicating the disposition or discharge status of the patient at the end service for the period covered on this bill. (Add other valid NUBC codes when applicable)	<u>Code</u>	<u>Description</u>				Missing or Invalid
				1	Home or self-care				
				2	Discharged or transferred to another short term general hospital for inpatient care				
				9	Admitted as an inpatient to this hospital				
24	Patient Ethnicity	AN(1)	Patient's self-disclosed primary ethnicity	<u>Code</u>	<u>Description</u>		2010CA	DMG05-03	Missing or Invalid
				1	Hispanic or Latino				
				2	Not Hispanic or Latino				
				3	Unknown				
				4	Declined to answer				
25	Patient Race	AN(1)	Patient's self-disclosed primary race	<u>Code</u>	<u>Description</u>		2010CA	DMG05-03	Missing or Invalid
				1	White				
				2	Black/African American				
				3	American Indian/Alaskan Native				
				4	Native Hawaiian/Other Pacific Islander				
				5	Asian				
				6	Some other race				
				7	Unknown				
				9	Declined to answer				

26	Relationship to Insured - Primary	AN(2)	How the patient is related to the insured. "Child" implies the patient is a minor dependent, "Other" is other than self, spouse, or child, which may be an employee, ward, or dependent, as defined by the insured's plan.	<u>Code</u>	<u>Description</u>	6	2000C	PAT01	Missing or Invalid
				1	Spouse				
				2	Self				
				3	Child				
				4	Other				
9	Not available								
27	Patient Marital Status	AN(2)	The patient's marital status	<u>Code</u>	<u>Description</u>	8			Missing or Invalid
				1	Single				
				2	Married				
				3	Other				
				9	Not Available				
28	Patient Employment Status	AN(2)	The patient's employment status. "Full Time Student" or "Part-time Student" indicates patient is a registered full-time or part-time student as defined by the post-secondary school or university.	<u>Code</u>	<u>Description</u>	8			Missing or Invalid
				1	Employed				
				2	Full-time student				
				3	Part-time Student				
				4	Other				
9	Not Available								
29	Attending Practitioner Number	AN(9)	State license number of provider			17a	2310A	REF02(1G)	Missing or Invalid
30	Attending Practitioner NPI	AN(10)	The HIPAA National Identification Number of the ordering physician or practitioner in FL 17a			17b	2310A	NM109	Missing or Invalid 10-digit NPI number
31	Referring Practitioner Number	AN(9)	State license number of provider			17a	2310A	REF02(1G)	Missing or Invalid
32	Referring Practitioner NPI	AN(10)	The HIPAA National Identification Number of the referring physician or practitioner in FL 17a			17b	2310A	NM109	Missing or Invalid 10-digit NPI number
33	Primary Payer ID	AN(5)	The code of the plan or program of the insured as indicated in FL 11c	See Appendix 4					Missing or Invalid
34	Primary Payer Description1	AN(25)	The insurance plan or program name	See Appendix 4		11c	2000B	SBR04	Missing or Invalid

35	National Health Plan ID 1	AN(15)	Obtained through CMS Health Plan and Other Entity Enumeration System (HPOES)	<i>As mandated by federal law</i>					
36	Primary Payment Source 1	AN(5)	The insurance type to which the claim is being submitted. "Other" indicates health insurance including HMOs, automobile, accident, or liability.	<u>Code</u>	<u>Description</u>	1	2000B	SBR09	Missing or Invalid
				See Appendix 5/6					
37	Secondary Payer ID	AN(5)	The unique identifier of the other insurer as indicated in Field #33	See Appendix 4					Invalid
38	Secondary Payer Description2	AN(25)	Identified the plan or program of the other insurer	See Appendix 4		9d	2320	SBR04	Invalid
39	National Health Plan ID 2	AN(15)	Obtained through CMS Health Plan and Other Entity Enumeration System (HPOES)	<i>As mandated by federal law</i>					
40	Secondary Payment Source 2		Same description as field # 36	See Appendix 5/5a					Missing or Invalid
41	Tertiary Payer ID	AN(5)	Same description as field #33	See Appendix 4					Invalid
42	Tertiary Payer Description2	AN(25)	Same description as field #34	See Appendix 4		9d	2320	SBR04	Invalid
43	National Health Plan ID 3	AN(15)	Obtained through CMS Health Plan and Other Entity Enumeration System (HPOES)	<i>As mandated by federal law</i>					
44	Tertiary Payment Source 3	AN(1)	Same description as field # 36	See Appendix 5/5a					Missing or Invalid
45	Total Charges	N(12)	Total charges for procedure, supplies and services for encounter being recorded			28	2300	CLM02	Must equal sum of detail charges Non numeric
46	External Cause1	AN(8)	The "Diagnosis or Nature of Illness or Injury" - is the sign, symptom, complaint, or condition of the patient relating to the service(s) on the claim. Valid codes V00-Y99			21(1)	2300	HI01	Missing or Invalid for any two DX2-DX10 = S00-T88 7th character is not A, D or S No decimals
47	External Cause2	AN(8)	Same description as field #48			21(2)	2300	HI02	Missing or Invalid for any two DX2-DX10 = S00-T88

										7th character is not A, D or S No decimals
48	External Cause3	AN(8)	Same description as field #48			21(3)	2300	HI03		Missing or Invalid for any two DX2-DX10 = S00-T88 7th character is not A, D or S No decimals

Record Type 3: Diagnosis Table

Field #	Data Element Name	Field Type and Size	Description	Valid Contents		SOURCE			Edits
						1500 Form Locator	837 Loop	837 Segment	
1	Record Type	AN(2)	File type identifier	03					Missing or invalid
2	Facility National Provider ID	AN(10)	National Provider Identification (NPI) of the billing provider			32a	2310D	NM109	Missing or invalid
3	CT Facility License ID	AN(9)	Connecticut license number						Missing or invalid
4	Medical Record Number	AN(24)	The number assigned to the patient's medical/health record by the provider				2300	REF02	Missing
5	Patient Control Number	AN(24)	The patient's account number assigned by the provider.			26	2300	CLM01	Missing
6	ICD Version Indicator	AN(2)	9 – ICD-9 0 – ICD-10						Missing or invalid
7	Diagnosis Code1 ICD-10-CM	AN(8)	The first listed condition or reported diagnosis refers to the reason the patient presented for surgery even if the surgery was not performed due to a contraindication. For a confirmed diagnosis, if the postoperative diagnosis is different from the preoperative diagnosis, then report the postoperative diagnosis as the principal diagnosis.			21A	2300	HI01	Missing Invalid code External cause of morbidity code as principal diagnosis (V00-Y99) Duplicate diagnosis Invalid age Age or sex conflict

8	Diagnosis Code2 ICD-10-CM	AN(8)	Complications or secondary diagnoses refer to those conditions, exclusive of the principal diagnosis which exist at the time of the encounter or develop after the patient presents for outpatient surgery and require admission to observation.			21B	2300	HI02	Invalid codes Duplicate diagnosis Invalid age Age or sex conflict
9	Diagnosis Code3 ICD-10-CM	AN(8)	<i>Same description as field # 8</i>			21C	2300	HI03	Same as field #8
10	Diagnosis Code4 ICD-10-CM	AN(8)	<i>Same description as field # 8</i>			21D	2300	HI04	Same as field #8
11	Diagnosis Code5 ICD-10-CM	AN(8)	<i>Same description as field # 8</i>			21E			Same as field #8
12	Diagnosis Code6 ICD-10-CM	AN(8)	<i>Same description as field # 8</i>			21F			Same as field #8
13	Diagnosis Code7 ICD-10-CM	AN(8)	<i>Same description as field # 8</i>			21G			Same as field #8
14	Diagnosis Code8 ICD-10-CM	AN(8)	<i>Same description as field # 8</i>			21H			Same as field #8
15	Diagnosis Code9 ICD-10-CM	AN(8)	<i>Same description as field # 8</i>			21I			Same as field #8
16	Diagnosis Code10 ICD-10-CM	AN(8)	<i>Same description as field # 8</i>			21J			Same as field #8

Record Type 4: Procedure Table

Field #	Data Element Name	Field Type and Size	Description	Valid Contents		SOURCE			Edits
						1500 Form Locator	837 Loop	837 Segment	
1	Record Type	AN(2)	File type identifier	04					Missing or invalid
2	Facility National Provider ID	AN(10)	National Provider Identification (NPI) of the billing provider			32a	2310D	NM109	Missing
3	CT Facility License ID	AN(9)	Connecticut license number						Missing or invalid
4	Medical Record Number	AN(24)	The number assigned to the patient's medical/health record by the provider				2300	REF02	Missing

5	Patient Control Number	AN(24)	The patient's account number assigned by the provider.			26	2300	CLM01	Missing
6	Date of Service_From	mm/dd/yyyy	The beginning service date of each procedure			24A	2400	DTP(472)	Missing
7	Date of Service_To	mm/dd/yyyy	The ending service date of each procedure			24A	2400	DTP(472)	Missing
8	Revenue Code (UB-04)	N(4)		See Appendix 6					Combination with CPT/HCPC code not unique
9	CPT4/HCPC Code	AN(5)	Enter the procedures, services or supplies using the CMS HCPCS Coding System			24D	2400	SV101-2	Combination with revenue code not unique
10	1 st Modifier for CPT4/HCPC Code	AN(2)	Provides specificity to a service or procedure rendered for reimbursement purposes			24D	2400	SV101-3	Inconsistent with Medicare Code Editor
11	2 nd Modifier for CPT4/HCPC Code	AN(2)	<i>Same description as field #10</i>			24D	2400	SV101-4	Inconsistent with Medicare Code Editor
12	3 rd Modifier for CPT4/HCPC Code	AN(2)	<i>Same description as field #10</i>			24D	2400	SV101-5	Inconsistent with Medicare Code Editor
13	4 th Modifier for CPT4/HCPC Code	AN(2)	<i>Same description as field #10</i>			24D	2400	SV101-6	Inconsistent with Medicare Code Editor
14	Diagnosis Pointer 1	N(4)	A pointer to the primary diagnosis to each service line. Use remaining diagnosis pointers in declining level of importance to service line			24E	2400	SV107-1	
15	Diagnosis Pointer 2	N(4)	A pointer to the secondary diagnosis in declining level of importance to service line			24E	2400	SV107-2	
16	Diagnosis Pointer 3	N(4)	<i>Same description as field #15</i>			24E	2400	SV107-3	
17	Diagnosis Pointer 4	N(4)	<i>Same description as field #15</i>			24E	2400	SV107-4	
18	Units of Service	N(7)	The number of days or units. If only one service is performed, enter the number 1			24G	2400	SV104 (UN) SV104 (MJ) SV104 (F2)	Decimal allowed Convert hours into minutes

19	Charges	N(9)	The total billed for each service line. Charges have to be for unique revenue codes and/or CPT/HCPC code combinations, else there will be double counting			24F	2400	SV102	Charges be for unique revenue and CPT/HCPC codes combinations, else there will be double counting
20	Rendering Physician State ID	AN(9)	CT State license number for physician rendering procedure or service						Missing or invalid
21	Rendering Physician NPI	AN(10)	Rendering provider national provider identifier			24J	2310B	NM109	Missing

Record Type 5: Trailer

Field #	Data Element Name	Field Type and Size	Description	Valid Contents	SOURCE			Edits
					1500 Form Locator	837 Loop	837 Segment	
1	Record Type	AN(2)	File type identifier	05				Missing or invalid
2	Facility National Provider ID	AN(10)	National Provider Identification (NPI) of the billing provider		32a	2310D	NM109	Missing
3	CT Facility License ID	AN(9)	Connecticut license number					Missing or invalid
4	Medicare Provider ID	AN(4)	Last four characters of ID					
5	Total Encounters	N(6)	The total number of discharges or encounters for the reporting period					Missing Non numeric Not equal to total number of encounters
6	Total Charges	N(12)	The sum charges for all encounters for the reporting period					Missing Non-numeric Not equal to sum of individual charges

Appendix 4: Payer identification code, name and description

Payer Code	Payer Description
01074	AETNA CASUAL & SURETY OF AMER
00005	AETNA CASUAL & SURETY OF AMER
00006	AETNA CASUAL & SURETY OF ILL
00007	AETNA INSURANCE COMPANY
00008	AETNA LIFE & CASUALTY CO.
00009	AETNA LIFE INSURANCE CO
00012	AGWAY INSURANCE CO
00013	AID ASSOC FOR LUTHERANS
00014	ALEX HAMILTON LIFE INS OF AMER
00016	ALL AMERICAN LIFE INS CO
00018	ALLSTATE INSURANCE CO.
00019	ALLSTATE LIFE INSURANCE CO
00021	AMALGAMATED LIFE
00023	AMER AMICABLE LIFE INS
00026	AMERICAN BANKERS INS OF FLA
00027	AMERICAN CASUALTY OF READING
00035	AMERICAN GENERAL GR INS
00042	AMERICAN HARDWARE MUTUAL
00043	AMER HEALTH AND LIFE INS CO
00044	AMERICAN HERITAGE LIFE
00045	AMERICAN HOME ASSURANCE CO
00048	AMER INS OF TEXAS
00056	AMERICAN MOTORISTS INS CO
00057	AMERICAN MUTUAL
00058	AMERICAN MUTUAL
00059	AMERICAN NATIONAL INS
00060	ANTHEM BLUE CROSS
00061	AMERICAN POLICYHOLDER'S INS
00062	AMERICAN PROGRESSIVE
00063	AMERICAN REPUBLIC INS CO
00064	AMER RESERVE LIFE INS
00066	BLUE CROSS 65 PLAN
00068	AMERICAN STATES INSURANCE CO
00069	AMERICAN UNITED LIFE INS CO
00070	AMERICAN UNDERWRITERS
00074	ASSOCIATED INDEMNITY CORP
00075	ASSOCIATION LIFE INSURANCE CO
00078	AULTCARE
00082	BANKERS LIFE & CASUALTY
00083	PRINCIPAL MUTUAL LIFE
00085	BANKERS MULTIPLE LIFE INS CO
00086	BANKERS NATIONAL LIFE INS CO
00087	BANKERS SECURITY LIFE INS SOC

00090	BENEFICIAL STANDARD LIFE INS
00091	BENEFIT TRUST LIFE INSURANCE
00092	BERKSHIRE LIFE INS CO
00093	BIRMINGHAM FIRE INS OF PENN
00096	BOSTON MUTUAL LIFE INSUR CO
00097	BOSTON OLD COLONY INSUR CO
000SW	STONE AND WEBSTER, INC (CBA)
00100	BUSINESS MENS ASSUR CO OF AMER
00105	CALIFORNIA-WESTERN STATES LIFE
00106	CANADA LIFE ASSURANCE CO
00107	CAPITAL LIFE
00108	CAPP CARE OHIO BRICK LAYERS
00110	CENTENNIAL LIFE INS CO
00112	CENTRAL NAT'L INS CO OF OMAHA
00116	CNTRL STATES HLTH & LIFE OMAHA
00119	CHARTER NATIONAL LIFE INS CO
00120	C H C S
00123	CITIZENS INS CO OF AMERICA
00126	CNA INSURANCE COS MAILHANDLRS
00130	COLONIAL LIFE & ACCIDENT INS
00131	COLONIAL LIFE INS CO OF AMER
00132	COLONIAL PENN FRANKLIN INS CO
00133	CONSECO DIRECT (COLONIAL PENN)
00136	COLUMBIAN MUTUAL LIFE INS CO
00139	COMBINED INSURANCE CO OF AMER
00142	COMMERCIAL INSUR CO OF NEWARK
00144	COMMERCIAL TRAVELERS MUTUAL IN
00146	COMMERCIAL UNION INSUR CO
00147	COMMERCIAL UNION LIFE OF AMER
00150	COMPANION LIFE INS CO
00151	CONFEDERATION LIFE INSURANCE
00152	COMPARATIVE INSURANCE
00156	CONN GENERAL IN
00157	CIGNA (CT GEN LIFE)
00158	CONN IDEMNITY CO
00159	CONN MUTUAL LIFE INSURANCE
00160	CONSTITUTION LIFE INS CO
00163	CONTINENTAL ASSURANCE CO
00164	CONTINENTAL ASSURANCE
00166	CONTINENTAL CASUALTY CO
00169	CONTINENTAL INSURANCE
00171	CONTINENTAL LIFE INS CO
00178	CROWN LIFE INS CO
00179	CUNA MUTUAL INS SOCIETY
00180	DELAWARE AMERICAN LIFE INS CO

00182	DOMINION LIFE ASSURANCE
00183	DURHAM LIFE
00185	EDUCATORS MUTUAL LIFE INS CO
00187	EMPIRE STATE MUT LIFE
00190	EMPLOYERS FIRE INS CO
00191	EMPLOYERS INS OF WAUSAU
00192	WAUSAU INSURANCE COMPANY
00193	EMPLOYERS MUTUAL CASUALTY CO
00194	EUROPE ASSISTANTS
00197	EQUITABLE LIFE ASSURANCE
00201	FAMILY LIFE INS CO
00203	FARM FAMILY LIFE INS CO
00205	FARMERS & TRADERS LIFE INS CO
00207	FEDERAL INS CO
00213	FIDELITY BANKERS LIFE INS
00214	FIDELITY AND CASUALTY OF NY
00215	FIDELITY INTERSTATE LIFE
00216	FIDELITY MUTUAL LIFE INS CO
00217	FIDELITY SECURITY LIFE INS CO
00218	FIRE & CASUALTY INS CO OF CT
00219	FIREMAN'S FUN AMERICA
0021H	21ST CENTURY HEALTH
00221	FIREMAN'S FUND INS CO
00223	FIREMAN'S INS CO OF NEWARK NJ
00224	FIRST COLONY LIFE INS CO
00225	FIRST PROVIDIAN
00231	FOREMOST LIFE INS CO
00232	FORTIS BENEFIT
00234	FRANKLIN LIFE INS CO
00235	G E MEDICAL BENEFITS
00236	GENERAL AMERICAN LIFE INS CO
00239	GEORGIA INTERNATIONAL LIFE
00241	GERBER LIFE INS CO
00243	GLEN FALLS INS CO (THE)
00245	GLOBE LIFE & ACCIDENT INS CO
00246	GLOBE LIFE INS CO
00247	GOLDEN RULE INS CO
00250	GOVERNMENT EMPLOYEES INS CO
00252	GRAND VALLEY HEALTH PLAN
00253	GREAT AMERICAN INS CO
00254	GREAT AMERICAN LIFE INS CO
00258	GREAT SOUTHERN LIFE
00259	GREAT-WEST LIFE ASSURANCE CO
00261	GUARANTEE RESERVE LIFE INS CO
00263	GUARDIAN LIFE INS OF AMER THE
00264	HARDEN AND CO

00265	HARRINGTON/BROOKFIELD
00268	HANOVER LIFE
00269	HARTFORD ACCIDENT & INDEMNITY
00270	HARTFORD LIFE & ACCIDENT INS
00271	HARTFORD LIFE INSURANCE CO
00272	HEALTH PLAN SERVICES
00273	HEALTH DIRECT
00275	HOME INS CO
00276	HOME LIFE INSURANCE CO OF AMER
00277	ANTHEM HEALTH & LIFE(HOME LIFE
00278	HOME OWNERS LIFE INS CO
00280	HORACE MANN LIFE INS CO
00282	IDS LIFE INS CO
00286	INA LIFE CO OF CALIF
00287	INA LIFE INS CO / NEW YORK
00288	INDEPENDENCE LIFE/ACCIDENT
00292	INDIANAPOLIS LIFE INS CO
00296	INSURANCE CO OF NORTH AMERICA
00297	INS CO OF THE STATE OF PENNSYLA
00303	EMPIRE BLUE CROSS
00308	EMPIRE BLUE CROSS(MEDICARE)
00309	ITT LIFE INS CORP
00311	J.C. PENNEY LIFE INS CO
00312	JEFFERSON LIFE
00313	JOHN HANCOCK MUTUAL LIFE INS
00316	KEMPER MUTUAL
00318	KENTUCKY CENTRAL LIFE INS CO
00320	KEY BENEFIT ADMINISTRATORS
00322	LAMAR LIFE INS CO
00325	LIBERTY LIFE ASSUR CO OF BOST.
00326	LIBERTY LIFE INSUR CO
00327	LIBERTY MUTUAL INS CO
00332	LIFE INS CO OF GEORGIA
00334	LIFE INS CO OF NORTH AMERICA
00335	LIFE INS CO OF THE SOUTHWEST
00336	LIFE OF THE SOUTH
00339	LINCOLN BENEFIT LIFE CO
00342	LINCOLN NATIONAL LIFE INS CO
00343	LONDON ASSUR OF LONDON, ENG.
00344	LONDON GUARANTEE & ACCIDENT NY
00348	LOYAL AMER LIFE INS CO
00349	LUMBERMENS MUTUAL CASUALTY CO
00350	M S C H HELATH PLAN
00351	MACCABEES MUT LIFE INS
00352	MCC BEHAVIORIAL HEALTH
00355	MANUFACTURERS LIFE INS CO

00357	MARYLAND CASUALTY CO
00358	MASS CASUALTY INS CO
00359	MASS GEN LIFE INS CO
00360	MASS INDEMNITY & LIFE INS CO
00361	UNICARE LIFE & HEALTH INS CO
00362	MASTERCARE
00364	METROPOLITAN LIFE INSURANCE CO
00365	METRA-HEALTH
00372	MIDLAND NATIONAL LIFE INS CO
00377	HEALTH PARTNERS
00378	MID WEST BENEFIT CORP
00379	MINISTERS LIFE-MUTUAL LIFE INS
00383	MONARCH LIFE INS CO
00384	MONTGOMERY WARD LIFE INS CO
00385	MONUMENTAL LIFE INS CO
00386	MUTUAL BENEFIT LIFE INS CO
00387	MUTUAL LIFE INS CO OF NY
00388	MUTUAL OF OMAHA INSURANCE CO
00390	LOCAL 390
00394	NATIONAL BENEFIT LIFE
00395	NATIONAL CASUALTY CO
00397	NATIONAL FIDELITY LIFE INS CO
00398	NATIONAL FIRE INS CO OF HTFD
00399	NATIONAL FOUNDATION
00401	NATIONAL HOME LIFE ASSUR CO
00412	NAT'L UNION FIRE INS OF PITTSB
00413	NATIONWIDE INSURANCE
00414	NATIONWIDE LIFE INS CO
00415	NATIONWIDE MUTUAL INS CO
00416	NEW ENGLAND MUTUAL LIFE INS CO
00417	NYLCARE(FORM.NEW YORK LIFE)
00418	NIAGARA FIRE INS CO
00420	NO AMERICAN ASSURANCE
00421	NORTH AMER CO FOR FIRE & HLTH
00422	NORTH AMER LIFE & CASUALTY CO
00423	NORTH AMER LIFE ASSUR CO
00425	NORTH CENTRAL LIFE INS CO
00426	NORTH RIVER INS CO
00427	NORTHERN ASSUR CO OF AMER
00429	NORTHWESTERN MUTUAL LIFE INS
00430	NORTHWESTERN NATIONAL INS CO
00431	NORTHWESTERN NATIONAL LIFE INS
00433	PROVIDENT/OCCIDENTAL LIFE
00435	OHIO CASUALTY INS CO (THE)
00438	OHIO NATIONAL LIFE INS CO
00440	OLD AMERICAN INS CO

00443	OLD REPUBLIC INS CO
00444	OLD REPUBLIC LIFE INS CO
00450	OXFORD
00451	PPP INTERNATIONAL
00452	PACIFIC INDEMNITY CO
00454	PACIFIC MUTUAL LIFE INS. CO.
00456	PAN AMERICAN LIFE INSURANCE
00458	PAUL REVERE LIFE INS CO
00459	PEERLESS INS CO
00460	PCA HEALTH PLAN OF FLORIDA
00461	PENN WESTERN
00463	PENN MUTUAL LIFE INS CO
00470	PHILADELPHIA LIFE INS CO
00471	PHOENIX ASSUR CO OF NEW YORK
00472	PHOENIX MUTUAL LIFE INS CO
00474	PILGRIM HEALTH
00477	PILOT LIFE INS
00478	PIONEER LIFE/ILLNESS
00479	PIONEER MUTUAL LIFE INS CO
00480	PIONEER MANAGEMENT SYSTEMS
00482	PREFERRED RISK MUTUAL INS CO
00485	PROTECTIVE LIFE INS CO
00488	PROVIDENT LIFE & ACCIDENT
00489	PROVIDENT LIFE & CASUALTY INS
00490	PROVIDENT MUTUAL LIFE OF PHIL
00491	PRUDENTIAL INS OF AMERICA
00498	RELIANCE LIFE INS CO
00499	RELIANCE STANDARD LIFE INS CO
00500	REPUBLIC INS CO
00501	REPUBLIC NATIONAL LIFE INS CO
00504	ROYAL GLOBE LIFE
00505	SAGAMORE
00506	SAFECO LIFE INS CO
00507	ST PAUL FIRE & MARINE
00508	ST PAUL LIFE
00509	SECURITY BENEFIT LIFE INS CO
00513	SECURITY LIFE OF DENVER INS
00516	SECURITY MUTUAL LIFE OF NY
00518	SENTRY INS A MUTUAL CO
00519	SENTRY LIFE INS CO
00520	SHEET METAL WORKERS PLUS
00524	SOUTHLAND LIFE INS CO
00527	SPRINGFIELD LIFE INS CO, INC.
00528	STANDARD INS CO
00530	STANDARD LIFE & ACCIDENT INS
00535	STATE FARM MUTUAL AUTOMOBILE

00536	STATE MUTUAL LIFE ASSURANCE
00538	SUN LIFE ASSUR OF CANADA
00539	SUN LIFE INS CO OF AMERICA
00543	SURETY LIFE INS CO
00545	TEACHERS INS & ANNUITY ASSOC
00548	TIME INS CO
00551	TRANSCONTINENTAL INS CO
00554	TRANSPORT LIFE INS CO
00555	TRANSPORTATION INS CO
00557	TRAVELERS INDEMNITY CO OF RI
00558	UNITED HEALTH CARE - CT
00559	TRAVELERS INS CO OF ILL (THE)
00564	UNION CENTRAL LIFE CO
00565	UNION FIDELITY LIFE INS CO
00566	UNION LABOR LIFE INS CO
00571	UNION SECURITY LIFE INS CO
00572	UNITED AMERICAN INS CO
00574	UNITED BENEFIT LIFE INS
00575	UNITED COMMERCIAL TRAVELERS
00577	UNITED FAMILY LIFE INS CO
00578	U H C MANAGED CARE
00579	UNITED FIDELITY
00580	UNITED HEALTH CARE PLAN OF FLA
00583	UNITED INS CO OF AMERICA
00584	UNITED LIFE AND ACCIDENT INS
00585	UNITED PACIFIC LIFE INS CO
00586	U S FIDELITY AND GUARANTEE
00587	UNITED STATES FIRE INSURANCE
00588	UNITED STATES LIFE INS
00589	UNITED SECURITIES LIFE INSURAN
00592	UNIVERSAL UNDERWRITERS INC CO
00594	USA HEALTH SERVICE
00595	U S A A
00596	US LIFE INSURANCE OF CALIF
00597	VALLEY FORGE INS CO
00598	VALLEY FORGE LIFE INS CO
00599	VALUE BEHAVIORIAL HEALTH
00600	WASHINGTON NATIONAL INS CO
00601	VALUE HEALTH CARE
00603	WESTERN UNION
00604	WESTERN LIFE INS CO
00605	WEYCO
00609	WISCONSIN NATIONAL LIFE INS CO
00613	WORLD INS CO
00618	ZURICH AMERICAN LIFE INS CO
00622	AFFILITATED INSURANCE

00623	LOCAL 371 - AMAL. WEL/TRUST
00626	AMER POSTAL WKRS UNION HLTH PL
00630	BENEFIT PLAN ADM
00631	EMPIRE BLUE CROSS SENIOR CARE
00632	BLUE CROSS OF NE NY
00633	EMPIRE BLUE CROSS
00634	BLUE CROSS OF WESTERN NY
00637	BLUE CROSS OF MASS
00638	BLUE CROSS OF RHODE ISLAND
00639	BLUE CROSS OF NEW JERSEY
00640	BLUE SHIELD OF NEW JERSEY
00641	BLUE CROSS/BLUE SHIELD OF ME
00642	BLUE CROSS/BLUE SHIELD OF PA
00643	BLUE CROSS/BLUE SHIELD OF DC
00644	BLUE CROSS/BLUE SHIELD OF MICH
00645	BLUE CROSS OF NH & VT
00650	LOCAL 67 CARP HEALTH/WELF
00652	CENTURY LIFE OF AMERICA
00654	Cheesborough Ponds
00656	CHUBB LIFE INS CO OF AMERICA
00660	COMBUSTION ENGINEERING
00662	CONN LABORERS HEALTH/WELFARE
00664	CONN NATIONAL LIFE INS CO
00665	CT STATE DENTAL ASSOC
00669	CORPORATE HEALTH INS
00670	CROUSE HINDS CO
00673	HARRINGTON BEN SVC(DIVERSIFIED
00675	ELECTRIC BOAT DIVISION
00685	GOVT EMPLOYEES HEALTH ASSOC
00686	GROUP HEALTH INC
00688	HEALTH AND WELFARE FUND
00689	HEALTH INSURANCE OF VERMONT
00690	HEALTH REINSURANCE ASSOCIATION
00692	LOCAL 325 - IBEW
00698	INT UNION OPER ENGINEERS 478
00700	STATE WELFARE
00701	CHAMPUS
00703	JOHNSON ADMINISTRATORS
00709	MAIL HANDLERS BENEFIT PLAN
00710	MEDICAL CLAIMS
00711	MED WEST COMMERCIAL HEALTH
00712	MEDPAC
00713	MED TAC
00714	MOUNT VERNON GROUP
00716	LOCAL 321 NATL ASSOC LTR CARR
00717	NATIONAL BENEFIT FUND

00725	PENN GENERAL
00729	PILLSBURY HEALTH
00731	POSTMASTERS BENEFIT FUND
00732	PROGRAMMED BENEFITS
00740	RETAIL CLERKS LOCAL 919
00745	SELF FUNDING ADMINISTRATION
00751	STIRLING AND STIRLING
00755	LOCAL 145 - TEAMSTERS
00756	LOCAL 191 - TEAMSTERS
00757	LOCAL 443 - TEAMSTERS
00758	LOCAL 536 - TEAMSTERS
00759	LOCAL 559 - TEAMSTERS
00371	MIDLAND MUTUAL LIFE INS CO THE
00760	LOCAL 617 - TEAMSTERS
00761	LOCAL 671
00762	LOCAL 677 - TEAMSTERS
00763	LOCAL 798 - TEAMSTERS
00764	LOCAL 1035 - TEAMSTERS
00765	LOCAL 1040 - TEAMSTERS
00766	LOCAL 1150 - TEAMSTERS
00768	TR PAUL
00769	LOCAL 777 PIPEFITTERS
00776	UNITED ILLUMINATING
00777	UNIVERSAL MFG CO
00778	UTICA MUTUAL INS CO
00787	SOUTHWIRE AFFILWYRE WYND
00788	CONNECTICARE
00789	YALE HEALTH PLAN
00790	KAISER FOUNDATION HEALTH PLAN
00809	COMPREHENSIVE BENEFIT SERVICE
00811	FIRESTONE INS.
00812	CHAMPUS
00813	AARP INSURANCE PROGRAM
00814	FIRST HEALTH ALTA/STRATEGIES
00815	ALTA HEALTH STRATEGIES
00816	BLUE CROSS GENERIC CODE
00818	EASTERN BENEFIT
00819	LOCAL 38, 40 - SHEET METAL
00820	LOCAL 282 / LOCAL 173
00824	W.J. JONES ADMINISTRATION
00826	PHYSICIANS HEALTH SERVICES
00840	LOCAL 493 - HLTH SER PLAN
00842	NEW ENGLAND HEALTH CARE-NJ
00843	OLIN DIRECT CLAIMS
00844	PHILADELPHIA AMERICAN LIFE
00845	ROBERT S WEISS CO.

00846	ZEBBA TRUST
00847	NCAS - R.I.
00848	PARTNERS NATIONAL
00851	NESTLES FOOD/NESTLES USA
00855	PACIFIC FIDELITY
00861	UNITED CHAMBERS INS
00862	LOCAL 90 IBEW
00863	HEALTH CORP OF AMERICA
00864	BENEFIT PLAN NEW ENGLAND
00866	CELTIC LIFE INS
00870	LOCAL 155
00872	BLUE CROSS OF ALABAMA
00877	UNITED PLANS
00879	SUBURBAN HEALTH PLAN
00880	PROFESSIONAL PENSIONS INC.
00881	BAYSTATE HEALTH PLAN
00883	WESTERN GENERAL SERVICES
00884	WILLSE & ASSOCIATES INC
00892	BX ILLINOIS
00894	CENTRAL MASS HEALTH CARE
00895	BX FLORIDA
00897	JOHN ALDEN INS CO
00898	COMPLETE CARE CONTROL
00903	NEW ENGLAND HEALTH CARE
00905	INTERACTIVE BENEFIT CORP
00908	SUNRISE HEALTHCARE CORP.
00910	EMPLOYEE BENEFIT PLAN
00911	ASSOC PLAN ADMINISTRATORS
00916	AMERICA'S HEALTH PLAN
00921	ARBOR ACRES
00926	JOHN DEERE INS. CO.
00928	HEALTH NEW ENGLAND
00929	MCDONOUGH CAPERTON
00936	TPA ARIZONIA
00940	HEALTH CHOICE
00941	FEDERAL EXPRESS
00947	EQUIFAX(HEALTH ECONOMICS CORP)
00949	LOCAL 481 - TEAMSTERS
00955	LOCAL 363 - TEAMSTERS
00956	LOCAL 106 - TEAMSTERS
00958	MED SPAN INC
00965	HEALTH PLAN ADMIN.
00966	UNION MUTUAL MEDICAL FUND
00968	BLUE CROSS/BLUE SHIELD WEST PA
00970	POMPCO
00973	BLUE CROSS/BLUE SHIELD OREGON

00974	LOCAL 15/424 - TEAMSTERS
00975	OXFORD HEALTH PLAN
00977	LOCAL 24 - TEAMSTERS
00982	ABA/PGT EMPLOYEE MED TRUST
00984	UNITED MEDICAL RESOURCES
00990	HOSPICE
00991	PPO - OTHER
00992	HM0 - OTHER
00993	NO CHARGE
00994	TITLE V
00995	COMMERCIAL
00996	OTHER FEDERAL
00997	WORKMAN'S COMPENSATION
00998	SELF PAY
00999	OTHER (UNLISTED INSURANCE)
00A-B	BX AMERICAN BOAT BUILDERS
00A-L	BX ALLEGHENY LUD STL HOURLY
00A-T	BX ALGONQUIN GAS TRANSMISS CO
00A-W	BX AUTOMO WHOLESALE ASSOC NE
00A01	MEGA LIFE
00A05	CHESTERFIELD RESOURCES
00A08	STRATEGIC RESOURCE CO.
00A10	BX ALLEGHENY LUD RETIREES
00A11	BX ALLEGHENY LUDLUM
00A24	FALLON COMM. HEALTH PLAN
00A53	BAKERS CHOICE PRODUCTS
00A54	BLAIR MILL ADMINISTRATORS
00A68	MASHANTUCKET PEQUOT
00A83	AFTRA HEALTH FUND
00A84	MOHAWK VALLEY PHYSICIANS
00A89	COTTER MEMBER INS.
00A97	MUTUAL HEALTH AGENCY
00AAA	AAA LIFE INS
00AB1	BX AMERICAN BOAT BUILDERS
00ABH	ADVANCED BEHAVIORAL HEALTH
00ABS	BX AMERICNA BUREAU OF SHIPPING
00ACB	BX CITIBANK N.A.
00ACN	AMERICAN CANCER SOCIETY
00ACP	AMERICAN COLLEGE OF PHYSICIANS
00ACR	ALICARE
00ACS	AMER COLLEGE SURGEONS INS
00ADI	ADVANCED INSURANCE
00ADM	ADMINISTRATIVE SERVICES
00ADS	ADMINISTAR DEFENSE SERVICES
00ADT	BX AMERICAN DISTRICT TELEGRAPH
00AFC	BX ALLIED FEDERATED CO-OPS INC

00AFF	AFFORDABLE
00AGI	BX NAT AGRIMARK
00AGL	AMER GUARANTY LIFE INS CO
00AGW	BX AGWAY
00AHC	AFFILIATED HEALTHCARE
00AHP	SELECT CHOICE(AETNA HP SNE)
00AIA	AIA BENEFIT TRUST
00AIC	BX AIR COND CONTRACTORS AMER
00AIG	COMP:AIG INTL
00AIL	AMERICAN INTERNATIONAL LIFE
00AIN	AIU NORTH AMERICA
00AIS	BX AMERICAN INST FOR RESEARCH
00AIU	BX ATLANTIC INDEPENDENT UNION
00AJF	ALLEN J FLOOD INS
00AKB	ARKANSAS BEST
00AL1	BX ALLEGHENY LUD STL HRLY PRE
00AL2	BX ALLEGHENY LUD STL SALARIED
00AL3	BX ALLEGHENY LUD STL NON EXEMP
00AL5	BX ALLEGHENY LUD STL SALESMEN
00AL6	BX ALLEGHENY LUDLUM STEEL CORP
00AL8	BX ALLEGHENY LUDLUM STEEL
00AL9	BX ALLEGHENY LUDLUM
00ALB	BX ST ALBANS MILK COOPERATIVE
00ALC	BX ALLING AND CORY
00ALI	BX AMALGAMATED LIFE INS (REG)
00ALO	BX AMALGAMATED LIFE INS (EXEC)
00ALP	ALLIED PILOTS ASSOCIATION
00ALS	BX ALLIED STORES CORP READS
00AMA	AMA INS CO
00AMC	AMICA MUTUAL INS. CO.
00AMD	AMD
00AMF	AMERICAN FAMILY
00AMG	AMERICAN GROUP
00AMH	AV MED HEALTH
00AMI	AMERICAN INS.
00AMK	BX AMETEK, INCORPORATED
00AMN	AMERIPLAN
00AMP	BX ASSOC MSTR TRSTE OF NJ FUEL
00AMR	AMERICARES
00AMS	AMS HEALTH BENEFITS
00ANA	BX ANIMED INC
00ANG	ANGELOVIK INSURANCE
00APA	BX PENNWALT - API
00APH	APHA
00APN	AMERICAN PIONEER
00APO	BX ASSOC PRESS (GUILD EMPLOYEE

00APR	BX ASSOCIATED PRESS
00APS	BX ASSOC PRESS (ADMIN STAFF)
00APT	BX ASSOC PRESS (ADMIN STF RET
00ARA	ARA PLAN
00ARD	BX ARGON MEDICAL CORP
00ARO	BX IUE AFL-CIO HEALTH FUND
00ARS	AON RISK SERVICES
00ASO	BX ALLIED-SIGNAL CORP
00ASU	BX ALLIED-SIGNAL CORP
00ASY	AMERICAN MANAGEMENT SYSTEMS
00AT1	BX AMER TEL & TEL SME GROUPS
00ATA	APTA
00ATG	BX AMER TEL/TEL GENERAL DEPTS
00ATI	BX AMER TEL & TEL INTERNAT'L
00ATT	BX NAT AT&T
00AUD	BX AUDIOVOX
00AUT	BX AUTOMATED CONCEPTS, INC
00AWN	AWANE
00AWT	BX N Y ST AUTOMOTIVE WHL SALES
00B-D	BX BENDIX CORP INSTRUMENT PROD
00B-I	BX BUTCHER & CO INC
00B-S	BX BROCKWAY SMITH
00B08	DALY AND LEE AGENCY, INC.
00B23	CHICKERING GROUP
00B32	CAREMARK
00B38	First Fortis
00B51	ACCORDIA
00B65	CONFED. ADMIN. SERVICES INC.
00B70	GROUP RESOURCES
00B92	CHAMPVA CENTER
00BAA	BX BELL ATLANTIC MGMNT SVCS
00BAC	BACKUS EMPLOYEE HEALTH PLAN
00BAP	BX BELL ATLANTIC PENSIONERS
00BBI	BNAI BRITH INS
00BCB	BX CITIBANK N.A.
00BCL	BX BARCLAYS BANK INT'L LTD
00BCN	BX BANK ON NY CO, INC THE
00BDD	BX BROOME TIOGA DEL HLTH CNSRT
00BEA	BEACON BENEFITS SERVICES
00BEE	BEECH STREET CORPORATION
00BEN	BENECORP
00BFC	BROWN FORMAN CORP
00BHB	BRADLEY HEALTHCARE FOR BUSINES
00BHF	BRIDGEPORT HOSP. FAMILY HEALTH
00BHR	BECKWITH HIGHTOWER & RENB
00BHS	BX BARGIN HAROLD'S USA, INC

00BIB	BETTER BABIES IN BRIDGEPORT
00BLI	BANKERS COMM LIFE INS CO
00BLL	BX PENNWALT - BELLEVILLE
00BMA	BX BELL ATLANTIC MANAGENENT
00BMO	BX BOOK OF THE MONTH CLUB
00BNF	BENEFIT CONCEPTS
00BNM	BENEFIT MANAGEMENT OF ME
00BNP	BENEFIT PLANNERS
00BNS	BENEFIT SERVICES
00BOD	BUREAU OF DISABILITY
00BOP	BOARD OF PENSIONS
00BRK	BERKLEY ASSOC
00BRS	BROKERAGE SERVICES
00BSC	BX BUILDERS SQUARE, INC
00BSS	BX BUILDERS SQUARE, INC
00BST	BX BEAR STEARNS & CO
00BSY	BENEFIT SYSTEM SER
00BTD	BX BROOME TIOGA DELAWARE HLTH
00BTT	DMR-CT SW REGION(FORM.BIRTH-3)
00BVO	BX BIG Y FOODS
00BXN	BX NATIONAL - GENERIC
00C-E	BX CHUBB LIFE AMERICA
00C-F	BX CUMBERLAND FARMS
00C-H	BX CARTEN/SHERWOOD DIV HARSC
00C-K	BX CUSHMAN & WAKEFIELD
00C-S	BX C.C. COWLES & COMPANY
00C01	GENERAL ACCIDENT
00C02	HEALTH RISK MANAGEMENT
00C03	CONSOLIDATED GROUP TRUST
00C04	HOME INDEMNITY
00C22	WESTPORT BENEFITS(GENELCO)
00C26	PHS - CARE FREE
00C32	ALLIANCE AFFORDABLE HEALTH
00C74	CAPITAL DIST. PHYSICIAN HEALTH
00C83	LOCAL 1430
00C99	CITY WELFARE
00CAB	CA BS
00CAC	CRAWFORD & CO
00CAF	CAREFLORIDA
00CAI	CONFERENCE ASSOCIATES INSURANC
00CAS	CREATE A SCAPE
00CBA	BX PHARMACY - CIBA CEIGY CORP
00CBN	CHARTER BENEFITS
00CBS	BX CBS INCORPORATED
00CCC	BX CHASE/CLARK CREDIT CO
00CCM	BX CNTRL SQUARE SCHL DIS MEDCR

00CCN	COMMUNITY CARE NETWORK
00CCR	CHOICE CARE CORP CTR
00CCS	CC SYSTEMS CORP
00CCW	BX AMALGAMATED CTN & ALL INDS
00CEN	CENTRA BENEFIT SERVICES
00CEX	BX MEMBERS & CLREKS INS PLAN
00CFE	BX I.U.E. HEALTH FUND
00CFG	BX CUMBERLAND FARMS
00CFL	CT FIRST LIFE
00CFV	BX CBS/FOX COMPANY
00CFX	BX AMALGAMATED COTTON GARMENT
00CGA	CATHOLIC GOLDEN AGE
00CHB	CHUBB FIRST
00CHC	COMMUNITY HEALTH CARE PLAN INC
00CHI	CHAMPION INTERNATIONAL
00CHL	CT HOSP LABORATORY NTRWK CHLN
00CHN	CONSTITUTION HEALTH CARE
00CHP	CIGNA HEALTH PLAN
00CHS	BX CHUBB CORPORATION
00CHW	CONN HOSP ASSOC WORKERS COMP
00CIB	CIBA GEIGY
00CIN	BX CIS CORPORATION
00CJC	BX CJ CLARK - AMERICA INC
00CKO	BX CLARKSON IND, INC
00CLF	BX AMALGAMATED INS FUND CLOTH
00CLI	CHESAPEAKE LIFE INS. CO
00CMB	BX BANKERS TRUST COMPANY
00CMG	BX TRSTS CPNTRS & MLWGHTS L 31
00CMH	CMG HEALTH
00CMS	CLAIMS MANAGEMENT SERVICE
00CNG	CONCORD GROUP
00CNH	CONCENTRA HEALTH PLAN
00CNL	BX COOPERS AND LYBRAND
00CNS	CONSTITUTION HEALTH CARE
00CNT	COMMUNITY HEALTH NETWORK
00COC	COSTCARE
00COK	BX PENNWALT CORPORATION
00COM	COMMUNITY HEALTH PLAN
00COR	CORESOURCE
00CRE	BX CRESTAR FINANCIAL
00CRG	BX CBS RECORDS INC
00CRS	COMP:RENAISSANCE STONE
00CRV	BX W R GRACE CO CRYOVAC DIV
00CSA	CORPORATE BUSINESS SERV ASSOC.
00CSE	BX CHARMING SHOPPES NON EXECUT
00CSG	BX CBS RECORDS INC

00CSH	CONSUMER HEALTH NETWORK
00CSI	BX COATED SALES
00CSN	BX CHARMING SHOPPES EXECUTIVES
00CSW	CENTRAL AND SOUTHWEST
00CT1	BX CARPENTER TECH (RETIREEES)
00CT2	BX CARPENTER TECH (RETIREEES)
00CTC	CONNECTICOMP
00CTF	BX AMALGAMATED CTN & ALL INDS
00CTH	CONNECTICUT HEALTH PLAN
00CUD	CENTRAL UNITED
00CV1	BX CONSUMER VALUE (MARK STEVEN)
00CV2	BX CONSUMER VALUE (RETAIL)
00CVL	COVENANT LIFE INS.
00CVS	BX CONSUMER VALUE STORES
00CWI	BX CHILD WORLD INCORPORATED
00CWL	BX COWLES COMMUNICATION
00CYT	CYTEC
00D-A	BX D'ANGELO'S INCORPORATED
00D-F	BX TRW DOT DIV MARLIN ROCKWELL
00D-M	BX MORDECAI CHASE ASSOCIATES
00D18	PROFESSIONAL BENEFITS INSURANC
00D45	FHP
00D71	CONSOLIDATED HEALTH
00DAB	DUNN & BRADSTREET
00DBL	BX DREXEL BURNHAM LAMBERT, INC
00DBP	DENTAL BENEFIT PLAN
00DCB	BX CITIBANK N.A.
00DCC	BX DICTAPHONE CORPORATION
00DCF	BX DCF FOOD INDUSTRIES
00DCH	BX ALAMDEIA MOTORS INC
00DDA	BX DUNKIN DONUTS OF AMERICA
00DDC	BX ILC DATA DEVICE CORP
00DEL	DELTA DENTAL
00DGD	DIRECTORS GUILD
00DIS	DISNEY WORLDWIDE SERVICES
00DLG	BX DAIRYLEA COOPERATIVE
00DMB	D M B A
00DMR	STATE OF CT-DEPT MENTAL RETARD
00DNB	BX DUN & BRADSTREET CORP, THE
00DOC	CT DEPT OF CORRECTIONS
00DOL	US DEPARTMENT OF LABOR
00DPM	BX DIRECT PRESS/MODERN LITHO
00DRO	BX DRAVO CORP - HOURLY
00DRV	BX DRAVO CORP - SALARIED
00DSY	BX DIOCESE OF SYRACUSE
00DVA	DEPARTMENT OF VETERAN AFFAIRS

00DVT	DARIEN VETERNARIAN
00EAC	EASTERN CASUALTY
00EAF	MEDICAID - EMER. ASSIST. FAMLY
00EBA	EMPLOYEE BENEFIT ADM
00EBC	EBAM CORP
00EBI	EBI
00EBN	EMPLOYEE MEDICAL BENEFITS
00EBP	EMPLOYEE BENEFIT PLAN
00EBS	BX EBASCO SVRCS INC (RETIREEES)
00EBT	EMPLOYERS BENEFIT TRUST
00EEB	EAGLE EMPLOYEE BENEFITS
00EEH	EMPHEYS EMPLOYERS HEALTH
00EGB	EMPERION/GALLAGER-BASSETT
00EGY	BX EGYPTN CULTRL & EDU BUR STU
00EHR	BX OPER ENGIN LOCAL 66 RETIREE
00EHW	BX OPER ENGIN LOCAL 66 HJWF
00EKC	BX EASTMAN KODAK
00ELB	ELI LILLY EMP BENEFITS ADM
00ELC	ELDORADO CLAIM
00ELD	ELDERPLAN
00EMB	BX MUTUAL BEN LIFE INS CO
00EMC	BX EASTERN MILK PRODUCERS
00EMH	EMERALD HEALTH
00EMO	BX EDINN MANAGEMENT CORP
00EMS	BX EM INDUSTIRES
00EPM	BX EDAN PARK
00EQU	EQUICOR
00ERS	BX E R SQUIBB & SONS INCORP
00ERV	BX ERVING PAPER MILLS
00ESI	BX EBASCO SRVCS INC (ACTIVE)
00EWC	BX EDWARD WECK AND COMP
00EXB	EXTENDED BENEFITS
00EXX	EXXON ANNUITANT
00FAB	BX FIRST AMER BANKSHARE, INC.
00FAR	BX FARM CREDIT BANKS
00FBM	BX NEW YORK FARM BUREAU
00FBS	FRINGE BENEFIT SERVICES
00FCC	FIRST CHOICE
00FCL	FIRST CONNECTICUT LIFE
00FCR	BX FARM CREDIT ADMINISTRATION
00FDA	FEDERAL ASSIST
00FDC	BX FED DEPOSIT INSURANCE CORP
00FEP	BS NAT FEDERAL GOV'T
00FHA	FOUNTAINHEAD ADMIN
00FIA	FIRST AMERICAN
00FIS	BX FISCHBACH CORPORATION

00FLF	FEDERATED LIFE
00FLM	BX JOINT BD FUR LEATHER MACHIN
00FNL	FIRST NATIONAL LIFE
00FNY	BX FIRST AMER BANK OF NEW YORK
00FOH	FIRST OPTION HEALTH PLAN
00FRA	FLEET RESERVE ASSOC
00FRB	BX FED RESERVE BANK OF BOSTON
00FRI	AM FRIDAYS, INC.
00FSC	FIRST CHICAGO
00FSH	BX M H FISHMAN CO INC
00FSU	FIRST UNITED
00FXL	BX CBS (OPTION CO-PAY)
00G-M	BX GMAC MORTGAGE CORP
00GAP	MEDIGAP
00GCR	BX CULBRO CORPORATION
00GDU	GRAND UNION
00GEC	BX GENERAL ELECTRIC
00GHC	GROUP HEALTH COOPERATIVE
00GHP	GRIFFIN HEALTH PLAN
00GIB	GOVERNMENT IND. BENEFITS
00GNM	GREATER NY MUTUAL
00GOL	BX GOLDMAN SACHS & COMP
00GRW	BX GOLUB CORP - SPECIAL GROUP
00GSV	GRANITE SERVICES
00GT1	BX THREADING TOOLS
00GT2	BX GEOMETRIC TL DIV M RKWL SAL
00GT3	BX THREADING TLS M ROCKWL 39 W
00GT4	BX THREADING TOOL <65 SAL RETS
00GT5	BX THREADING TOOL HRLY SAL <65
00GT6	BX THREADING TOOL >65 TRW INC
00GT7	BX THREADING TOOL >65 TRW INC
00GT8	BX THREADING TOOL >65 TRW INC
00GTI	BX GREEN THUMB, INC
00GUH	BX SCHENLEY IND EST 87 HRLY
00GUS	BX GUINNESS DISTILLER, INC
00GWI	BX SIMON & SCHUSTER INC
00GWU	GEORGE WASHINGTON UNIVERSITY
00GYT	GOODYEAR TIRE
00H-H	BX HANDY & HARMAN
00H-I	BX HALSTED INDUSTRIES, INC
00H-L	BX HOWARD JOHNSON MOTOR LODGES
00HAC	HOLDEN AND CO
00HAS	BX DELOITTE HASKINS AND SELLS
00HAV	HEALTHADVANTAGE
00HBA	BX HISCOCK & BARCLAY
00HBL	HOME BENEFICIAL LIFE INS.

00HBN	HEALTH BENEFITS
00HCC	HEALTH CHOICE OF CT
00HCI	HEALTH CARE INC.
00HCO	HUGHES CLAIM OFFICE
00HCS	HEALTH CLAIM SERVICES
00HCV	HEALTH CARE VALUE MANAGEMENT
00HEA	HEALTHNET
00HH1	BX HANDY & HARMAN
00HH2	BX HANDY AND HARMAN COBRA
00HHL	HARBOR HEALTH
00HHP	HIP HEALTH PLAN
00HKP	HEALTH KEEPERS
00HLA	BX HOFFMAN LA ROCHE
00HLE	BX HOFFMAN LA ROCHE, INC.
00HLJ	HERBERT L. JAMISON
00HLK	HEALTHLINK
00HMC	HEALTH MANAGEMENT CORP
00HNA	HEALTH NETWORK AMERICA
00HNH	HEALTH SOURCE NH
00HPS	HEALTHPLUS
00HRB	HARRINGTON BENEFIT
00HRE	BX HOFFMAN LA ROCHE RETIREES
00HRI	BX HEALTH RESEARCH, INC
00HRT	HEALTH RIGHT
00HRZ	HERTZ
00HSA	BX HOWLAND STEINBACH/HOCHSCHIL
00HSC	HEALTHSOURCE CONN
00HSI	BX BROOKS DRUGS
00HSL	HOME SECURITY LIFE INS
00HSO	HEALTH SOURCE
00HSS	BX SUPERMARKET GEN RETIREES
00HSU	HOSP OF SPECIAL SURGERY
00HTC	BX HELME TOBACCO COMPANY
00HUM	HUMANA
00HUS	BX HUGIN SWEDA, INC
00HVD	HARVARD COMM HEALTH PLAN
00HYD	BX HYDRO LAWN, INC
00IBA	INT'L BENEFIT ADMIN
00IBC	BX IRVING BANK CORP IRVING TRS
00IBM	BX IBM
00ICI	ICI HEALTH CLAIMS
00IDC	IHC DIRECT CARE
00IDD	BX ILC DATA DEVICE (EXECUTIVES
00IDX	INDEX
00IEW	BX I.U.E. HEALTH FUND
00IGA	ISLAND GROUP ADMINISTRATION

00IHC	BX INTER'ST HOTELS CORP (MARRI
00IMG	INTERNATIONAL MEDICAL GROUP
00IMP	BX INST OF MODERN PROCEDURES
00IND	INDECS OF EBASCO
00ING	INTEGRA
00INT	INTERCONTINENTAL CORP
00IRI	BX INTERSTATE RESOURCES
00IRQ	BX CULTURE OFF OF IRAQ STUDENT
00ISV	INSERVCO
00ITA	BX ITAL GOVT HLTH INS NATL PGM
00IWO	BX IRON WRS DIST COUNCIL W NY
00J-F	BX JOSEPH A BANK CLOTHIERS
00JFM	JF MALLOY & ASSOC
00JFP	JEFFERSON PILOT
00JLA	BX JONES & LAUGHLIN STL ACTIVE
00JLR	BX JONES & LAUGHLIN STL RETIRE
00JMC	BX JORDAN MARSH CO
00JMH	JMH EMPLOYEE HEALTH
00JPA	JOHN PEARL ASSOC.
00JWF	BX JOINT WELFARE ADMIN FUND
00K-A	BX KEYES ASSOCIATES
00K-C	BX KEDS CORP DIV OF STRIDE RIT
00K-I	BX KNOLL INTERNATIONAL INC
00KAI	KANAWHA INS
00KAY	BX KAY JEWELERS INC
00KCC	BX EASTMAN KODAK COBRA
00KCI	BX KOOPERS CO INC
00KEY	BX KEY CORP
00KIC	KIMBERLY-CLARK
00KM2	BX KENNAMETAL INC
00KMC	BX K-MART CORP (STANDARD)
00KNS	KEMPER NATIONAL SERVICES
00KOP	BX KOOPERS CO INC (SALARY)
00KRE	BX S H KRESS
00KS1	BX KELLY SRVCS INC LICENSEES
00KS2	BX KELLY SRVCS INC (COBRA ONLY
00KSM	BX K-MART CORP (COST SHARING)
00KSO	BX KELLY SRVCS INC ACTIVE EMPL
00KVI	KVI
00KWT	BX CULTURAL DIV OF THE EMBASSY
00KYH	KEYSTONE HEALTH
00L-D	BX NE DEPTS ILGWU DEPENDENTS
00L-F	BX LOCAL 413 WLFARE TRST FUND
00L-W	BX NE DEPTS ILGWU WORKERS
00L00	LOCAL UNION INS. - MISC
00L02	LOCAL 2

00L16	LOCAL 16 BRICKLAYERS
00L19	LOCAL 191
00L20	LOCAL 958
00L21	LOCAL 210 - CARPENTERS
00L23	LOCAL 230 - CT LABORERS
00L39	LOCAL 39
00L43	LOCAL 43 - CARPENTERS
00L44	LOCAL 44 - BRICKLAYER'S FUND
00L47	LOCAL 478 - OPERATING ENGINEER
00L53	LOCAL 919
00L99	LOCAL 1199 - HEALTH CARE EMPL
00LAB	BX BELL TEL LABORATORIES, INC
00LAT	LORD AND TAYLORS
00LFN	BX LINCOLN FIRST BANK
00LHC	LAWRENCE HEALTHCARE
00LMH	LIFE L&M
00LMS	LOOMIS COMPANY
00LRA	BX LTV - STL RETIRED HOURLY
00LRB	BX LTV - STL RET HRLY >071686
00LRD	BX LTV - STL RET HRLY >071686
00LRG	BX LTV - STL /RETIRED HOURLY
00LRL	BX LTV STL/UMWA ACT RET/SUR SP
00LTE	BX LTV - STL SALARIED ACTIVE
00LTF	BX LTV - STL HRLY PENSIONERS
00LTG	BX LTV - STL SALAR'D PENSIONER
00LTH	BX LTV - STL REP STL CORP MINI
00LTK	BX LTV - STL SALAR ACT <10 YRS
00LTL	BX LTV - STL SALAR ACT >10 YRS
00LTM	BX LTV - STL SALAR'D RETIREES
00LTS	BX LTV - STL HOURLY/SAL <10 YR
00LTT	BX LTV - STL HRLY/SALAR >10 YR
00LUK	BX PENNWALT - LUCIDOL
00LWD	BX LOCAL 734 WLFARE FND PA EMP
00LXA	BX LOCAL 734 WLFARE FND NJ EMP
00M-A	BX ROBERT A MAIN & SNS
00M-C	BX MAIN HURDMAN & CRANSTOUN
00M-G	BX MAC-GRAY, INC.
00M-L	BX MILES LABORATORIES (HOURLY)
00M-S	BX E & B MARINE SUPPLY, INC
00MAA	MUTUAL ASSOCIATION ADM
00MAE	BX METCALF AND EDDY
00MAL	BX METROMAIL CORP
00MAN	BX MANTECH INTERNATIONAL CORP
00MBA	BX MUTUAL BEN LIFE INS (AGENTS
00MBB	BX MUTUAL BEN LIFE - HOME OFF
00MBC	MAGELLAN BEHAVIORAL HEALTH

00MBD	BX METROPOLITAN BROADCASTING
00MBE	BX MUTUAL BEN LIFE INS OFF EMP
00MBH	BX MUTUAL BEN LIFE HM OFF CMM
00MBI	BX MUTUAL BUSINESS CENTER INC
00MBN	MANAGED BENEFIT ADMIN
00MBS	BX MONROE SYS FOR BUSINESS
00MCD	MCDOWELL AGENCY
00MCO	BX METAL IMPROVEMENT CO
00MCR	BX METRO NORTH COMMUTER RAILRD
00MCS	BX MC GREGOR SPTSWEAR RAPID AM
00MDA	MEDICA
00MDC	MEDCO (MBC)-PSYCHIATRY
00MDD	MEDICAID MGD CARE - OTHER
00MDH	MD HEALTH PLAN
00MDP	MEDIPLAN
00MDR	MEDICARE MGD CARE
00MDS	MAY DEPARTMENT STORES
00MDV	MEDVIEW
00MED	MEDCO BEHAVIORAL HEALTH
00MEP	MEDI PLUS
00MET	BX METROMEDIA INC
00MGC	MAGNACARE
00MGL	BX GLEN ALDEN
00MHC	BX MANUFACTURES HANOVER CORP
00MIC	BX METAL IMPROVEMENT CO INC
00MIE	BX MID ATLANTIC IND ELEC CNTRC
00MIP	MEMBER INSURANCE PROGRAM
00ML1	BX MILES LABORATORIES COBRA
00MLB	MAJOR LEAGUE BASEBALL
00MLF	MILFORD EMPLOYEE HEALTH PLAN
00MLP	MULTI PLAN
00MMB	MONTANA MEDICAL BENEFITS
00MMG	BX G MC NEW (RAPID AMERICAN)
00MMO	MEDICAL MUTUAL OHIO
00MMP	MASTERS MATES & PILOTS
00MNB	BX MELLON BANK N. A.
00MNC	BX METRO N CMTR RR COBRA SUBSC
00MNH	MINNESOTA HEALTH CARE
00MOR	BX MORSE/DIESEL
00MOT	MOTOROLA BENEFITS
00MPC	BX MILLIPORE CORP
00MPH	BX G.C. MURPHY
00MRR	BX MORRISON, INC.
00MS1	BX E & B MARINE SUPPLY, INC
00MS2	BX E & B MARINE SUPPLY, INC
00MSC	BX MELLON-STUART CO

00MSH	MASS HEALTH
00MSI	MED SPAN INC.
00MSO	BX E & B MARINE SUPPLY, INC
00MSP	MED SPAN
00MST	MASTERCARE
00MTH	UNITEDHEALTHCARE(METRA-HEALTH)
00MVA	MOTOR VEHICLE ADMINISTRATION
00MVM	GROUP BENEFIT SERVICES (MEDCO)
00MVP	MVP HEALTH PLAN
00MXM	MIDDLESEX MUTUAL
00N-J	BX NORTH & JUDD, INC HOURLY
00N-K	BX ANDAL CORP FRM NAT'L KINNEY
00N-O	BX N ENG COUNCIL OF OPTOMETRIS
00N01	BX N ENG COUNCIL OF OPTOMETRIS
00NAA	NORTH AMERICAN ADMINISTRATOR
00NAL	NALC(NATL ASSN LTR CARR)
00NAM	NAMIC
00NAS	NATIONAL AUTO SPRINKLER
00NAT	BX ATT - BELL LABS
00NBC	NEW YORK BUS CO
00NBG	NBGH EMPLOYEE PLAN
00NBK	NORTHBROOK
00NCA	NCAS
00NCJ	BX NAT'L CONF OF CHRSTNS & JEW
00NDC	NORTHEAST DIRECT HEALTH
00NEB	BX NEBRASKA
00NEH	NEW ENGLAND HEALTHCARE EFW
00NEP	NEW ENGLAND BENEFIT PLAN
00NEU	NORTHEAST UTILITIES
00NFT	NO FAULT INSURANCE
00NFU	BX NAVY FEDERAL CREDIT UNION
00NGP	NJADA GROUP
00NGS	NGS
00NHE	NATIONAL HEALTH
00NHI	NATIONAL HEALTH INS
00NJ2	BX NORTH & JUDD, INC
00NJ3	BX NORTH & JUDD RET COBRA
00NJ4	BX NORTH & JUDD RET COBRA
00NJC	BX N J CARPENTERS WELFARE FUND
00NMH	NEW MILFORD EMPLOYEE HLTH PLAN
00NOR	BX NORSTAR-BANCORP INC.
00NPD	NORWALK POLICE DEPARTMENT
00NPL	NIPPON LIFE
00NPN	NPPN
00NRL	NATIONAL RURAL LTR CARRIERS
00NSE	NASE

00NSF	NORTHWESTERN SECURITY LIFE
00NSI	NATIONAL STUDENT INS
00NVF	BX NVF CO (DIV SHARON STEEL)
00NVT	BX BANKING & FIN INSTIT. NY
00NWB	BX NATIONAL WESTMINSTER BANK
00NWK	BX NEWSWEEK INC
00NWR	BX NATIONAL WESTMINSTER BANK
00NYB	BX NEW YORK STATE BAR ASSOC
00NYE	NYEDA HEALTH
00NYL	NYL CARE HEALTH PLANS OF CONN
00NYM	NEW YORK MEDICAID
00NYN	BX NYNEX
00NYR	NYLACOR
00NYW	WELLCARE OF NY
00OCT	BX OFF OF THE COMPT OF THE CUR
00OGA	OHIO GRAPHIC ARTS HLTH
00OGI	BX OSSMONN GROUP
00OGL	BX OGILVY & MATHER INC
00OHO	BX STATE OF OHIO
00OLY	BX OLYMPUS CAMERA
00OMN	BX STUDENTS (SULTANATE OF OMAN
00OPC	OPTIMUM CHOICE
00OPE	BX INT. UN OF OPER ENG PA & DE
00OTU	BX OUTLET COMPANY, THE
00P-C	BX PALL CORPORATION
00P-G	BX PROCTOR & GAMBLE (COBRA)
00P-S	BX MERITOR CREDIT CORP
00PAS	PREFERRED ASSURANCE
00PBH	PROBEHAVIORAL HEALTH
00PCA	BX GOLUB CORP - MAIN GROUP
00PCB	PACIFIC BENEFIT
00PCC	BX PITTSBURG CORNING CORP
00PCF	PACIFIC HOUSE
00PCH	PACIFIC HERITAGE
00PCI	BX PARK COMMUNICATIONS
00PDG	BX PEOPLES DRUG STORE
00PDI	PLAN DATA INC.
00PEN	PENSION ASSOCIATES
00PFC	PROFESSIONAL CLAIMS
00PFE	PACIFICARE (SECURE HORIZONS)
00PFI	PREFERRED WORKS
00PFL	PFL LIFE
00PFR	PREFERRED INS
00PG1	BX PROCTOR & GAMBLE (RETIRES)
00PGI	PATRIOT GENERAL INSR
00PGS	PROGRESSIVE INS.

00PHC	PRUDENTIAL HEALTH CARE OF CT
00PHH	PREFERRED HEALTH
00PHM	PATHMARK
00PHS	PRIVATE HEALTH CARE SYSTEMS
00PIK	BX PICKWICK INTERNATIONAL
00PKF	BX PANNELL KERR FORSTER
00PMA	PIEDMONT ADMINISTRATORS
00PMI	PHYSICIANS MUTUAL INS CO
00PNA	BX PNC FINANCIAL CORP
00PNC	BX PNC FINANCIAL CORPORATION
00PND	BX IUE AFL-CIO HEALTH FUND PRO
00PNR	PIONEER ADJUSTMENT
00PNT	PAINTERS DISTR.
00POL	BX POLYMER CORPORATION
00PPI	PRO PSYCH, INC.
00PRA	PREMIER ASSIST
00PRC	BX COMMONWEALTH OF PUERTO RICO
00PRE	BX PREMIER INDUSTRIAL CORP
00PRF	BX PREMIER INDUSTRIAL CORP
00PRG	BX PREMIER INDUSTRIAL CORP
00PRH	BX PREMIER INDUSTRIAL CORP
00PRI	BX PARISIAN, INCORPORATED
00PRJ	BX PREMIER INDUSTRIAL CORP
00PRL	PROVIDIAN LIFE
00PRO	PROAMERICA
00PRU	PRUCARE
00PRV	PROVIDENCE-MCR
00PSG	BX PURITY SUPREME SUPERMARKETS
00PSI	PLAN SERVICES INC.
00PSK	BX PENSKE CORP
00PSL	PACIFIC STANDARD LIFE INS
00PSY	PSYCHOLOGICAL RESOURCES
00PTH	PATHWISE BEHAVIORAL HEALTH
00PYR	PYRAMID LIFE
00R-H	BX ROHM & HAAS CO
00R-L	BX ROHM & HAAS CO
00R-W	BX RAND-WHITNEY ROBERTSON
00RAA	BX WORLD WIDE COMP & COMMUNICA
00RAD	BX ADAP (DIV OF RITE AID)
00RAI	BX RAPID AMER INDUSTRIES
00RAL	RALSTON PURINA
00RAX	BX RAXTON CORP DIV STOP & SHOP
00RCB	RURAL CARRIER BENEFITS
00RCN	BX REGIONAL DATA CENTER INC
00RCU	BX UNITED FOOD COM WKRS LOC 23
00REB	BX ENCORE BOOKS DIV RITE AID

00RES	BX N Y STATE RESTURANT ASSOC
00RET	BX ALLIED-SIGNAL, INC
00RFF	BX RESEARCH FUND OF SUNY
00RFR	BX RESEARCH FUND OF SUNY
00RGI	BX ROYAL INSURANCE
00RHD	BX REUBEN H DONNELLEY CORP
00RHS	BX ROHM & HAAS CO (SALES GROUP)
00RHX	BX RANDOM HOUSE
00RIF	BX AMALGAMATED RETAIL INS FUND
00RIP	BX AMALGAMATED RETAIL INS PTM
00RIR	BX RITE AID (ROME DIV)
00RIT	BX RITE AID CORPORATION
00RJR	BX R. J. REYNOLDS
00RKL	BX RICKEL HOME CENTERS
00RMC	BX RIVERSIDE MEM CHAPELS & AFF
00ROY	ROYAL INSURANCE
00RPD	BX RAPID AMER CORP ETAL
00RPE	BX RAPID AMER CORP COM EXEC ME
00RPI	BX RHONE-POULEC INC
00RRS	ROTO ROOTER SERVICES
00RSC	BX RITE AID
00RSD	BX REPUB STL HRLY & N/EXM <10Y
00RSE	BX REPUB STL HRLY & N/EXM SALA
00RSF	BX REPUB STL HRLY & N/EXM SAL
00RSG	BX REP STL EXEMPT SALARIED
00RSH	BX REPUB STL SPEC MED PLAN
00RSL	BX REPUB STL (REDUCED BENEFITS)
00RSP	BX REPUB STL SALARY PENSION
00RST	BX SERA - TEC DIV OF RITE AID
00RTZ	BX RITZ CAMERA CENTERS, INC
00RW1	BX RAND-WHITNEY ROBERTSON PW
00RW2	BX RAND-WHITNEY ROBERTSON
00RW3	BX RAND-WHITNEY ROBERTSON
00RW4	BX RAND-WHITNEY ROBERTSON
00RW5	BX RAND-WHITNEY ROBERTSON
00RW6	BX RAND-WHITNEY ROBERTSON
00RW7	BX RAND-WHITNEY ROBERTSON
00RW8	BX RAND-WHITNEY ROBERTSON
00S-A	BX SEALED AIR CORP
00S-E	BX STV ENGINEERS INC
00S-I	BX STOWE WOODWARD INDUSTRIES
00S-J	BX ST JOE MINERALS CORP
00S-L	BX SMITHKLINE BECKMAN CORP
00S-S	BX SERVICE STATION DEALERS AME
00S00	OTHER STATE AGENCIES
00S01	STATE SERVICES FOR THE BLIND

00SA1	BX SERVICE STATION DEALERS AME
00SA2	BX SERVICE STATION DEALERS
00SA3	SAS
00SAG	SAG PRODUCERS HEALTH FUND
00SAM	SAMBA
00SAO	BX SERVICE STATION DEALERS
00SAS	BX STOP AND SHOP
00SBA	BX SABENA BELGIAN WORLD AIRLIN
00SBD	SUNDANCE BENEFITS DEPT
00SCE	SMITH CORONA EMPLOYEE
00SCI	STATE COMP INS FUND
00SCS	BX CNTRL SQUARE SCHL NON MEDCR
00SEL	SELECTPRO
00SEN	BX S E NICHOLS, INC
00SFU	STATE INS. FUND
00SGL	BX SUPERMARKET GEN PATHMARK EM
00SGO	BX SWIFT GLASS CO
00SHA	BX SHARON STL CORP ACTIVE SALA
00SHH	BX SCHENLEY INDS INC HOURLY
00SHP	SUBURBAN HEALTH PLAN
00SHR	BX SHARETECH
00SHS	STRATEGIC HEALTH SVC
00SID	BX SID HARVEY INDUSTIRES
00SIF	SECONDARY INQUIRY FUND
00SIG	SHELBY INSURANCE GROUP
00SIL	SILVER HILL HOSPITAL
00SKD	BX S KLEIN DEPT STRS RAPID AME
00SLS	BX ST LAWRENCE SEAWAY DEV CORP
00SMA	BX SECURITY MUTUAL LIFE INS CO
00SMB	BX MUTUAL BEN LIFE INS CO
00SND	S.S. OF NOTRE DAME
00SNE	SNET
00SNL	SNL ADMINISTRATORS
00SNT	BX SONAT INC
00SOM	SHEFFIELD OLSON & MCQUEEN
00SQC	BX SQUIBB CORP
00SQH	BX E R SQUIBB & SONS HOURLY
00SRW	BX SHERWOOD MEDCL PRODUCTD DIV
00SSA	BX SECRET SRVC EMP HLTH ASSOC
00SSC	SHAWMUT SELECT CARE
00STH	SNAP ON TOOLS HEALTH
00STI	STUDENT INSURANCE
00STM	BX AMER TEL & TEL INFO SYSTEM
00STR	STAR ADMINISTRATION
00STU	STUDENT HEALTH

00STW	BX STANWICK CORP
00SWA	BX SWANK INC
00SWJ	SEDGWICK JAMES
00SWO	BX STONE & WEBSTER
00SWS	SWSCHP
00T-I	BX TELEDYNE INC
00TAG	BX ANDERSEN
00TBC	CONNECTICUT TB CONTROL PGM
00TBE	TRAILBLAZER HEALTH ENTERPRISES
00TDR	TOWN OF DARIEN
00TDS	BX TDS VENTURA, INC
00TEA	BX EASTERN RAILROAD
00TEB	BX TRKNG WLFARE FND NJ LOC 560
00TEC	TOTAL EMPLOYEE CARE
00TEE	BX TMSTERS WLFARE FUND LOC 614
00TEG	BX TRKNG WLFARE FND NJ LOC 560
00TEL	BX NEW YORK TELEPHONE
00TER	BX TERADYNE INC
00TEW	BX TMSTRS LOC 617 HLTH & WEL F
00TFS	TUFTS HEALTH PLAN
00THC	TOTAL HEALTH CHOICE
00TIS	TRAVEL INSURANCE SERVICES
00TJM	TJ MAXX
00TKC	TAKE CARE
00TKH	BX TEK HUGHES DIV OF INT PLTEX
00TKP	TAKECARE PREFERRED
00TLA	BX N Y ST TRIAL LAWYER ASSOC
00TLC	BX JAMES TALCOTT FACTORS, INC
00TLE	BX TIME INCORPORATED
00TLP	TED L PARKER & ASSOC
00TLW	BX TMSTERS WLFARE FUND LOC 84
00TMB	BX MUTUAL BEN LIFE INS CO
00TME	BX TIME INCORPORATED
00TMK	TRUSTMARK
00TMP	TOWN OF MILFORD POLICE COMP
00TNE	THE NEW ENGLAND
00TNW	BX TILLINGHAST NELSON & WARREN
00TOW	TOWER LIFE/ACCIDENT INS
00TPA	TPA OF PA
00TPC	UNITED HEALTHCARE ADM(TPA-CT)
00TPH	BX TUSCARORA PLASTICS
00TPL	TOTAL PLAN ADMIN
00TPP	TPCM THREE PARTY PLAN
00TPS	BX TUSCARORA PLASTICS SALARIED
00TRI	TRIAD
00TRP	TRAVELER'S PREFERRED

00TRS	TRI-STATE
00TSB	BX SERVICE BUREAU CORP
00TVA	TRAVELERS PROTECTIVE ASSO
00TWU	BX ACTWU TEXTILE WKRS HLTH PLN
00TWW	BX ACTWU TEXTILE WKRS HLTH PLN
00TWX	BX ACTWU TEXTILE WKRS HLTH PLN
00TWY	BX ACTWU TEXTILE WKRS HLTH PLN
00TYC	THIRD PARTY CLAIMS
00U-D	BX UDDEHOML STEEL CORP
00U-P	BX UNITED PARCEL SERVICE
00U-S	BX UNITED STATES STEEL
00U10	BX U S STEEL RETIREES
00U11	BX U S STEEL RETIREES
00U12	BX U S STEEL RETIREES
00U13	BX UNITED STATES STEEL
00U14	BX US STL USX N/EXM SAL RETIRE
00U99	BX U S STEEL ACT NON EXM SAL
00UAI	US ASSIST-APRI INS.
00UAW	BX UNITED AUTO WORKERS
00UBH	UNITED BEHAVIORIAL HEALTH
00UBT	BX TMSTERS LOC 641 W F
00UCC	UCC CLAIMS
00UFW	BX UNITED FOOD & COMM WORKERS
00UHN	UTC HEALTHCARE NETWORK
00UMC	BX WEST OHIO UNITED METHODIST
00UMW	UNITED MINE WORKER
00UNB	UNISYS BENEFIT
00UNC	USA HEALTH NETWORK CO., INC.
00UNE	UNITED HEALTH PLANS OF NE
00UNL	UNUM LIFE
00UNW	LOCAL 208-UNITED WIRE
00UPP	UNITED PAYORS & PROVIDERS
00UPS	BX UNITED PARCEL SERVICE
00US2	BX UNITED STATES STEEL
00US3	BX UNITED STATES STEEL
00US4	BX UNITED STATES STEEL
00USA	USSA
00USC	BX UNITED STATE STL MINE WRKS
00USH	US HEALTHCARE, INC. (AETNA)
00USO	BX UNITED STATES STEEL
00USP	BX U.S. STEEL CORP SAL RETIREE
00USS	BX USS CORP SAL N/REPRSNTD EMP
00USW	BX UNITED STEELWRKS OF AMERICA
00UTI	UNITED TRANSPORTATION INS
00UTV	BX ASSOC PRESS (UTW RETIREES)
00UTW	BX ASSOC PRESS (UTW)

00V-A	BX GTE VALERON CORP (ACTIVE)
00V-R	BX GTE VALERON CORP (RETIREES)
00V10	BX VALASSIS INSERTS
00VAS	VA SURETY
00VEB	VEBA TRUST FUND
00VET	VETERANS ADMINISTRATION
00VIS	BX ACTION VISTA VOLUNTEERS
00VYT	VYTRA HEALTHCARE
00W99	STATE WELFARE - MISC
00WAB	STATE WELFARE - ALABAMA
00WAL	WALMART BENEFIT
00WBH	WHEELER/BRISTOL HOSPITAL
00WCM	WELLCARE OF CONNECTICUT, INC.
00WCN	WILLIS CORROON
00WCP	WORLD COLOR PRESS INS
00WDB	BX WALDEN BOOKS
00WDC	WALGREEN DRUG CO
00WEF	BX TMSTERS LOC 641 WLFARE FUND
00WER	BX WESTERN ELECTRIC
00WEW	BX WILLIAM E WRIGHT CO
00WFS	WOODFIELD FAMILY SERVICES
00WLT	BX PENNWALT CORPORATION
00WMA	STATE WELFARE - MASSACHUSETTS
00WMB	WHATCOM MEDICAL BUREAU
00WME	STATE WELFARE - MAINE
00WMS	STATE WELFARE - MISSISSIPPI
00WNH	STATE WELFARE - NEW HAMPSHIRE
00WNJ	STATE WELFARE - NEW JERSEY
00WNY	STATE WELFARE - NY
00WOL	BX AMALGAMATED INS FUND (WOOL)
00WPA	STATE WELFARE - PA
00WPR	BX W PA TMSTRS & MOTOR CAR E R
00WPT	BX W PA TMSTRS & MOTOR CAR WLF
00WRG	WRITERS GUILD
00WRI	STATE WELFARE - RHODE ISLAND
00WRS	BX WESTINGHOUSE RADIOL SVC DIV
00WSC	STATE WELFARE - SOUTH CAROLINA
00WSH	BX AMALGAMATED WASHABLE CLOTHI
00WSU	BX WOLTERS, SAMSOM, US CORP
00WTX	STATE WELFARE - TEXAS
00WVT	STATE WELFARE - VERMONT
00WXB	BX WESTINGHOUSE ELECTRIC
00XPS	EXPRESS SCRIPTS
00YPH	YALE PREFERRED HEALTH PLAN
00YSM	CSHCN-YALE SCHOOL OF MEDICINE
01000	PLAN ADMINISTRATORS

01001	MARRIOTT NE REGIONAL
01002	UTICA FIRST
01003	CLIENT SERVICES GROUP
01004	PREFERRED HEALTH NET(PHN/MD)
01005	GROUP & PENSION ADMIN
01006	NAT'L ORG OF INDUS TRADES
01008	PURINA BENEFIT ASSO
01009	BOISE CASCADE CORP
01010	FOX-EVERETT
01011	BORDEN MEDICAL PLAN
01012	NAT'L ASSO UNIFORMED SVCS
01013	CRUM & FORSTER
01014	ELITE BENEFIT SYSTEMS
01015	MUTUAL PROTECTIVE
01016	GROUP INS SERVICE CENTER
01017	TUCKER & CLARK
01018	AFSPA-AMER FOREIGN SVCS
01019	STATE OF CT-SMHA
01020	HEALTHSOURCE PPO PRODUCT
01021	THOMAS E. FAY INS. ADJ
01022	NEIGHBORHOOD HEALTH PART
01023	ALLIED NATIONAL
01024	BORDEL CORP.
01025	LOWER HUDSON VALLEY EAP
01026	DUNLAP CLAIMS MGMT
01027	AMERIHEALTH-MEDICARE
01028	GROUP ADMINISTRATORS LTD
01029	UNITED HEALTHCARE
01030	FARMERS INS GROUP
01031	MAXON COMPANY
01032	RAND INS.
01033	SAFECO
01034	SOUTHCARE
01035	PREFERRED ONE
01037	MOUNTAIN STATE ADM
01039	CIRMA
01040	HEALTH AMERICA RE
01041	MANAGED HEALTH NETWORK
01042	SAGA BEHAVIORAL HEALTH
01043	ACCESS BEHAVIORAL HEALTH
01044	MOHEGAN SUN TRIBAL
01045	MAGELLAN BEHAVIORAL HEALTH
01046	TPA OF CT
01047	SAGA-GENERAL
01048	INSURANCE PROGRAMMERS
01049	WOMAN & HEALTH

01050	EVOLUTIONS HEALTHCARE SYSTEMS
01051	ONE HEALTH PLAN
01052	ASSOC HOSP SERVICE OF MAINE
01053	NATIONAL HERITAGE INSURANCE CO
01054	PSYCH MANAGEMENT INC.
01055	BLUE CROSS TEAMSTERS
01056	USI ADMINISTRATORS
01057	VALUE OPTIONS
01058	NORWALK, CITY OF BENEFIT PLAN
01059	WOMAN & HEALTH/BC OF CT
01060	PSYCH MANAGEMENT INC (PMI)
01061	HMC PPO,INC(S&S HC STRATEGIES)
01062	DIVERSIFIED INSURANCE
01063	YNHH Senior Assurance
01064	EMPLOYEE ASSISTANCE PROGRAM
01065	PERFORMAX
01067	CORESTAR
01068	MIDWEST NATIONAL LIFE
01069	BENESIGHT
01070	HEALTH CONNECTICUT PPO
01071	BEHAVIORAL HEALTH CT
01073	Northeast Healthcare Alliance
01074	MHN INC.
01076	EVERCARE CHOICE
01077	BEHAVIORAL HEALTH PARTNERSHIP
01078	AETNA GOLDEN MEDICARE
01079	EVERCARE PLAN
01080	COVENTRY HEALTHCARE INC.
01081	HUMANA INSURANCE COMPANY
01082	WELLCARE OF CONNECTICUT, INC
01089	SENIOR WHOLE HEALTH LLC
01090	LOCAL 155 BAKERY & CONFECTION
0HUSA	HUSKY A PROGRAM
0HUSB	HUSKY B PROGRAM
0MCSI	MANAGED CARE STRATEGIES, INC.
0TRCR	TRICARE
13101	NATIONAL GOVT. SERVS. MEDICARE
14163	PREFERRED ONE WELLCARE
23225	AETNA BETTER HEALTH
39064	CIGNA BEHAVIORAL HEALTH
39075	ANTHEM BEHAVIORAL HEALTH
39085	AETNA BEHAVIORAL HEALTH
60054	AETNA BETTER HEALTH
87726	AMERICHOICE OF CONNECTICUT
OOLGW	BX ILGWU CHICAGO REGION
SH999	VNA NORTHWEST INC.

Payer Code	Payer Description
00HPM	Harvard Pilgrim
00CTE	Connecticare Employee
00ABM	Anthem BCBS Medicare
00USL	USAA Life
00ATS	Aetna Secondary
00UHI	United Healthcare Integrated
00CGS	Cigna Secondary
00DGP	Diversified Group
00RMI	Retiree Medical Insurance Plan
00LHS	Liberty Healthshare
00TWH	Town of West Hartford
00CBT	Comprehensive Benefits
00WHC	Wellnet Healthcare
00GTL	Guarantee Trust Life Insurance Co
00ABS	Allied Benefit Systems Inc
00ASI	Association & Society Insurance Co
0GEHA	GEHA
0RRMC	Railroad Medicare
00DAC	Diversified Administrative Corp
0CCHF	Connecticare Carpenters Health Fund
00AME	Ameriben
0GEAS	GEHA-ASA
0CADM	Claims Administration
00388	Mutual of Omaha Companies
0PHCS	PHCS Network
00POM	POMCO Group
00BGR	Bristol GI Research
00HPS	Healthplus Insurance Company
00NEE	New England Electrical Workers
00AMA	AMA Insurance
00RCB	Rural Carrier Benefit
00CPT	CT Pipe Trades Benefit Funds
00IHB	Innovative Health Plan
00CRX	Collect RX
00EGB	Gallagher Bassett Services Inc.
0HPHC	HPHC
0HTFD	The Hartford
00MSA	The Main Street America
00AET	AETNA
00SWI	Sedgwick Insurance
00NLC	National Association of Letter Carriers
00IUL	IUBAC Local 1
00CGS	Coresource NGS
00IBL	IBEW Local 35

Payer Code	Payer Description
00HBI	Health Plans Inc.
00HMI	HCC Medical Insurance Services
00TSS	Triple-S Salud
00NLB	Nippon Life Benefits
00UHS	United Healthcare Student Resources
00NAS	National Automatic Sprinkler Industry
00PAT	Patient Advocates
00UNI	Unity Health Insurance

Appendix 5: Source of Payment Codes and Descriptions

Code	Description	Code	Description
1	MEDICARE	311	TRICARE (CHAMPUS)
11	Medicare (Managed Care)	3111	TRICARE Prime--HMO
111	Medicare HMO	3112	TRICARE Extra--PPO
112	Medicare PPO	3113	TRICARE Standard - Fee For Service
113	Medicare POS	3114	TRICARE For Life--Medicare Supplement
119	Medicare Managed Care Other	3115	TRICARE Reserve Select
12	Medicare (Non-managed Care)	3116	Uniformed Services Family Health Plan (USFHP) -- HMO
121	Medicare FFS	3119	Department of Defense - (other)
122	Medicare Drug Benefit	312	Military Treatment Facility
123	Medicare Medical Savings Account (MSA)	3121	Enrolled Prime--HMO
129	Medicare Non-managed Care Other	3122	Non-enrolled Space Available
19	Medicare Other	3123	TRICARE For Life (TFL)
2	MEDICAID	313	Dental --Stand Alone
21	Medicaid (Managed Care)	32	Department of Veterans Affairs
211	Medicaid HMO	321	Veteran care--Care provided to Veterans
212	Medicaid PPO	3211	Direct Care--Care provided in VA facilities
213	Medicaid PCCM (Primary Care Case Management)	3212	Indirect Care--Care provided outside VA facilities
219	Medicaid Managed Care Other	32121	Fee Basis
22	Medicaid (Non-managed Care Plan)	32122	Foreign Fee/Foreign Medical Program(FMP)
23	Medicaid/SCHIP	32123	Contract Nursing Home/Community Nursing Home
24	Medicaid Applicant	32124	State Veterans Home
25	Medicaid - Out of State	32125	Sharing Agreements
29	Medicaid Other	32126	Other Federal Agency
3	OTHER GOVERNMENT (Federal/State/Local excluding Department of Corrections)	322	Non-veteran care
31	Department of Defense	3221	Civilian Health and Medical Program for the VA (CHAMPVA)
3222	Spina Bifida Health Care Program (SB)	379	Local, not otherwise specified (other local, county)

3223	Children of Women Vietnam Veterans (CWVV)	38	Other Government (Federal, State, Local not specified)
3229	Other non-veteran care	381	Federal, State, Local not specified managed care
33	Indian Health Service or Tribe	3811	Federal, State, Local not specified - HMO
331	Indian Health Service - Regular	3812	Federal, State, Local not specified - PPO
332	Indian Health Service - Contract	3813	Federal, State, Local not specified - POS
333	Indian Health Service - Managed Care	3819	Federal, State, Local not specified - not specified managed care
334	Indian Tribe - Sponsored Coverage	382	Federal, State, Local not specified - FFS
34	HRSA Program	389	Federal, State, Local not specified - Other
341	Title V (MCH Block Grant)	39	Other Federal
342	Migrant Health Program	4	DEPARTMENTS OF CORRECTIONS
343	Ryan White Act	41	Corrections Federal
349	Other	42	Corrections State
35	Black Lung	43	Corrections Local
36	State Government	44	Corrections Unknown Level
361	State SCHIP program (codes for individual states)	5	PRIVATE HEALTH INSURANCE
362	Specific state programs (list/ local code)	51	Managed Care (Private)
369	State, not otherwise specified (other state)	511	Commercial Managed Care - HMO
37	Local Government	512	Commercial Managed Care - PPO
371	Local - Managed care	513	Commercial Managed Care - POS
3711	HMO	514	Exclusive Provider Organization
3712	PPO	515	Gatekeeper PPO (GPPO)
3713	POS	519	Managed Care, Other (non HMO)
372	FFS/Indemnity	52	Private Health Insurance - Indemnity
521	Commercial Indemnity	81	Self-pay
522	Self-insured (ERISA) Administrative Services Only (ASO) plan	82	No Charge
523	Medicare supplemental policy (as second payer)	821	Charity
529	Private health insurance—other commercial Indemnity	822	Professional Courtesy
53	Managed Care (private) or private health insurance (indemnity), not otherwise specified	823	Research/Clinical Trial

54	Organized Delivery System	83	Refusal to Pay/Bad Debt
55	Small Employer Purchasing Group	84	Hill Burton Free Care
59	Other Private Insurance	85	Research/Donor
6	BLUE CROSS/BLUE SHIELD	89	No Payment, Other
61	BC Managed Care	9	MISCELLANEOUS/OTHER
611	BC Managed Care - HMO	91	Foreign National
612	BC Managed Care - PPO	92	Other (Non-government)
613	BC Managed Care - POS	93	Disability Insurance
619	BC Managed Care - Other	94	Long-term Care Insurance
62	BC Indemnity	95	Worker's Compensation
63	BC (Indemnity or Managed Care) - Out of State	951	Worker's Comp HMO
64	BC (Indemnity or Managed Care) - Unspecified	953	Worker's Comp Fee-for-Service
69	BC (Indemnity or Managed Care) - Other	954	Worker's Comp Other Managed Care
7	MANAGED CARE, UNSPECIFIED (to be used only if one can't distinguish public from private)	959	Worker's Comp, Other unspecified
71	HMO	96	Auto Insurance (no fault)
72	PPO	98	Other specified (includes Hospice - Unspecified plan)
73	POS	99	No Typology Code available for payment source
79	Other Managed Care, Unknown if public or private	ZZZ	Unavailable / Unknown
8	NO PAYMENT from an Organization/Agency/Program/Private Payer Listed		

Source: *Public Health Data Standards Consortium, Source of Payment Typology (V3.0)*

Appendix 5a: Prior OHCA Source of Payment Codes Mapping with Payer Typology

Payercode	Payercode description	Typology Code	Typology Description
A	Self Pay	81	Self Pay
B	Workers Compensation	95	Workers' Compensation
C	Medicare	1	Medicare
D	Medicaid	2	Medicaid
E	Other Federal Program	3 or 4	Other Government or Corrections
F	Commercial Insurance Company	5	Private Health Insurance
G	Blue Cross	6	Blue Cross/Blue Shield
H	CHAMPUS	311	TRICARE (Champus)
I	Other	92	Other (non-Government)
Q	Title V	341	Title V (MCH Block Grant)
R	No Charge	82	No Charge
S	HMO	511	Commercial managed care - HMO
T	PPO	512	Commercial managed care - PPO
U	Charter Oak	362	State specific program - Charter Oak

Source: *CT DPH Office of Health Care Access Acute Care Discharge Database and Public Health Data Standards Consortium, Source of Payment Typology (V3.0)*

Appendix 6: Revenue Codes and Description

Revenue Code	Description
0250	Pharmacy - General Classification
0251	Pharmacy - Generic Drugs
0252	Pharmacy - Non-generic Drugs
0254	Pharmacy - Drugs Incident to other Diagnostic Services
0255	Pharmacy - Drugs incident to Radiology
0256	Pharmacy - Experimental Drugs
0257	Pharmacy - Non-prescription
0258	Pharmacy - IV Solutions
0259	Pharmacy - Other Pharmacy
0260	IV Therapy - General classification
0261	IV Therapy - Infusion Pump
0262	IV Therapy - Pharmacy Svcs
0263	IV Therapy - Drug/Supply Delivery
0264	IV Therapy - Supplies
0269	IV Therapy - Other
0270	Medical/Surgical Supplies and Devices - General Classification
0271	Medical/Surgical Supplies and Devices - Non Sterile
0272	Medical/Surgical Supplies and Devices - Sterile
0273	Medical/Surgical Supplies and Devices - Take Home
0274	Medical/Surgical Supplies and Devices - Prosthetic/Orthotic Devices
0275	Medical/Surgical Supplies and Devices - Pace Maker
0276	Medical/Surgical Supplies and Devices - Intraocular Lens
0278	Medical/Surgical Supplies and Devices - Other Implants
0279	Medical/Surgical Supplies and Devices - Other Supplies/Devices
0280	Oncology - General Classification
0289	Oncology - Other
0299	Durable Medical Equipment - Other Equipment
0300	Laboratory - General Classification
0301	Laboratory - Chemistry
0302	Laboratory - Immunologu
0303	Laboratory - Renal Patient(Home)
0304	Laboratory - Non-Routine Dialysis
0305	Laboratory - Hematology
0306	Laboratory - Bacteriology and Microbiology
0307	Laboratory - Urology
0309	Laboratory - Other

0310	Laboratory Pathological - General Classification
0311	Laboratory Pathological - Cytology
0312	Laboratory Pathological - Histology
0314	Laboratory Pathological - Biopsy
0319	Laboratory Pathological - Other
0320	Radiology - Diagnostic - General Classification
0321	Radiology - Diagnostic - Angiocardiology
0322	Radiology - Diagnostic - Arthrography
0323	Radiology - Diagnostic - Arteriography
0324	Radiology - Diagnostic - Chest X-Ray
0329	Radiology - Diagnostic - Other
0330	Radiology - Therapeutic - General Classification
0331	Radiology - Therapeutic - Chemotherapy - Injected
0332	Radiology - Therapeutic - Chemotherapy - Oral
0333	Radiology - Therapeutic - Radiation Therapy
0335	Radiology - Therapeutic - Chemotherapy - IV
0339	Radiology - Therapeutic - Other
0209	Intensive Care - Other Intensive Care
0340	Nuclear Medicine - General Classification
0341	Nuclear Medicine - Diagnostic
0342	Nuclear Medicine -Therapeutic
0343	Nuclear Medicine - Diagnostic RadioPharmaceuticals
0344	Nuclear Medicine - Therapeutic RadioPharmaceuticals
0349	Nuclear Medicine - Other
0350	CT Scan - General Classification
0351	CT Scan - Head Scan
0352	CT Scan - Body Scan
0359	CT Scan - Other CT Scans
0360	Operating Room Services - General Classification
0361	Operating Room Services - Minor Surgery
0362	Operating Room Services - Organ transplant other than Kidney
0367	Operating Room Services - Kidney transplant
0369	Operating Room Services - Other Operating Room Services
0370	Anesthesia - General Classification
0371	Anesthesia - Incident to Radiology
0372	Anesthesia - Incident to other Diagnostic Services
0374	Anesthesia - Acupuncture
0379	Anesthesia - Other Anesthesia

0380	Blood - General classification
0381	Blood - Packed Red Cells
0382	Blood - Whole Blood
0383	Blood - Plasma
0384	Blood - Platelets
0385	Blood - Leucocytes
0386	Blood - Other components
0387	Blood - Other derivatives (Cryoprecipitates)
0389	Blood - Other Blood
0390	Blood Storage and Processing - General Classification
0391	Blood Storage and Processing - Blood Administration
0399	Blood Storage and Processing - Other
0400	Other Imaging Services - General classification
0401	Other Imaging Services - Diagnostic Mammography
0402	Other Imaging Services - Ultrasound
0403	Other Imaging Services - Screening Mammography
0404	Other Imaging Services - Positron Emission Tomography
0409	Other Imaging Services - Other
0410	Respiratory Services - General Classification
0412	Respiratory Services - Inhalation Services
0413	Respiratory Services - Hyperbaric Oxygen Therapy
0419	Respiratory Services - Other
0420	Physical Therapy - General classification
0421	Physical Therapy - Visit charge
0422	Physical Therapy - Hourly charge
0423	Physical Therapy - Group rate
0424	Physical Therapy - Evaluation or Re-evaluation
0429	Physical Therapy - Other
0430	Occupational Therapy - General classification
0431	Occupational Therapy - Visit charge
0432	Occupational Therapy - Hourly charge
0433	Occupational Therapy - Group rate
0434	Occupational Therapy - Evaluation or Re-evaluation
0439	Occupational Therapy - Other
0440	Speech-Language Pathology Therapy - General classification
0441	Speech-Language Pathology Therapy - Visit charge
0442	Speech-Language Pathology Therapy - Hourly charge
0443	Speech-Language Pathology Therapy - Group rate
0444	Speech-Language Pathology Therapy - Evaluation or Re-evaluation

0449	Speech-Language Pathology Therapy - Other
0450	Emergency Room - General Classification
0451	EMTALA Emergency Medical Screening Services
0452	ER Beyond EMTALA Screening
0456	Urgent Care
0459	Emergency Room - Other
0460	Pulmonary Function - General Classification
0469	Pulmonary Function - Other
0470	Audiology - General Classification
0471	Audiology - Diagnostic
0472	Audiology - Treatment
0479	Audiology - Other
0480	Cardiology - General Classification
0481	Cardiology - Cardiac Cath Lab
0482	Cardiology - Stress Test
0483	Echocardiology
0489	Cardiology - Other
0490	Ambulatory Surgical Care - General Classification
0499	Ambulatory Surgical Care - Other
0510	Clinic - General Classification
0511	Clinic - Chronic Pain Center
0512	Clinic - Dental Clinic
0513	Clinic - Psychiatric Clinic
0514	Clinic - OB-GYN Clinic
0515	Clinic - Pediatric Clinic
0516	Urgent Care Clinic
0519	Clinic - Other Clinic
0530	Osteopathic Services - General Classification
0531	Osteopathic Services - Osteopathic Therapy
0539	Osteopathic Services - Other
0610	MRI - General Classification
0611	MRI - Brain (including Brainstem)
0612	MRI - Spinal Cord (including Spine)
0614	MRI - Other
0615	MRA - Head and Neck
0616	MRA - Lower Extremities
0618	MRA - Other
0619	MRI - Other
0621	Medical/Surgical Supplies - Incident to radiology
0622	Medical/Surgical Supplies - Incident to other diagnostic services
0623	Itemized charges for surgical dressings
0624	Medical/Surgical Supplies - Investigational Device
0630	Drugs Identification - General Classification

0631	Drugs Identification - Single Source Drug
0632	Drugs Identification - Multiple Source Drug
0633	Drugs Identification - Restrictive Prescription
0634	Drugs Identification - Erythropoietin (EPO) less than 10,000 units
0635	Drugs Identification - Erythropoietin (EPO) more than 10,000 units
0636	Drugs Identification - Drugs Requiring Detailed Coding
0637	Drugs Identification - Self-administrable Drugs
0681	Trauma Response Level I
0682	Trauma Response, Level II
0683	Trauma Response: Level III
0684	Trauma Response: Level IV
0689	Trauma Response: Other
0700	Cast Room - General Classification
0709	Cast room - Other
0710	Recovery room - General Classification
0720	Labor Room/Delivery - General Classification
0721	Labor Room/Delivery - Labor
0722	Labor Room/Delivery - Delivery
0723	Labor Room/Delivery - Circumcision
0724	Labor Room/Delivery - Birthing Centre
0729	Labor Room/Delivery - Other
0730	EKG/ECG - General Classification
0731	EKG/ECG - Holter monitor
0732	EKG/ECG - Telemetry
0739	EKG/ECG - Other
0740	EEG - General classification
0750	Gastro Intestinal Services - General Classification
0760	Treatment/Observation Room - General Classification
0761	Treatment/Observation Room - Treatment Room
0762	Treatment/Observation Room - Observation Room
0769	Treatment/Observation Room - Other
0770	Preventive Care Services - General
0771	Vaccine Administration
0779	Other preventive care services
0789	Other Telemedicine
0790	Lithotripsy - General Classification
0800	Inpatient Renal Dialysis - General Classification
0801	Inpatient Renal Dialysis - Inpatient Hemodialysis
0802	Inpatient Renal Dialysis - Inpatient Peritoneal (Non-CAPD)
0803	Inpatient Renal Dialysis - Inpatient Continuous Ambulatory Peritoneal Dialysis

0804	Inpatient Renal Dialysis - Inpatient Continuous Cycling Peritoneal Dialysis
0809	Inpatient Renal Dialysis - Other
0810	Organ Acquisition - General Classification
0811	Organ Acquisition - Living Donor-Kidney
0812	Organ Acquisition - Cadaver Donor-Kidney
0813	Organ Acquisition - Unknown Donor -Kidney
0814	Organ Acquisition - Other Kidney Acquisition
0820	Hemodialysis - Outpatient or Home - General Classification
0821	Hemodialysis - Outpatient or Home - Hemodialysis/Composite or other rate
0825	Hemodialysis - Outpatient or Home - Support Services
0829	Hemodialysis - Outpatient or Home - Other
0830	Peritoneal Dialysis - Outpatient or Home - General Classification
0831	Peritoneal Dialysis - Outpatient or Home - Peritoneal Composite or other rate
0839	Peritoneal Dialysis - Outpatient or Home - Other
0840	CAPD - Outpatient or Home - General Classification
0841	CAPD - Outpatient or Home - CAPD/Composite or other rate
0842	CAPD - Outpatient or Home - Home Supplies
0843	CAPD - Outpatient or Home - Home Equipment
0844	CAPD - Outpatient or Home - Maintenance/100%
0859	CCPD OPD/Home: Other CCPD dialysis
0860	Magnetoencephalography
0880	Miscellaneous Dialysis
0881	Miscellaneous Dialysis: Ultrafiltration
0889	Miscellaneous Dialysis: Other misc. dialysis
0987	Professional Fees -Hospital Visit
0988	Professional Fees - Consultation
0989	Professional Fees - Private Duty Nurse
0900	Psychiatric/Psychological Trt
0901	Psychiatric/Psychological Trt: Electroshock treatment
0902	Psychiatric/Psychological Trt: Milieu therapy
0903	Psychiatric/Psychological Trt: Play therapy
0904	Psychiatric/Psychological Trt: Activity therapy
0905	Psychiatric/Psychological Trt: Intensive Outpatient serv-sych
0906	Psychiatric/Psychological Trt: Intensive out serv - chem dep
0907	Psychiatric/Psychological Trt: Comm behavioral program
0911	Psychiatric/Psychological Svcs: Rehabilitation
0912	Psychiatric/Psychological Svcs: Partial Hosp - less intensive

0913	Psychiatric/Psychological Svcs: Partial Hosp - Intensive
0914	Psychiatric/Psychological Svcs: Individual therapy
0915	Psychiatric/Psychological Svcs: Group therapy
0916	Psychiatric/Psychological Svcs: Family therapy
0917	Psychiatric/Psychological Svcs: Biofeedback
0918	Psychiatric/Psychological Svcs: Testing
0919	Psychiatric/Psychological Svcs: Other behavioral treat/serv
0920	Other Diagnostic Services
0921	Other Diagnostic Services: Peripheral vascular lab
0922	Other Diagnostic Services: Electromyogram

0923	Other Diagnostic Services: Pap smear
0924	Other Diagnostic Services: Allergy test
0925	Other Diagnostic Services: Pregnancy test
0941	Other Therapeutic Serv: Recreation Rx
0942	Other Therapeutic Serv: Educ/training
0943	Other Therapeutic Serv: Cardiac rehab
0944	Other Therapeutic Serv: Drug rehab
0945	Other Therapeutic Serv: Alcohol rehab
0948	Pulmonary Rehabilitation
0949	Other Therapeutic Serv: Additional RX SVS
9999	No revenue data

Source: *National Uniform Billing Committee UB-04 Manual and CMS 2016 FR OPPS revenue code to cost center crosswalks 10.27.2015*