

New Bill Pay Record Layout

Field Name	Description	Data Type/Size	Allowable Values
Case Number	Unique Identifier for each case assigned by the responsible District Office.	Char(9)	
Payee Number	Unique Identifier assigned to provider (SSN or Tax ID)	Char(9)	
Service From Date	Beginning Date of Service	Date(8)	CCYYMMDD
Service To Date	Ending Date of Service	Date(8)	CCYYMMDD
Record Type	Type of record	Char(1)	B=Normal Bill C= Cancel Check D=Debt M=Manual Check
Payee Number	Payee ID number	Char(9)	
Payee Name	Claimant's Name	Char(35)	
Payee Address Line 1	Payee's Address	Char(35)	
Payee Address Line 2	Payee's Address	Char(35)	
Payee Address Line 3	Payee's Address	Char(30)	
Payee City	Payee's City	Char(20)	
Payee State	Payee's State	Char(2)	
Payee Zip	Payee's Zip	Char(5)	
Payee Zip 4	Payee's Zip +4	Char(4)	
Provider Type		Char(1)	F= Pharmacy P= Physician H= Hospital R=Claimant
Reimbursement Code	Indicates Payment Made to the Claimant	Char(1)	R= Reimbursement made to Claimant
Pharmacy Number	Pharmacy NABP Number	Char(7)	
Pay Center Code	Code Used to Identify a Central Payment Center for a Pharmacy Chain	Char(6)	Availiable for bills paid prior to 9/4/03
Clearinghouse ID	Clearinghouse ID Number	Char(3)	Availiable for bills paid prior to 9/4/03
Employee last Name	Employee's Last name (From CMF)	Char(10)	
Employee First Initial	Employee's First Initial (From CMF)	Char(1)	
Area Code	SMSA/MSA Identifier	Char(4)	FIPS Code table
Redefine - UNIQUE TO Pharmacy Record Type= F			
RX Numbers	Prescribes Number	Char(7)	
RX Appeals	RX Appealed	Char(1)	
RX Refills		Char(2)	
Redefine - UNIQUE TO Hospital Record Type= H			

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Field Name	Description	Data Type/Size	Allowable Values
Diagnosed related group number	Diagnosis Related Group for Inpatient Bills	Char(3)	
Filler		Char(4)	
Appeal	Medical Bill Appealed	Char(1)	Y/N= W
Filler		Char(2)	
Redefine - UNIQUE TO Physician Record Type= P			
Procedure Code	Billed procedure code	Char(5)	CPT-4, HCPC'S, Revenue center or OWCP Procedure code indicating Service Provided
Modifier Code	Indicates different level of service	Char(2)	
Appeals Code	Fee schedule appeal code	Char(1)	B, 1-7
Filler		Char(2)	
Redefine - UNIQUE TO Fund Adjustment Data Prior to 09/04/03			
Transfer Indicator	Funds have been transferred	Char(1)	0
Adjustment Indicator	Adjustment has been made	Char(1)	0
Filler		Char(8)	
Return from Redefine			
Category Code	Procedure Code Category	Char(1)	A= Anesthesia E= Evaluation/Management M=Medicine P= Pathology/Laboratory R= Radiology/Nuclear Med Diagnostic Ultrasound S= Surgery
Work Unit	Work Relative Unit	Char(3)	000
Practice Unit	Practice Expenses Geographical Adjustment Factor	Char(3)	000
Malpractice Unit	Malpractice Relative Value	Char(3)	000
Unit Cost	Conversion Factor	Char(3)	000
Adjust Factor	Expenses Geographic Adjustment factor	Char(3)	000
Practice Adjustment factor	Practice Expenses Geographic Adjustment Factor	Char(3)	000
Malpractice Adjustment Factor	Malpractice Expenses Geographic Adjustment Factor	Char(3)	000
Percent Modifier	Adjustment factor for Procedure code Modifier	Char(2)	00
National Drug Code	National Drug Code	Char(11)	00000000000
Two-Year High Price	2YR High, Wholesale Price	Char(5)	00000
Dispensing Fee	Allowed Dispensing Fee For Prescription	Char(2)	00

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Field Name	Description	Data Type/Size	Allowable Values
Redefine - UNIQUE TO Pharmacy Record Type= F			
Allowed Fee Amount	Allowable cost for prescription	Char(5)	0
Redefine - UNIQUE TO Hospital Record Type= H			
DRG Amount	Actual Cost, Calculated by Diagnostic Related Group for Inpatient bills	Char(5)	00000
Servicing State Code	State where Service was Performed	Char(2)	
Servicing Zip Code	Zip Code Where Service was Performed	Char(5)	
Prompt Payment obligation	Prompt Payment Flag Indicating contractual payment obligation	Char(1)	
Redefine - UNIQUE TO Bills Paid Prior To 9/4/03			
Bill Number	Bill Number	Char(12)	000000000000
Invoice type	Type of Invoice	Char(1)	0
Invoice number	Invoice number	Char(8)	00000000
Redefine - UNIQUE TO Invoice Type			
Invoice Date	If Invoice type=D, Date provider created the bill If Invoice type = N, Providers Unique ID number for the bill	Date(8)	
Redefine - UNIQUE TO Bills Paid After 9/4/03			
TCN	Unique Transaction Control Number	Char(17)	
Dispense Rate	Dispensing rate	Char(4)	0000
Return from Redefine			
Provider Charges Amount	Amount Charged by provider	Char(5)	00000
Ineligible Amount	Amount Not Covered	Char(5)	00000
Ineligible code	Ineligible payment code	Char(1)	0
Fee Reduction Amount	Fee Reduced Amount	Char(5)	00000
Amount paid	Net Amount Paid	Char(5)	00000
Service Units Billed	Service Units Billed	Char(5)	00000
Locator Code	UB92 Loc 4; Code Indicates type of Institution	Char(3)	
Prescriber's Name	Physician's name	Char(10)	
Bill Received Date	Date Bill was received	Date(8)	CCYYMMDD
Bill Date Key	Date Bill was keyed for payment	Date(8)	CCYYMMDD
Bill Paid Date	Check Date/Payment Date	Date(8)	CCYYMMDD
Adjustment Date	Date an adjustment transaction was entered against a bill	Date(8)	CCYYMMDD
Bill Authorizing Official	Conditional ; System Generated ID	Char(3)	Three Character Alpha

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Field Name	Description	Data Type/Size	Allowable Values
Bypass Code	Indicates Type of Payment or Adjustment	Char(1)	
District Office Input Code	District Office Code	Char(2)	
Redefine - UNIQUE TO Bills Paid Prior 9/4/03			
District Office Control Code	District Office Sequent Code	Char(2)	
Error Code	Internal Processor Only	Char(1)	
Batch ID Number	The Batch the Bill was keyed with	Char(6)	
Operator Identifier	System Generated Log-on ID	Char(8)	
Redefine - UNIQUE TO Bills Paid After 9/4/03			
TCN to Credit	Original Case Number	Char(17)	
Return from Redefine			
Payee Case from Code	Code Indicates if a change to a Case Number or Provider ID	Char(1)	
Payee Case from ID	Original Case Number or Provider ID	Char(9)	
Payee Case to Code	Code Indicates if a change to a Case Number or Provider ID	Char(1)	
Payee Case to ID	Corrected Case Number or Provider ID	Char(9)	
Bill ID Number	Sequential number of bill within a batch of bills	Char(2)	
Bill Line Number	Sequential Number of bill line item	Char(3)	
Record Sequence	Internal process	Char(2)	
Resolver ID	ID of Person who resolved the suspended bill	Char(8)	
New TCN	New transaction Control Number	Char(17)	
Expanded Amount Fields			
Work Unit	Work Relative Unit	Char(5)	CPT4 & HFCA Tables
Practice Unit	Practice Expenses Geographical Adjustment Factor	Char(5)	CPT4 & HFCA Tables
Malpractice Unit	Malpractice	Char(5)	CPT4 & HFCA Tables
Unit Cost	Conversion Factor	Char(5)	
Adjust Factor	Expenses Geographic Adjustment factor	Char(4)	
Practice Adjustment factor	Practice Expenses Geographic Adjustment Factor	Char(4)	
Malpractice Adjustment Factor	Malpractice Expenses Geographic Adjustment Factor	Char(4)	
Percent Modifier	Adjustment factor for Procedure code Modifier	Char(3)	
Two-Year High Price	2YR High, Wholesale Price for RX	Char(10)	Modified Element
Dispensing Fee	Allowed Dispensing Fee For Prescription	Char(7)	Modified Element
Allowed Fee Amount	Allowable cost for prescription	Char(10)	Modified Element
Provider Charged Amount	Amount Charged by provider	Char(10)	Modified Element
Ineligible Amount	Amount Not Covered	Char(10)	Modified Element
Fee Reduction Amount	Fee Reduced	Char(10)	Modified Element

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Field Name	Description	Data Type/Size	Allowable Values
Amount paid	Net Amount Paid	Char(10)	Modified Element
Service Units Billed	Service Units Billed	Char(8)	
Bill ID Number	Sequential number of bill within a batch of bills	Char(3)	
Bill Line Number	Sequential Number of bill line item	Char(4)	
Record Sequence	Internal process	Char(3)	