

MEDS II Data Element Dictionary

Change Log between Versions 2.1 (August 2005) and Version 2.2 (April 2006)

Page #	Data Element	Change
Global	Global	Version 2.1 August 2005 changed to Version 2.2 April 2006
Cover	Cover	Added Additional Contact Information
7	Introduction	Added 2006 Submission Schedule Dates
11	Introduction	Added four rules on reconciling response reports.
11	Introduction	Added text: 'Plans should not adjust data submitted in the Legacy (MEDS) data format. All encounters with dates of service January 1, 2005 forward should be submitted in the MEDS II file format. If prior to Phase II system conversion 2005 data were erroneously submitted in the legacy file format, these records must be resubmitted in the MEDS II format. All 2005 dates of service submitted by health plans between January - March 2005 have been purged from the encounter/claim processing system.'
12	Introduction	Added Information on MEDS-L discussion group.
14-27	MEDS II Data Element Reporting Table	Added notation on the 2-byte filler fields that follow MMIS Provider ID fields that they are reserved for future NPI use.
31	Record Type	Tier One Edit application note added.
36	Prod Indicator	Tier One Edit application note added.
37	Plan ID Number	Deleted '00725 History Record Not Found Adj/Void'
48	Client Identification Number	Deleted '00725 History Record Not Found Adj/Void'
50	Provider Profession Code	Added 'space fill if not applicable'.
51	Provider License Number	Added 'Do Not Zero Fill -- space fill if not applicable'.
52	Provider Identification Number	Added appropriate provider type by Encounter Type table for reference. Added space-fill if not applicable. Added 00175 Servicing Provider ID Not On File (Professional and Dental); 00078 Referring Provider Identification Number Invalid (Institutional and Pharmacy).
55	Total Paid Amount	Added 00438 Paid Amount Invalid
56	Other Payer Name	Added 'space fill if not applicable'.
57	Other Insurance Total Paid Amount	Added 00439 Other Insurance Paid Invalid
58-59	Other Insurance Type Code	Added 'space fill if not applicable'.
60	VII. Institutional	Added 'Plans should report inpatient stays as a single encounter event.'
61	Provider Specialty Code	Added 'space fill if not applicable'.
62	Hospital Inpatient Claim/Encounter Indicator	Added 00437 Claim Encounter Ind Invalid
67	Type of Bill Code Digit 3 Code	Added text to indicate interim codes for COS 11 encounters are not applicable. Added 00436 Type of Bill Digit 3 Invalid
68	Statement Covers Period From	Changed valid year to >=04. Added text 'Must be spaced-filled when not applicable (i.e., COS 11)

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69	Statement Covers Period Thru	Changed valid year to >=04. Added text 'Must be spaced-filled when not applicable (i.e., COS 11)
70	Type of Admission	Deleted '9 Information Not Available' Added 'Space-fill if not applicable.'
72	Source of Admission	Added 'Space-fill if not applicable.' Added '00435 Source of Admission Code Invalid'
74	Patient Status or Disposition Code	Added '00021 Patient Status Code Invalid' Added 'Space-fill if not applicable.'
75	Medical Record Number	Added 'Space-fill if not applicable.'
76	Neonate Birth Weight Code	Added 'Space-fill if not applicable.' Added '00431 Neonate Birth Weight Code Invalid.'
77	Neonate Birth Weight In Grams	Added '00434 Birthweight Not Reasonable.'
78	Revenue Code	Added 'Space-fill if not applicable.'
80	HCPCS Code	Added 'Health Plans should not report non-standard procedure codes for non-emergency transportation services.' Added 'Do not include procedure code modifiers.'
81	Quantity or Units Submitted	Added 'Right-justified and zero-filled. (i.e., '1' would be reported as '0000000001')
82	Paid Amount	Added '00438 Paid Amount Invalid'
83	Non-Inpatient Claim/Encounter Indicator	Added 'Space-fill if not applicable.' Added '00437 Claim Encounter Ind Invalid'
88	Principal Procedure Code	Added 'Not all inpatient encounters will have a principal procedure code. If a procedure was performed, the plan should report a valid code on the inpatient encounter record.' Added '00170 Procedure Code Not On File'
89	Other Procedure Codes	Added '00170 Procedure Code Not on File'
90	Attending Provider Profession Code	Added 'Space-fill if not applicable.'
91	Attending Provider License Number	Added 'Do Not Zero-Fill – Space Fill if Not Applicable.'
92	Attending Provider Identification Number	Added 'Space-fill if not applicable.' Added '00432 Attend Prov Id Not on File.'
93	Surgeon Profession Code	Added 'Space-fill if not applicable.'
94	Surgeon License Number	Added 'Do Not Zero-Fill – Space Fill if Not Applicable.'
95	Surgeon Identification Number	Added 'Space-fill if not applicable.' Added '00433 Oper Prov Id Not on File.'
96	Admission Date	Changed Valid Year to >=04
97	Discharge Date	Changed Valid Year to >=04
98	Prescribing Provider Profession Code	Added 'Space-fill if not applicable.'
99	Prescribing Provider License Number	Added footnote to mapping table '* Element 466-EZ is a prescriber ID qualifier and will always equal 08.' Added 'Right-justified. Do Not Zero-Fill -- Space-fill if not

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		applicable.'
100	Prescribing Provider Identification Number	Added footnote to mapping table '*The NCPDP qualifier (466-EZ) will always be equal to 05.'
101	Prescription Ordered Date	Changed Valid Year to >=04
102	Date Filled	Changed Valid Year to >=04
106	Pharmacy Claim/Encounter Indicator	Added '00437 Claim Encounter Ind Invalid'
108	Dental Claim/Encounter Indicator	Added '00437 Claim Encounter Ind Invalid'
111	Procedure Code	Added text 'Fields for reporting of up to ten procedures or services are available. If more than ten procedures were performed during the encounter, submit a second encounter record with the additional procedures listed, using a different Encounter Control Number and identical information on all other elements that were included in the first record (with the exception of Total Amount Paid, which should equal the sum of the paid amount(s) on the second encounter record).'
		Added 'Do not include procedure code modifiers.'
112	Dental Number of Units/Visits	Added 'Right-justified and zero-filled. (i.e., '1' would be reported as '00000000001')
114	Paid Amount	Added '00438 Paid Amount Invalid.'
115	Service Start Date	Changed Valid Year to >=04
117	Service End Date	Changed Valid Year to >=04
121	Professional Claim/Encounter Indicator	Added '00437 Claim Encounter Ind Invalid'
124	Procedure Codes	Changed text '...using a <u>different</u> Encounter Control Number and identical information on all other elements that were included in the first record (with the exception of Total Amount Paid, <u>which should equal the sum of the paid amount(s) on the second encounter record</u>).'
		Added text 'Do not report non-standard procedure codes for non-emergency transportation services. Do not include procedure code modifiers.'
125	Number of Units/Visits	Added 'Right-justified and zero-filled. (i.e., '1' would be reported as '00000000001')
126	Paid Amount	Added '00438 Paid Amount Invalid.'
127	Service Start Date	Changed Valid Year to >=04
128	Service End Date	Changed Valid Year to >=04
144	Appendix D	Changed Appendix D to include the 'MEDS II Supplemental Manual On Applicable Edits.'