



Centers for Medicaid and CHIP Services (CMCS)

Transformed Medicaid Statistical Information System (T-MSIS)

Data Dictionary Valid Value List

Version: v2.4.0

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PRA Disclosure Statement The Transformed Medicaid Statistical Information System (T-MSIS) is used to assist the Centers for Medicare & Medicaid Services (CMS) with monitoring and oversight of Medicaid and CHIP programs, to enable evaluation of demonstrations under section 1115 of the Social Security Act and to calculate quality measures and other metrics, including those reported through the new Medicaid and CHIP Scoreboard. Section 4735 of the Balanced Budget Act of 1997 included a statutory requirement for states to submit claims data, enrollee encounter data, and supporting information. Section 6504 of the Affordable Care Act strengthened this provision by requiring states to include data elements the Secretary determines necessary for program integrity, program oversight, and administration. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0345 (Expires: 07/31/2022). The time required to complete this information collection is estimated to average 10 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

T-MSIS Valid Value List

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.001	1115A Demonstration Indicator List	1115A-DEMONSTRATION-IND	0	No
VVL.001	1115A Demonstration Indicator List	1115A-DEMONSTRATION-IND	1	Yes
VVL.002	Address Border State Indicator List	ADDR-BORDER-STATE-IND	0	No
VVL.002	Address Border State Indicator List	ADDR-BORDER-STATE-IND	1	Yes
VVL.002	Address Border State Indicator List	ADDR-BORDER-STATE-IND	8	N/A - State does not distinguish border state providers.
VVL.003	Adjustment Indicator List	ADJUSTMENT-IND / LINE-ADJUSTMENT-IND	0	Original Claim/Encounter/Payment - Indicates that this is the first (and, when applicable, only) fully adjudicated transaction in a claim family (one or more claims with the related ICN-ORIG and/or ICN-ADJ and typically the same MSIS ID and provider ID(s) also).
VVL.003	Adjustment Indicator List	ADJUSTMENT-IND / LINE-ADJUSTMENT-IND	1	Void/Reversal/Cancel of a prior submission Use this code to convey that the purpose of the transaction is to void/reverse/cancel a previously paid/approved claim/encounter/payment where the claim/encounter/payment is not being replaced by a new paid/approved version of the claim/encounter/payment. Typically, this would be the last claim/encounter/payment that would ever be associated with a given claim family. These records must have the same ICN-ORIG or ICN-ADJ as the claim/encounter being voided. CMS expects a void transaction to also have the same MSIS ID and provider ID(s) as the claim/encounter/payment being voided/reversed/cancelled.
VVL.003	Adjustment Indicator List	ADJUSTMENT-IND / LINE-ADJUSTMENT-IND	4	Replacement/Resubmission of a previously paid/approved claim/encounter/payment - Use when the purpose of the transaction is to replace a previously paid/approved claim/encounter/payment with a new paid/approved version of the claim/encounter/payment. These records must have the same ICN-ORIG or ICN-ADJ as the claim/encounter being replaced. CMS expects a replacement transaction to also have the same MSIS ID and provider ID(s) as the claim/encounter/payment being replaced/resubmitted.
VVL.003	Adjustment Indicator List	ADJUSTMENT-IND / LINE-ADJUSTMENT-IND	5	Credit Gross Adjustment - Use this code to indicate an aggregate provider-level recoupment of payments (e.g., not attributable to a single beneficiary). Amounts on these claims should be expressed as negative numbers. If a credit gross adjustment is reported with an ICN that is related to an ICN(s) of another gross adjustment (credit or debit) then CMS will interpret this to mean that the credit gross adjustment with the more recent adjudication date should completely replace the preceding related gross adjustment. If the ICNs of a credit gross adjustment are not related to any other gross adjustments (credit or debit) then the credit gross adjustment will always be treated as a distinct financial transaction.
VVL.003	Adjustment Indicator List	ADJUSTMENT-IND / LINE-ADJUSTMENT-IND	6	Debit Gross Adjustment - Use this code to indicate an aggregate provider-level payment to a provider (e.g., not attributable to a single beneficiary). Amounts on these claims should be expressed as positive numbers. If a debit gross adjustment is reported with an ICN that is related to an ICN(s) of another gross adjustment (credit or debit) then CMS will interpret this to mean that the credit gross adjustment with the more recent adjudication date should completely replace the preceding related gross adjustment. If the ICNs of a debit gross adjustment are not related to any other gross adjustments (credit or debit) then the debit gross adjustment will always be treated as a distinct financial transaction.
VVL.004	Affiliated Program Type List	AFFILIATED-PROGRAM-TYPE	2	Health Plan (state-assigned health plan ID) - The value in the AFFILIATED-PROGRAM-ID data element contains the state-assigned health plan Identifier of health plan in which the provider is enrolled to provide services including through the state plan and a waiver.
VVL.004	Affiliated Program Type List	AFFILIATED-PROGRAM-TYPE	3	Waiver - The value in the AFFILIATED-PROGRAM-ID data element contains an identifier for the waiver in which a provider is allowed to deliver services to eligible beneficiaries.

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.004	Affiliated Program Type List	AFFILIATED-PROGRAM-TYPE	4	Health Home Entity - The value in the AFFILIATED-PROGRAM-ID data element contains the name of the health home in which a provider is participating. The health home entity is responsible for providing health home services to the patient in conformance with the Health Home SPA. This is the name that the state uses to uniquely identify the health home team. This entity can be a designated provider (e.g., physician, clinic, behavioral health organization), a health team which links to a designated provider, or a health team (physicians, nurses, behavioral health professionals).
VVL.004	Affiliated Program Type List	AFFILIATED-PROGRAM-TYPE	5	Other - The value in the AFFILIATED-PROGRAM-ID data element contains an identifier for something other than a health plan, waiver, or health home entity.
VVL.005	Bed Type Code List	BED-TYPE-CODE	1	Intermediate Care Facility for the Intellectually Disabled
VVL.005	Bed Type Code List	BED-TYPE-CODE	2	Inpatient
VVL.005	Bed Type Code List	BED-TYPE-CODE	3	Nursing Facility
VVL.005	Bed Type Code List	BED-TYPE-CODE	4	Title 18 Skilled Nursing Facility (T18 SNF)
VVL.006	Coverage Type List	COVERAGE-TYPE	01	Drug
VVL.006	Coverage Type List	COVERAGE-TYPE	02	Professional (Physician) Visit - Office
VVL.006	Coverage Type List	COVERAGE-TYPE	03	Dental Care
VVL.006	Coverage Type List	COVERAGE-TYPE	04	Inpatient Hospital
VVL.006	Coverage Type List	COVERAGE-TYPE	05	Outpatient Hospital
VVL.006	Coverage Type List	COVERAGE-TYPE	06	Nursing Home
VVL.006	Coverage Type List	COVERAGE-TYPE	07	Vision
VVL.006	Coverage Type List	COVERAGE-TYPE	08	Durable Med Equip (rent)
VVL.006	Coverage Type List	COVERAGE-TYPE	09	Durable Med Equip (purchase)
VVL.006	Coverage Type List	COVERAGE-TYPE	10	Home Health
VVL.006	Coverage Type List	COVERAGE-TYPE	11	Mental health - outpatient
VVL.006	Coverage Type List	COVERAGE-TYPE	12	Mental health - inpatient
VVL.006	Coverage Type List	COVERAGE-TYPE	13	Psychiatric care- outpatient
VVL.006	Coverage Type List	COVERAGE-TYPE	14	Psychiatric care- inpatient
VVL.006	Coverage Type List	COVERAGE-TYPE	15	Rehabilitation
VVL.006	Coverage Type List	COVERAGE-TYPE	16	Cancer
VVL.006	Coverage Type List	COVERAGE-TYPE	17	Emergency Services
VVL.006	Coverage Type List	COVERAGE-TYPE	18	Chiropractic
VVL.006	Coverage Type List	COVERAGE-TYPE	19	Surgical
VVL.006	Coverage Type List	COVERAGE-TYPE	20	Diagnostic Medical, including X-ray and Lab Services
VVL.006	Coverage Type List	COVERAGE-TYPE	21	PT/OT/ST
VVL.006	Coverage Type List	COVERAGE-TYPE	22	Hospice
VVL.006	Coverage Type List	COVERAGE-TYPE	23	Transportation
VVL.006	Coverage Type List	COVERAGE-TYPE	98	Other
VVL.007	Eligible Address Type List	ADDR-TYPE	01	Primary home address and contact information, used for the eligibility determination process
VVL.007	Eligible Address Type List	ADDR-TYPE	02	Primary work address and contact information
VVL.007	Eligible Address Type List	ADDR-TYPE	03	Secondary residence and contact information
VVL.007	Eligible Address Type List	ADDR-TYPE	04	Secondary work address and contact information
VVL.007	Eligible Address Type List	ADDR-TYPE	05	Other category of address and contact information
VVL.007	Eligible Address Type List	ADDR-TYPE	06	Eligible persons official mailing address
VVL.008	Facility Group Individual Code List	FACILITY-GROUP-INDIVIDUAL-CODE	01	Facility - The entity identified by the associated SUBMITTING-STATE-PROV-ID is a facility.
VVL.008	Facility Group Individual Code List	FACILITY-GROUP-INDIVIDUAL-CODE	02	Group - The entity identified by the associated SUBMITTING-STATE-PROV-ID is a group of individual practitioners.

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.008	Facility Group Individual Code List	FACILITY-GROUP-INDIVIDUAL-CODE	03	Individual - The entity identified by the associated SUBMITTING-STATE-PROV-ID is an individual practitioner.
VVL.009	Ownership Code List	OWNERSHIP-CODE	01	Voluntary - Non-Profit - Religious Organizations
VVL.009	Ownership Code List	OWNERSHIP-CODE	02	Voluntary - Non-Profit - Other
VVL.009	Ownership Code List	OWNERSHIP-CODE	03	Voluntary - multiple owners
VVL.009	Ownership Code List	OWNERSHIP-CODE	04	Proprietary - Individual
VVL.009	Ownership Code List	OWNERSHIP-CODE	05	Proprietary - Corporation
VVL.009	Ownership Code List	OWNERSHIP-CODE	06	Proprietary - Partnership
VVL.009	Ownership Code List	OWNERSHIP-CODE	07	Proprietary - Other
VVL.009	Ownership Code List	OWNERSHIP-CODE	08	Proprietary - multiple owners
VVL.009	Ownership Code List	OWNERSHIP-CODE	09	Government - Federal
VVL.009	Ownership Code List	OWNERSHIP-CODE	10	Government - State
VVL.009	Ownership Code List	OWNERSHIP-CODE	11	Government - City
VVL.009	Ownership Code List	OWNERSHIP-CODE	12	Government - County
VVL.009	Ownership Code List	OWNERSHIP-CODE	13	Government - City-County
VVL.009	Ownership Code List	OWNERSHIP-CODE	14	Government - Hospital District
VVL.009	Ownership Code List	OWNERSHIP-CODE	15	Government - State and City/County
VVL.009	Ownership Code List	OWNERSHIP-CODE	16	Government - other multiple owners
VVL.009	Ownership Code List	OWNERSHIP-CODE	17	Voluntary /Proprietary
VVL.009	Ownership Code List	OWNERSHIP-CODE	18	Proprietary/Government
VVL.009	Ownership Code List	OWNERSHIP-CODE	19	Voluntary/Government
VVL.009	Ownership Code List	OWNERSHIP-CODE	88	N/A - The individual only practices as part of a group, e.g., as an employee
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	01	General Practice
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	02	General Surgery
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	03	Allergy/Immunology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	04	Otolaryngology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	05	Anesthesiology C
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	06	Cardiology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	07	Dermatology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	08	Family Practice
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	09	Interventional Pain Management
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	10	Gastroenterology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	11	Internal Medicine
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	12	Osteopathic Manipulative Therapy

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	13	Neurology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	14	Neurosurgery
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	15	Speech Language Pathologist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	16	Obstetrics/Gynecology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	17	Hospice and Palliative Care
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	18	Ophthalmology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	19	Oral Surgery (dentists only)
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	20	Orthopedic Surgery
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	21	Cardiac Electrophysiology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	22	Pathology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	23	Sports Medicine
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	24	Plastic and Reconstructive Surgery
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	25	Physical Medicine and Rehabilitation
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	26	Psychiatry
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	27	Geriatric Psychiatry
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	28	Colorectal Surgery (formerly proctology)
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	29	Pulmonary Disease
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	30	Diagnostic Radiology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	31	Cardiac Rehabilitation & Intensive Cardiac Rehabilitation
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	32	Anesthesiologist Assistant
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	33	Thoracic Surgery
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	34	Urology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	35	Chiropractic

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	36	Nuclear Medicine
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	37	Pediatric Medicine
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	38	Geriatric Medicine
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	39	Nephrology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	40	Hand Surgery
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	41	Optometry
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	42	Certified Nurse Midwife
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	43	Certified Registered Nurse Anesthetist (CRNA)
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	44	Infectious Disease
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	45	Mammography Center
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	46	Endocrinology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	47	Independent Diagnostic Testing Facility (IDTF)
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	48	Podiatry
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	49	Ambulatory Surgical Center
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	50	Nurse Practitioner
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	51	Medical Supply Company with Orthotist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	52	Medical Supply Company with Prosthetist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	53	Medical Supply Company with Orthotist-Prosthetist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	54	Other Medical Supply Company
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	55	Individual Certified Orthotist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	56	Individual Certified Prosthetist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	57	Individual Certified Orthotist-Prosthetist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	58	Medical Supply Company with Pharmacist

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	59	Ambulance Service Provider
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	60	Public Health or Welfare Agency
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	61	Voluntary Health or Charitable Agency
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	62	Psychologist (Billing Independently)
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	63	Portable X-Ray Supplier
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	64	Audiologist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	65	Physical Therapist in Private Practice
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	66	Rheumatology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	67	Occupational Therapist in Private Practice
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	68	Clinical Psychologist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	69	Clinical Laboratory
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	70	Single or Multispecialty Clinic or Group Practice
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	71	Registered Dietitian or Nutrition Professional
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	72	Pain Management
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	73	Mass Immunization Roster Biller
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	74	Radiation Therapy Center
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	75	Slide Preparation Facility
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	76	Peripheral Vascular Disease
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	77	Vascular Surgery
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	78	Cardiac Surgery
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	79	Addiction Medicine
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	80	Licensed Clinical Social Worker
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	81	Critical Care (Intensivists)

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	82	Hematology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	83	Hematology/Oncology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	84	Preventive Medicine
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	85	Maxillofacial Surgery
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	86	Neuropsychiatry
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	87	All Other Suppliers
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	88	Unknown Supplier/Provider Specialty
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	89	Certified Clinical Nurse Specialist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	90	Medical Oncology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	91	Surgical Oncology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	92	Radiation Oncology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	93	Emergency Medicine
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	94	Interventional Radiology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	95	Advance Diagnostic Imaging
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	96	Optician
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	97	Physician Assistant
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	98	Gynecological/Oncology
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	99	Undefined physician type (provider is an MD)
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A0	Hospital-General
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A1	Skilled Nursing Facility
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A2	Intermediate Care Nursing Facility
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A3	Other Nursing Facility
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A4	Home Health Agency

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A5	Pharmacy
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A6	Medical Supply Company with Respiratory Therapist
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A7	Department Store
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A8	Grocery Store
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	A9	Indian Health Service facility
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	B1	Oxygen supplier
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	B2	Pedorthic personnel
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	B3	Medical supply company with pedorthic personnel
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	B4	Rehabilitation Agency
VVL.010	Provider Specialty List	PROV-CLASSIFICATION-TYPE = 2 (Provider Specialty Code)	B5	Ocularist
VVL.011	Provider Classification Type List	PROV-CLASSIFICATION-TYPE	1	Taxonomy code
VVL.011	Provider Classification Type List	PROV-CLASSIFICATION-TYPE	2	Provider specialty code
VVL.011	Provider Classification Type List	PROV-CLASSIFICATION-TYPE	3	Provider type code
VVL.011	Provider Classification Type List	PROV-CLASSIFICATION-TYPE	4	Authorized category of service code
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	01	Physician
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	02	Speech Language Pathologist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	03	Oral Surgery (Dentist only)
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	04	Cardiac Rehabilitation and Intensive Cardiac Rehabilitation
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	05	Anesthesiology Assistant
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	06	Chiropractic
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	07	Optometry
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	08	Certified Nurse Midwife
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	09	Certified Registered Nurse Anesthetist (CRNA)
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	10	Mammography Center
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	11	Independent Diagnostic Testing Facility (IDTF)

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	12	Podiatry
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	13	Ambulatory Surgical Center
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	14	Nurse Practitioner
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	15	Medical Supply Company with Orthotist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	16	Medical Supply Company with Prosthetist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	17	Medical Supply Company with Orthotist-Prosthetist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	18	Other Medical Supply Company
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	19	Individual Certified Orthotist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	20	Individual Certified Prosthetist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	21	Individual Certified Prosthetist-Orthotist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	22	Medical Supply Company with Pharmacist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	23	Ambulance Service Provider
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	24	Public Health or Welfare Agency
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	25	Voluntary Health or Charitable Agency
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	26	Psychologist, Clinical
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	27	Portable X-Ray Supplier
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	28	Audiologist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	29	Physical Therapist in Private Practice
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	30	Occupational Therapist in Private Practice
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	31	Clinical Laboratory
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	32	Clinic or Group Practice
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	33	Registered Dietitian or Nutrition Professional
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	34	Mass Immunizer Roster Biller

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	35	Radiation Therapy Center
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	36	Slide Preparation Facility
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	37	Licensed Clinical Social Worker
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	38	Certified Clinical Nurse Specialist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	39	Advance Diagnostic Imaging
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	40	Optician
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	41	Physician Assistant
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	42	Hospital-General
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	43	Skilled Nursing Facility
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	44	Intermediate Care Nursing Facility
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	45	Other Nursing Facility
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	46	Home Health Agency
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	47	Pharmacy
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	48	Medical Supply Company with Respiratory Therapist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	49	Department Store
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	50	Grocery Store
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	51	Indian Health Service facility
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	52	Oxygen supplier
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	53	Pedorthic personnel
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	54	Medical supply company with pedorthic personnel
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	55	Rehabilitation Agency
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	56	Ocularist
VVL.012	Provider Type Code List	PROV-CLASSIFICATION-TYPE = 3 (Provider Type Code)	57	All Other

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.013	T-MSIS File Type List	FILE-NAME	CLAIM-IP	Inpatient claims file
VVL.013	T-MSIS File Type List	FILE-NAME	CLAIM-LT	Long term care claims file
VVL.013	T-MSIS File Type List	FILE-NAME	CLAIM-OT	Other claims file
VVL.013	T-MSIS File Type List	FILE-NAME	CLAIM-RX	Prescription claims file
VVL.013	T-MSIS File Type List	FILE-NAME	ELIGIBLE	Eligible file
VVL.013	T-MSIS File Type List	FILE-NAME	MNGDCARE	Managed care organization file
VVL.013	T-MSIS File Type List	FILE-NAME	PROVIDER	Provider file
VVL.013	T-MSIS File Type List	FILE-NAME	TPL-FILE	Third-party liability file
VVL.014	Record ID List	RECORD-ID	MCR00001	FILE-HEADER-RECORD-MANAGED-CARE
VVL.014	Record ID List	RECORD-ID	MCR00002	MANAGED-CARE-MAIN
VVL.014	Record ID List	RECORD-ID	MCR00003	MANAGED-CARE-LOCATION-AND-CONTACT-INFO
VVL.014	Record ID List	RECORD-ID	MCR00004	MANAGED-CARE-SERVICE-AREA
VVL.014	Record ID List	RECORD-ID	MCR00005	MANAGED-CARE-OPERATING-AUTHORITY
VVL.014	Record ID List	RECORD-ID	MCR00006	MANAGED-CARE-PLAN-POPULATION-ENROLLED
VVL.014	Record ID List	RECORD-ID	MCR00007	MANAGED-CARE-ACCREDITATION-ORGANIZATION
VVL.014	Record ID List	RECORD-ID	MCR00008	NATIONAL-HEALTH-CARE-ENTITY-ID-INFO
VVL.014	Record ID List	RECORD-ID	MCR00009	CHPID-SHPID-RELATIONSHIP
VVL.014	Record ID List	RECORD-ID	PRV00001	FILE-HEADER-RECORD-PROVIDER
VVL.014	Record ID List	RECORD-ID	PRV00002	PROV-ATTRIBUTES-MAIN
VVL.014	Record ID List	RECORD-ID	PRV00003	PROV-LOCATION-AND-CONTACT-INFO
VVL.014	Record ID List	RECORD-ID	PRV00004	PROV-LICENSING-INFO
VVL.014	Record ID List	RECORD-ID	PRV00005	PROV-IDENTIFIERS
VVL.014	Record ID List	RECORD-ID	PRV00006	PROV-TAXONOMY-CLASSIFICATION
VVL.014	Record ID List	RECORD-ID	PRV00007	PROV-MEDICAID-ENROLLMENT
VVL.014	Record ID List	RECORD-ID	PRV00008	PROV-AFFILIATED-GROUPS
VVL.014	Record ID List	RECORD-ID	PRV00009	PROV-AFFILIATED-PROGRAMS
VVL.014	Record ID List	RECORD-ID	PRV00010	PROV-BED-TYPE-INFO
VVL.014	Record ID List	RECORD-ID	ELG00001	FILE-HEADER-RECORD-ELIGIBILITY
VVL.014	Record ID List	RECORD-ID	ELG00002	PRIMARY-DEMOGRAPHICS-ELIGIBILITY
VVL.014	Record ID List	RECORD-ID	ELG00003	VARIABLE-DEMOGRAPHICS-ELIGIBILITY
VVL.014	Record ID List	RECORD-ID	ELG00004	ELIGIBLE-CONTACT-INFORMATION
VVL.014	Record ID List	RECORD-ID	ELG00005	ELIGIBILITY-DETERMINANTS
VVL.014	Record ID List	RECORD-ID	ELG00006	HEALTH-HOME-SPA-PARTICIPATION-INFORMATION
VVL.014	Record ID List	RECORD-ID	ELG00007	HEALTH-HOME-SPA-PROVIDERS
VVL.014	Record ID List	RECORD-ID	ELG00008	HEALTH-HOME-CHRONIC-CONDITIONS
VVL.014	Record ID List	RECORD-ID	ELG00009	LOCK-IN-INFORMATION
VVL.014	Record ID List	RECORD-ID	ELG00010	MFP-INFORMATION
VVL.014	Record ID List	RECORD-ID	ELG00011	STATE-PLAN-OPTION-PARTICIPATION
VVL.014	Record ID List	RECORD-ID	ELG00012	WAIVER-PARTICIPATION
VVL.014	Record ID List	RECORD-ID	ELG00013	LTSS-PARTICIPATION
VVL.014	Record ID List	RECORD-ID	ELG00014	MANAGED-CARE-PARTICIPATION
VVL.014	Record ID List	RECORD-ID	ELG00015	ETHNICITY-INFORMATION
VVL.014	Record ID List	RECORD-ID	ELG00016	RACE-INFORMATION
VVL.014	Record ID List	RECORD-ID	ELG00017	DISABILITY-INFORMATION
VVL.014	Record ID List	RECORD-ID	ELG00018	1115A-DEMONSTRATION-INFORMATION
VVL.014	Record ID List	RECORD-ID	ELG00020	HCBS-CHRONIC-CONDITIONS-NON-HEALTH-HOME

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.014	Record ID List	RECORD-ID	ELG00021	ENROLLMENT-TIME-SPAN
VVL.014	Record ID List	RECORD-ID	ELG00022	ELG-IDENTIFIERS
VVL.014	Record ID List	RECORD-ID	TPL00001	FILE-HEADER-RECORD-TPL
VVL.014	Record ID List	RECORD-ID	TPL00002	TPL-MEDICAID-ELIGIBLE-PERSON-MAIN
VVL.014	Record ID List	RECORD-ID	TPL00003	TPL-MEDICAID-ELIGIBLE-PERSON-HEALTH-INSURANCE-COVERAGE-INFO
VVL.014	Record ID List	RECORD-ID	TPL00004	TPL-MEDICAID-ELIGIBLE-PERSON-HEALTH-INSURANCE-COVERAGE-CATEGORIES
VVL.014	Record ID List	RECORD-ID	TPL00005	TPL-MEDICAID-ELIGIBLE-OTHER-THIRD-PARTY-COVERAGE-INFORMATION
VVL.014	Record ID List	RECORD-ID	TPL00006	TPL-ENTITY-CONTACT-INFORMATION
VVL.014	Record ID List	RECORD-ID	CIP00001	FILE-HEADER-RECORD-IP
VVL.014	Record ID List	RECORD-ID	CIP00002	CLAIM-HEADER-RECORD-IP
VVL.014	Record ID List	RECORD-ID	CIP00003	CLAIM-LINE-RECORD-IP
VVL.014	Record ID List	RECORD-ID	CLT00001	FILE-HEADER-RECORD-LT
VVL.014	Record ID List	RECORD-ID	CLT00002	CLAIM-HEADER-RECORD-LT
VVL.014	Record ID List	RECORD-ID	CLT00003	CLAIM-LINE-RECORD-LT
VVL.014	Record ID List	RECORD-ID	COT00001	FILE-HEADER-RECORD-OT
VVL.014	Record ID List	RECORD-ID	COT00002	CLAIM-HEADER-RECORD-OT
VVL.014	Record ID List	RECORD-ID	COT00003	CLAIM-LINE-RECORD-OT
VVL.014	Record ID List	RECORD-ID	CRX00001	FILE-HEADER-RECORD-RX
VVL.014	Record ID List	RECORD-ID	CRX00002	CLAIM-HEADER-RECORD-RX
VVL.014	Record ID List	RECORD-ID	CRX00003	CLAIM-LINE-RECORD-RX
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE- CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	01	Alabama
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE- CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	02	Alaska
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE- CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	04	Arizona
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE- CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	05	Arkansas
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE- CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	06	California
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE- CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	08	Colorado

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	09	Connecticut
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	10	Delaware
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	11	District of Columbia
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	12	Florida
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	13	Georgia
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	15	Hawaii
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	16	Idaho
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	17	Illinois
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	18	Indiana
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	19	Iowa
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	20	Kansas

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	21	Kentucky
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	22	Louisiana
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	23	Maine
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	24	Maryland
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	25	Massachusetts
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	26	Michigan
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	27	Minnesota
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	28	Mississippi
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	29	Missouri
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	30	Montana
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	31	Nebraska

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	32	Nevada
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	33	New Hampshire
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	34	New Jersey
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	35	New Mexico
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	36	New York
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	37	North Carolina
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	38	North Dakota
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	39	Ohio
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	40	Oklahoma
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	41	Oregon
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	42	Pennsylvania

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	44	Rhode Island
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	45	South Carolina
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	46	South Dakota
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	47	Tennessee
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	48	Texas
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	49	Utah
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	50	Vermont
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	51	Virginia
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	53	Washington
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	54	West Virginia
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	55	Wisconsin

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	56	Wyoming
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	60	American Samoa
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	66	Guam
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	72	Puerto Rico
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	78	U.S. Virgin Islands
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	93	Wyoming (CHIP) - W4
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	94	Montana (TPA) - M8
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	96	Iowa (CHIP) - I4
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	97	Pennsylvania (CHIP) - P1
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	Not Applicable	The list is based on ANSI state codes but in some cases have been modified to meet T-MSIS needs.
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	Not Applicable	This URL will take the reader to the American National Standards Institute (ANSI) Website for the various geographical code sets:

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.015	State Code List	SUBMITTING-STATE / MANAGED-CARE-STATE / ADDR-STATE / ELIGIBLE-STATE / INSURANCE-CARRIER-STATE / ORIGINATION-STATE / DESTINATION-STATE	Not Applicable	State Code List
VVL.016	Sex List	SEX	F	Female
VVL.016	Sex List	SEX	M	Male
VVL.016	Sex List	SEX	U	Unknown
VVL.017	State Plan Enrollment List	STATE-PLAN-ENROLLMENT	1	Medicaid
VVL.017	State Plan Enrollment List	STATE-PLAN-ENROLLMENT	2	CHIP
VVL.017	State Plan Enrollment List	STATE-PLAN-ENROLLMENT	3	Both Medicaid and CHIP
VVL.017	State Plan Enrollment List	STATE-PLAN-ENROLLMENT	4	Not state plan affiliated
VVL.018	Submission Transaction Type List	SUBMISSION-TRANSACTION-TYPE	C	Create File - a file that contains a complete set of transactions/changes processed since the last Create file submission. States may submit only one valid Create file per reporting period and data file type.
VVL.018	Submission Transaction Type List	SUBMISSION-TRANSACTION-TYPE	R	Replacement File - a Replacement submission is a replacement of the months data. It will completely replace the immediate prior submission. If a later replacement entry is received, it will overwrite the previous replacement, as well as a prior Create or Update submission for the same data type and reporting period. NOTE: The records in an Update file are not generated as a result of a change processed in the states Medicaid or Medicaid-related systems during the current reporting month. These Update file record segments may be unchanged from the ones submitted previously for various reasons (for example, the state may be unable to process a change record in their Medicaid / Medicaid-related systems to correct the issue because the state is simply passing through to T-MSIS data that originated outside of the states systems).[1] Conversely, the records may be different from those previously submitted, but the change is the result of a fix whose root cause problem was an issue in the T-MSIS file-creation or replacement process at CMS. Regardless, the record was not generated from a change that occurred in the states source data.
VVL.018	Submission Transaction Type List	SUBMISSION-TRANSACTION-TYPE	U	
VVL.019	Teaching Indicator List	TEACHING-IND	0	No
VVL.019	Teaching Indicator List	TEACHING-IND	1	Yes
VVL.020	Accepting New Patients Indicator List	ACCEPTING-NEW-PATIENTS-IND	0	No
VVL.020	Accepting New Patients Indicator List	ACCEPTING-NEW-PATIENTS-IND	1	Yes
VVL.020	Accepting New Patients Indicator List	ACCEPTING-NEW-PATIENTS-IND	8	N/A - The individual only practices as a member of a group.
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	01	National committee for quality assurance - excellent
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	02	National committee for quality assurance - commendable
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	03	National committee for quality assurance - provisional
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	04	National committee for quality assurance - new plan no longer a valid accreditation level
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	05	URAC - full
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	06	URAC - conditional
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	07	URAC - provisional
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	08	Accreditation Association for Ambulatory Health Care, Inc. (AAAHC) - 3 years
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	09	Accreditation Association for Ambulatory Health Care, Inc. (AAAHC) - 1 year - no longer valid accreditation level
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	10	Accreditation Association for Ambulatory Health Care, Inc. (AAAHC) - 6 months - no longer valid accreditation level
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	11	Not accredited
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	12	Other
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	13	National committee for quality assurance -- accredited
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	14	National committee for quality assurance - interim

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	15	National committee for quality assurance - denied
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	Not Applicable	Accreditation Organization List
VVL.021	Accreditation Organization List	ACCREDITATION-ORGANIZATION	Not Applicable	Accreditation Organization List 2
VVL.022	Adjustment Reason Code List	ADJUSTMENT-REASON-CODE	Not Applicable	Adjustment Reason Code List
VVL.023	CHIP Code List	CHIP-CODE		Individual was not Medicaid eligible and not eligible for separate CHIP for the month *End Dated 0 20200214
VVL.023	CHIP Code List	CHIP-CODE	1	Individual was Medicaid eligible, but was not included in either Medicaid-Expansion CHIP or a separate title XXI CHIP) program for the month. These include blind and disabled people and low-income families with dependent children.
VVL.023	CHIP Code List	CHIP-CODE	2	Individual was included in the Medicaid-Expansion CHIP program and subject to enhanced Federal matching for the month. States with Medicaid-Expansion programs have built upon existing Medicaid programs to include low-income children whose family incomes are above Medicaid income eligibility thresholds.
VVL.023	CHIP Code List	CHIP-CODE	3	Individual was not Medicaid-Expansion CHIP eligible but was included in a separate title XXI CHIP program for the month. States using Separate CHIP have used CHIP funds to create separate programs outside of their Medicaid programs.
VVL.024	Admission Type List	ADMISSION-TYPE	1	EMERGENCY The patient requires immediate medical intervention as a result of severe, life threatening or potentially disabling conditions. Generally, the patient is admitted through the emergency room.
VVL.024	Admission Type List	ADMISSION-TYPE	2	URGENT The patient requires immediate attention for the care and treatment of a physical or mental disorder. Generally, the patient is admitted to the first available and suitable accommodation.
VVL.024	Admission Type List	ADMISSION-TYPE	3	ELECTIVE The patients condition permits adequate time to schedule the availability of a suitable accommodation.
VVL.024	Admission Type List	ADMISSION-TYPE	4	NEWBORN The patient is a newborn delivered either inside the admitting hospital (UB04 FL 15 value 5 [A baby born inside the admitting hospital] or outside of the hospital (UB04 FL 15 value 6 [A baby born outside the admitting hospital]).
VVL.024	Admission Type List	ADMISSION-TYPE	5	TRAUMA The patient visits a trauma center (A trauma center means a facility licensed or designated by the State or local government authority authorized to do so, or as verified by the American College of surgeons and involving a trauma activation.)
VVL.024	Admission Type List	ADMISSION-TYPE	9	UNKNOWN Information not available.
VVL.025	Diagnosis Code Flag List	DIAGNOSIS-CODE-FLAG-1 to DIAGNOSIS-CODE-FLAG-12 / ADMITTING-DIAGNOSIS-CODE-FLAG	1	ICD-9
VVL.025	Diagnosis Code Flag List	DIAGNOSIS-CODE-FLAG-1 to DIAGNOSIS-CODE-FLAG-12 / ADMITTING-DIAGNOSIS-CODE-FLAG	2	ICD-10
VVL.026	Diagnosis Code List	ADMITTING-DIAGNOSIS-CODE / DIAGNOSIS-CODE 1 thru DIAGNOSIS-CODE-12	Not Applicable	Admitting Diagnosis Code List (ICD-9-CM Diagnosis and Procedure Codes)
VVL.026	Diagnosis Code List	ADMITTING-DIAGNOSIS-CODE / DIAGNOSIS-CODE 1 thru DIAGNOSIS-CODE-12	Not Applicable	Admitting Diagnosis Code List (ICD-10)
VVL.030	American Indian Alaskan Native Indicator List	AMERICAN-INDIAN-ALASKAN-NATIVE-INDICATOR	0	Individual does not meet the definition of an American Indian/Alaskan Native.
VVL.030	American Indian Alaskan Native Indicator List	AMERICAN-INDIAN-ALASKAN-NATIVE-INDICATOR	1	Individual meets the definition of an American Indian/Alaskan Native.
VVL.031	Billing Unit List	BILLING-UNIT	01	Per Day

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.031	Billing Unit List	BILLING-UNIT	02	Per Hour
VVL.031	Billing Unit List	BILLING-UNIT	03	Per Case
VVL.031	Billing Unit List	BILLING-UNIT	04	Per Encounter
VVL.031	Billing Unit List	BILLING-UNIT	05	Per Week
VVL.031	Billing Unit List	BILLING-UNIT	06	Per Month
VVL.031	Billing Unit List	BILLING-UNIT	07	Other Arrangements
VVL.032	Brand Generic Indicator List	BRAND-GENERIC-IND	0	Not a Drug
VVL.032	Brand Generic Indicator List	BRAND-GENERIC-IND	1	Generic
VVL.032	Brand Generic Indicator List	BRAND-GENERIC-IND	2	Brand
VVL.033	Citizenship Indicator List	CITIZENSHIP-IND	0	No
VVL.033	Citizenship Indicator List	CITIZENSHIP-IND	1	Yes
VVL.034	Citizenship Verification Flag List	CITIZENSHIP-VERIFICATION-FLAG	0	Citizenship Verified
VVL.034	Citizenship Verification Flag List	CITIZENSHIP-VERIFICATION-FLAG	1	Enrolled in Medicaid pending citizenship verification
VVL.035	Claim Denied Indicator List	CLAIM-DENIED-INDICATOR	0	Denied: The payment of claim in its entirety was denied by the state.
VVL.035	Claim Denied Indicator List	CLAIM-DENIED-INDICATOR	1	Not Denied: The state paid some or all of the claim.
VVL.036	CMS 64 Category for Federal Reimbursement List	CMS-64-CATEGORY-FOR-FEDERAL-REIMBURSEMENT	01	Federal funding under Title XIX
VVL.036	CMS 64 Category for Federal Reimbursement List	CMS-64-CATEGORY-FOR-FEDERAL-REIMBURSEMENT	02	Federal funding under Title XXI
VVL.036	CMS 64 Category for Federal Reimbursement List	CMS-64-CATEGORY-FOR-FEDERAL-REIMBURSEMENT	03	Federal funding under ACA *Code end dated 20200920
VVL.036	CMS 64 Category for Federal Reimbursement List	CMS-64-CATEGORY-FOR-FEDERAL-REIMBURSEMENT	04	Federal funding under other legislation
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	01	Capsule
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	02	Ointment
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	03	Cream
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	04	Suppository
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	05	Powder
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	06	Emulsion
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	07	Liquid
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	10	Tablet
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	11	Solution
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	12	Suspension
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	13	Lotion
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	14	Shampoo
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	15	Elixir
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	16	Syrup
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	17	Lozenge
VVL.037	Compound Dosage Form List	COMPOUND-DOSAGE-FORM	18	Enema
VVL.038	Compound Drug Indicator List	COMPOUND-DRUG-IND	0	Not Compound
VVL.038	Compound Drug Indicator List	COMPOUND-DRUG-IND	1	Compound
VVL.039	Conception to Birth Indicator List	CONCEPTION-TO-BIRTH-IND	0	No
VVL.039	Conception to Birth Indicator List	CONCEPTION-TO-BIRTH-IND	1	Yes
VVL.040	Copay Waived Indicator List	COPAY-WAIVED-IND	0	Not Waived: The provider did not waive the beneficiary's copayment,
VVL.040	Copay Waived Indicator List	COPAY-WAIVED-IND	1	Waived: The provider waived the beneficiary's copayment.
VVL.041	Core Based Statistical Area Code List	CORE-BASED-STATISTICAL-AREA-CODE	1	The MCO's service area falls partially or entirely inside one or more metropolitan areas.

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.041	Core Based Statistical Area Code List	CORE-BASED-STATISTICAL-AREA-CODE	2	The MCOs service area falls partially or entirely inside one or more micropolitan areas, but not within any metropolitan areas.
VVL.041	Core Based Statistical Area Code List	CORE-BASED-STATISTICAL-AREA-CODE	3	The MCOs service area falls entirely outside of all metropolitan and micropolitan areas.
VVL.042	Crossover Indicator List	CROSSOVER-INDICATOR	0	Not Crossover Claim
VVL.042	Crossover Indicator List	CROSSOVER-INDICATOR	1	Crossover Claim
VVL.043	Disability Type Code List	DISABILITY-TYPE-CODE	01	Individual is deaf or has serious difficulty hearing.
VVL.043	Disability Type Code List	DISABILITY-TYPE-CODE	02	Individual is blind or has serious difficulty seeing, even when wearing glasses.
VVL.043	Disability Type Code List	DISABILITY-TYPE-CODE	03	Individual has serious difficulty concentrating, remembering, or making decisions because of a physical, mental, or emotional condition. (Applicable only to people who are 5 years old or older.)
VVL.043	Disability Type Code List	DISABILITY-TYPE-CODE	04	Individual has serious difficulty walking or climbing stairs. (Applicable only to people who are 5 years old or older.)
VVL.043	Disability Type Code List	DISABILITY-TYPE-CODE	05	Individual has difficulty dressing or bathing. (Applicable only to people who are 5 years old or older.)
VVL.043	Disability Type Code List	DISABILITY-TYPE-CODE	06	Individual has difficulty doing errands alone such as visiting a doctor's office or shopping because of a physical, mental, or emotional condition. (Applicable only to people who are 15 years old or older.)
VVL.043	Disability Type Code List	DISABILITY-TYPE-CODE	07	Other
VVL.043	Disability Type Code List	DISABILITY-TYPE-CODE	08	None
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	00	No intervention
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	AS	Patient assessment
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	CC	Coordination of care
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	DE	Dosing evaluation/determination
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	FE	Formulary enforcement
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	GP	Generic product selection
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	MA	Medication administration
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	M0	Prescriber consulted
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	MR	Medication review
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	PE	Patient education/instruction
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	PH	Patient medication history
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	PM	Patient monitoring
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	P0	Patient consulted

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	PT	Perform laboratory test
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	RO	Pharmacist consulted other source
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	RT	Recommend laboratory test
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	SC	Self-care consultation
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	SW	Literature search/review
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	TC	Payer/processor consulted
VVL.044	Drug Utilization Professional Service Code List	DRUG-UTILIZATION-CODE (440-E5, Professional Service Code)	TH	Therapeutic product interchange
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	AD	Additional Drug Needed
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	AN	Prescription Authentication
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	AR	Adverse Drug Reaction
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	AT	Additive Toxicity
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	CD	Chronic Disease Management
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	CH	Call Help Desk
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	CS	Patient Complaint/Symptom
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	DA	Drug-Allergy
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	DC	Drug-Disease (Inferred)
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	DD	Drug-Drug Interaction
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	DF	Drug-Food interaction
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	DI	Drug Incompatibility
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	DL	Drug-Lab Conflict
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	DM	Apparent Drug Misuse
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	DS	Tobacco Use
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	ED	Patient Education/Instruction

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	ER	Overuse
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	EX	Excessive Quantity
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	HD	High Dose
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	IC	Iatrogenic Condition
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	ID	Ingredient Duplication
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	LD	Low Dose
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	LK	Lock In Recipient
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	LR	Underuse
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	MC	Drug-Disease (Reported)
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	MN	Insufficient Duration
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	MS	Missing Information/Clarification
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	MX	Excessive Duration
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	NA	Drug Not Available
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	NC	Non-covered Drug Purchase
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	ND	New Disease/Diagnosis
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	NF	Non-Formulary Drug
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	NN	Unnecessary Drug
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	NP	New Patient Processing
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	NR	Lactation/Nursing Interaction
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	NS	Insufficient Quantity
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	OH	Alcohol Conflict
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	PA	Drug-Age
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	PC	Patient Question/Concern

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	PG	Drug-Pregnancy
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	PH	Preventive Health Care
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	PN	Prescriber Consultation
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	PP	Plan Protocol
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	PR	Prior Adverse Reaction
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	PS	Product Selection Opportunity
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	RE	Suspected Environmental Risk
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	RF	Health Provider Referral
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	SR	Suboptimal Regimen
VVL.045	Drug Utilization Reason for Service Code List	DRUG-UTILIZATION-CODE (439-E4, Reason for Service Code)	TD	Therapeutic
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	00	Not Specified
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1A	Filled As Is, False Positive
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1B	Filled Prescription As Is
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1C	Filled, With Different Dose
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1D	Filled, With Different Directions
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1E	Filled, With Different Drug
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1F	Filled, With Different Quantity
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1G	Filled, With Prescriber Approval
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1H	Brand-to-Generic Change
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1J	Rx-to-OTC Change
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	1K	Filled with Different Dosage Form
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	2A	Prescription Not Filled
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	2B	Not Filled, Directions Clarified

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3A	Recommendation Accepted
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3B	Recommendation Not Accepted
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3C	Discontinued Drug
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3D	Regimen Changed
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3E	Therapy Changed
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3F	Therapy Changed-cost increased acknowledged
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3G	Drug Therapy Unchanged
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3H	Follow-Up/Report
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3J	Patient Referral
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3K	Instructions Understood
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3M	Compliance Aid Provided
VVL.046	Drug Utilization Result of Service Code List	DRUG-UTILIZATION-CODE (441-E6, Result of Service Code)	3N	Medication Administered
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	00	Eligible is not a Medicare beneficiary
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	01	Eligible is entitled to Medicare - QMB only
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	02	Eligible is entitled to Medicare - QMB AND Medicaid coverage
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	03	Eligible is entitled to Medicare - SLMB only
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	04	Eligible is entitled to Medicare - SLMB AND Medicaid coverage
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	05	Eligible is entitled to Medicare - QDWI
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	06	Eligible is entitled to Medicare - Qualifying individuals
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	08	Eligible is entitled to Medicare - Other Dual Eligibles (Non QMB, SLMB, QDWI or QI)
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	09	Eligible is entitled to Medicare - Other (This code is to be used only with specific CMS approval.)
VVL.047	Dual Eligible Code List	DUAL-ELIGIBLE-CODE	10	Separate CHIP Eligible is entitled to Medicare
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	01	Parents and Other Caretaker Relatives
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	02	Transitional Medical Assistance
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	03	Extended Medicaid due to Earnings
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	04	Extended Medicaid due to Spousal Support Collections
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	05	Pregnant Women
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	06	Deemed Newborns
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	07	Infants and Children under Age 19
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	08	Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	09	Former Foster Care Children
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	10	Individuals at or below 100% FPL, age 17 through 19, non-pregnant individuals aged 17 through 19, not otherwise mandatorily eligible, with income at or below 133% FPL
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	11	Individuals Receiving SSI
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	12	Aged, Blind and Disabled Individuals in 209(b) States

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	13	Individuals Receiving Mandatory State Supplements
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	14	Individuals Who Are Essential Spouses
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	15	Institutionalized Individuals Continuously Eligible Since 1973
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	16	Blind or Disabled Individuals Eligible in 1973
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	17	Individuals Who Lost Eligibility for SSI/SSP Due to an Increase in OASDI Benefits in 1972
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	18	Individuals Who Would be Eligible for SSI/SSP but for OASDI COLA increases since April, 1977
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	19	Disabled Widows and Widowers Ineligible for SSI due to Increase in OASDI
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	20	Disabled Widows and Widowers Ineligible for SSI due to Early Receipt of Social Security
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	21	Working Disabled under 1619(b)
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	22	Disabled Adult Children
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	23	Qualified Medicare Beneficiaries
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	24	Qualified Disabled and Working Individuals
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	25	Specified Low Income Medicare Beneficiaries
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	26	Qualifying Individuals
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	27	Optional Coverage of Parents and Other Caretaker Relatives
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	28	Reasonable Classifications of Individuals under Age 21
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	29	Children with Non-IV-E Adoption Assistance
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	30	Independent Foster Care Adolescents
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	31	Optional Targeted Low Income Children
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	32	Individuals Electing COBRA Continuation Coverage
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	33	Individuals above 133% FPL under Age 65
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	34	Certain Individuals Needing Treatment for Breast or Cervical Cancer
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	35	Individuals Eligible for Family Planning Services
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	36	Individuals with Tuberculosis
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	37	Aged, Blind or Disabled Individuals Eligible for but Not Receiving Cash Assistance
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	38	Individuals Eligible for Cash Assistance except for Institutionalization
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	39	Individuals Receiving Home and Community Based Services under Institutional Rules
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	40	Optional State Supplement Recipients - 1634 States, and SSI Criteria States with 1616 Agreements
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	41	Optional State Supplement Recipients - 209(b) States, and SSI Criteria States without 1616 Agreements
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	42	Institutionalized Individuals Eligible under a Special Income Level
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	43	Individuals participating in a PACE Program under Institutional Rules
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	44	Individuals Receiving Hospice Care
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	45	Qualified Disabled Children under Age 19
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	46	Poverty Level Aged or Disabled
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	47	Work Incentives Eligibility Group
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	48	Ticket to Work Basic Group
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	49	Ticket to Work Medical Improvements Group
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	50	Family Opportunity Act Children with Disabilities
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	51	Individuals Eligible for Home and Community-Based Services
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	52	Individuals Eligible for Home and Community-Based Services - Special Income Level
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	53	Medically Needy Pregnant Women
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	54	Medically Needy Children under Age 18
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	55	Medically Needy Children Age 18 through 20
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	56	Medically Needy Parents and Other Caretakers

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	59	Medically Needy Aged, Blind or Disabled
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	60	Medically Needy Blind or Disabled Individuals Eligible in 1973
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	61	Targeted Low-Income Children
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	62	Deemed Newborn
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	63	Children Ineligible for Medicaid Due to Loss of Income Disregards
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	64	Coverage from Conception to Birth
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	65	Children with Access to Public Employee Coverage
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	66	Children Eligible for Dental Only Supplemental Coverage
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	67	Targeted Low-Income Pregnant Women
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	68	Pregnant Women with Access to Public Employee Coverage
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	69	Individuals with Mental Health Conditions (expansion group)
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	70	Family Planning Participants (expansion group)
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	71	Other expansion group
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	72	Adult Group - Individuals at or below 133% FPL Age 19 through 64 - newly eligible for all states
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	73	Adult Group - Individuals at or below 133% FPL Age 19 through 64 - not newly eligible for non 1905z(3) states
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	74	Adult Group - Individuals at or below 133% FPL Age 19 through 64 - not newly eligible parent/ caretaker-relative(s) in 1905z(3) states
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	75	Adult Group - Individuals at or below 133% FPL Age 19 through 64 - not newly eligible non-parent/ caretaker-relative(s) in 1905z(3) states
VVL.048	Eligibility Group List	ELIGIBILITY-GROUP	76	Uninsured Individual eligible for COVID-19 testing
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	01	Excess income
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	02	Excess assets
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	03	Income reduced
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	04	Aged out of program
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	05	No longer in the foster care system
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	06	Death
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	07	No longer disabled
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	08	No longer institutionalized
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	09	No longer in need of long-term care services resides
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	10	Obtained employer sponsored insurance (ESI)
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	11	Gained access to public employees health plan
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	12	Obtained other coverage (not ESI or public employees health plan)
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	13	Failure to respond
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	14	Failure to pay premium or enrollment fees
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	15	Moved to a different state
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	16	Voluntary request for termination
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	17	Lack of verifications
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	18	Fraud
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	19	Suspension due to incarceration
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	20	Residence in an Institution for Mental Disease (IMD)
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	21	Suspension/Termination with reason unknown
VVL.051	Eligibility Change Reason List	ELIGIBILITY-CHANGE-REASON	22	Other
VVL.052	US County Code List	ADDR-COUNTY / ELIGIBLE-COUNTY-CODE / MANAGED-CARE-COUNTY	Not Applicable	This URL will take the reader to the American National Standards Institute (ANSI) Website for the various geographical code sets:

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.052	US County Code List	ADDR-COUNTY / ELIGIBLE-COUNTY-CODE / MANAGED-CARE-COUNTY	Not Applicable	US County Code List
VVL.052	US County Code List	ADDR-COUNTY / ELIGIBLE-COUNTY-CODE / MANAGED-CARE-COUNTY	Not Applicable	Once at the Website, the reader should scroll down to the section entitled "State and State Equivalents" for the state codes, "FIPS Codes for Outlying Areas of the United States and the Freely Associated States" for the territory codes and "County Subdivision" for the county codes.
VVL.054	Enrollment Type List	ENROLLMENT-TYPE	1	Medicaid or Medicaid Expansion CHIP
VVL.054	Enrollment Type List	ENROLLMENT-TYPE	2	Separate Title XXI CHIP
VVL.055	Ethnicity Code List	ETHNICITY-CODE	0	Not of Hispanic or, Latino/a, or Spanish origin
VVL.055	Ethnicity Code List	ETHNICITY-CODE	1	Mexican, Mexican American, Chicano/a
VVL.055	Ethnicity Code List	ETHNICITY-CODE	2	Puerto Rican
VVL.055	Ethnicity Code List	ETHNICITY-CODE	3	Cuban
VVL.055	Ethnicity Code List	ETHNICITY-CODE	4	Another Hispanic, Latino, or Spanish origin
VVL.055	Ethnicity Code List	ETHNICITY-CODE	5	Hispanic or Latino Unknown
VVL.055	Ethnicity Code List	ETHNICITY-CODE	6	Ethnicity Unspecified
VVL.056	File Encoding Specification List	FILE-ENCODING-SPECIFICATION	FLF	The file follows a fixed length format
VVL.056	File Encoding Specification List	FILE-ENCODING-SPECIFICATION	PSV	The file follows a pipe-delimited format
VVL.058	File Status Indicator List	FILE-STATUS-INDICATOR	P	Production file
VVL.058	File Status Indicator List	FILE-STATUS-INDICATOR	T	Test file
VVL.059	Fixed Payment Indicator List	FIXED-PAYMENT-IND	0	Not Fixed Payment
VVL.059	Fixed Payment Indicator List	FIXED-PAYMENT-IND	1	FFS Fixed Payment
VVL.060	Forced Claim Indicator List	FORCED-CLAIM-IND	0	No
VVL.060	Forced Claim Indicator List	FORCED-CLAIM-IND	1	Yes
VVL.061	Funding Code List	FUNDING-CODE	A	Medicaid Agency
VVL.061	Funding Code List	FUNDING-CODE	B	CHIP Agency
VVL.061	Funding Code List	FUNDING-CODE	C	Mental Health Service Agency
VVL.061	Funding Code List	FUNDING-CODE	D	Education Agency
VVL.061	Funding Code List	FUNDING-CODE	E	Child and Family Services Agency
VVL.061	Funding Code List	FUNDING-CODE	F	County
VVL.061	Funding Code List	FUNDING-CODE	G	City
VVL.061	Funding Code List	FUNDING-CODE	H	Providers
VVL.061	Funding Code List	FUNDING-CODE	I	Other
VVL.062	Funding Source Non-Federal Share List	FUNDING-SOURCE-NONFEDERAL-SHARE	01	State appropriations to the Medicaid agency
VVL.062	Funding Source Non-Federal Share List	FUNDING-SOURCE-NONFEDERAL-SHARE	02	Intergovernmental transfers (IGT)
VVL.062	Funding Source Non-Federal Share List	FUNDING-SOURCE-NONFEDERAL-SHARE	03	Certified public expenditures (CPE)
VVL.062	Funding Source Non-Federal Share List	FUNDING-SOURCE-NONFEDERAL-SHARE	04	Provider taxes
VVL.062	Funding Source Non-Federal Share List	FUNDING-SOURCE-NONFEDERAL-SHARE	05	Donations
VVL.062	Funding Source Non-Federal Share List	FUNDING-SOURCE-NONFEDERAL-SHARE	06	State appropriations to the CHIP agency
VVL.063	Health Home Chronic Condition List	HEALTH-HOME-CHRONIC-CONDITION	A	Mental health
VVL.063	Health Home Chronic Condition List	HEALTH-HOME-CHRONIC-CONDITION	B	Substance abuse
VVL.063	Health Home Chronic Condition List	HEALTH-HOME-CHRONIC-CONDITION	C	Asthma
VVL.063	Health Home Chronic Condition List	HEALTH-HOME-CHRONIC-CONDITION	D	Diabetes
VVL.063	Health Home Chronic Condition List	HEALTH-HOME-CHRONIC-CONDITION	E	Heart disease
VVL.063	Health Home Chronic Condition List	HEALTH-HOME-CHRONIC-CONDITION	F	Overweight (BMI of >25)
VVL.063	Health Home Chronic Condition List	HEALTH-HOME-CHRONIC-CONDITION	G	HIV/AIDS
VVL.063	Health Home Chronic Condition List	HEALTH-HOME-CHRONIC-CONDITION	H	Other

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	001	Aged
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	002	Physical Disabilities
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	003	Intellectual Disabilities
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	004	Autism Spectrum Disorder
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	005	Developmental Disabilities
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	006	Mental Illness and/or Serious Emotional Disturbance
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	007	Brain Injury
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	008	HIV/AIDS
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	009	Technology Dependent or Medically Fragile
VVL.064	HCBS Chronic Condition Non Health Home Code List	HCBS-CHRONIC-CONDITION-NON-HEALTH-HOME-CODE	010	Disabled (other)
VVL.065	HCBS Service Code List	HCBS-SERVICE-CODE	1	The HCBS service was provided under 1915(i)
VVL.065	HCBS Service Code List	HCBS-SERVICE-CODE	2	The HCBS service was provided under 1915(j)
VVL.065	HCBS Service Code List	HCBS-SERVICE-CODE	3	The HCBS service was provided under 1915(k)
VVL.065	HCBS Service Code List	HCBS-SERVICE-CODE	4	The HCBS service was provided under a 1915(c) HCBS Waiver
VVL.065	HCBS Service Code List	HCBS-SERVICE-CODE	5	The HCBS service was provided under an 1115 waiver
VVL.065	HCBS Service Code List	HCBS-SERVICE-CODE	6	The HCBS service was not provided under the statutes identified above and was of an acute care nature
VVL.065	HCBS Service Code List	HCBS-SERVICE-CODE	7	The HCBS service was not provided under the statutes identified above and was of a long term care nature
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	01010	Case Management
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	02011	Group Living, Residential Habilitation
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	02012	Group Living, Mental Health Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	02013	Group Living, Other
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	02021	Shared Living, Residential Habilitation
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	02022	Shared Living, Mental Health Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	02023	Shared Living, Other
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	02031	In-e Residential Habilitation
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	02032	In-Home Round-The-Clock Mental Health Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	02033	In-Home Round-The-Clock Services, Other
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	03010	Job Development
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	03021	Ongoing Supported Employment, Individual
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	03022	Ongoing Supported Employment, Group
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	03030	Career Planning
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	04010	Prevocational Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	04020	Day Habilitation
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	04030	Education Services

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	04040	Day Treatment/Partial Hospitalization
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	04050	Adult Day Health
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	04060	Adult Day Services (Social Model)
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	04070	Community Integration
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	04080	Medical Day Care for Children
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	05010	Private Duty Nursing
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	05020	Skilled Nursing
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	06010	Home Delivered Meals
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	07010	Rent and Food Expenses For Live-In Caregiver
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	08010	Home-Based Habilitation
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	08020	Home Health Aide
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	08030	Personal Care
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	08040	Companion
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	08050	Homemaker
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	08060	Chore
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	09011	Respite, Out-Of-Home
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	09012	Respite, In-Home
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	09020	Caregiver Counseling and/or Training
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	10010	Mental Health Assessment
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	10020	Assertive Community Treatment
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	10030	Crisis Intervention
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	10040	Behavior Support
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	10050	Peer Specialist
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	10060	Counseling
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	10070	Psychosocial Rehabilitation
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	10080	Clinic Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	10090	Other Mental Health and Behavioral Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11010	Health Monitoring
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11020	Health Assessment
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11030	Medication Assessment and/or Management
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11040	Nutrition Consultation
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11050	Physician Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11060	Prescription Drugs
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11070	Dental Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11080	Occupational Therapy
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11090	Physical Therapy
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11100	Speech, Hearing, And Language Therapy
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11110	Respiratory Therapy
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11120	Cognitive Rehabilitative Therapy
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	11130	Other Therapies
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	12010	Financial Management Services In Support Of Participant Direction
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	12020	Information and Assistance In Support Of Participant Direction
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	13010	Participant Training
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	14010	Personal Emergency Response System (Pers)
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	14020	Home and/or Vehicle Accessibility Adaptations
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	14031	Equipment and Technology

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	14032	Supplies
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	15010	Non-Medical Transportation
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	16010	Community Transition Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	17010	Goods and Services
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	17020	Interpreter
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	17030	Housing Consultation
VVL.066	HCBS Taxonomy Code List	HCBS-TAXONOMY	17990	Other
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	00	0:00-0:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	01	1:00-1:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	02	2:00-2:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	03	3:00-3:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	04	4:00-4:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	05	5:00-5:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	06	6:00-6:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	07	7:00-7:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	08	8:00-8:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	09	9:00-9:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	10	10:00-10:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	11	11:00-11:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	12	12:00-12:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	13	13:00-13:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	14	14:00-14:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	15	15:00-15:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	16	16:00-16:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	17	17:00-17:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	18	18:00-18:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	19	19:00-19:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	20	20:00-20:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	21	21:00-21:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	22	22:00-22:59
VVL.067	Hour List	ADMISSION-HOUR DISCHARGE-HOUR	23	23:00-23:59
VVL.068	Household Size List	HOUSEHOLD-SIZE	01	1 person
VVL.068	Household Size List	HOUSEHOLD-SIZE	02	2 people
VVL.068	Household Size List	HOUSEHOLD-SIZE	03	3 people
VVL.068	Household Size List	HOUSEHOLD-SIZE	04	4 people
VVL.068	Household Size List	HOUSEHOLD-SIZE	05	5 people
VVL.068	Household Size List	HOUSEHOLD-SIZE	06	6 people
VVL.068	Household Size List	HOUSEHOLD-SIZE	07	7 people
VVL.068	Household Size List	HOUSEHOLD-SIZE	08	8 or more people
VVL.069	Immigration Status List	IMMIGRATION-STATUS	1	Qualified non-citizen
VVL.069	Immigration Status List	IMMIGRATION-STATUS	2	Lawfully present under CHIPRA 214
VVL.069	Immigration Status List	IMMIGRATION-STATUS	3	Eligible only for payment for emergency services
VVL.069	Immigration Status List	IMMIGRATION-STATUS	8	U.S. citizen
VVL.070	Immigration Verification Flag List	IMMIGRATION-VERIFICATION-FLAG	0	Immigration Status Verified
VVL.070	Immigration Verification Flag List	IMMIGRATION-VERIFICATION-FLAG	1	Enrolled in Medicaid pending immigration verification
VVL.071	Income Code List	INCOME-CODE	01	Individuals State-defined family income is from 0 to 100% of the FPL

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.071	Income Code List	INCOME-CODE	02	Individuals State-defined family income is from 101 to 133% of the FPL
VVL.071	Income Code List	INCOME-CODE	03	Individuals State-defined family income is from 134 to 150% of the FPL
VVL.071	Income Code List	INCOME-CODE	04	Individuals State-defined family income is from 151 to 200% of the FPL
VVL.071	Income Code List	INCOME-CODE	05	Individuals State-defined family income is from 201 to 255% of the FPL
VVL.071	Income Code List	INCOME-CODE	06	Individuals State-defined family income is from 256 to 300% of the FPL
VVL.071	Income Code List	INCOME-CODE	07	Individuals State-defined family income is from 301 to 400% of the FPL
VVL.071	Income Code List	INCOME-CODE	08	Individuals State-defined family income is over 400% of the FPL
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	001	Inpatient hospital services, other than services in an institution for mental diseases
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	058	Services furnished in a religious nonmedical health care institution
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	060	Emergency hospital services
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	084	Sterilizations
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	086	Other Pregnancy-related Procedures
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	090	Critical access hospital services - IP
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	091	Skilled care - hospital residing
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	092	Exceptional care - hospital residing
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	093	Non-acute care - hospital residing
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	123	Disproportionate share hospital (DSH) payments
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	132	Supplemental payment - inpatient
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	135	EHR payments to provider
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	136	administered during any portion of the emergency period defined in paragraph (1)(B) of section 1135(g) beginning on or after the date of the enactment of this subparagraph for the detection of SARSCoV2 or the diagnosis of the virus that causes COVID-19, and the administration of such in vitro diagnostic products
VVL.072	Type of Service (Inpatient Claim) List	TYPE-OF-SERVICE	137	COVID-19 testing-related services
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	01	Medical or comprehensive health insurance plan (e.g. HMO)
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	02	Dental health insurance plan
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	03	Vision health insurance plan
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	04	Prenatal/delivery health insurance plan
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	05	Long term care health insurance plan (Long Term PIHP)
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	06	Transportation health insurance plan (Transportation PAHP)
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	07	A managed care plan
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	08	Disease management health insurance plan (Disease Management PAHP)
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	09	PAHP (Medical only)
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	10	Comprehensive health insurance and Long Term Care (hybrid)
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	11	Other health insurance plan
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	12	Veterans Administration health benefits
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	13	Indian Health Service Program health benefits
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	14	TRICARE health benefits
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	15	Eligible enrolled in private LTC insurance
VVL.073	Insurance Plan Type List	INSURANCE-PLAN-TYPE	16	Fee-for-Service insurance
VVL.074	Level of Care Status List	LEVEL-OF-CARE-STATUS	001	Hospital as defined in 42 CFR 440.10
VVL.074	Level of Care Status List	LEVEL-OF-CARE-STATUS	002	Inpatient psychiatric facility for individuals under age 21 as provided in 42 CFR 440.160
VVL.074	Level of Care Status List	LEVEL-OF-CARE-STATUS	003	Nursing Facility
VVL.074	Level of Care Status List	LEVEL-OF-CARE-STATUS	004	ICF/IDD
VVL.074	Level of Care Status List	LEVEL-OF-CARE-STATUS	005	Other Type of Facility
VVL.074	Level of Care Status List	LEVEL-OF-CARE-STATUS	888	Not Applicable (Not in LTSS program)

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	01	Physician
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	02	Speech Language Pathologist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	03	Oral Surgery (Dentist only)
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	04	Cardiac Rehabilitation and Intensive Cardiac Rehabilitation
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	05	Anesthesiology Assistant
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	06	Chiropractic
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	07	Optometry
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	08	Certified Nurse Midwife
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	09	Certified Registered Nurse Anesthetist (CRNA)
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	10	Mammography Center
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	11	Independent Diagnostic Testing Facility (IDTF)
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	12	Podiatry
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	13	Ambulatory Surgical Center
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	14	Nurse Practitioner
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	15	Medical Supply Company with Orthotist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	16	Medical Supply Company with Prosthetist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	17	Medical Supply Company with Orthotist-Prosthetist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	18	Other Medical Supply Company
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	19	Individual Certified Orthotist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	20	Individual Certified Prosthetist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	21	Individual Certified Prosthetist-Orthotist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	22	Medical Supply Company with Pharmacist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	23	Ambulance Service Provider
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	24	Public Health or Welfare Agency
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	25	Voluntary Health or Charitable Agency
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	26	Psychologist, Clinical
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	27	Portable X-Ray Supplier
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	28	Audiologist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	29	Physical Therapist in Private Practice
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	30	Occupational Therapist in Private Practice
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	31	Clinical Laboratory
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	32	Clinic or Group Practice
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	33	Registered Dietitian or Nutrition Professional
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	34	Mass Immunizer Roster Biller
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	35	Radiation Therapy Center
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	36	Slide Preparation Facility
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	37	Licensed Clinical Social Worker
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	38	Certified Clinical Nurse Specialist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	39	Advance Diagnostic Imaging
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	40	Optician
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	41	Physician Assistant
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	42	Hospital-General
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	43	Skilled Nursing Facility
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	44	Intermediate Care Nursing Facility
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	45	Other Nursing Facility
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	46	Home Health Agency

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	47	Pharmacy
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	48	Medical Supply Company with Respiratory Therapist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	49	Department Store
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	50	Grocery Store
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	51	Indian Health Service facility
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	52	Oxygen supplier
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	53	Pedorthic personnel
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	54	Medical supply company with pedorthic personnel
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	55	Rehabilitation Agency
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	56	Ocularist
VVL.075	Lockin Provider Type List	LOCKIN-PROV-TYPE	57	All Other
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	009	Nursing facility services for individuals age 21 or older (other than services in an institution for mental disease)
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	044	Inpatient hospital services for individuals age 65 or older in institutions for mental diseases
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	045	Nursing facility services for individuals age 65 or older in institutions for mental diseases
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	046	Intermediate care facility (ICF/IID) services
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	047	Nursing facility services, other than in institutions for mental diseases
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	048	Inpatient psychiatric services for individuals under age 21
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	050	Inpatient substance abuse treatment services and residential substance abuse treatment services.
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	059	Skilled nursing facility services for individuals under age 21
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	133	Supplemental payment - nursing
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	136	In vitro diagnostic products (as defined in section 809.3(a) of title 21, Code of Federal Regulations) administered during any portion of the emergency period defined in paragraph (1)(B) of section 1135(g) beginning on or after the date of the enactment of this subparagraph for the detection of SARS-CoV-2 or the diagnosis of the virus that causes COVID-19, and the administration of such in vitro diagnostic products
VVL.076	Type of Service (Long Term Claim) List	TYPE-OF-SERVICE	137	COVID-19 testing-related services
VVL.077	LTSS Level of Care List	LTSS-LEVEL-CARE	1	Skilled Care
VVL.077	LTSS Level of Care List	LTSS-LEVEL-CARE	2	Intermediate Care
VVL.077	LTSS Level of Care List	LTSS-LEVEL-CARE	3	Custodial Care
VVL.079	Managed Care Address Type List	MANAGED-CARE-ADDR-TYPE	1	MCOs corporate address and contact information
VVL.079	Managed Care Address Type List	MANAGED-CARE-ADDR-TYPE	2	MCOs mailing address
VVL.079	Managed Care Address Type List	MANAGED-CARE-ADDR-TYPE	3	MCOs service location address
VVL.079	Managed Care Address Type List	MANAGED-CARE-ADDR-TYPE	4	MCOs Billing address and contact information
VVL.079	Managed Care Address Type List	MANAGED-CARE-ADDR-TYPE	5	CEOs address and contact information
VVL.079	Managed Care Address Type List	MANAGED-CARE-ADDR-TYPE	6	CFOs address and contact information
VVL.079	Managed Care Address Type List	MANAGED-CARE-ADDR-TYPE	7	Other
VVL.080	Maintenance Assistance Status List	MAINTENANCE-ASSISTANCE-STATUS	0	Eligible for Separate CHIP only
VVL.080	Maintenance Assistance Status List	MAINTENANCE-ASSISTANCE-STATUS	1	Receiving Cash or eligible under section 1931 of the Act
VVL.080	Maintenance Assistance Status List	MAINTENANCE-ASSISTANCE-STATUS	2	Medically Needy
VVL.080	Maintenance Assistance Status List	MAINTENANCE-ASSISTANCE-STATUS	3	Poverty Related
VVL.080	Maintenance Assistance Status List	MAINTENANCE-ASSISTANCE-STATUS	4	Other
VVL.080	Maintenance Assistance Status List	MAINTENANCE-ASSISTANCE-STATUS	5	1115 - Demonstration expansion eligible

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
				Enrolled through use of Medicare enrollment system (State did not require that provider submit application. Rather Provider is active Medicare provider and state Medicaid program accepted these 1 credentials as sufficient to participate as state Medicaid provider.)
VVL.078	Provider Enrollment Method	PROV-ENROLLMENT-METHOD		1
VVL.078	Provider Enrollment Method	PROV-ENROLLMENT-METHOD		2 Enrolled through use of state-based provider application
VVL.078	Provider Enrollment Method	PROV-ENROLLMENT-METHOD		3 Other
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	01	Parents and Other Caretaker Relatives
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	02	Transitional Medical Assistance
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	03	Extended Medicaid due to Earnings
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	04	Extended Medicaid due to Spousal Support Collections
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	05	Pregnant Women
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	06	Deemed Newborns
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	07	Infants and Children under Age 19
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	08	Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	09	Former Foster Care Children
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP		10 Individuals at or below 100% FPL through a non-program individual aged 17 through 19, not otherwise mandatorily eligible, with income at or below 133% FPL
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	11	Individuals Receiving SSI
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	12	Aged, Blind and Disabled Individuals in 209(b) States
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	13	Individuals Receiving Mandatory State Supplements
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	14	Individuals Who Are Essential Spouses
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	15	Institutionalized Individuals Continuously Eligible Since 1973
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	16	Blind or Disabled Individuals Eligible in 1973
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	17	Individuals Who Lost Eligibility for SSI/SSP Due to an Increase in OASDI Benefits in 1972
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	18	Individuals Who Would be Eligible for SSI/SSP but for OASDI COLA increases since April, 1977
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	19	Disabled Widows and Widowers Ineligible for SSI due to Increase in OASDI
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	20	Disabled Widows and Widowers Ineligible for SSI due to Early Receipt of Social Security
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	21	Working Disabled under 1619(b)
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	22	Disabled Adult Children
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	23	Qualified Medicare Beneficiaries
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	24	Qualified Disabled and Working Individuals
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	25	Specified Low Income Medicare Beneficiaries
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	26	Qualifying Individuals
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	27	Optional Coverage of Parents and Other Caretaker Relatives
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	28	Reasonable Classifications of Individuals under Age 21
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	29	Children with Non-IV-E Adoption Assistance
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	30	Independent Foster Care Adolescents
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	31	Optional Targeted Low Income Children
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	32	Individuals Electing COBRA Continuation Coverage
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	33	Individuals above 133% FPL under Age 65
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	34	Certain Individuals Needing Treatment for Breast or Cervical Cancer
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	35	Individuals Eligible for Family Planning Services
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	36	Individuals with Tuberculosis
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	37	Aged, Blind or Disabled Individuals Eligible for but Not Receiving Cash Assistance
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	38	Individuals Eligible for Cash Assistance except for Institutionalization
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	39	Individuals Receiving Home and Community Based Services under Institutional Rules
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	40	Optional State Supplement Recipients - 1634 States, and SSI Criteria States with 1616 Agreements

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	41	Optional State Supplement Recipients - 209(b) States, and SSI Criteria States without 1616 Agreements
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	42	Institutionalized Individuals Eligible under a Special Income Level
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	43	Individuals participating in a PACE Program under Institutional Rules
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	44	Individuals Receiving Hospice Care
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	45	Qualified Disabled Children under Age 19
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	46	Poverty Level Aged or Disabled
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	47	Work Incentives Eligibility Group
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	48	Ticket to Work Basic Group
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	49	Ticket to Work Medical Improvements Group
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	50	Family Opportunity Act Children with Disabilities
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	51	Individuals Eligible for Home and Community-Based Services
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	52	Individuals Eligible for Home and Community-Based Services - Special Income Level
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	72	Adult Group - Individuals at or below 133% FPL Age 19 through 64 - newly eligible for all states
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	73	Adult Group - Individuals at or below 133% FPL Age 19 through 64- not newly eligible for non 1905z(3) states
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	74	Adult Group - Individuals at or below 133% FPL Age 19 through 64 not newly eligible parent/ caretaker-relative(s) in 1905z(3) states
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	75	Adult Group - Individuals at or below 133% FPL Age 19 through 64- not newly eligible non-parent/ caretaker-relative(s) in 1905z(3) states
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	53	Medically Needy Pregnant Women
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	54	Medically Needy Children under Age 18
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	55	Medically Needy Children Age 18 through 20
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	56	Medically Needy Parents and Other Caretakers
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	59	Medically Needy Aged, Blind or Disabled
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	60	Medically Needy Blind or Disabled Individuals Eligible in 1973
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	61	Targeted Low-Income Children
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	62	Deemed Newborn
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	63	Children Ineligible for Medicaid Due to Loss of Income Disregards
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	64	Coverage from Conception to Birth
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	65	Children with Access to Public Employee Coverage
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	66	Children Eligible for Dental Only Supplemental Coverage
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	67	Targeted Low-Income Pregnant Women
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	68	Pregnant Women with Access to Public Employee Coverage
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	69	Individuals with Mental Health Conditions (expansion group)
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	70	Family Planning Participants (expansion group)
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	71	Other expansion group
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	72	Adult Group - Individuals at or below 133% FPL Age 19 through 64 - newly eligible for all states
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	73	Adult Group - Individuals at or below 133% FPL Age 19 through 64- not newly eligible for non 1905z(3) states
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	74	Adult Group - Individuals at or below 133% FPL Age 19 through 64 not newly eligible parent/ caretaker-relative(s) in 1905z(3) states
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP	75	Adult Group - Individuals at or below 133% FPL Age 19 through 64- not newly eligible non-parent/ caretaker-relative(s) in 1905z(3) states
VVL.081	Managed Care Plan Pop List	MANAGED-CARE-PLAN-POP		76 Uninsured Individual eligible for COVID-19 testing

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	01	Comprehensive MCO
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	02	Traditional PCCM Provider arrangement
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	03	Enhanced PCCM Provider arrangement
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	04	Health Insuring Organization (HIO)
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	05	Medical-only PIHP (risk or non-risk/non-comprehensive/with inpatient hospital or institutional services)
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	06	Medical-only PAHP (risk or non-risk/non-comprehensive/no inpatient hospital or institutional services)
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	07	Long Term Care (LTC) PIHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	08	Mental Health (MH) PIHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	09	Mental Health (MH) PAHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	10	Substance Use Disorders (SUD) PIHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	11	Substance Use Disorders (SUD) PAHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	12	Mental Health (MH) and Substance Use Disorders (SUD) PIHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	13	Mental Health (MH) and Substance Use Disorders (SUD) PAHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	14	Dental PAHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	15	Transportation PAHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	16	Disease Management PAHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	17	Program for All-Inclusive Care for the Elderly (PACE)
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	18	Pharmacy PAHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	19	Individual is enrolled in Long-Term Services & Supports (LTSS) and Mental Health (MH) PIHP
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	20	Other
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	60	Accountable Care Organization
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	70	Health/Medical Home
VVL.082	Managed Care Plan Type List	MANAGED-CARE-PLAN-TYPE	80	Integrated Care For Dual Eligibles
VVL.083	Managed Care Profit Status List	MANAGED-CARE-PROFIT-STATUS	01	501(C)(3) NON-PROFIT
VVL.083	Managed Care Profit Status List	MANAGED-CARE-PROFIT-STATUS	02	FOR-PROFIT, CLOSELY HELD
VVL.083	Managed Care Profit Status List	MANAGED-CARE-PROFIT-STATUS	03	FOR-PROFIT, PUBLICLY TRADED
VVL.083	Managed Care Profit Status List	MANAGED-CARE-PROFIT-STATUS	04	OTHER
VVL.084	Managed Care Program List	MANAGED-CARE-PROGRAM	1	Medicaid State Plan
VVL.084	Managed Care Program List	MANAGED-CARE-PROGRAM	2	CHIP State Plan
VVL.084	Managed Care Program List	MANAGED-CARE-PROGRAM	3	Both Medicaid and CHIP
VVL.085	Managed Care Service Area List	MANAGED-CARE-SERVICE-AREA	1	Statewide - The managed care entity provides services to beneficiaries throughout the entire state.
VVL.085	Managed Care Service Area List	MANAGED-CARE-SERVICE-AREA	2	County - The managed care entity provides services to beneficiaries in specified counties.
VVL.085	Managed Care Service Area List	MANAGED-CARE-SERVICE-AREA	3	City - The managed care entity provides services to beneficiaries in specified cities.
VVL.085	Managed Care Service Area List	MANAGED-CARE-SERVICE-AREA	4	Region - The managed care entity provides services to beneficiaries in specified regions, not defined by individual counties within the state (region is state-defined).
VVL.085	Managed Care Service Area List	MANAGED-CARE-SERVICE-AREA	5	Zip Code - The managed care entity program provides services to beneficiaries in specified zip codes.
VVL.085	Managed Care Service Area List	MANAGED-CARE-SERVICE-AREA	6	Other - The managed care entity provides services to beneficiaries in "other" area(s), not Statewide, County, City, or Region.
VVL.086	Managed Care Service Area Name List	MANAGED-CARE-SERVICE-AREA-NAME	Not Applicable	This URL will take the reader to the American National Standards Institute (ANSI) Website for the various geographical code sets:
VVL.086	Managed Care Service Area Name List	MANAGED-CARE-SERVICE-AREA-NAME	Not Applicable	Managed Care Service Area Name List

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.086	Managed Care Service Area Name List	MANAGED-CARE-SERVICE-AREA-NAME	Not Applicable	Once at the Website, the reader should scroll down to the section entitled "State and State Equivalents" for the state codes, "FIPS Codes for Outlying Areas of the United States and the Freely Associated States" for the territory codes and "County Subdivision" for the county codes.
VVL.088	Marital Status List	MARITAL-STATUS	01	Legally Married (to opposite sex), spouse present
VVL.088	Marital Status List	MARITAL-STATUS	02	Legally Married (to opposite sex), spouse absent
VVL.088	Marital Status List	MARITAL-STATUS	03	Legally Married (to same sex), spouse present
VVL.088	Marital Status List	MARITAL-STATUS	04	Legally Married (to same sex), spouse absent
VVL.088	Marital Status List	MARITAL-STATUS	05	Partnered or in Civil Union (to opposite sex), spouse present
VVL.088	Marital Status List	MARITAL-STATUS	06	Partnered or in Civil Union (to opposite sex), spouse absent
VVL.088	Marital Status List	MARITAL-STATUS	07	Partnered or in Civil Union (to same sex), spouse present
VVL.088	Marital Status List	MARITAL-STATUS	08	Partnered or in Civil Union (to same sex), spouse absent
VVL.088	Marital Status List	MARITAL-STATUS	09	Legally separated (and not married or partnered)
VVL.088	Marital Status List	MARITAL-STATUS	10	Divorced (and not currently married or partnered)
VVL.088	Marital Status List	MARITAL-STATUS	11	Separated (and not currently married or partnered)
VVL.088	Marital Status List	MARITAL-STATUS	12	Widower/Widow (and not currently married or partnered)
VVL.088	Marital Status List	MARITAL-STATUS	13	Never married/partnered
VVL.088	Marital Status List	MARITAL-STATUS	14	Other
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	00	Eligible for Separate CHIP only
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	01	Aged Individual
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	02	Blind/Disabled Individual
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	03	Not used
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	04	Child (not Child of Unemployed Adult, not Foster Care Child)
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	05	Adult (not based on unemployed status)
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	06	Child of Unemployed Adult (optional)
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	07	Unemployed Adult (optional)
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	08	Foster Care Child
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	10	Refugee Medical Assistance (45 CFR Sub-part G)
VVL.089	Medicaid Basis of Eligibility List	MEDICAID-BASIS-OF-ELIGIBILITY	11	Individual covered under the Breast and Cervical Cancer Prevention and Treatment Act of 2000
VVL.090	MFP Lives with Family List	MFP-LIVES-WITH-FAMILY	0	No
VVL.090	MFP Lives with Family List	MFP-LIVES-WITH-FAMILY	1	Yes
VVL.090	MFP Lives with Family List	MFP-LIVES-WITH-FAMILY	2	No MFP Participation
VVL.091	MFP Qualified Institution List	MFP-QUALIFIED-INSTITUTION	00	Default- No MFP Participation
VVL.091	MFP Qualified Institution List	MFP-QUALIFIED-INSTITUTION	01	Nursing Facility
VVL.091	MFP Qualified Institution List	MFP-QUALIFIED-INSTITUTION	02	ICF/IID (Intermediate Care Facilities for individuals with Intellectual Disabilities)
VVL.091	MFP Qualified Institution List	MFP-QUALIFIED-INSTITUTION	03	IMD (Institution for Mental Diseases)
VVL.091	MFP Qualified Institution List	MFP-QUALIFIED-INSTITUTION	04	Hospital
VVL.091	MFP Qualified Institution List	MFP-QUALIFIED-INSTITUTION	05	Other
VVL.092	MFP Qualified Residence List	MFP-QUALIFIED-RESIDENCE	00	Default - No MFP Participation
VVL.092	MFP Qualified Residence List	MFP-QUALIFIED-RESIDENCE	01	Home owned by participant
VVL.092	MFP Qualified Residence List	MFP-QUALIFIED-RESIDENCE	02	Home owned by family member
VVL.092	MFP Qualified Residence List	MFP-QUALIFIED-RESIDENCE	03	Apartment leased by participant, not assisted living
VVL.092	MFP Qualified Residence List	MFP-QUALIFIED-RESIDENCE	04	Apartment leased by participant, assisted living
VVL.092	MFP Qualified Residence List	MFP-QUALIFIED-RESIDENCE	05	Group home of no more than 4 people
VVL.093	MFP Reason Participation Ended List	MFP-REASON-PARTICIPATION-ENDED	00	Default - No MFP Participation
VVL.093	MFP Reason Participation Ended List	MFP-REASON-PARTICIPATION-ENDED	01	Completed 365 days of participation

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.093	MFP Reason Participation Ended List	MFP-REASON-PARTICIPATION-ENDED	02	Suspended eligibility
VVL.093	MFP Reason Participation Ended List	MFP-REASON-PARTICIPATION-ENDED	03	Re-institutionalized
VVL.093	MFP Reason Participation Ended List	MFP-REASON-PARTICIPATION-ENDED	04	Died
VVL.093	MFP Reason Participation Ended List	MFP-REASON-PARTICIPATION-ENDED	05	Moved
VVL.093	MFP Reason Participation Ended List	MFP-REASON-PARTICIPATION-ENDED	06	No longer needed services
VVL.093	MFP Reason Participation Ended List	MFP-REASON-PARTICIPATION-ENDED	07	Other
VVL.094	MFP Reinstitutionalized Reason List	MFP-REINSTITUTIONALIZED-REASON	00	Default- No MFP Participation
VVL.094	MFP Reinstitutionalized Reason List	MFP-REINSTITUTIONALIZED-REASON	01	Acute care hospitalization followed by long term rehabilitation
VVL.094	MFP Reinstitutionalized Reason List	MFP-REINSTITUTIONALIZED-REASON	02	Deterioration in cognitive functioning
VVL.094	MFP Reinstitutionalized Reason List	MFP-REINSTITUTIONALIZED-REASON	03	Deterioration in health
VVL.094	MFP Reinstitutionalized Reason List	MFP-REINSTITUTIONALIZED-REASON	04	Deterioration in mental health
VVL.094	MFP Reinstitutionalized Reason List	MFP-REINSTITUTIONALIZED-REASON	05	Loss of housing
VVL.094	MFP Reinstitutionalized Reason List	MFP-REINSTITUTIONALIZED-REASON	06	Loss of personal care giver
VVL.094	MFP Reinstitutionalized Reason List	MFP-REINSTITUTIONALIZED-REASON	07	By request of participant or guardian
VVL.094	MFP Reinstitutionalized Reason List	MFP-REINSTITUTIONALIZED-REASON	08	Lack of sufficient community services
VVL.095	National Health Care Entity ID Type List	NATIONAL-HEALTH-CARE-ENTITY-ID-TYPE	1	Controlling Health Plan (CHP) ID - the national health plan identifier of a health plan that either controls its own business activities, actions, or policies, or is controlled by an entity that is not a health plan and exercises sufficient control over the subhealth plan(s) under it so as to direct its own business activities, actions, or policies, as well as those of any subhealth plans under it.
VVL.095	National Health Care Entity ID Type List	NATIONAL-HEALTH-CARE-ENTITY-ID-TYPE	2	Subhealth Plan (SHP) ID - the national health plan identifier of a health plan whose business activities, actions, or policies are directed by a controlling health plan. All subhealth HPIDs should be reported. Other Entity Identifier (OEID) - a national identifier for entities that are not health plans, health care providers, or individuals (as defined in 45 CFR 160.103), but that need to be identified in standard transactions (including, for example, third party administrators, transaction vendors, clearinghouses, and other payers). Other entities are not required to obtain an OEID, but they could obtain and use one if they need to be identified in covered transactions.
VVL.095	National Health Care Entity ID Type List	NATIONAL-HEALTH-CARE-ENTITY-ID-TYPE	3	1115 demonstration waiver program - demonstration projects under which most provisions of Section 1902 of the Social Security Act are waived and/or expenditures that would not otherwise be eligible for FFP are authorized. States use these to expand eligibility, restructure Medicaid coverage and secure programmatic flexibility.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	01	1915(b) waiver program - waivers of most provisions of Section 1902 of the Social Security Act in order to limit beneficiaries freedom of choice of provider; selectively contract with providers; or provide additional services to beneficiaries (State may include BBA special populations)
VVL.096	Operating Authority List	OPERATING-AUTHORITY	02	1932(a) state plan option to use managed care for MCO and PCCM programs - mandatory managed care programs implemented through the state plan (State must exclude or permit voluntary enrollment of specific populations)
VVL.096	Operating Authority List	OPERATING-AUTHORITY	03	1915(a) voluntary managed care program - an MCO managed care program in which enrollment is voluntary and therefore does not require a waiver.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	04	Concurrent 1915(b)/1915(c) waivers - programs, or portions thereof, operating under both 1915(b) managed care and 1915(c) home and community-based services waivers.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	05	Concurrent 1915(a)/1915(c) waivers - programs, or portions thereof, operating under both 1915(a) voluntary managed care and 1915(c) home and community-based services waiver
VVL.096	Operating Authority List	OPERATING-AUTHORITY	06	Concurrent 1932(a)/1915(c) waivers - programs, or portions thereof, operating under both 1932(a) managed care and 1915(c) home and community-based services waiver.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	07	PACE program that provides pre-paid, capitated comprehensive, health care services to the frail elderly.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	08	

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.096	Operating Authority List	OPERATING-AUTHORITY	09	1905(t) voluntary PCCM program - A PCCM managed care program in which enrollment is voluntary and therefore does not require a waiver.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	10	1937benchmark benefit program - programs to provide benefits that differ from Medicaid state plan benefits using managed care and implemented through the state plan.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	11	1902(a)(70) non-emergency medical transportation program non-emergency medical transportation brokerage programs implemented through the state plan which can vary scope of services, operate on a less-than-statewide basis, and limit freedom of choice
VVL.096	Operating Authority List	OPERATING-AUTHORITY	12	Concurrent 1915(b)/1915(i) HCBS state plan services - the optional 1915(i) state plan Home and Community-Based Services (HCBS) benefit operated in conjunction with a 1915(b) managed care waiver program.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	13	Concurrent 1915(a)/ 1915(i) HCBS state plan services - the optional 1915(i) state plan Home and Community-Based Services (HCBS) benefit operated in conjunction with a 1915(a) voluntary managed care program.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	14	Concurrent 1932(a)/ 1915(i) HCBS state plan services - the optional 1915(i) state plan Home and Community-Based Services (HCBS) benefit operated in conjunction with a 1932(a) managed care state plan option.
VVL.096	Operating Authority List	OPERATING-AUTHORITY	15	1945 Health Homes.
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	002	Outpatient hospital services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	003	Rural health clinic services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	004	Other ambulatory services furnished by a rural health clinic
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	005	Professional laboratory services, Technical laboratory services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	006	Technical laboratory services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	007	Professional radiological services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	008	Technical radiological services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	010	Early and periodic screening and diagnosis and treatment (EPSDT) services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	011	Family planning services and supplies for individuals of child-bearing age
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	012	Physicians' services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	013	Medical and surgical services of a dentist
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	014	Outpatient substance abuse treatment services.
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	015	Medical or other remedial care or services, other than physicians' services, provided by licensed practitioners within the scope of practice as defined under State law
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	016	Home health services - Nursing services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	017	Home health services - Home health aide services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	018	Home health services - Medical supplies, equipment, and appliances suitable for use in the home
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	019	Home health services - Physical therapy provided by a home health agency or by a facility licensed by the State to provide medical rehabilitation services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	020	Home health services - Occupational therapy provided by a home health agency or by a facility licensed by the State to provide medical rehabilitation services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	021	Home health services - Speech pathology and audiology services provided by a home health agency or by a facility licensed by the State to provide medical rehabilitation services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	022	Private duty nursing services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	023	Advanced practice nurse services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	024	Pediatric nurse
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	025	Nurse-midwife service
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	026	Nurse practitioner services

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	027	Respiratory care for ventilator-dependent individuals
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	028	Clinic services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	029	Dental services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	030	Physical therapy services (when not provided under home health services)
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	031	Occupational therapy services (when not provided under home health services)
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	032	Speech, hearing, and language disorders services (when not provided under home health services)
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	035	Dentures
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	036	Medical equipment/prosthetic devices
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	037	Eyeglasses
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	038	Hearing Aids
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	039	Diagnostic services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	040	Screening services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	041	Preventive services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	042	Well-baby and well-child care services as defined by the State.
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	043	Rehabilitative services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	049	Outpatient mental health services, other than Outpatient substance abuse treatment services. This TOS includes services furnished in a State-operated mental hospital and including community-based services.
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	050	Inpatient substance abuse treatment services and residential substance abuse treatment services.
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	051	Personal care services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	052	Primary care case management services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	053	Targeted case management services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	054	Case Management services other than those that meet the definition of primary care case management services or targeted case management services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	055	Care coordination services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	056	Transportation services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	057	Enabling services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	060	Emergency hospital services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	061	Critical access hospital services - OT
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	062	HCBS - Case management services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	063	HCBS - Homemaker services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	064	HCBS - Home health aide services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	065	HCBS - Personal care services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	066	HCBS - Adult day health services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	067	HCBS - Habilitation services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	068	HCBS - Respite care services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	069	HCBS - Day treatment or other partial hospitalization services, psychosocial rehabilitation services and clinic services (whether or not furnished in a facility) for individuals with chronic mental illness
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	070	HCBS - Day Care
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	071	HCBS - Training for family members
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	072	HCBS - Minor modification to the home
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	073	HCBS - Other services requested by the agency and approved by CMS as cost effective and necessary to avoid institutionalization

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	074	HCBS - Expanded habilitation services - Prevocational services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	075	HCBS - Expanded habilitation services - Educational services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	076	HCBS - Expanded habilitation services - Supported employment services, which facilitate paid employment
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	077	HCBS-65-plus - Case management services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	078	HCBS-65-plus - Homemaker services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	079	HCBS-65-plus - Home health aide services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	080	HCBS-65-plus - Personal care services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	081	HCBS-65-plus - Adult day health services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	082	HCBS-65-plus - Respite care services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	083	HCBS-65-plus - Other medical and social services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	084	Sterilizations
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	085	Prenatal care and pre-pregnancy family planning services and supplies.
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	086	Other Pregnancy-related Procedures
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	087	Hospice services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	088	Any other health care services or items specified by the Secretary and not excluded under regulations.
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	089	Disposable medical supplies.
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	115	Residential care
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	119	Capitated payments to HMOs, HIOs, or PACE plans
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	120	Capitated payments for primary care case management (PCCM)
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	121	Premium payments for private health insurance
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	122	Capitated payments to prepaid health plans (PHPs)
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	123	Disproportionate share hospital (DSH) payments
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	127	Indian Health Service (IHS) - Family Plan
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	131	Drug Rebates
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	134	Supplemental payment outpatient
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	135	EHR payments to provider
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	136	In vitro diagnostic products (as defined in section 809.3(a) of title 21, Code of Federal Regulations) administered during any portion of the emergency period defined in paragraph (1)(B) of section 1135(g) beginning on or after the date of the enactment of this subparagraph for the detection of SARSCoV2 or the diagnosis of the virus that causes COVID19, and the administration of such in vitro diagnostic products
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	137	COVID-19 testing-related services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	138	Per member per month (PMPM) payments for health home services
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	139	Per member per month (PMPM) payments for Medicare Part A premiums
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	140	Per member per month (PMPM) payments for Medicare Part B premiums
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	141	Per member per month (PMPM) payments for Medicare Advantage Dual Special Needs Plans (D-SNP) Medicare Part C
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	142	Per member per month (PMPM) payments for Medicare Part D premiums
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	143	Per member per month (PMPM) payments for other payments
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	144	Payments to individuals for personal assistance services under 1915(j)
VVL.097	Type of Service (Other Claim) List	TYPE-OF-SERVICE	145	Medication Assisted Treatment (MAT) services and drugs for evidenced-based treatment of Opioid Use Disorder (OUD)
VVL.098	Patient Status List	PATIENT-STATUS	Not Applicable	A valid list of Patient Status codes can be purchased at https://www.nubc.org/license
VVL.099	Policy Owner Code List	POLICY-OWNER-CODE	01	Self

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.099	Policy Owner Code List	POLICY-OWNER-CODE	02	Spouse
VVL.099	Policy Owner Code List	POLICY-OWNER-CODE	03	Custodial Parent
VVL.099	Policy Owner Code List	POLICY-OWNER-CODE	04	Noncustodial Parent (Child Support Enforcement in effect)
VVL.099	Policy Owner Code List	POLICY-OWNER-CODE	05	Noncustodial Parent without child support enforcement in effect
VVL.099	Policy Owner Code List	POLICY-OWNER-CODE	06	Grandparent
VVL.099	Policy Owner Code List	POLICY-OWNER-CODE	07	Guardian
VVL.099	Policy Owner Code List	POLICY-OWNER-CODE	08	Domestic Partner
VVL.099	Policy Owner Code List	POLICY-OWNER-CODE	09	Other
VVL.100	Pregnancy Indicator List	PREGNANCY-IND	0	No
VVL.100	Pregnancy Indicator List	PREGNANCY-IND	1	Yes
VVL.101	Primary Language Engl Prof List	PRIMARY-LANGUAGE-ENGL-PROF-CODE	0	Very Well
VVL.101	Primary Language Engl Prof List	PRIMARY-LANGUAGE-ENGL-PROF-CODE	1	Well
VVL.101	Primary Language Engl Prof List	PRIMARY-LANGUAGE-ENGL-PROF-CODE	2	Not well
VVL.101	Primary Language Engl Prof List	PRIMARY-LANGUAGE-ENGL-PROF-CODE	3	No spoken proficiency
VVL.102	Provider Address Type List	ADDR-TYPE	1	Provider Billing
VVL.102	Provider Address Type List	ADDR-TYPE	2	Provider Mailing
VVL.102	Provider Address Type List	ADDR-TYPE	3	Provider Practice
VVL.102	Provider Address Type List	ADDR-TYPE	4	Provider Service Location
VVL.104	Provider Profit Status List	PROV-PROFIT-STATUS	01	501(C)(3) NON-PROFIT
VVL.104	Provider Profit Status List	PROV-PROFIT-STATUS	02	FOR-PROFIT, CLOSELY HELD
VVL.104	Provider Profit Status List	PROV-PROFIT-STATUS	03	FOR-PROFIT, PUBLICLY TRADED
VVL.104	Provider Profit Status List	PROV-PROFIT-STATUS	04	OTHER
VVL.104	Provider Profit Status List	PROV-PROFIT-STATUS	88	N/A - The individual only practices as part of a group
VVL.104	Provider Profit Status List	PROV-PROFIT-STATUS	99	Unknown
VVL.106	Provider Taxonomy List	PROV-CLASSIFICATION-TYPE = 1 (Provider Taxonomy)	Not Applicable	The key values pairs for this list is incorporated by reference and can be found at the following URL:
VVL.106	Provider Taxonomy List	PROV-CLASSIFICATION-TYPE = 1 (Provider Taxonomy)	Not Applicable	Link to Provider Taxonomy Code List
VVL.107	Race List	RACE	001	White
VVL.107	Race List	RACE	002	Black or African American
VVL.107	Race List	RACE	003	American Indian or Alaskan Native
VVL.107	Race List	RACE	004	Asian Indian
VVL.107	Race List	RACE	005	Chinese
VVL.107	Race List	RACE	006	Filipino
VVL.107	Race List	RACE	007	Japanese
VVL.107	Race List	RACE	008	Korean
VVL.107	Race List	RACE	009	Vietnamese
VVL.107	Race List	RACE	010	Other Asian
VVL.107	Race List	RACE	011	Asian Unknown
VVL.107	Race List	RACE	012	Native Hawaiian
VVL.107	Race List	RACE	013	Guamanian or Chamorro
VVL.107	Race List	RACE	014	Samoan
VVL.107	Race List	RACE	015	Other Pacific Islander
VVL.107	Race List	RACE	016	Native Hawaiian or Other Pacific Islander Unknown
VVL.107	Race List	RACE	017	Unspecified
VVL.108	Reimbursement Arrangement List	REIMBURSEMENT-ARRANGEMENT	01	Risk-based Capitation, no incentives or risk-sharing

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.108	Reimbursement Arrangement List	REIMBURSEMENT-ARRANGEMENT	02	Risk-based Capitation with Incentive Arrangements
VVL.108	Reimbursement Arrangement List	REIMBURSEMENT-ARRANGEMENT	03	Risk-based Capitation with other risk-sharing Arrangements
VVL.108	Reimbursement Arrangement List	REIMBURSEMENT-ARRANGEMENT	04	Non-Risk Capitation
VVL.108	Reimbursement Arrangement List	REIMBURSEMENT-ARRANGEMENT	05	Fee-For-Service
VVL.108	Reimbursement Arrangement List	REIMBURSEMENT-ARRANGEMENT	06	Primary Care Case Management Payment
VVL.108	Reimbursement Arrangement List	REIMBURSEMENT-ARRANGEMENT	07	Other
VVL.108	Reimbursement Arrangement List	REIMBURSEMENT-ARRANGEMENT	08	Primary Care Case Management Payment plus Fee-For-Service
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE		0 Individual is not eligible for Medicaid or CHIP during the month.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	1	Individual is eligible for Medicaid or CHIP and entitled to the full scope of Medicaid or CHIP benefits.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	2	Individual is eligible for Medicaid or Medicaid-Expansion CHIP, but only entitled to restricted benefits based on alien status.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	3	Individual is eligible for Medicaid but only entitled to restricted benefits based on Medicare dual-eligibility status (e.g., QMB, SLMB, QDWI, QI).
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	4	Individual is eligible for Medicaid or CHIP but is only entitled to restricted benefits for pregnancy-related services, including services that do and those that do not meet the Minimum Essential Coverage standard.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	5	Individual is eligible for Medicaid or Medicaid-Expansion CHIP, but for reasons other than alien, dual-eligibility, or pregnancy-related status, is only entitled to restricted benefits (e.g., restricted benefits based upon substance abuse, medically needy, or other criteria) that meet the standard for Minimum Essential Coverage.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	6	Individual is eligible for Medicaid or Medicaid-Expansion CHIP but only entitled to restricted benefits for family planning services.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	7	Individual is eligible for Medicaid and entitled to Medicaid benefits under an alternative package of benchmark-equivalent coverage, as enacted by the Deficit Reduction Act of 2005.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	A	Individual is eligible for Medicaid and entitled to benefits under the Psychiatric Residential Treatment Facilities Demonstration Grant Program (PRTF), as enacted by the Deficit Reduction Act of 2005.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	B	Individual is eligible for Medicaid and entitled to Medicaid benefits using a Health Opportunity Account (HOA)
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	C	Individual is eligible for S-separate CHIP dental coverage (supplemental dental wraparound benefit to employer-sponsored insurance)
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	D	Individual is eligible for Medicaid and entitled to benefits under a Money Follows the Person (MFP) rebalancing demonstration, as enacted by the Deficit Reduction Act of 2005, to allow States to develop community based long term care opportunities.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	E	Individual is eligible for Medicaid or Medicaid-Expansion CHIP, but for reasons other than alien, dual-eligibility, or pregnancy-related status, is only entitled to restricted benefits (e.g., restricted benefits based on substance abuse, medically needy, or other criteria) that do not meet the standard for Minimum Essential Coverage.
VVL.109	Restricted Benefits Code List	RESTRICTED-BENEFITS-CODE	F	Individual is eligible for Medicaid but is only entitled to restricted benefits for medical assistance for COVID-19 diagnostic products and any visit described as a COVID-19 testing-related service for which payment may be made under the State plan during any portion of the public health emergency period, beginning March 18, 2020, as described in Sections 1902(a)(10)(A)(ii)(XXIII), 1902(ss) and clause XVIII in the matter following 1902(a)(10)(G) of the Social Security Act.
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	011	Family planning services and supplies for individuals of child-bearing age

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	018	Home health services - Medical supplies, equipment, and appliances suitable for use in the home
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	033	Prescribed drugs
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	034	Over-the-counter medications.
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	036	Medical equipment/prosthetic devices
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	085	Prenatal care and pre-pregnancy family planning services and supplies.
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	089	Disposable medical supplies.
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	127	Indian Health Service (IHS) - Family Plan
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	131	Drug Rebates
				In vitro diagnostic products (as defined in section 809.3(a) of title 21, Code of Federal Regulations) administered during any portion of the emergency period defined in paragraph (1)(B) of section 1135(g) beginning on or after the date of the enactment of this subparagraph for the detection of SARS-CoV-2 or the diagnosis of the virus that causes COVID-19, and the administration of such in vitro diagnostic products
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	136	
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	137	COVID-19 testing-related services
				Medication Assisted Treatment (MAT) services and drugs for evidenced-based treatment of Opioid Use Disorder (OUD)
VVL.110	Type of Service (RX Claim) List	TYPE-OF-SERVICE	145	
VVL.111	SSDI Indicator List	SSDI-IND	0	No
VVL.111	SSDI Indicator List	SSDI-IND	1	Yes
VVL.112	SSI Indicator List	SSI-IND	0	No
VVL.112	SSI Indicator List	SSI-IND	1	Yes
VVL.113	SSN Indicator List	SSN-INDICATOR	0	State does not use SSN as MSIS-IDENTIFICATION-NUMBER
VVL.113	SSN Indicator List	SSN-INDICATOR	1	State uses SSN as MSIS-IDENTIFICATION-NUMBE
VVL.114	SSN Verification Flag List	SSN-VERIFICATION-FLAG	0	SSN not verified
VVL.114	SSN Verification Flag List	SSN-VERIFICATION-FLAG	1	SSN successfully verified by SSA
VVL.114	SSN Verification Flag List	SSN-VERIFICATION-FLAG	2	SSN is pending SSA verification
VVL.117	State Plan Option Type List	STATE-PLAN-OPTION-TYPE	01	Community First Choice
VVL.117	State Plan Option Type List	STATE-PLAN-OPTION-TYPE	02	1915(i)
VVL.117	State Plan Option Type List	STATE-PLAN-OPTION-TYPE	03	1915(j)
VVL.117	State Plan Option Type List	STATE-PLAN-OPTION-TYPE	04	1932(a)
VVL.117	State Plan Option Type List	STATE-PLAN-OPTION-TYPE	05	1915(a)
VVL.117	State Plan Option Type List	STATE-PLAN-OPTION-TYPE	06	1937 (Alternative Benefit Plans)
VVL.119	TANF Cash Code List	TANF-CASH-CODE	0	Individual was not eligible for medicaid
VVL.119	TANF Cash Code List	TANF-CASH-CODE	1	Individual did not receive TANF benefits
				Individual did receive TANF benefits (States should only use this value if they can accurately separate eligible receiving TANF benefits from other 1931 eligible)
VVL.119	TANF Cash Code List	TANF-CASH-CODE	2	
VVL.120	Tooth Surface Code List	TOOTH-SURFACE-CODE	B	Buccal - The surface of the tooth which is closest to the cheek.
				Distal - The surface of the tooth facing away from an invisible line drawn vertically through the center of the face.
VVL.120	Tooth Surface Code List	TOOTH-SURFACE-CODE	D	
VVL.120	Tooth Surface Code List	TOOTH-SURFACE-CODE	F	Facial - The surface of a tooth that is directed towards the face.
VVL.120	Tooth Surface Code List	TOOTH-SURFACE-CODE	I	Incisal - The cutting edges of the anterior teeth.
VVL.120	Tooth Surface Code List	TOOTH-SURFACE-CODE	L	Lingual - The surface of the tooth that is directed towards the tongue.
				Mesial - The surface of a tooth which faces toward an invisible line drawn vertically through the center of the face.
VVL.120	Tooth Surface Code List	TOOTH-SURFACE-CODE	M	
VVL.120	Tooth Surface Code List	TOOTH-SURFACE-CODE	O	Occlusa - The surfaces of the posterior (back) teeth which provides the chewing function.
VVL.121	TPL Entity Address Type List	TPL-ENTITY-ADDR-TYPE	06	TPL-Entity Corporate Location

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.121	TPL Entity Address Type List	TPL-ENTITY-ADDR-TYPE	07	TPL-Entity Mailing
VVL.121	TPL Entity Address Type List	TPL-ENTITY-ADDR-TYPE	08	TPL-Entity Satellite Location
VVL.121	TPL Entity Address Type List	TPL-ENTITY-ADDR-TYPE	09	TPL-Entity Billing
VVL.121	TPL Entity Address Type List	TPL-ENTITY-ADDR-TYPE	10	TPL-Entity Correspondence
VVL.121	TPL Entity Address Type List	TPL-ENTITY-ADDR-TYPE	11	TPL-Other
VVL.122	TPL Health Insurance Coverage Indicator List	TPL-HEALTH-INSURANCE-COVERAGE-IND	0	Medicaid/CHIP eligible individual has no TPL insurance coverage.
VVL.122	TPL Health Insurance Coverage Indicator List	TPL-HEALTH-INSURANCE-COVERAGE-IND	1	Medicaid/CHIP eligible individual does have TPL insurance coverage.
VVL.123	TPL Other Coverage Indicator List	TPL-OTHER-COVERAGE-IND	0	Medicaid/CHIP eligible individual has no other TPL funding available.
VVL.123	TPL Other Coverage Indicator List	TPL-OTHER-COVERAGE-IND	1	Medicaid/CHIP eligible individual does have other TPL funding available.
VVL.124	Type of Bill List	TYPE-OF-BILL	Not Applicable	1st Digit must always be a zero ('0')
VVL.124	Type of Bill List	TYPE-OF-BILL	Not Applicable	2nd Digit-Type of Facility
VVL.124	Type of Bill List	TYPE-OF-BILL	1	Hospital
VVL.124	Type of Bill List	TYPE-OF-BILL	2	Skilled Nursing
VVL.124	Type of Bill List	TYPE-OF-BILL	3	Home Health
VVL.124	Type of Bill List	TYPE-OF-BILL	4	Religious Nonmedical (Hospital)
VVL.124	Type of Bill List	TYPE-OF-BILL	5	Reserved for national assignment (discontinued effective 10/1/05).
VVL.124	Type of Bill List	TYPE-OF-BILL	6	Intermediate Care
VVL.124	Type of Bill List	TYPE-OF-BILL	7	Clinic or Hospital Based Renal Dialysis Facility (requires special information in second digit below).
VVL.124	Type of Bill List	TYPE-OF-BILL	8	Special facility or hospital ASC surgery (requires special information in second digit below).
VVL.124	Type of Bill List	TYPE-OF-BILL	9	Reserved for National Assignment
VVL.124	Type of Bill List	TYPE-OF-BILL	Not Applicable	3rd Digit-Bill Classification (Except Clinics and Special Facilities)
VVL.124	Type of Bill List	TYPE-OF-BILL	1	Inpatient
VVL.124	Type of Bill List	TYPE-OF-BILL	2	Inpatient
VVL.124	Type of Bill List	TYPE-OF-BILL	3	Outpatient
VVL.124	Type of Bill List	TYPE-OF-BILL	4	Other
VVL.124	Type of Bill List	TYPE-OF-BILL	5	Intermediate Care - Level I
VVL.124	Type of Bill List	TYPE-OF-BILL	6	Intermediate Care - Level II
VVL.124	Type of Bill List	TYPE-OF-BILL	7	Reserved for national assignment (discontinued effective 10/1/05).
VVL.124	Type of Bill List	TYPE-OF-BILL	8	Swing Bed (may be used to indicate billing for SNF level of care in a hospital with an approved swing bed agreement).
VVL.124	Type of Bill List	TYPE-OF-BILL	9	Reserved for National Assignment
VVL.124	Type of Bill List	TYPE-OF-BILL	Not Applicable	3rd Digit-Classification (Clinics Only)
VVL.124	Type of Bill List	TYPE-OF-BILL	1	Rural Health Clinic (RHC)
VVL.124	Type of Bill List	TYPE-OF-BILL	2	Hospital Based or Independent Renal Dialysis Facility
VVL.124	Type of Bill List	TYPE-OF-BILL	3	Free Standing Provider-Based Federally Qualified Health Center (FQHC)
VVL.124	Type of Bill List	TYPE-OF-BILL	4	Other Rehabilitation Facility (ORF)
VVL.124	Type of Bill List	TYPE-OF-BILL	5	Comprehensive Outpatient Rehabilitation Facility (CORF)
VVL.124	Type of Bill List	TYPE-OF-BILL	6	Community Mental Health Center (CMHC)
VVL.124	Type of Bill List	TYPE-OF-BILL	7	Reserved for national assignment (discontinued effective 10/1/05)
VVL.125	Type of Bill List	TYPE-OF-BILL	8	Licensed Freestanding Emergency Medical Facility (Effective 4/1/12)
VVL.124	Type of Bill List	TYPE-OF-BILL	9	OTHER
VVL.124	Type of Bill List	TYPE-OF-BILL	Not Applicable	3rd Digit-Classification (Special Facilities Only)
VVL.124	Type of Bill List	TYPE-OF-BILL	1	Hospice (Nonhospital Based)

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.124	Type of Bill List	TYPE-OF-BILL	2	Hospice (Hospital Based)
VVL.124	Type of Bill List	TYPE-OF-BILL	3	Ambulatory Surgical Center Services to Hospital Outpatients
VVL.124	Type of Bill List	TYPE-OF-BILL	4	Free Standing Birthing Center
VVL.124	Type of Bill List	TYPE-OF-BILL	5	Critical Access Hospital
VVL.125	Type of Bill List	TYPE-OF-BILL	6	Residential Facility
VVL.126	Type of Bill List	TYPE-OF-BILL	7	Freestanding Non-residential Opioid Treatment Program (Effective 1/1/21)
VVL.125	Type of Bill List	TYPE-OF-BILL	8	Reserved for National Assignment
VVL.124	Type of Bill List	TYPE-OF-BILL	9	OTHER
VVL.124	Type of Bill List	TYPE-OF-BILL	Not Applicable	4th Digit-Frequency
VVL.124	Type of Bill List	TYPE-OF-BILL	A	Admission/Election Notice
VVL.124	Type of Bill List	TYPE-OF-BILL	B	Hospice/Medicare Coordinated Care Demonstration/Religious Nonmedical Health Care Institution Termination/Revocation Notice
VVL.124	Type of Bill List	TYPE-OF-BILL	C	Hospice Change of Provider Notice
VVL.124	Type of Bill List	TYPE-OF-BILL	D	Hospice/Medicare Coordinated Care Demonstration/Religious Nonmedical Health Care Institution Void/Cancel
VVL.124	Type of Bill List	TYPE-OF-BILL	E	Hospice Change of Ownership
VVL.124	Type of Bill List	TYPE-OF-BILL	F	Beneficiary Initiated Adjustment Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	G	CWF Initiated Adjustment Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	H	CMS Initiated Adjustment Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	I	FI Adjustment Claim (Other than QIO or Provider
VVL.124	Type of Bill List	TYPE-OF-BILL	J	Initiated Adjustment Claim-Other
VVL.124	Type of Bill List	TYPE-OF-BILL	K	OIG Initiated Adjustment Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	M	MSP Initiated Adjustment Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	P	QIO Adjustment Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	0	Nonpayment/Zero Claims
VVL.124	Type of Bill List	TYPE-OF-BILL	1	Admit Through Discharge Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	2	Interim-First Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	3	Interim-Continuing Claims (Not valid for PPS Bills)
VVL.124	Type of Bill List	TYPE-OF-BILL	4	Interim-Last Claim (Not valid for PPS Bills)
VVL.124	Type of Bill List	TYPE-OF-BILL	5	Late Charge Only
VVL.124	Type of Bill List	TYPE-OF-BILL	7	Replacement of Prior Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	8	Void/Cancel of a Prior Claim
VVL.124	Type of Bill List	TYPE-OF-BILL	9	Final Claim for a Home Health PPS Episode
VVL.125	Type of Claim List	TYPE-OF-CLAIM	1	A Fee-For-Service Medicaid or Medicaid-expansion CHIP Claim
VVL.125	Type of Claim List	TYPE-OF-CLAIM	2	Medicaid or Medicaid-expansion CHIP Capitated Payment
VVL.125	Type of Claim List	TYPE-OF-CLAIM	3	Medicaid or Medicaid-expansion CHIP Managed Care Encounter record that simulates a bill for a service rendered to a patient covered under some form of Capitation Plan. This includes billing records submitted by providers to non-state entities (e.g., MCOs, health plans) for which the State has no financial liability since the risk entity has already received a capitated payment from the State.
VVL.125	Type of Claim List	TYPE-OF-CLAIM	4	Medicaid or Medicaid-expansion CHIP Service Tracking Claim
VVL.125	Type of Claim List	TYPE-OF-CLAIM	5	Medicaid or Medicaid-expansion CHIP Supplemental Payment (above capitation fee or above negotiated rate) (e.g., FQHC additional reimbursement)
VVL.125	Type of Claim List	TYPE-OF-CLAIM	A	Separate CHIP (Title XXI) claim: A Fee-for-Service Claim
VVL.125	Type of Claim List	TYPE-OF-CLAIM	B	Separate CHIP (Title XXI) claim: Capitated Payment

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.125	Type of Claim List	TYPE-OF-CLAIM	C	Separate CHIP (Title XXI) managed care encounter record that simulates a bill for a service or items rendered to a patient covered under some form of Capitation Plan. This includes billing records submitted by providers to non-State entities (e.g., MCOs, health plans) for which a state has no financial liability as the at-risk entity has already received a capitated payment from the state
VVL.125	Type of Claim List	TYPE-OF-CLAIM	D	Separate CHIP (Title XXI) Service Tracking Claim
VVL.125	Type of Claim List	TYPE-OF-CLAIM	E	Separate CHIP (Title XXI) claim for a supplemental payment (above capitation fee or above negotiated rate) (e.g., FQHC additional reimbursement)
VVL.125	Type of Claim List	TYPE-OF-CLAIM	U	Other FFS claim
VVL.125	Type of Claim List	TYPE-OF-CLAIM	V	Other Capitated Payment
VVL.125	Type of Claim List	TYPE-OF-CLAIM	W	Other Managed Care Encounter
VVL.125	Type of Claim List	TYPE-OF-CLAIM	X	Non-Medicaid/CHIP service tracking claims
VVL.125	Type of Claim List	TYPE-OF-CLAIM	Y	Other Supplemental Payment
VVL.125	Type of Claim List	TYPE-OF-CLAIM	Z	Denied claims
VVL.126	Type of Hospital List	TYPE-OF-HOSPITAL	00	Not a hospital
VVL.126	Type of Hospital List	TYPE-OF-HOSPITAL	01	Inpatient Hospital
VVL.126	Type of Hospital List	TYPE-OF-HOSPITAL	02	Outpatient Hospital
VVL.126	Type of Hospital List	TYPE-OF-HOSPITAL	03	Critical Access Hospital
VVL.126	Type of Hospital List	TYPE-OF-HOSPITAL	04	Swing Bed Hospital
VVL.126	Type of Hospital List	TYPE-OF-HOSPITAL	05	Inpatient Psychiatric Hospital
VVL.126	Type of Hospital List	TYPE-OF-HOSPITAL	06	IHS Hospital
VVL.126	Type of Hospital List	TYPE-OF-HOSPITAL	07	Childrens Hospital
VVL.126	Type of Hospital List	TYPE-OF-HOSPITAL	08	Other
VVL.127	Type of Other Third-Party Liability List	TYPE-OF-OTHER-THIRD-PARTY-LIABILITY	1	Tort/Casualty Claim
VVL.127	Type of Other Third-Party Liability List	TYPE-OF-OTHER-THIRD-PARTY-LIABILITY	2	Medical Malpractice
VVL.127	Type of Other Third-Party Liability List	TYPE-OF-OTHER-THIRD-PARTY-LIABILITY	3	Estate (an estate, annuity or designated trust)
VVL.127	Type of Other Third-Party Liability List	TYPE-OF-OTHER-THIRD-PARTY-LIABILITY	4	Liens
VVL.127	Type of Other Third-Party Liability List	TYPE-OF-OTHER-THIRD-PARTY-LIABILITY	5	Workers Compensation
VVL.127	Type of Other Third-Party Liability List	TYPE-OF-OTHER-THIRD-PARTY-LIABILITY	6	Payments from an individual or group who has either voluntarily or been assigned legal responsibility for the health care of one or more Medicaid recipients; fraternal groups; unions
VVL.127	Type of Other Third-Party Liability List	TYPE-OF-OTHER-THIRD-PARTY-LIABILITY	7	Other - unidentified
VVL.129	Veteran Indicator List	VETERAN-IND	0	No
VVL.129	Veteran Indicator List	VETERAN-IND	1	Yes
VVL.130	Waiver Type List	WAIVER-TYPE	01	1115 Other demonstration
VVL.130	Waiver Type List	WAIVER-TYPE	02	1915(b)(1) - These waivers permit freedom-of-choice or mandatory managed care with some voluntary managed care.
VVL.130	Waiver Type List	WAIVER-TYPE	03	1915(b)(2) - These waivers allow states to use enrollment brokers.
VVL.130	Waiver Type List	WAIVER-TYPE	04	1915(b)(3) - These waivers allow states to use savings to provide additional services that are not in the State Plan.
VVL.130	Waiver Type List	WAIVER-TYPE	05	1915(b)(4) - These waivers allow fee for service selective contracting.
VVL.130	Waiver Type List	WAIVER-TYPE	06	1915(c) - Aged and Disabled
VVL.130	Waiver Type List	WAIVER-TYPE	07	1915(c) - Aged
VVL.130	Waiver Type List	WAIVER-TYPE	08	1915(c) - Physical Disabilities
VVL.130	Waiver Type List	WAIVER-TYPE	09	1915(c) - Intellectual Disabilities
VVL.130	Waiver Type List	WAIVER-TYPE	10	1915(c) - Intellectual and Developmental Disabilities
VVL.130	Waiver Type List	WAIVER-TYPE	11	1915(c) - Brain Injury

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.130	Waiver Type List	WAIVER-TYPE	12	1915(c) - HIV/AIDS
VVL.130	Waiver Type List	WAIVER-TYPE	13	1915(c) - Technology Dependent or Medically Fragile
VVL.130	Waiver Type List	WAIVER-TYPE	14	1915(c) - Disabled (other)
VVL.130	Waiver Type List	WAIVER-TYPE	15	1915(c) - Enrolled in 1915(c) waiver for unspecified or unknown populations
VVL.130	Waiver Type List	WAIVER-TYPE	16	1915(c) - Autism/Autism spectrum disorder
VVL.130	Waiver Type List	WAIVER-TYPE	17	1915(c) - Developmental Disabilities
VVL.130	Waiver Type List	WAIVER-TYPE	18	1915(c) - Mental Illness-Age 18 or Older
VVL.130	Waiver Type List	WAIVER-TYPE	19	1915(c) - Mental Illness-Under Age 18
VVL.130	Waiver Type List	WAIVER-TYPE	20	1915(c) waiver concurrent with an 1115 or 1915(b) managed care authority
VVL.130	Waiver Type List	WAIVER-TYPE	21	1115 HIFA Waiver - Health Insurance Flexibility and Accountability (HIFA) demonstration
VVL.130	Waiver Type List	WAIVER-TYPE	22	1115 Pharmacy demonstration
VVL.130	Waiver Type List	WAIVER-TYPE	23	1115 Disaster-related demonstration
VVL.130	Waiver Type List	WAIVER-TYPE	24	1115 Family planning demonstration
VVL.130	Waiver Type List	WAIVER-TYPE	25	1115 Substance use demonstration
VVL.130	Waiver Type List	WAIVER-TYPE	26	1115 Premium Assistance demonstration
VVL.130	Waiver Type List	WAIVER-TYPE	27	1115 Beneficiary engagement demonstration
VVL.130	Waiver Type List	WAIVER-TYPE	28	1115 Former foster care youth from another state
VVL.130	Waiver Type List	WAIVER-TYPE	29	1115 Managed long term services and support
VVL.130	Waiver Type List	WAIVER-TYPE	30	1115 Delivery system reform
VVL.130	Waiver Type List	WAIVER-TYPE	31	1332 Demonstration
VVL.130	Waiver Type List	WAIVER-TYPE	32	1915(b) waiver
VVL.130	Waiver Type List	WAIVER-TYPE	33	1915(c) waiver
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	1A	Inpatient Hospital - Reg. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	1B	Inpatient Hospital - DSH
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	1C	Inpatient Hospital - Sup. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	1D	Inpatient Hospital - GME Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	2A	Mental Health Facility Services - Reg. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	2B	Mental Health Facility - DSH
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	3A	Nursing Facility Services - Reg. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	3B	Nursing Facility Services - Sup. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	4A	Intermediate Care Facility Services Individuals with Intellectual Disabilities: Public Providers
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	4B	Intermediate Care Facility Services - Individuals with Intellectual Disabilities: Private Providers
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	4C	Intermediate Care Facility Services Individuals with Intellectual Disabilities: Supplemental Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	5A	Physician & Surgical Services - Reg. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	5B	Physician & Surgical Services - Sup. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	5C	Physician & Surgical Services - Evaluation and Management
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	5D	Physician & Surgical Services - Vaccine codes
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	6A	Outpatient Hospital Services - Reg. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	6B	Outpatient Hospital Services - Sup. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	7	Prescribed Drugs
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	7A1	Drug Rebate Offset - National
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	7A2	Drug Rebate Offset - State Sidebar Agreement
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	7A3	MCO - National Agreement
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	7A4	MCO - State Sidebar Agreement
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	7A5	Increased ACA OFFSET - Fee for Service - 100%

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	7A6	Increased ACA OFFSET - MCO - 100%
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	8	Dental Services
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	9A	Other Practitioners Services - Reg. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	9B	Other Practitioners Services - Sup. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	10	Clinic Services
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	11	Laboratory/Radiological
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	12	Home Health Services
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	13	Sterilizations
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	14	Other Pregnancy-related Procedures
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	15	EPSDT Screening
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	16	Rural Health
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	17A	Medicare - Part A
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	17B	Medicare - Part B
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	17C1	120% - 134% Of Poverty
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	17D	Coinsurance
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18A	Medicaid - MCO
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18A1	Medicaid MCO - Evaluation and Management
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18A2	Medicaid MCO - Vaccine codes
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18A3	Medicaid MCO - Community First Choice
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18A4	Medicaid MCO - Preventive Services Grade A OR B, ACIP Vaccines and their Admin
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B1	Prepaid Ambulatory Health Plan
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B1a	MCO PAHP - Evaluation and Management
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B1b	MCO PAHP - Vaccine codes
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B1c	MCO PAHP - Community First Choice
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B1d	MCO PAHP - Preventive Services Grade A OR B, ACIP Vaccines and their Admin
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B2	Prepaid Inpatient Health Plan
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B2a	MCO PIHP - Evaluation and Management
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B2b	MCO PIHP - Vaccine codes
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B2c	MCO PIHP - Community First Choice
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18B2d	MCO PIHP - Preventive Services Grade A OR B, ACIP Vaccines and their Admin
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18C	Medicaid - Group Health
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18D	Medicaid - Coinsurance
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	18E	Medicaid - Other
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	19A	Home & Community-Based Services - Reg. Pay. (Waiv)
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	19B	Home & Community-Based Services - St. Plan 1915(i) Only Pay.
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	19C	Home & Community-Based Services - St. Plan 1915(j) Only Pay.
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	19D	Home & Community Based Services State Plan 1915(k) Community First Choice
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	22	All-Inclusive Care Elderly
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	23A	Personal Care Services - Reg. Payments
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	23B	Personal Care Services - SDS 1915(j)
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	24A	Targeted Case Management Services - Com. Case-Man.
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	24B	Case Management - State Wide
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	25	Primary Care Case Management
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	26	Hospice Benefits
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	27	Emergency Services for Undocumented Aliens
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	28	Federally-Qualified Health Center

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	29	Non-Emergency Medical Transportation
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	30	Physical Therapy
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	31	Occupational Therapy
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	32	Services for Speech, Hearing & Language
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	33	Prosthetic Devices, Dentures, Eyeglasses
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	34	Diagnostic Screening & Preventive Services
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	34A	Preventive Services Grade A OR B, ACIP Vaccines and their Admin
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	35	Nurse Mid-Wife
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	36	Emergency Hospital Services
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	37	Critical Access Hospitals
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	38	Nurse Practitioner Services
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	39	School Based Services
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	40	Rehabilitative Services (non-school-based)
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	41	Private Duty Nursing
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	42	Freestanding Birth Center
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	43	Health Home for Enrollees w Chronic Conditions
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	44	Tobacco Cessation for Pregnant Women
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	45	Health Homes for Substance-Use-Disorder Enrollees per section 1006 of the SUPPORT for Patients and Communities Act
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	49	Other Care Services
VVL.131	XIX MBESCBES Category of Service List	XIX-MBESCBES-CATEGORY-OF-SERVICE	50	Total
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	1A	Premiums - Up To 150%: Gross Premiums Paid
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	1B	Premiums - Up To 150%: Cost Sharing Offset
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	1C	Premiums - Over 150%: Gross Premiums Paid
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	1D	Premiums - Over 150%: Cost Sharing Offset
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	2	Inpatient Hospital
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	3	Inpatient Mental Health
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	4	Nursing Care Services
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	5	Physician/Surgical
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	6	Outpatient Hospital
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	7	Outpatient Mental Health
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	8	Prescribed Drugs
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	8A	Drug Rebate
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	9	Dental Services
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	10	Vision Services
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	11	Other Practitioners
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	12	Clinic Services
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	13	Therapy Services
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	14	Laboratory/Radiological
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	15	Medical Equipment
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	16	Family Planning
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	17	Other Pregnancy-related Procedures
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	18	Screening Services
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	19	Home Health
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	20	Health Services Initiatives
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	21	Home and Community

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	22	Hospice
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	23	Medical Transportation
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	24	Case Management
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	25	Translation and Interpretation
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	31	Other Services
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	32	Outreach
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	32A	Increased Outreach and Enrollment of Indians
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	32B	Increase outreach and enrollment of children through premium subsidies
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	33	Administration
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	34	PERM Administration
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	35	Citizenship Verification Technology CHIPRA
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	35A	CVT Development
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	35B	CVT Operation
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	48	Balance
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	49	Less: Collections
VVL.132	XXI MBESCBES Category of Service List	XXI-MBESCBES-CATEGORY-OF-SERVICE	50	Total
VVL.133	Other TPL Collection List	OTHER-TPL-COLLECTION	000	Not Applicable
VVL.133	Other TPL Collection List	OTHER-TPL-COLLECTION	001	Third Party Resource is Casualty/Tort
VVL.133	Other TPL Collection List	OTHER-TPL-COLLECTION	002	Third Party Resource is Estate
VVL.133	Other TPL Collection List	OTHER-TPL-COLLECTION	003	Third Party Resource is Lien (TEFRA)
VVL.133	Other TPL Collection List	OTHER-TPL-COLLECTION	004	Third Party Resource is Lien (Other)
VVL.133	Other TPL Collection List	OTHER-TPL-COLLECTION	005	Third Party Resource is Workers Compensation
VVL.133	Other TPL Collection List	OTHER-TPL-COLLECTION	006	Third Party Resource is Medical Malpractice
VVL.133	Other TPL Collection List	OTHER-TPL-COLLECTION	007	Third Party Resource is Other
VVL.134	Health Home Provider Indicator List	HEALTH-HOME-PROV-IND	0	No
VVL.134	Health Home Provider Indicator List	HEALTH-HOME-PROV-IND	1	Yes
VVL.136	Medicare Combined Deductible Indicator List	MEDICARE-COMB-DED-IND	0	Amount not combined with coinsurance amount
VVL.136	Medicare Combined Deductible Indicator List	MEDICARE-COMB-DED-IND	1	Amount combined with coinsurance amount
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	00	None
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	01	Anthrax
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	02	Cervical Cancer)
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	03	Diphtheria
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	04	Hepatitis A
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	05	Hepatitis B
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	06	Haemophilus influenza type b (Hib)
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	07	Human Papillomavirus (HPV)
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	08	H1N1 Flu
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	09	Seasonal Flu
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	10	Japanese Encephalitis
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	11	Lyme Disease
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	12	Measles
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	13	Meningococcal
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	14	Monkey pox
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	15	Mumps

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	16	Pertussis
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	17	Pneumococcal
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	18	Poliomyelitis
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	19	Rabies
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	20	Rotavirus
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	21	Rubella
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	22	Shingles
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	23	Smallpox
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	24	Tetanus
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	25	Tuberculosis
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	26	Typhoid Fever
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	27	Varicella
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	28	Yellow Fever
VVL.137	Immunization Type List	IMMUNIZATION-TYPE	29	Other
VVL.138	Medicare Reimbursement Type List	MEDICARE-REIM-TYPE	01	IPPS - Acute Inpatient PPS
VVL.138	Medicare Reimbursement Type List	MEDICARE-REIM-TYPE	02	LTCHPPS - Long-term Care Hospital PPS
VVL.138	Medicare Reimbursement Type List	MEDICARE-REIM-TYPE	03	SNFPPS - Skilled Nursing Facility PPS
VVL.138	Medicare Reimbursement Type List	MEDICARE-REIM-TYPE	04	HHPPS - Home Health PPS
VVL.138	Medicare Reimbursement Type List	MEDICARE-REIM-TYPE	05	IRFPPS - Inpatient Rehabilitation Facility PPS
VVL.138	Medicare Reimbursement Type List	MEDICARE-REIM-TYPE	06	IPFPPS - Inpatient Psychiatric Facility PPS
VVL.138	Medicare Reimbursement Type List	MEDICARE-REIM-TYPE	07	OPPS - Outpatient PPS
VVL.138	Medicare Reimbursement Type List	MEDICARE-REIM-TYPE	08	Fee Schedules (for physicians, DME, ambulance, and clinical lab)
VVL.138	Medicare Reimbursement Type List	MEDICARE-REIM-TYPE	09	Part C Hierarchical Condition Category Risk Assessment (CMS-HCC RA) Capitation Payment Model
VVL.139	Program Type List	PROGRAM-TYPE	00	No Special Program
VVL.139	Program Type List	PROGRAM-TYPE	01	EPSDT
VVL.139	Program Type List	PROGRAM-TYPE	02	Family Planning
VVL.139	Program Type List	PROGRAM-TYPE	03	Rural Health Clinic
VVL.139	Program Type List	PROGRAM-TYPE	04	Federally Qualified Health Centers (FQHC)
VVL.139	Program Type List	PROGRAM-TYPE	05	Indian Health Services
VVL.139	Program Type List	PROGRAM-TYPE	07	Home and Community Based Care Waiver Services
VVL.139	Program Type List	PROGRAM-TYPE	08	Money Follows the Person (MFP)
VVL.139	Program Type List	PROGRAM-TYPE	10	BIP - Balancing Incentive Payment
VVL.139	Program Type List	PROGRAM-TYPE	11	Community First Choice (1915(k))
VVL.139	Program Type List	PROGRAM-TYPE	12	Medicaid Emergency Psychiatric Demonstration
VVL.139	Program Type List	PROGRAM-TYPE	13	Home and Community Based Services (HCBS) State Plan Option (1915(i))
VVL.139	Program Type List	PROGRAM-TYPE	14	State Plan CHIP
VVL.139	Program Type List	PROGRAM-TYPE	15	Psychiatric Residential Treatment Facilities Demonstration Grant Program (PRTF)
VVL.139	Program Type List	PROGRAM-TYPE	16	1915(j) (Self- directed personal assistance services/personal care under State Plan or 1915(c) waiver)
VVL.139	Program Type List	PROGRAM-TYPE	17	COVID-19 Testing and Testing-Related Services (1905(a)(3) and 2103(c))
VVL.140	Split Claim Indicator List	SPLIT-CLAIM-IND	0	No
VVL.140	Split Claim Indicator List	SPLIT-CLAIM-IND	1	Yes
VVL.141	Service Tracking Type List	SERVICE-TRACKING-TYPE	00	Not a Service Tracking Claim
VVL.141	Service Tracking Type List	SERVICE-TRACKING-TYPE	01	Drug Rebate
VVL.141	Service Tracking Type List	SERVICE-TRACKING-TYPE	02	DSH Payment

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.141	Service Tracking Type List	SERVICE-TRACKING-TYPE	03	Lump Sum Payment
VVL.141	Service Tracking Type List	SERVICE-TRACKING-TYPE	04	Cost Settlement
VVL.141	Service Tracking Type List	SERVICE-TRACKING-TYPE	05	Supplemental
VVL.141	Service Tracking Type List	SERVICE-TRACKING-TYPE	06	Other
VVL.142	Other Insurance Indicator List	OTHER-INSURANCE-IND	0	No
VVL.142	Other Insurance Indicator List	OTHER-INSURANCE-IND	1	Yes
VVL.143	Payment Level Indicator List	PAYMENT-LEVEL-IND	1	Claim payment is determined at the header
VVL.143	Payment Level Indicator List	PAYMENT-LEVEL-IND	2	Claim payment is determined at the individual lines
VVL.144	License Type List	LICENSE-TYPE	1	State, county, or municipality professional or business license
VVL.144	License Type List	LICENSE-TYPE	2	DEA license
VVL.144	License Type List	LICENSE-TYPE	3	Professional society accreditation
VVL.144	License Type List	LICENSE-TYPE	4	CLIA accreditation
VVL.144	License Type List	LICENSE-TYPE	5	Other
VVL.146	Provider Identifier Type List	PROV-IDENTIFIER-TYPE	1	State-specific Medicaid Provider ID
VVL.146	Provider Identifier Type List	PROV-IDENTIFIER-TYPE	2	NPI
VVL.146	Provider Identifier Type List	PROV-IDENTIFIER-TYPE	3	Medicare ID
VVL.146	Provider Identifier Type List	PROV-IDENTIFIER-TYPE	4	NCPDP ID
VVL.146	Provider Identifier Type List	PROV-IDENTIFIER-TYPE	5	Federal Tax ID
VVL.146	Provider Identifier Type List	PROV-IDENTIFIER-TYPE	6	State Tax ID
VVL.146	Provider Identifier Type List	PROV-IDENTIFIER-TYPE	7	SSN
VVL.146	Provider Identifier Type List	PROV-IDENTIFIER-TYPE	8	Other
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	01	Active - Active Do Not Pay
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	02	Active - Active Reinstated
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	03	Active - Active
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	04	Active - Eligibility Verification
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	05	Active - Encounter Only
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	06	Active - Financial Trans Only
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	20	Denied - Denied Two Provider Numbers
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	21	Denied - For Other Reasons
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	22	Denied - Invalid License
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	23	Denied - Not Eligible
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	24	Denied - Same Number Assigned
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	40	Pending - Enrollment

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	41	Pending - License/Cert Verification
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	42	Pending - Missing Documentation
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	43	Pending - No License/Temp License
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	44	Pending - NPI Invalid
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	45	Pending - Rate Determination
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	46	Pending - Signed Agreement
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	47	Pending - Status Approval
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	48	Pending - W9 Missing or Incomplete
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	60	Term - Abuse of billing privileges
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	61	Term - Action Taken by Medicaid/CHIP
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	62	Term - Action Taken by Medicare
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	63	Term - Change of Ownership
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	64	Term - Failure to report a change of address/ownership
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	65	Term - False or misleading information
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	66	Term - Federal exclusion/ debarment, etc.
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	67	Term - Felony conviction
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	68	Term - Involuntary Termination
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	69	Term - License Expired
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	70	Term - License Revoked
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	71	Term - Loss of license or other State action
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	72	Term - Medicare/Medicaid Exclusion
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	73	Term - Medicaid Authority
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	74	Term - Medicare Termination

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	75	Term - Misuse of billing number
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	76	Term - No Claims Activity
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	77	Term - Non-Compliance
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	78	Term - Onsite review/ Provider is no longer operational
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	79	Term - Other
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	80	Term - Provider Deceased
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	81	Term - State exclusion/ debarment, etc.
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	82	Term - Unknown
VVL.147	Provider Medicaid Enrollment Status Code List	PROV-MEDICAID-ENROLLMENT-STATUS-CODE	83	Term - Voluntary Termination
VVL.148	Diagnosis POA Flag List	DIAGNOSIS-POA-FLAG-1 to DIAGNOSIS-POA-FLAG-12	Y	Diagnosis was present at time of inpatient admission
VVL.148	Diagnosis POA Flag List	DIAGNOSIS-POA-FLAG-1 to DIAGNOSIS-POA-FLAG-12	N	Diagnosis was not present at time of inpatient admission
VVL.148	Diagnosis POA Flag List	DIAGNOSIS-POA-FLAG-1 to DIAGNOSIS-POA-FLAG-12	U	Documentation insufficient to determine if condition was present at the time of inpatient admission
VVL.148	Diagnosis POA Flag List	DIAGNOSIS-POA-FLAG-1 to DIAGNOSIS-POA-FLAG-12	W	Clinically undetermined. Provider unable to clinically determine whether the condition was present at the time of inpatient admission.
VVL.148	Diagnosis POA Flag List	DIAGNOSIS-POA-FLAG-1 to DIAGNOSIS-POA-FLAG-12		1 Exempt from POA reporting.
VVL.149	Claim Payment Remittance Code List	CLAIM-PYMT-REM-CODE-1 to CLAIM-PYMT-REM-CODE-4	Not Applicable	Claim Payment Remittance Code List
VVL.150	Source Location List	SOURCE-LOCATION	01	MMIS
VVL.150	Source Location List	SOURCE-LOCATION	02	Non-MMIS CHIP Payment System
VVL.150	Source Location List	SOURCE-LOCATION	03	Pharmacy Benefits Manager (PBM) Vendor
VVL.150	Source Location List	SOURCE-LOCATION	04	Dental Benefits Manager Vendor
VVL.150	Source Location List	SOURCE-LOCATION	05	Transportation Provider System
VVL.150	Source Location List	SOURCE-LOCATION	06	Mental Health Claims Payment System
VVL.150	Source Location List	SOURCE-LOCATION	07	Financial Transaction/Accounting System
VVL.150	Source Location List	SOURCE-LOCATION	08	Other State Agency Claims Payment System
VVL.150	Source Location List	SOURCE-LOCATION	09	County/Local Government Claims Payment System
VVL.150	Source Location List	SOURCE-LOCATION	10	Other Vendor/Other Claims Payment System
VVL.150	Source Location List	SOURCE-LOCATION	20	Managed Care Organization (MCO)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	001	Inpatient Hospital Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	002	Outpatient Hospital Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	003	Rural health clinic services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	004	FQHC services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	005	Other Laboratory and X-Ray Services

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.151	Benefit Type Code List	BENEFIT-TYPE	006	Nursing Facility Services for 21 and over
VVL.151	Benefit Type Code List	BENEFIT-TYPE	007	EPSDT
VVL.151	Benefit Type Code List	BENEFIT-TYPE	008	Family Planning Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	009	Mandatory tobacco cessation counseling for pregnant women under 1905(a)(4)(D)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	010	Physicians' Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	011	Medical and Surgical Services Furnished by a Dentist
VVL.151	Benefit Type Code List	BENEFIT-TYPE	012	Nurse-midwife services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	013	Certified pediatric or family nurse practitioners' services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	014	Free Standing Birth Center Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	015	Home Health Services - Intermittent or part-time nursing services provided by a home health agency
VVL.151	Benefit Type Code List	BENEFIT-TYPE	016	Home Health Services - Home Health Aide Services Provided by a Home Health Agency
VVL.151	Benefit Type Code List	BENEFIT-TYPE	017	Home Health Services - Medical supplies, equipment, and appliances suitable for use in the home
VVL.151	Benefit Type Code List	BENEFIT-TYPE	018	Medical care and any type of remedial care recognized under State law - Podiatrists' Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	019	Medical care and any type of remedial care recognized under State law - Optometrists' Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	020	Medical care and any type of remedial care recognized under State law - Chiropractors' Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	021	Medical care and any type of remedial care recognized under State law - Other Practitioners' Services within scope of practice as defined by State law
VVL.151	Benefit Type Code List	BENEFIT-TYPE	022	Home Health Services - Physical therapy; occupational therapy; speech pathology; audiology provided by a home health agency
VVL.151	Benefit Type Code List	BENEFIT-TYPE	023	Private Duty Nursing
VVL.151	Benefit Type Code List	BENEFIT-TYPE	024	Clinic Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	025	Dental Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	026	Physical Therapy and Related Services - Physical Therapy
VVL.151	Benefit Type Code List	BENEFIT-TYPE	027	Physical Therapy and Related Services - Occupational Therapy
VVL.151	Benefit Type Code List	BENEFIT-TYPE	028	Physical Therapy and Related Services - Services for individuals with speech, hearing and language disorders
VVL.151	Benefit Type Code List	BENEFIT-TYPE	029	Prescription drugs, dentures, and prosthetic devices; and eyeglasses - Prescribed Drugs
VVL.151	Benefit Type Code List	BENEFIT-TYPE	030	Prescription drugs, dentures, and prosthetic devices; and eyeglasses - Dentures
VVL.151	Benefit Type Code List	BENEFIT-TYPE	031	Prescription drugs, dentures, and prosthetic devices; and eyeglasses - Prosthetic Devices
VVL.151	Benefit Type Code List	BENEFIT-TYPE	032	Prescription drugs, dentures, and prosthetic devices; and eyeglasses - Eyeglasses
VVL.151	Benefit Type Code List	BENEFIT-TYPE	033	Other diagnostic, screening, preventive, and rehabilitative services - Diagnostic Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	034	Other diagnostic, screening, preventive, and rehabilitative services - Screening Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	035	Other diagnostic, screening, preventive, and rehabilitative services - Preventive Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	036	Other diagnostic, screening, preventive, and rehabilitative services - Rehabilitative Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	037	Services for individuals over age 65 in IMDs - Inpatient hospital services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	038	Services for individuals over age 65 in IMDs - Nursing facility services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	039	Intermediate Care Facility Services for individuals with intellectual disabilities or persons with related conditions
VVL.151	Benefit Type Code List	BENEFIT-TYPE	040	Inpatient psychiatric facility services for under 21
VVL.151	Benefit Type Code List	BENEFIT-TYPE	041	Hospice Care
VVL.151	Benefit Type Code List	BENEFIT-TYPE	042	Case Management Services and TB related services - Case management services as defined in the State Plan in accordance with section 1905(a)(19) or 1915(g)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	043	Case Management Services and TB related services - Special TB related services under section 1902(z)(2)

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.151	Benefit Type Code List	BENEFIT-TYPE	044	Respiratory care services under 1902(e)(9)(A) through (C)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	045	Personal care services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	046	Primary care case management services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	047	Special sickle-cell anemia-related services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	048	Any other medical care and any other type of remedial care recognized under State law, specified by the Secretary - Transportation
VVL.151	Benefit Type Code List	BENEFIT-TYPE	049	Any other medical care and any other type of remedial care recognized under State law, specified by the Secretary - Services provided in religious non-medical health care facilities
VVL.151	Benefit Type Code List	BENEFIT-TYPE	050	Any other medical care and any other type of remedial care recognized under State law, specified by the Secretary - Nursing facility services for patients under 21
VVL.151	Benefit Type Code List	BENEFIT-TYPE	051	Any other medical care and any other type of remedial care recognized under State law, specified by the Secretary - Emergency hospital services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	052	Any other medical care and any other type of remedial care recognized under State law, specified by the Secretary - Critical Access Hospitals
VVL.151	Benefit Type Code List	BENEFIT-TYPE	053	Extended services for pregnant women - Additional Services for any other medical conditions that may complicate pregnancy
VVL.151	Benefit Type Code List	BENEFIT-TYPE	054	Community First Choice
VVL.151	Benefit Type Code List	BENEFIT-TYPE	055	Health Home Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	056	Limited Pregnancy-Related Services for Pregnant Women with Income Above the Applicable Income Limit
VVL.151	Benefit Type Code List	BENEFIT-TYPE	057	Ambulatory prenatal care for pregnant women furnished during a presumptive eligibility period
VVL.151	Benefit Type Code List	BENEFIT-TYPE	058	Benefits for Families Receiving Transitional Medical Assistance
VVL.151	Benefit Type Code List	BENEFIT-TYPE	059	Standards for Coverage of Transplant Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	060	School-Based Services Payment Methodologies
VVL.151	Benefit Type Code List	BENEFIT-TYPE	061	Indian Health Services and Tribal Health Facilities
VVL.151	Benefit Type Code List	BENEFIT-TYPE	062	Methods and Standards to Assure High Quality Care
VVL.151	Benefit Type Code List	BENEFIT-TYPE	063	Medicare Premium Payments
VVL.151	Benefit Type Code List	BENEFIT-TYPE	064	Medicare Coinsurance and Deductibles
VVL.151	Benefit Type Code List	BENEFIT-TYPE	065	Other Medical Insurance Premium Payments
VVL.151	Benefit Type Code List	BENEFIT-TYPE	066	Programs for Distribution of Pediatric Vaccines
VVL.151	Benefit Type Code List	BENEFIT-TYPE	067	Laboratory and x-ray services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	068	Home Health Services - Home health aide services provided by a home health agency
VVL.151	Benefit Type Code List	BENEFIT-TYPE	069	Private duty nursing services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	070	Physical Therapy and Related Services - Audiology services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	071	Extended services for pregnant women - Additional Pregnancy-related and postpartum services for a 60-day period after the pregnancy ends and any remaining days in the month in which the 60th day falls.
VVL.151	Benefit Type Code List	BENEFIT-TYPE	072	Home and Community Care for Functionally Disabled Elderly individuals as defined and described in the State Plan
VVL.151	Benefit Type Code List	BENEFIT-TYPE	073	Emergency services for certain legalized aliens and undocumented aliens
VVL.151	Benefit Type Code List	BENEFIT-TYPE	074	Licensed or Otherwise State-Approved Free-Standing Birthing Center and other ambulatory services that are offered by a freestanding birth center
VVL.151	Benefit Type Code List	BENEFIT-TYPE	075	Homemaker
VVL.151	Benefit Type Code List	BENEFIT-TYPE	076	Home Health Aide
VVL.151	Benefit Type Code List	BENEFIT-TYPE	077	Adult Day Health services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	078	Habilitation

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.151	Benefit Type Code List	BENEFIT-TYPE	079	Habilitation: Residential Habilitation
VVL.151	Benefit Type Code List	BENEFIT-TYPE	080	Habilitation: Supported Employment
VVL.151	Benefit Type Code List	BENEFIT-TYPE	081	Habilitation: Education (non IDEA available)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	082	Habilitation: Day Habilitation
VVL.151	Benefit Type Code List	BENEFIT-TYPE	083	Habilitation: Pre-Vocational
VVL.151	Benefit Type Code List	BENEFIT-TYPE	084	Habilitation: Other Habilitative Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	085	Respite
VVL.151	Benefit Type Code List	BENEFIT-TYPE	086	Day Treatment (mental health service)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	087	Psychosocial rehabilitation
VVL.151	Benefit Type Code List	BENEFIT-TYPE	088	Environmental Modifications (Home Accessibility Adaptations)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	089	Vehicle Modifications
VVL.151	Benefit Type Code List	BENEFIT-TYPE	090	Non-Medical Transportation
VVL.151	Benefit Type Code List	BENEFIT-TYPE	091	Special Medical Equipment (minor assistive Devices)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	092	Home Delivered meals
VVL.151	Benefit Type Code List	BENEFIT-TYPE	093	Assistive Technology (i.e., communication devices)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	094	Personal Emergency Response (PERS)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	095	Nursing Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	096	Community Transition Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	097	Adult Foster Care
VVL.151	Benefit Type Code List	BENEFIT-TYPE	098	Day Supports (non-habilitative)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	099	Supported Employment
VVL.151	Benefit Type Code List	BENEFIT-TYPE	100	Supported Living Arrangements
VVL.151	Benefit Type Code List	BENEFIT-TYPE	101	Supports for Consumer Direction (Supports Facilitation)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	102	Participant Directed Goods and Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	103	Senior Companion (Adult Companion Services)
VVL.151	Benefit Type Code List	BENEFIT-TYPE	104	Assisted Living
VVL.151	Benefit Type Code List	BENEFIT-TYPE	105	Program for All-inclusive Care for the Elderly (PACE) Services
VVL.151	Benefit Type Code List	BENEFIT-TYPE	106	Self-directed Personal Assistance Services under 1915(j)
				In vitro diagnostic products (as defined in section 809.3(a) of title 21, Code of Federal Regulations) administered during any portion of the emergency period defined in paragraph (1)(B) of section 1135(g) beginning on or after the date of the enactment of this subparagraph for the detection of SARSCoV2 or the diagnosis of the virus that causes COVID19, and the administration of such in vitro diagnostic products
VVL.151	Benefit Type Code List	BENEFIT-TYPE	107	
VVL.151	Benefit Type Code List	BENEFIT-TYPE	108	COVID19 testing-related services
VVL.152	Claim Status List	CLAIM-LINE-STATUS / CLAIM-STATUS	Not Applicable	Link to Claim Status List
VVL.153	Claim Status Category List	CLAIM-STATUS-CATEGORY	Not Applicable	Link to Claim Status Category List
VVL.154	Line Adjustment Reason Code List	LINE-ADJUSTMENT-REASON-CODE	Not Applicable	Link to Line Adjustment Reason Code List
VVL.156	Healthcare Acquired Condition Indicator List	HEALTH-CARE-ACQUIRED-CONDITION-IND	0	No
VVL.156	Healthcare Acquired Condition Indicator List	HEALTH-CARE-ACQUIRED-CONDITION-IND	1	Yes
VVL.157	NDC Unit of Measure List	NDC-UNIT-OF-MEASURE/UNIT-OF-MEASURE	EA	Each
VVL.157	NDC Unit of Measure List	NDC-UNIT-OF-MEASURE/UNIT-OF-MEASURE	F2	International Unit
VVL.157	NDC Unit of Measure List	NDC-UNIT-OF-MEASURE/UNIT-OF-MEASURE	ML	Milliliter
VVL.157	NDC Unit of Measure List	NDC-UNIT-OF-MEASURE/UNIT-OF-MEASURE	ME	Milligram
VVL.157	NDC Unit of Measure List	NDC-UNIT-OF-MEASURE/UNIT-OF-MEASURE	GR	Gram

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.157	NDC Unit of Measure List	NDC-UNIT-OF-MEASURE/UNIT-OF-MEASURE	GM	Grams
VVL.157	NDC Unit of Measure List	NDC-UNIT-OF-MEASURE/UNIT-OF-MEASURE	UN	Unit
VVL.158	Revenue Code List	REVENUE-CODE	Not Applicable	Revenue Code List
VVL.159	Self Direction Type List	SELF-DIRECTION-TYPE	000	Not Applicable
VVL.159	Self Direction Type List	SELF-DIRECTION-TYPE	001	Hiring Authority
VVL.159	Self Direction Type List	SELF-DIRECTION-TYPE	002	Budget Authority
VVL.159	Self Direction Type List	SELF-DIRECTION-TYPE	003	Hiring and Budget Authority
VVL.164	Rebate Eligible Indicator List	REBATE-ELIGIBLE-INDICATOR	0	NDC is not eligible for drug rebate program. (Manufacturer does not have a rebate agreement.)
VVL.164	Rebate Eligible Indicator List	REBATE-ELIGIBLE-INDICATOR	1	NDC is eligible for drug rebate program
VVL.164	Rebate Eligible Indicator List	REBATE-ELIGIBLE-INDICATOR	2	NDC is exempt from the drug rebate program (biological and medical devices)
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	1	Priced using QMB Pricing
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	2	Lab panel bundled
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	4	Priced using RBRVS
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	5	Anesthesia pricing
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	7	APC priced
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	A	Manually priced
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	B	By report
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	C	Maximum fee
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	D	Percent of charges
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	E	Reimbursement Rate
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	F	Lower level screening fee
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	G	Billed Charges
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	H	Denied
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	I	Medicare Coins and deductible
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	J	Daily Per Diem Rate
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	K	Medicare allowed amount
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	L	First 20 days stay
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	M	Medicare prevailing
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	O	APRDRG pricing
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	P	DRG
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	R	DRG w/cost outlier
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	U	DRG priced by proration
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	V	Mid-level priced
VVL.165	Allowed Charge Source List	ALLOWED-CHARGE-SRC	Z	ATP Bundled
VVL.166	Occurrence Code List	OCCURRENCE-CODE-01 to OCCURRENCE-CODE-10	Not Applicable	Occurrence Codes
VVL.166	Occurrence Code List	OCCURRENCE-CODE-01 to OCCURRENCE-CODE-10	Not Applicable	Occurrence Span Codes
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	10000000	Individuals or Groups (of Individuals)
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	17000000	Non-Individual - Other Service Providers
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	25000000	Non-Individual - Agencies
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	26000000	Non-Individual - Ambulatory Health Care Facilities
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	27000000	Non-Individual - Hospital Units
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	28000000	Non-Individual - Hospitals
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	29000000	Non-Individual - Laboratories
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	30000000	Non-Individual - Managed Care Organizations

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	310000000	Non-Individual - Nursing & Custodial Care Facilities
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	320000000	Non-Individual - Residential Treatment Facilities
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	330000000	Non-Individual - Suppliers
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	340000000	Non-Individual - Transportation Services
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	380000000	Non-Individual - Respite Care Facility
VVL.167	Provider Facility Type	PROV-FACILITY-TYPE	Not Applicable	Note: Appendix L takes the WPC taxonomy codes and relates each one to its provider facility type code
VVL.168	Primary Eligibility Group Indicator List	PRIMARY-ELIGIBILITY-GROUP-IND	0	No
VVL.168	Primary Eligibility Group Indicator List	PRIMARY-ELIGIBILITY-GROUP-IND	1	Yes
VVL.169	SSI State Supplement Code List	SSI-STATE-SUPPLEMENT-STATUS-CODE	000	Not Applicable
VVL.169	SSI State Supplement Code List	SSI-STATE-SUPPLEMENT-STATUS-CODE	001	Mandatory
VVL.169	SSI State Supplement Code List	SSI-STATE-SUPPLEMENT-STATUS-CODE	002	Optional
VVL.170	Tooth Designation System List	TOOTH-DESIGNATION-SYSTEM	JO	ANSI/ADA/ISO Specification No. 3950
VVL.170	Tooth Designation System List	TOOTH-DESIGNATION-SYSTEM	JP	ADAs Universal/National Tooth Designation system
VVL.171	Tooth Number List	TOOTH-NUM	1	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	2	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	3	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	4	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	5	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	6	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	7	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	8	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	9	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	10	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	11	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	12	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	13	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	14	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	15	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	16	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	17	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	18	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	19	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	20	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	21	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	22	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	23	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	24	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	25	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	26	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	27	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	28	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	29	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	30	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	31	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	32	Lower Arch, Upper right quadrant

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.171	Tooth Number List	TOOTH-NUM	O	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	P	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	Q	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	R	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	S	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	T	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	AS	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	BS	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	CS	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	DS	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	ES	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	FS	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	GS	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	HS	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	IS	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	JS	Upper Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	KS	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	LS	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	MS	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	NS	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	OS	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	PS	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	QS	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	RS	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	SS	Lower Arch, Upper right quadrant
VVL.171	Tooth Number List	TOOTH-NUM	TS	Lower Arch, Upper right quadrant
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	00	Entire Oral Cavity
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	01	Maxillary Area
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	02	Mandibular Area
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	03	Upper Right Sextant
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	04	Upper Anterior Sextant
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	05	Upper Left Sextant
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	06	Lower Left Sextant
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	07	Lower Anterior Sextant
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	08	Lower Right Sextant
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	09	Other Area of Oral Cavity (An area specified in an annexed document or further explanation available.)
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	10	Upper Right Quadrant (Right Refers to the oral and skeletal structures on the right side.)
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	20	Upper Left Quadrant (Left Refers to the oral and skeletal structures on the left side.)
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	30	Lower Left Quadrant
VVL.172	Tooth Quad Code List	TOOTH-QUAD-CODE	40	Lower Right Quadrant
VVL.174	New Refill Indicator List	NEW-REFILL-IND	00	New Prescription
VVL.174	New Refill Indicator List	NEW-REFILL-IND	01-99	Number of Refill(s)
VVL.175	Procedure Code Flag List	PROCEDURE-CODE-FLAG 1 thru PROCEDURE-CODE-FLAG 6	01	CPT 4

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.175	Procedure Code Flag List	PROCEDURE-CODE-FLAG 1 thru PROCEDURE-CODE-FLAG 6	02	ICD-9 CM
VVL.175	Procedure Code Flag List	PROCEDURE-CODE-FLAG 1 thru PROCEDURE-CODE-FLAG 6	06	HCPCS (Both National and Regional HCPCS)
VVL.175	Procedure Code Flag List	PROCEDURE-CODE-FLAG 1 thru PROCEDURE-CODE-FLAG 6	07	ICD-10 - CM PCS
VVL.175	Procedure Code Flag List	PROCEDURE-CODE-FLAG 1 thru PROCEDURE-CODE-FLAG 6	10-87	Other Systems
VVL.176	SSI Status List	SSI-STATUS	000	Not Applicable
VVL.176	SSI Status List	SSI-STATUS	001	SSI
VVL.176	SSI Status List	SSI-STATUS	002	SSI Eligible Spouse
VVL.176	SSI Status List	SSI-STATUS	003	SSI Pending a Final Determination of Disposal of Resources Exceeding SSI Dollar Limits
VVL.177	Outlier Code List	OUTLIER-CODE	00	No Outlier
VVL.177	Outlier Code List	OUTLIER-CODE	01	Day Outlier
VVL.177	Outlier Code List	OUTLIER-CODE	02	Cost Outlier
VVL.177	Outlier Code List	OUTLIER-CODE	06	Valid DRG Received from the intermediary
VVL.177	Outlier Code List	OUTLIER-CODE	07	CMS Developed DRG
VVL.177	Outlier Code List	OUTLIER-CODE	08	CMS Developed DRG Using Patient Status Code
VVL.177	Outlier Code List	OUTLIER-CODE	09	Not Group able
VVL.177	Outlier Code List	OUTLIER-CODE	10	Composite of cost outliers
VVL.178	Place of Service Code List	PLACE-OF-SERVICE	Not Applicable	Place of Service Code List
VVL.179	Primary Language Code List	PRIMARY-LANGUAGE-CODE	Not Applicable	See language codes in the Data Dictionary Appendix G: ISO 639-2 Language Codes Reference for a list of all valid language codes
VVL.179	Primary Language Code List	PRIMARY-LANGUAGE-CODE	Not Applicable	Language Codes List
VVL.180	HCPCS Rate List	HCPCS-RATE	Not Applicable	HCPCS Codes
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	001	Inpatient hospital services, other than services in an institution for mental diseases
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	002	Outpatient hospital services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	003	Rural health clinic services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	004	Other ambulatory services furnished by a rural health clinic
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	005	Professional laboratory services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	006	Technical laboratory services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	007	Professional radiological services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	008	Technical radiological services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	009	Nursing facility services for individuals age 21 or older (other than services in an institution for mental disease)
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	010	Early and periodic screening and diagnosis and treatment (EPSDT) services

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	011	Family planning services and supplies for individuals of child-bearing age
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	012	Physicians' services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	013	Medical and surgical services of a dentist
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	014	Outpatient substance abuse treatment services.
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	015	Medical or other remedial care or services, other than physicians' services, provided by licensed practitioners within the scope of practice as defined under State law
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	016	Home health services - Nursing services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	017	Home health services - Home health aide services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	018	Home health services - Medical supplies, equipment, and appliances suitable for use in the home
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	019	Home health services - Physical therapy provided by a home health agency or by a facility licensed by the State to provide medical rehabilitation services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	020	Home health services - Occupational therapy provided by a home health agency or by a facility licensed by the State to provide medical rehabilitation services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	021	Home health services - Speech pathology and audiology services provided by a home health agency or by a facility licensed by the State to provide medical rehabilitation services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	022	Private duty nursing services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	023	Advanced practice nurse services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	024	Pediatric nurse
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	025	Nurse-midwife service
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	026	Nurse practitioner services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	027	Respiratory care for ventilator-dependent individuals
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	028	Clinic services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	029	Dental services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	030	Physical therapy services (when not provided under home health services)
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	031	Occupational therapy services (when not provided under home health services)
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	032	Speech, hearing, and language disorders services (when not provided under home health services)
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	033	Prescribed drugs

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	034	Over-the-counter medications.
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	035	Dentures
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	036	Prosthetic devices
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	037	Eyeglasses
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	038	Hearing Aids
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	039	Diagnostic services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	040	Screening services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	041	Preventive services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	042	Well-baby and well-child care services as defined by the State.
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	043	Rehabilitative services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	044	Inpatient hospital services for individuals age 65 or older in institutions for mental diseases
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	045	Nursing facility services for individuals age 65 or older in institutions for mental diseases
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	046	Intermediate care facility (ICF/IIDICF/IID) services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	047	Nursing facility services, other than in institutions for mental diseases
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	048	Inpatient psychiatric services for individuals under age 21
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	049	Outpatient mental health services, other than Outpatient substance abuse treatment services. This TOS includes services furnished in a State-operated mental hospital and including community-based services.
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	050	Inpatient substance abuse treatment services and residential substance abuse treatment services.
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	051	Personal care services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	052	Primary care case management services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	053	Targeted case management services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	054	Case Management services other than those that meet the definition of primary care case management services or targeted case management services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	055	Care coordination services.

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	056	Transportation services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	057	Enabling services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	058	Services furnished in a religious nonmedical health care institution
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	059	Skilled nursing facility services for individuals under age 21
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	060	Emergency hospital services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	061	Critical access hospital services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	062	HCBS - Case management services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	063	HCBS - Homemaker services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	064	HCBS - Home health aide services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	065	HCBS - Personal care services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	066	HCBS - Adult day health services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	067	HCBS - Habilitation services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	068	HCBS - Respite care services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	069	HCBS - Day treatment or other partial hospitalization services, psychosocial rehabilitation services and clinic services (whether or not furnished in a facility) for individuals with chronic mental illness
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	070	HCBS - Day Care
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	071	HCBS - Training for family members
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	072	HCBS - Minor modification to the home
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	073	HCBS - Other services requested by the agency and approved by CMS as cost effective and necessary to avoid institutionalization
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	074	HCBS - Expanded habilitation services - Prevocational services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	075	HCBS - Expanded habilitation services - Educational services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	076	HCBS - Expanded habilitation services - Supported employment services, which facilitate paid employment
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	077	HCBS-65-plus - Case management services

VVL_ID	VVL_Name	VVL_Field	VVL_Code	VVL_Code_Description
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	078	HCBS-65-plus - Homemaker services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	079	HCBS-65-plus - Home health aide services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	080	HCBS-65-plus - Personal care services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	081	HCBS-65-plus - Adult day health services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	082	HCBS-65-plus - Respite care services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	083	HCBS-65-plus - Other medical and social services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	084	Sterilizations
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	085	Prenatal care and pre-pregnancy family planning services and supplies.
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	086	Other Pregnancy-related Procedures
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	087	Hospice services
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	088	Any other health care services or items specified by the Secretary and not excluded under regulations.
VVL.181	Provider Authorized Category of Service Code List	PROV-CLASSIFICATION-TYPE = 4 (Authorized Category of Service Code)	115	Residential care
VVL.182	Eligible Identifier Type List	ELG-IDENTIFIER-TYPE	1	Medicaid Card ID (State MMIS)
VVL.182	Eligible Identifier Type List	ELG-IDENTIFIER-TYPE	2	Old MSIS Identification Number (State MMIS)
VVL.183	Reason for Change List	REASON-FOR-CHANGE	MERGE	Merge Beneficiaries
VVL.183	Reason for Change List	REASON-FOR-CHANGE	UNMERGE	Unmerge Beneficiaries
VVL.183	Reason for Change List	REASON-FOR-CHANGE	LSE	Large System Enhancement
VVL.183	Reason for Change List	REASON-FOR-CHANGE	TCAM	Transition between CHIP and Medicaid
VVL.184	Border State Indicator List	BORDER-STATE-IND	0	No
VVL.184	Border State Indicator List	BORDER-STATE-IND	1	Yes
VVL.186	Procedure Code List	PROCEDURE-CODE-1 thru PROCEDURE-CODE-6	Not Applicable	Procedure Code List
VVL.186	Procedure Code List	PROCEDURE-CODE-1 thru PROCEDURE-CODE-6	Not Applicable	Procedure Code List 2
VVL.186	Procedure Code List	PROCEDURE-CODE-1 thru PROCEDURE-CODE-6	Not Applicable	Procedure Code List 3
End of table				