**MDR Appointment File**

**Version 1.0 22 February 2007**

1. Source

Data capture system: CHCS

1. Transmission (Format and Frequency)

After the initial complete harvest of all appointments with appointment dates after 30 September 2001, CHCS harvests and transmits appointment data monthly on the 11th of the month. The transmission includes a record for any appointment meeting all four criteria:

* An appointment date after 30 September 2001
* A status indicating the encounter occurred (any closed status other than those that says the encounter did not occur) EXCEPT if it is a newly cancelled appointment which had already been transmitted in a previous month.
* An appointment date on or before the last day of the month preceding the transmission
* A last modified date later than the 10th of the month preceding the transmission (or since the initial complete harvest, applicable only to the first monthly feed).

The format of the data feed into the MDR is described in Interface Control Document 1300-3120-01.

1. Organization and batching

There are two MDR core data files (detail and summary) prepared from the appointment data feed. The appointment data process also produces special outputs described later in this document. The detailed appointment data are organized into fiscal year files, and stored as SAS data sets.  The summarized data are organized into a single SAS data set spanning all years.

Initial Load: The initial harvest is for all appointments with appointment dates after 30 September 2001. It is permissible to split the harvest into multiple segments (such as fiscal quarters) so that harvests can complete at night during non-peak demand hours for CHCS. The final segment of the initial load should occur on the 11th of the month and include any appointment after 30 September 2001 with a last modified date later than when the first segment was harvested.

Frequency of updates: Monthly, with all transactions of identical keys ( IEN host node seed, appointment prefix, and appointment IEN) being merged in the MDR to keep only the most recently received record.  If two records in the same feed have the same key, the record showing the most recent update date will be kept. If both have the same update date, the last encountered will be kept. If the appointment status of the kept record is “Cancelled”, the record will be deleted and no record retained matching that key.

New appointment records from the current and previous fiscal year are processed every month. Updated appointment records from any other previous fiscal years are batched for semi-annual updates.

1. Receiving Filters

Appointments that have not been closed out or appointments that were not kept are not included in the data feed to the MDR (unless the record is a cancellation of something previously sent to the MDR).

1. Field Transformations and Deletions for MDR Core Database

In preparing the MDR appointment data file, many of the fields from the data feed are dropped and records are filtered out. In particular, it has been noted that test records have been provided by CHCS. These test records do not represent real appointments and should be filtered out. The current list of MEPRS 3 codes to use for this filter is: BPM, BQQ, BTR, BTS, BZA, BZZ, DAP, or FCH. Because this list is subject to change (and is currently being revalidated), it is important that the processor be written flexibly, so that if a new code is added to the list, all records in the data being processed should be filtered (whether or not records are in the existing FY database, or are in the monthly feed). Furthermore, additional derivations are done to append additional detail to each record. Some of these derivations require merges to external files. The merge rules are described below.

* Master Person Index (MPI): Prior to processing, the Master Person Index is applied to the MDR appointment data to fill-in blank person identification fields and to add the person association reason code. See VM6 specification for details.
* Merging to LVM4 (FY04 and forward) or Enrollment (FY03 and before) Data: Each FY appointment feed is merged to the MDR Longitudinal VM4 File of matching FY. The merge keys are, in order:
* EDI\_PN (DEERS Patient Identifier) if not blank in the appointment record.
* Sponsor SSN & DDS in combination

If a matching record is found, the LVM4 fields are populated according to the table in section VI. If no matching record is found in the LVM4 file, the fields are left blank.

* Merging to MDR OmniCAD Data: Each FY appointment file is merged to the OmniCAD whose FY and FM match the appointment date. From this table are retrieved the fields matching the “Patient Zip Code at Time of Visit” and sponsor service fields. If a matching record is found, the Omni-CAD fields are populated according the table in section VI. If no matching record is found, the fields are set to unknown.
* Merging to DMIS ID Data: Each FY appointment file is merged to the MDR DMIS ID Index Table whose FY matches the appointment date. If a matching record is found, the DMISID fields are populated according the table in section VI. If no matching record is found, the appointment record is rejected to an exception file, and a QC alert occurs[[1]](#footnote-1).
1. File layout and content

The table below describes the content of the master MDR Appointment data file. A summary file (described in the “Special Outputs” section of this document) is created from the detail files upon completion of each processing cycle.

| **Variable Name** | **Format** | **Field Position in Source Data** | **SAS Name** | **Derivation** |
| --- | --- | --- | --- | --- |
| Appointment Date | yyyymmdd | 1 | apptdt |  No transformation |
| Sponsor SSN | $9 | 2 | sponssn |  See MPI specification |
| Patient SSN | $9 | 3 | patssn |  No transformation |
| DEERS Dependent Data Suffix (DDS) | $2 | 4 | dds |  See MPI specification |
| Person Identifier | $10 | 5 | patuniq |  See MPI specification |
| Sex | $1 | 6 | sex |  No transformation |
| Date Of Birth | yyyymmdd | 7 | patdob |  No transformation |
| Sponsor Rank | $4 | 8 | rankpay |  No transformation |
| Patient Category | $3 | 9 | r\_patcat |  No transformation |
| MEPRS Code | $4 | 10 | meprscd |  No transformation |
| Patient Status | $1 | 11 | patstat |  No transformation |
| DMIS ID Code | $4 | 12 | dmisid |  No transformation |
| Appointment Status | $1 | 13 | apptstat |  No transformation |
| Enrollment DMIS ID (Raw) | $4 | 14 | enrdmis1 |  No transformation |
| Alternate Care Value (Raw)  | $1 | 15 | acv1 |  No transformation |
| Family Member Prefix | $2 | 16 | fmp |  No transformation |
| Medicare Eligibility | $2 | 17 | medelig |  No transformation |
| Patient Zip Code at Time of Visit | $5 | 18 | patzip |  No transformation |
| Appointment IEN | $10 | 19 | apptidno |  No transformation |
| Workload Type | $1 | 20 | wkldtype |  No transformation |
| Provider ID (Old) | $15 | 21 | provid |  No transformation |
| Provider ID (HIPAA) | $15 | 22 | hprovid |  No transformation |
| Provider specialty (old) | $3 | 23 | provspec |  No transformation |
| Provider specialty (HIPAA) | $10 | 24 | hipaaprv |  No transformation |
| Location Type | $1 | 25 | pcmloc |  No transformation |
| Zip Code Validity | $1 | 26 | zipstat |  No transformation |
| State |   | 35 | state |  No transformation |
| Zip Code | $5 | 36 | zip |  No transformation |
| Appointment Type | $5 | 37 | appttype |  No transformation |
| HealthCare Delivery Program (HCDP) | $3 | 38 | hcdpcode |  No transformation |
| Date last modified |  yyyymmdd | 39 | moddate | No transformation |
| Duration | mmm | 40 | apptmin |  No transformation |
| Host Node Seed | $3 | 41 | hostseed |  No transformation |
| **Fields from LVM4 Merge** |
| DEERS ACV  | $1 |  | acv | ACV value from LVM4 where appointment date is between an ACV segment for FY04 and forward. ACV value from LENR (ACVfycm) that matches the calendar month and fiscal year of appointment date.  |
| DEERS Enrollment DMIS ID  | $4 |  | enrdmis | Enrollment DMIS ID from LVM4 where appointment date is between an Enrollment segment for FY04 and forward. Enrollment DMIS ID (enr\_fycm) from LENR that matches the calendar month and fiscal year of appointment date.  |
| DEERS Ben Cat Common  | $1 |  | combenl | Common beneficiary category from LVM4 where appointment date is between a Beneficiary Category segment for FY04 and forward. Common beneficiary category (benfycm) from LENR that matches the calendar month and fiscal year of appointment date.  |
| **Fields from Omni-CAD merge** |
| Catchment Area | $4 |  | catch | From MDR Omni-CAD merge. Populate with matching service affiliated catchment ID. If sponsor service =A, fill with a\_world, if F, fill with f\_world, if in list (M N V) then fill with n\_world, otherwise fill with o\_world. If a matching MDR Omni CAD record is not found, fill with ‘0999’. |
| PRISM Area | $4 |  | prism | From MDR Omni-CAD merge. Populate with matching service affiliated PRISM ID. If sponsor service aggregate=A, fill with a\_prism, if F, fill with f\_prism, if in list (M N V) then fill with n\_prism, otherwise fill with o\_prism. If a matching MDR Omni CAD record is not found, fill with ‘0999’. |
|  Tnex Region | $1 |  | pttnxreg | From MDR Omni-CAD merge, populate with tnexreg. If a match is not found, leave blank. |
| MCS Region | $2 |  | ptmcsreg | From MDR Omni-CAD merge, populate with r\_world. If a match is not found, set equal to ‘16’. |
| **Fields from MDR DMIS ID Index merge** |
| Treatment Service | $1 |  | txsvc | Ubu\_svc  |
| Treatment MCS Region | $2 |  | txmcsreg | Ubu\_reg |
| Treatment T-NEX Region | $1 |  | txtnxreg | Tnexreg  |
| MTF Zip Code | $5 |  | mtfzip | Faczip |
| Facility State Code | $2 |  | facstate | Facstate |
| **From MPI merge** |
| Person Association Reason Code | $2 |  | parc | See VM6 specification |
|  Internally Derived fields |
| Age | 3.0 |  | patage |  If the day of the appointment is later in the year than the patient’s date of birth, set equal to appointment date – birthdate, else set equal to appointment date – birth date - 1.  |
| Age Group | $1 |  | dmisage | A: ages 0-4; B: ages 5-14, C: ages 15-17, D: ages 18-24, E: 25-34, F: 35-44, G: 45-64, H: 65+, X: All others |
| Age Group Expanded | $1 |  | expage | A: ages 0-4; B: ages 5-14, C: ages 15-17, D: ages 18-24, E: 25-34, F: 35-44, G: 45-64, H: 65-69, I: 70-74, J: 75-79, K: 80-84, L: 85+, X: All Others |
| SAS Appointment Date | N |  | iapptdt | Calculated as the number of days that have elapsed since January 1, 1960 (SAS Date).  |
| Patient Category Code | $3 |  | patcat | Set to raw patient category code (r\_patcat) unless hcdp is 401 or 402 or between 405 and 412. In that case, if fmp is 20, set the patcat to “X” concatenated with a “36”, otherwise set to “X” concatenated with “37”. |
| Ben Cat | $3 |  | bencat | Assign based on the MDR patcat reference table.  |
| Ben Cat Common  | $1 |  | comben | If bencat in (‘ACT’ GRD’) then =4, If bencat in (‘DA’ ‘DGR’) then =1;If bencat = ‘RET’ then=2;Otherwise = 3 |
| Sponsor Service  | $1 |  | sponsvc | First digit of patient category code |
| Sponsor Service, Summary |  |  | sumsvc | If sponsor service=’A’ then =’A’; else if sponsor service=’F’ then =’F’, else if sponsor service in (M N V) then =’N’, else ‘O’ |
| CMAC Provider Class | $1 |  | cmac |  See Appendix |
| FM | $2 |  | fm | If calendar month in (10 11 12) then fiscal month=calendar month-9, else fiscal month=calendar month+3.  |
| FY | $4 |  | fy | If calendar month in (10 11 12) then fiscal year=calendar year-1; else fiscal year=calendar year. |
| CM | $2 |  | cm |  String beginning at position 5 and ending at position 6 of appointment date. |
| CY | $4 |  | cy |  String beginning at position 1 and ending at position 4 of appointment date. |
| Medicare Eligibility Flag | $1 |  | medflag | If Medicare eligibility is blank then if age 65+ set = ‘Y’, else ‘N’. Otherwise, if Medicare eligibility in (‘N’ ‘S’) then set=’N’, else ‘Y’. |
| Pay Grade Group | $2 |  | paygr |  If sponsor rank in [‘E1’, ‘E4’][[2]](#footnote-2) then =’1’, if sponsor rank in [‘E5’,‘E9’] then = ‘2’; if rank in [‘O1’,‘O3’] then = ‘3’; if rank in [O4-O11] then=’4’, else=’5’  |
| MEPRS 3 Code | $3 |  | mep3 | 1st three characters of MEPRS Code |

1. Refresh Frequency

Monthly.

1. Special Outputs

With each appointment data processing, several special output files are prepared. The special outputs are the MDR appointment summary file, a cancellation file to use in MDR Appointment processing, a cancellation proc format file to use in SADR processing, and an MDR address file. These files are described below.

**MDR Appointment Summary File**: After the update of the MDR Appointment File for any fiscal year, the MDR Appointment Summary File is updated. In that update, all rows of the summary matching the FY of the update are deleted, and new rows are appended that result from the tabulation of the new Appointment File. In this tabulation, there are some minor field derivations, as well. The content of the appointment summary file is described in the table below.

 MDR Appointment Summary File

|  |  |  |  |
| --- | --- | --- | --- |
| **Variable Name** | **Format** | **SAS Name** | **Transformation** |
| Ben Cat Common  | $1 | comben | No transformation |
| CM | $2 | cy | No transformation |
| CY | $4 | cm | No transformation |
| DMIS ID Code | $4 | dmisid | No transformation |
| FM | $2 | fm | No transformation |
| FY | $4 | fy | No transformation |
| Host Node Seed | $3 | hostseed | No transformation |
| Inpatient volume | N | inpvol | Count of rows where Patient Status (patstat)= “I” |
| MEPRS(3) Code | $3 | mep3 | No transformation |
| Outpatient volume | N | outvol | Count of rows where patstat <> “I” |
| PRIME indicator | $1 | prime | “1” if ACV in (A D E B F H J Q), else “0” |
| Provider Group | $1 | provgrp | 1 if CMAC Provider Class (CMAC) is “1”, else 0 |
| Sex | $1 | sex | No transformation |
| Sponsor Service (Summary) | $1 | sumsvc | No transformation |
| Summary Age Group | $1 | sumage | ’Y’ if dmisage <’H’, Else ’S’ |
| Tel Con Indicator | $1 |  |  ‘1’ if appointment status (apptstat)is ‘4’, else ‘0’ |
| Total Volume | N | totvol | Sum of inpatient volume (inpvol) and outpatient volume (outpvol) |
| Treatment MCS Region | $2 | txmcsreg | No transformation |
| Treatment Service | $1 | txsvc | No transformation |
| Treatment T-NEX Region | $1 | txtnxreg |  No transformation |
| Workload Type | $1 | wkldtype | No transformation |

MHS Address file feed data:

An appointment based address file is created to use in preparation of the MHS Address file. The data in the appointment-based address file spans all time for which we have appointment data, and contains the most recently reported address for a patient; where

* the “most recent” appointment record is determined by selecting the record with the most recent appointment date (date last modified is used as a tiebreaker should a person have more than appointment record for the same day).
* A person is defined by a unique EDI\_PN.

Note that this file cannot be prepared from the final MDR file, because it contains fields that are not retained in the public use data. The content of this file is described in the table below.

|  |  |  |
| --- | --- | --- |
| **Variable Name** | Format | **SAS Name** |
| Appointment Date | yyyymmdd | apptdt |
| Sponsor SSN | $9 | sponssn |
| DEERS Dependent Data Suffix (DDS) | $2 | dds |
| Patient Identifier | $10 | patuniq |
| Patient Last Name | $26 | patln |
| Patient First Name | $20 | patfn |
| Street Address 1 | $40 | addr1 |
| Street Address 2 | $40 | addr2 |
| Street Address 3 | $40 | addr3 |
| City | $20 | city |
| State | $2 | state |
| Zip Code | $5 | zip |
| Phone Number | $14 | fonhome |
| Date last modified | yyyymmdd | moddate |

Master Cancellation File

A cancellation file is prepared each month by extracting certain fields from cancelled records in the feed. These cancelled records are processed against the master appointment data set, and records whose key matches one in the cancellation file are removed from the master appointment data.

**Appendix: CMAC Provider Class**

The CMAC Class variable is derived based on provider specialty code. The mapping to use in the derivation is contained in the table below.

Mapping of CHCS Provider Specialty Codes to CMAC Classes

| **Code** | **Description** | **Class** |
| --- | --- | --- |
| 000 | General Medical Officer | 1 |
| 001 | Family Practice Physician | 1 |
| 002 | Contract Physician | 1 |
| 003 | Family Practice Physician Resident | 1 |
| 004 | Emergency Physician | 1 |
| 005 | Emergency Physician Resident | 1 |
| 011 | Internist | 1 |
| 012 | Allergist | 1 |
| 013 | Oncologist | 1 |
| 014 | Cardiologist | 1 |
| 015 | Cardiopulmonary Laboratory Physician | 1 |
| 016 | Endocrinologist | 1 |
| 017 | Geriatrician | 1 |
| 018 | Gastroenterologist | 1 |
| 019 | Hematolgoist | 1 |
| 020 | Rheumatolgoist | 1 |
| 021 | Pulmonary Disease Physician | 1 |
| 022 | Infectious Disease Physician | 1 |
| 023 | Metabolic Disease Physician | 1 |
| 024 | Nephrologist | 1 |
| 025 | Medical Geneticist | 1 |
| 026 | Tropical Medicine Physician | 1 |
| 027 | Nuclear Medicine Physician | 1 |
| 028 | Internal Medicine Resident | 1 |
| 040 | Pediatrician | 1 |
| 041 | Pediatric Allergist | 1 |
| 042 | Adolescent Medicine Physician | 1 |
| 043 | Pediatric Cardiologist | 1 |
| 044 | Pediatric Dermatologist | 1 |
| 045 | Pediatric Endocrinologist | 1 |
| 046 | Perinatolgoist | 1 |
| 047 | Pediatric Metabolic Disease Physician | 1 |
| 048 | Pediatric Hematologist | 1 |
| 049 | Pediatric Neurologist | 1 |
| 050 | Pediatric Pulmonary Disease Physician | 1 |
| 051 | Pediatric Infectious Disease Physician | 1 |
| 052 | Pediatric Resident | 1 |
| 053 | Pediatric Gastroenterologist | 1 |
| 054 | Pediatric Nephrologist | 1 |
| 060 | Neurologist | 1 |
| 061 | Neurologist Resident | 1 |
| 070 | Psychiatrist | 1 |
| 071 | Child Psychiatrist | 1 |
| 072 | Psychoanalyst | 2 |
| 073 | Psychiatric Resident | 1 |
| 074 | Alcohol Abuse Counselor | 3 |
| 075 | Drug Abuse Counselor | 3 |
| 080 | Dermatologist | 1 |
| 081 | Dermatologist Resident | 1 |
| 090 | Physical Medicine Physician | 1 |
| 091 | Special Weapons Defense Physician | 1 |
| 092 | Anesthesiologist | 1 |
| 093 | Anesthesiology Resident | 1 |
| 094 | Anesthetist | 4 |
| 100 | General Surgeon | 1 |
| 101 | Thoracic Surgeon | 1 |
| 102 | Colon & Rectal Surgeon | 1 |
| 103 | Cardiac Surgeon | 1 |
| 104 | Pediatric Surgeon | 1 |
| 105 | Peripheral Vascular Surgeon | 1 |
| 106 | Neurological Surgeon | 1 |
| 107 | Plastic Surgeon | 1 |
| 108 | Resident Surgeon | 1 |
| 109 | Burn Therapist | 1 |
| 110 | Urologist | 1 |
| 111 | Urology Resident | 1 |
| 115 | Plastic Surgery Resident | 1 |
| 120 | Ophthalmologist | 1 |
| 121 | Ophthalmology Resident | 1 |
| 130 | Otorhinolaryngologist | 1 |
| 131 | Otorhinolaryngology Resident | 1 |
| 140 | Orthopedic Surgeon | 1 |
| 141 | Hand Surgeon | 1 |
| 142 | Orthopedic Resident | 1 |
| 150 | Obstetrician/Gynecologist (OB/GYN) | 1 |
| 151 | Endocrinologist, OB/GYN | 1 |
| 152 | Oncologist, OB/GYN | 1 |
| 153 | Pathologist, OB/GYN | 1 |
| 154 | OB/GYN Resident | 1 |
| 200 | Pathologist | 1 |
| 202 | Medical Chemist | 0 |
| 203 | Medical Microbiologist | 0 |
| 204 | Forensic Pathologist | 1 |
| 205 | Neuropathologist | 1 |
| 206 | Nuclear Medicine Pathologist | 1 |
| 207 | Pathology Resident | 1 |
| 208 | Histopathologist | 1 |
| 210 | Biomedical Lab Officer | 0 |
| 211 | Biomedical Lab Science Officer | 0 |
| 212 | Microbiology Lab Officer | 0 |
| 213 | Chemistry Lab Officer | 0 |
| 214 | Blood Bank Officer | 0 |
| 215 | Clinical Lab Officer, Other | 0 |
| 300 | Aerospace Medicine Physician | 1 |
| 301 | Aerospace Medicine Resident | 1 |
| 302 | Aerospace Med Flight Surgeon/Family Practice | 1 |
| 320 | Preventive Medicine Physician | 1 |
| 321 | Occupational Medicine Physician | 1 |
| 322 | Hyperbaric/Underseas Medicine Physician | 1 |
| 400 | Radiologist | 1 |
| 401 | Radiation Therapist | 1 |
| 402 | Neuro-Radiologist | 1 |
| 403 | Nuclear Medicine Radiologist | 1 |
| 404 | Diagnostic Radiologist | 1 |
| 405 | Special Procedures Radiologist | 1 |
| 406 | Radiology Resident | 1 |
| 407 | Radiophysicist | 4 |
| 500 | Senior Staff Physician | 1 |
| 501 | Anesthesiology Consultant | 1 |
| 502 | Internal Medicine Consultant | 1 |
| 503 | Pediatric Medicine Consultant | 1 |
| 504 | Neurology Consultant | 1 |
| 505 | Psychology Consultant | 1 |
| 506 | Dermatology Consultant | 1 |
| 507 | Physical Medicine Consultant | 1 |
| 508 | Surgery Consultant | 1 |
| 509 | Urology Consultant | 1 |
| 510 | Ophthalmology Consultant | 1 |
| 511 | Otorhinolarynology Consultant | 1 |
| 512 | Orthopedic Surgery Consultant | 1 |
| 513 | OB/GYN Consultant | 1 |
| 514 | Aerospace Medicine Consultant | 1 |
| 515 | Preventive Medicine Consultant | 1 |
| 516 | Radiology Consultant  | 1 |
| 517 | Dental Consultant | 4 |
| 518 | Other Consultant | 1 |
| 600 | Nurse, General Duty | 0 |
| 601 | Mental Health Nurse | 0 |
| 602 | OB/GYN Nurse Practitioner | 4 |
| 603 | Pediatric Nurse Practitioner | 4 |
| 604 | Primary Care Nurse Practitioner Qualified | 4 |
| 605 | Primary Care Nurse Practitioner – Entry | 4 |
| 606 | Aerospace Nurse | 0 |
| 607 | Community Health Nurse | 4 |
| 608 | Certified Nurse Midwife | 4 |
| 609 | Nurse Midwife – Entry Level | 4 |
| 610 | Clinical Nurse- Entry Level for Nurse Practitioner | 4 |
| 611 | Psychiatric Nurse Practitioner | 3 |
| 612 | Nurse Anesthetist | 4 |
| 700 | Other Provider (Officer) | 4 |
| 701 | Aerospace Physiologist | 4 |
| 702 | Clinical Psychologist | 2 |
| 703 | Psychology Worker | 3 |
| 704 | Dietician – Nutritionist | 4 |
| 705 | Occupational Therapist | 1 |
| 706 | Physical Therapist | 1 |
| 707 | Podiatrist | 1 |
| 708 | Optometrist | 1 |
| 709 | Audiologist | 4 |
| 710 | Speech Therapist | 1 |
| 711 | Other Biomedical Specialist | 0 |
| 713 | Contract Chiropractor | 4 |
| 800 | Oral Surgeon | 1 |
| 801 | Oral Surgery Resident | 1 |
| 802 | Periodontist | 4 |
| 803 | Periodontic Resident | 4 |
| 804 | Prosthodontist | 4 |
| 805 | Prosthodontic Resident | 4 |
| 806 | Orthodontist | 4 |
| 807 | Orthodontic Resident | 4 |
| 808 | Oral Pathologist | 4 |
| 809 | Oral Pathology Resident | 4 |
| 810 | Endodontist | 4 |
| 811 | Endodontic Resident | 4 |
| 812 | Dental Officer General | 4 |
| 813 | Dental Officer Resident | 4 |
| 814 | Dental Staff Officer | 4 |
| 815 | Pedodontist | 4 |
| 816 | Pedodontic Resident | 4 |
| 900 | Corpsman/Technician | 0 |
| 901 | Physician Assistant | 4 |
| 902 | Dental Assistant | 0 |
| 905 | Cardiopulmonary Lab Technician | 0 |
| 910 | Adolescent Medicine | 1 |
| 911 | Aerospace Medicine | 1 |
| 912 | Allergy | 1 |
| 913 | Anesthesiology | 1 |
| 914 | Audiology | 4 |
| 915 | Cardiology | 1 |
| 916 | Community Health | 4 |
| 917 | Critical Care Medicine | 1 |
| 918 | Dental | 4 |
| 919 | Dermatology | 1 |
| 920 | Dietetics | 4 |
| 921 | Emergency Medicine | 1 |
| 922 | Endocrinology | 1 |
| 923 | Family Practice/Primary Care | 1 |
| 924 | Gastroenterology | 1 |
| 925 | General Medicine | 1 |
| 926 | Gerontology/Geriatrics | 1 |
| 927 | Gynecology | 1 |
| 928 | Health Benefits | 0 |
| 929 | Hematology | 1 |
| 930 | Immunology | 0 |
| 931 | Infectious Disease | 1 |
| 932 | Internal Medicine | 1 |
| 933 | Laboratory/Pathology | 0 |
| 934 | Medical Genetics | 1 |
| 935 | Metabolic Disease | 1 |
| 936 | Nephrology | 1 |
| 937 | Neonatal/Perinatal Medicine | 1 |
| 938 | Neurology | 1 |
| 939 | Nuclear Medicine | 1 |
| 940 | Nursing | 0 |
| 941 | Nutrition | 0 |
| 942 | OB/GYN | 1 |
| 943 | Ocuupational Health  | 4 |
| 944 | Oncology | 1 |
| 945 | Ophthalmology | 1 |
| 946 | Optometry | 1 |
| 947 | Orthopedics | 1 |
| 948 | Otorhinolaryngology | 1 |
| 949 | Pediatrics | 1 |
| 950 | Physical Medicine and Rehabilitation | 1 |
| 951 | Podiatry | 1 |
| 952 | Preventive Medicine | 1 |
| 953 | Psychiatry | 1 |
| 954 | Psychology | 2 |
| 955 | Pulmonary Disease | 4 |
| 956 | Radiology | 1 |
| 957 | Rheumatology | 1 |
| 958 | Social Work | 3 |
| 959 | Surgery | 1 |
| 960 | Physical Therapy | 1 |
| 961 | Radiation Therapy | 1 |
| 962 | Speech Language Pathology Therapy | 4 |
| 963 | Urology | 1 |
| 964 | Obstetrics | 1 |
| 965 | Sleep Disorders | 4 |
| 966 | Occupational Therapy | 1 |
| 967 | Developmental Pediatrics | 1 |
| 968 | Hyperbaric Medicine | 1 |
| 969 | Respiratory Therapy | 0 |
| 970 | Peripheral Vascular Medicine | 1 |
| 971 | Proctology | 1 |
| 972 | Thoracic Surgery | 1 |
| 999 | Unknown | 0 |

1. This would mean that the functional proponent’s office is notified for resolution. [↑](#footnote-ref-1)
2. The closed brackets (‘[‘, ‘]’) indicate inclusive ranges. [↑](#footnote-ref-2)