

10 March 2025

**Master Appointment
for the
MHS Data Repository (MDR)
(Version 2.00.08)**

Current Specification

Revision History

Version	Date	Originator	Para/Tbl/Fig	Description of Change
1.01.00	03/10/2009	J. MacLeod		Initial versioning.
1.02.00	03/09/2010	J. MacLeod		Changes incorporated for initial processor build.
1.02.01	03/29/2010	J. MacLeod	<ul style="list-style-type: none"> Table 1 	Added the summary output data set to Table 1.
1.03.00	04/29/2010	J. MacLeod	<ul style="list-style-type: none"> Table 3 Table 4 Section VI 	<ul style="list-style-type: none"> Changed the name of the Facility Zip Code from faczip to mtfzip so that the SADR code will not need to be modified for the merge to the appointment data. Corrected the spec derivation logic for the telcon variable. No change to processing code. Modified the description of how to identify cancellations.
1.04.00	06/11/2010	J. MacLeod	<ul style="list-style-type: none"> Table 3 	<ul style="list-style-type: none"> Changed the logic for bencat so that if no match is found with the LVM, bencat is set to Z rather than UNK. Changed the logic for comben, and sponsvc to include instruction on what to do if no match is found with the LVM.
1.05.00	06/24/2011	W. Funk	Entire document	<ul style="list-style-type: none"> Section I: Updated purpose Update entire document to reflect that the monthly feeds are no longer received. Added Product Line Added Rank and Rank Group
1.06.00	07/07/2011	W. Funk	<ul style="list-style-type: none"> Table 3 Appendix E Section X 	<ul style="list-style-type: none"> Added length of product line element Added format for rank collapsing Added information about M2 feed under "special outputs"
1.06.01	04/19/2013	W. Funk	<ul style="list-style-type: none"> Table 3 Table 7 Section 5 	<ul style="list-style-type: none"> Added new fields Added new fields Changed 35 day date window to 60 days.
1.06.02	06/10/2013	D. McDonald	<ul style="list-style-type: none"> Table 3 	<ul style="list-style-type: none"> Update Business Rule for acv_group

Version	Date	Originator	Para/Tbl/Fig	Description of Change
1.07.00	2/2/2015	J. MacLeod	<ul style="list-style-type: none"> Table 3 	<ul style="list-style-type: none"> Added Patient Name fields Note: the monthly feed is no longer being supplied, but the business rules were written to match the rest of the specification.
1.08.00	2/3/2015	J. MacLeod	<ul style="list-style-type: none"> Table 6 Appendix A Appendix B 	<ul style="list-style-type: none"> Eliminated table 6 because the layout of the feed is described in the M2 Appointment Data specification Re-numbered tables after Table 6 to account for the deletion of table 6. Appendix A – Added patient first name and patient last name to table 6 (after renumbering) Appendix B – added patient first name and patient last name to table 7 (after renumbering)
2.00.00	3/8/2016	T. Comer	<ul style="list-style-type: none"> Section II,III, V, VI, VIII Table 1 Table 3, Table 6 Appendices 	<ul style="list-style-type: none"> Removed references to basic files and master monthly appointment files Removed monthly appointment file information Updated table format to include ICD item number and field name references, alphabetized list by MDR label, added the following field groupings: <ul style="list-style-type: none"> a. Patient Category b. Detail Code(s) c. ATC Request/Time d. PCM Name, EDI_PN, IEN, and Group e. Provider Flag and Provider Name f. MHCDP Code and MHCDP Start and Stop Dates Removed Appendix A and renumbered Appendices and Tables
2.00.01	4/19/2016	W. Funk	<ul style="list-style-type: none"> Section IV, VI, Table 6 	<ul style="list-style-type: none"> Added basic file back in
2.00.02	6/24/2016	T.Comer	<ul style="list-style-type: none"> Table 3 	<ul style="list-style-type: none"> Added Hostprovien and rfuien

Version	Date	Originator	Para/Tbl/Fig	Description of Change
2.00.03	7/5/2016	T.Comer	<ul style="list-style-type: none"> Table 3 	<ul style="list-style-type: none"> Adjusted length of Hostprovien and rfuien
2.00.04	9/11/2017	Wendy Funk	<ul style="list-style-type: none"> Section 5 	<ul style="list-style-type: none"> Changed data filtering rules to exclude appointments scheduled on or after the extract date.
2.00.05	9/25/2017	Wendy Funk	<ul style="list-style-type: none"> Table 2 Table 3 	<ul style="list-style-type: none"> Clarified LVM date matching Added fields for NDAA 2017 and T2017
2.00.06	10/4/2017	Wendy Funk	<ul style="list-style-type: none"> Appendix D Table 4 	<ul style="list-style-type: none"> Corrected a typo in the ACV Group logic. Rewrote logic for the prime indicator. (Note: The summary file does not need to be completed before 1/1/2018)
2.00.07	11/29/2017	Keith Hofmann	<ul style="list-style-type: none"> Section 5 	<ul style="list-style-type: none"> Specified the data filtering rules more precisely for excluding appointments scheduled after the extract
2.00.08	3/10/2025	Wendy Funk	<ul style="list-style-type: none"> Table 2 	<ul style="list-style-type: none"> Added T Regions. Hid some fields.

MDR Master Appointment File

I. BACKGROUND

The purpose of this update to the MDR appointment specification is to support the development of a new table for the M2; which will include not only kept appointments, but also those that have not been kept.

II. SOURCE

The Appointment File feed is the primary feed used to create the MDR appointment file and originates from the CHCS Patient Appointment File. Data from a historical monthly feed are contained in historical year's data in this file, but updates are no longer received. For more information about how data from the monthly file can be found in the MDR Appointment Master – Historical functional specification. The only feed being used in newer data is the CHCS daily feed (which previously was a weekly feed).

III. TRANSMISSION (FORMAT AND FREQUENCY)

The data feed is transmitted from CHCS. Details about how the feed is prepared can be found in Interface Control Document 1300-6410-XX.

IV. ORGANIZATION AND BATCHING

Source Data: The first step in MDR processing is to batch records received from CHCS. Raw data batches should be stored in MDR/RAW according to routine MDR operating procedures.

Output Products: The MDR appointment processor requires many merges and field derivations, and many output products are prepared as a result of processing. Table 1 contains a list of these output products. The preparation of them is described in subsequent sections of this document.

Table 1: MDR Appointment Processor Output Products

MDR Appointment Processor	File Naming Convention	Member Name
MDR Basic Monthly Appointment File	/mdr/pub/basic/appt/detail/	fy<yy>.sas7bdat (NO LONGER UPDATED)
MDR Basic Appointment File	/mdr/pub/apptwkly/basic/fy**	fy<yy>.sas7bdat
MDR Master Appointment File	/mdr/pub/appt/detail/fy**	fy<yy>.sas7bdat
MDR Master Appointment Cancel File	/mdr/pub/appt/detail/fy**	fy<yy>_cancel.sas7bdat
MDR Appointment Summary File	/mdr/pub/appt/summary/	sum.sas7bdat
MHS Appointment Address File (Restricted Access only ¹)	/mdr/restricted/apptaddr/cy**/cm**/dpypmpd/	address.sas7bdat

Archival of files is also required, so that corresponding “apub” and other processing files (i.e. log, aprod, etc) are also loaded into the MDR according to routine operating procedures.

V. RECEIVING FILTERS

The appointment data are transmitted from CHCS daily. Beginning in 2017, the appointment data will contain records for appointments made 7 days in the future. For the time being, records with an

¹ Access to address data must be tightly controlled, as patient contact is possible with this file.

appointment date and time within one hour of the extract date and time (on or after the extract date and time) should be retained in mdr/raw, but stripped off for further processing.

VI. UPDATE PROCESS

There are two distinct types of appointment file products.

Although records are received daily, the MDR only processes appointment data on a weekly basis. Each week, appointment data that are received since the previous batching will be processed into the MDR datasets described in table 1.

The basic processor is not complicated. The general description of processing is that the feed data is appended to existing MDR data file(s) and the resulting file is de-duplicated by retaining only the most recent version (based on harvest or modification date) of a given record (defined by CHCS Host and Appointment IEN).

MDR Basic Appointment Weekly File: For the current and previous FY, files are updated weekly. This file contains all records sent in the MDR weekly appointment feed, de-duplicated as described above. The data elements in this file and SAS names are described in Appendix A. Records for previous fiscal years are batched and processed semi-annually. All fiscal year files should be sorted by CHCS Host and Appointment IEN prior to storage.

MHS Appointment Address File: To update the Appointment Address file, after de-duplicating (by CHCS Host and Appointment IEN), for any EDIPN, if there is more than one record per appointment, only the most recent appointment record is retained.

MDR Master Appointment File: The main MDR Master Appointment File contains all kept appointments while the associated master appointment cancellation file contains cancelled appointment information in exactly the same format as the MDR master appointment file. The same process is used to update the master appointment file and the master cancellation file². Each week, the most recent MDR Basic file is read in and data elements retained and derived according to the Merge/Transformation section of this document and Table 2 from the record layout section. Records with MEPRS codes: BPM, BQQ, BTR, BTS, BZA, BZZ, DAP, or FCH are deleted. New records are applied to the existing MDR Master Appointment File and MDR Appointment Master Cancellation File and further processed. To apply the update: append the newly received records onto the existing MDR Master Appointment File. If a record (CHCS Host / Appt IEN) exists in both the MDR Master File and the feed, retain the record that has the most recent modification date. Once this step is complete and derived fields have been added, remove all cancelled records from the MDR Master Appointment File and write them to the cancellation file. Records with one of the following values in the appointment status codes should be written to the cancellation data set: PENDING, CANCEL, NO-SHOW, LWOBS, ADMIN, OCC-SVC, BOOKED.

VII. FIELD TRANSFORMATIONS AND DELETIONS FOR MDR CORE DATABASE

There are several merges required to prepare the MDR Master Appointment File and the cancellation file. An asterisk after the merge file name indicates that existing MDR processing utilities should be used.

² An efficient method of operation would be to prepare both files in one process, separating into distinct outputs as a final step.

Table 2: External Reference File Merges

Merge	Date Matching	Additional Matching
Master Person Index*	Most recent MPI is used for FY08. For previous years, use MPI from the last month of the fiscal year being processed.	See VM-6 Specification
LVM*	For FY04 and later. The reference date is the appointment date.	EDIPN
Longitudinal Enrollment*	Match FY and CM of appointment to FY and CM of enrollment data elements. Only for FY03 and earlier.	Sponsor Social Security Number and DDS
Omni-CAD*	FY/FM of appointment FY/FM of MDR Omni CAD format file	Patient zip code & sponsor Service (Service: A=Army, F=Air Force/S Space Force, N=Navy and Navy Afloat, O=Other. Roll-up Appt Sources accordingly).
DMIS ID*	FY of appointment	Treatment DMIS ID
CMAC Provider Specialty File		Provider Specialty Code
Rank Reference Table		Rank (35)

Business rules for each of the appended fields that result from the merges above, are described in the body of the table in Section VIII, or in an appendix, referenced in that table.

VIII. RECORD LAYOUT AND CONTENT

The table below describes the content of the MDR Master Appointment data file and the MDR Master Cancellation File.

Table 3: MDR Appointment Master File SAS Dataset Structure and Business Rules

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Access to Care Category	atccat	\$15	43	Access to Care Category	No transformation
Appointment Date	apptdt	yyyymmdd	39	Appointment Date Time	Parse appointment date/time to derive appointment date, taking positions 1-8 of the source field. Store as numeric (SAS date)
Appointment IEN	apptidno	\$10	35	Host Appointment IEN	Record Key Field.
Appointment Status	apptstat	\$2	36	Appointment Status	1= PENDING 2= KEPT 3= CANCEL 4= NO-SHOW 5= WALK-IN 6= S-CALL 7= TEL-CON 8= LWOBS 9= ADMIN 10= OCC-SVC 12= BOOKED All other values
Appointment Time	apptime	\$5	39	Appointment Date Time	Parse appointment date and time to derive appointment time, taking positions 10-14 of the source field.
Appointment Type	appttype	\$6	37	Appointment Type	No transformation
ATC Request Date and Time	atcdttm	yyyymmdd HH:MM	70	ATC Request Date/Time	No transformation
CAPER Status	caperstat	\$1	28	CAPER Status	No transformation
CCE Status	ccestat	\$1	29	CCE Status	No transformation
CHCS Beneficiary Category	chcs_bc	\$3	59	Beneficiary Category	No transformation
CHCS PCM Group	chcs_group	\$30	61	NED Provider Group	No transformation
CHCS PCM ID	chcs_pcm	\$9	60	PCM ID	No transformation
CHCS Provider ID, Secondary Provider	provid2	\$9	50	Secondary Provider ID	No transformation
Clinic Name	clinic_name	\$30	63	Clinic Name	No transformation

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Date Appointment Made	apptmddt	yyyymmdd	42	Date and Time Appointment Made	Parse the Date & Time Appointment Made from weekly record to derive Date Appointment Made, taking positions 1-8 of the source field. Store as numeric (SAS date).
Date Last Modified	moddate	yyyymmdd	64	Harvest Date	No transformation
Date of Birth	patdob	yyyymmdd	4	Patient DOB	Store as numeric (SAS date)
DEERS Dependent Suffix (DDS)-Raw	dds_r	\$2	5	DDS	No transformation
Detail Code 1	detail1	\$8	66	Detail Code (1 st)	No transformation
Detail Code 2	detail2	\$8	67	Detail Code (2 nd)	No transformation
Detail Code 3	detail3	\$8	68	Detail Code (3 rd)	No transformation
Detail Code 4	detail4	\$8	69	Detail Code (4 th)	No transformation
DMIS ID	dmisid	\$4	11	Clinic DMIS ID	No transformation
Duration	apptmin	\$5	38	Appointment Duration	No Transformation
Enrollment DMIS ID (Raw)	enrdmis1	\$4	23	Enrolling DMIS ID	No transformation
Extract Date	extrdt	yyyymmdd	64	Harvest Date	Position 1-8; Store as numeric (SAS date)
Family Member Prefix	fmp	\$2	7	Patient Family Member Prefix (FMP)	No transformation
Health Care Delivery Program (HCDP)	hcdpcode	\$3	24	Health Care Delivery Plan (HCDP)	No transformation
Host Node DMIS ID	hostdmisid	\$4	1	Host DMIS ID	Record Key Field.
Host Provider IEN	hostprovien	\$12	44	Host Provider IEN	Position 6-12 of HOST_PRVIEN

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Inpatient Rounds MEPRS Code	rounds_meprs_cd	\$4	62	RNDS*MEPRS Code	No transformation
Location Type	pcmloc	\$1	34	Clinic Type	No transformation
Medicare Eligibility	medelig	\$2	31	Medicare Eligibility	No transformation
MEPRSCode	meprscd	\$4	32	Clinical MEPRS Code	No transformation
MHCDP Code	mcdp	\$3	77	MHCDP Code	No transformation
MHCDP Start Date	mhcdp_st	yyyymmdd	78	MHCDP Start Date	No transformation
MHCDP Stop Date	mhcdp_end	yyyymmdd	79	MHCDP Stop Date	No transformation
Patient Cancellation Reason Code	patcanrsn	\$18	40	Patient Cancellation Reason	No transformation
Patient Category	patcat	\$3	25	Patient Category Code	No transformation
Patient Category Status	cat_stat	\$1	65	Patient Category Status	No transformation
Patient First Name	firstname	\$20	8	Patient First Name	No transformation
Patient Last Name	lastname	\$26	9	Patient Last Name	No transformation
Patient SSN – Raw	patssn	\$9	10	Patient SSN	Remove dashes
Patient SSN Type Code	patssn_type	\$1	55	Patient Person ID Type Code	No transformation
Patient Status	patstat	\$1	22	Patient Status	No transformation
Patient Zip Code at Time of Visit	patzip	\$5	21	Patient ZIP Code	No transformation
PCM EDIPN	pcmedipn	\$10	72	PCM EDI_PN	No transformation
PCM Internal Entry Number	pcmien	\$10	73	PCM IEN	No transformation
PCM Place of Care	pcm_group	\$30	74	PCM Group Place of Care (Clinic)	No transformation
PCM Provider Name	pcmnm	\$30	71	PCM Provider Name	No transformation

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Person Identifier- Raw	patuniq_r	\$10	3	Patient Identifier	No transformation
Provider EDIPN	provedipn	\$10	46	Provider EDI_PN	No transformation
Provider EDIPN, Secondary	provedipn2	\$10	51	Secondary Provider EDI_PN	No transformation
Provider Flag	provflag	\$1	75	Provider Flag	No transformation
Provider ID (Old)	provid	\$9	45	Provider ID	No transformation
Provider Name	provmn	\$30	76	Provider Name	No transformation
Provider NPI	provnpi	\$10	57	Provider NPI	No transformation
Provider specialty (HIPAA)	hipaapr	\$10	47	Patient Tax	No transformation
Provider Specialty (Old)	provspec	\$3	48	Provider Specialty	No transformation
Referral Number	refnum	\$11	52	Host Reference IEN	Position 6-16 of HOST_REFIEN
Referral Refusal Reason IEN	rfuien	\$11	54	Host Referral Refusal Reason	Position 6-16 of HOST_RFUIEN
SADR Status	sadrstat	\$1	27	SADR Status	No transformation
Secondary Provider NPI	prov2npi	\$10	58	Secondary Provider NPI	No transformation
Sex	sex	\$1	12	Patient Sex	M= MALE F= FEMALE All other values
Source System	source	\$7	30	Source System	No transformation
Sponsor Rank	rank	\$35	15	Sponsor Rank	No transformation
Sponsor SSN – Raw	sponssn_r	\$9	16	Sponsor SSN	Remove dashes from SSN.
Sponsor SSN Type Code	sponssn_type	\$1	56	Sponsor Person ID Type Code	No transformation
State	state	\$2	17	Patient State	Derive state using PATZIP
Time Appointment Made	apptmdtime	\$5	42	Date and Time Appointment Made	Parse the Date & Time Appointment Made Date taking positions 10-14 of the source field.

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Workload Type	wkldtype	\$1	41	Work Load	C= COUNT N=NON-COUNT All other values
Internally Derived Fields (or simple proc format assignments)					
Age Group	dmsage	\$1			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
Appointment Prefix	aptprefix	\$1			Set to I.
Basic Master Change Date (MDR)	wkchgdt	yyyymmdd			Same as basic file "procdt"
CM	cm	\$2			Calendar Month of appointment date
CY	cy	\$4			Calendar year of appointment date
FM	fm	\$2			Set to CM -9 if CM is 10, 11 or 12, otherwise, set to CM + 3
FY	fy	\$4			Set to CY if CM is between 1 and 9, otherwise, set to CY+1
Initial Processing Date (MDR)	procdate1	yyyymmdd			Set to the initial date that this record was prepared for the MDR. Store as numeric (SAS date).
Length of Time Until Appointment	time_until	3			If either the appointment date or the date the appointment was made is missing or if the date the appointment was made is after the appointment date, then set time_until to missing. Otherwise set time_until to the number of days between the day of the appointment and the day the appointment was made. If time_until is greater than 999, then set it to 999.

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Master Change Code	chgcode	\$1			This code describes the record type after processing. The type can indicate the record is: a newly-added record (N), an existing master record that was modified by the last processing cycle (U), or an existing master record that was not modified by the last processing cycle (blank).
Master Change Date (MDR)	chgdt	yyyymmdd			Set to the most recent date that any data element on the master MDR record was changed. For records that never change, this will be equal to the initial processing date. Store as numeric (SAS date).
Medicare Eligibility Flag	medflag	\$1			If Medicare eligibility is blank and the patient age 65+, set MEDFLAG to Y. If Medicare eligibility not blank, set MEDFLAG to Y. Otherwise set MEDFLAG to N.
MEPRS 1 Code	mep1	\$1			Set to 1 st digit of MEPRS Code
MEPRS 3 Code	mep3	\$3			Set to 1 st 3 digits of MEPRS Code
Patient Age	patage	3			If the patient's date of birth is after the appointment date or either date is missing, set the patient age to missing. Otherwise, if the day of the appointment is later in the year than the patient's date of birth, set equal to the year of the appointment date – the year of the birth date, else set equal to year of the appointment date – the year of the patient's birth date - 1.
Product Line	prodline	\$7			See Appendix B for derivation.
Record Type Flag	rectype	\$1			Set to "B" if both a monthly and weekly file are available. Set to M if only a monthly record is available and Set to W if only a weekly record is available.
Sponsor Rank – 4 character	rankpay	\$4			Collapse spon_rank into rankpay according to table (Appendix B)
Sponsor Rank Group	rankgrp	\$2			Derived according to table 8 in Appendix C.

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Walk In Flag	walkin	\$1			Use raw walk-in flag (walkin_r) from weekly basic master file to derive this field. If the raw walk-in field is WALK-IN, set the walkin flag to 'Y', otherwise set the walkin flag to 'N'
Summary Branch of Service	sumsvc	\$1			If sponsvc N,M,V, set sumsvc=N. If sponsvc A, set sumsvc=A. If sponsvc = F, set sumsvc = F. Otherwise, set sumsvc = O.
Bencat Common	comben	\$1			If bencat in (AD GRD) then set to 4, else if bencat in (DA, DGR) set to 1 elseif bencat is RET set to 2, else set to 3.
DEERS ACV Group	acvgroup	\$2			If appt date is >=1/1/2018 then: if enr_grp is "P" then set to "PR" elseif enr_grp is "L" then set to "PL" elseif enr_group="U" then set to "DP" elseif (bencat common=4 and pcm_type=N) then "R" elseif pcm_type="O" then "R" elseif elg_grp in ("R" "S") then "O" else "O" For logic prior to Jan 2018, see appendix D
From LVM/LENR Merge (matched on EDIPN where appt date is between the begin and end date of the appropriate segment)					
DEERS ACV	acv	\$1			If the appointment date is between the begin and end date of MDR_ACV, then fill with MDR_ACV else leave blank; see VM=6 specification, section G18 and 19 for segment and field position. NO LONGER POPULATED AFTER JAN 1, 2018

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
DEERS Enrollment DMIS ID	enrdmis	\$4			If the appointment date is between the begin and end date of D_MI_PCM_EDVSN_DMIS_ID then fill with D_MI_PCM_EDVSN_DMIS_ID else leave blank; see VM=6 specification, section G18 and 19 for segment and field position.
DEERS PCM ID	pcm_id	\$32			If the appointment date is between the begin and end date of D_MI_PCM_ID then fill with D_MI_PCM_ID else leave blank; see VM=6 specification, section G18 and 19 for segment and field position.
DEERS Beneficiary Category	bencat	\$3			If the appointment date is between the begin and end date of D_R_BEN_CAT_CD then fill with D_R_BEN_CAT_CD else leave blank; see VM=6 specification, section G18 and 19 for segment and field position. If no match, set to "Z"
DEERS Aggregate Sponsor Branch of Service	sponsvc	\$1			If the appointment date is between the begin and end date of D_SPON_BR_SVC_CD then fill with D_SPON_BR_SVC_CD else leave blank; see VM=6 specification, section G18 and 19 for segment and field position. If no match, set to "Z"
DEERS HCDP – Enrolled	hcdp	\$3			If the appointment date is between the begin and end date of D_MI_HCDP_PLN_CVG_CD then fill with D_MI_HCDP_PLN_CVG_CD else leave blank; see VM=6 specification, section G18 and 19 for segment and field position.

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
DEERS HCDP - Assigned	hcdp_assgn	\$3			If the appointment date is between the begin and end date of D_MI_HCDP_PLN_CVG_CD then fill with D_MI_HCDP_PLN_CVG_CD else leave blank; see VM=6 specification, section G18 and 19 for segment and field position.
Eligibility Group	elg_grp	\$2			If the appointment date is between the begin and end date of D_ELG_GRP_CD then fill with D_ELG_GRP_CD else leave blank; see VM=6 specification, section G18 and 19 for segment and field position.
Enrollment Group	enr_grp	\$2			If the appointment date is between the begin and end date of D_ENR_GRP_CD then fill with D_ENR_GRP_CD else leave blank; see VM=6 specification, section G18 and 19 for segment and field position.
Enrollment PCM Type	pcm_type	\$1			If the appointment date is between the begin and end date of D_PCM_TYPE_CD then fill with D_PCM_TYPE_CD else leave blank; see VM=6 specification, section G18 and 19 for segment and field position.
From Omni-CAD Merge: Based on zip code, sponsor service and FY/FM					
PRISM Area	prism	\$4			Use patient zip code at time of visit (PATZIP) and sponsor service (map all non-A, F or N to O) for merge. If no matching zip code, set to '0999'.
Tnex Region	restnex	\$1			Use patient zip code at time of visit (PATZIP) for merge. If no match, leave blank. No longer required as of Jan 2025.

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
MCS Region	ptmcsreg	\$2			Use patient zip code at time of visit (PATZIP) for merge. If no matching zip code, set to '16'. No longer required as of Jan 2025.
MTF Service Area	mtfsvcare	\$4			Use patient zip code at time of visit (PATZIP)for merge. If no matching zip code, set to '0999'.
Beneficiary T3 Region	ben_t3_reg	\$2			T3_Reg. If no match leave blank. No longer required as of Jan 2025.
Beneficiary T2017 Region	ben_t17_reg	\$2			T17_Reg. If no match, leave blank.
Beneficiary T5 Region	ben_t5_reg	\$2			T5_Reg. If no match leave blank.
Treatment Service	txsvc	\$1			Set to the ubu_svc variable from the DMIS ID table, merging the data by DMISID and FY.
Facility State	facstate	\$2			Set to the facstate variable from the DMIS ID table, merging the data by DMISID and FY.
Facility Zip Code	mtfzip	\$5			Set to the mtfzip variable from the DMIS ID table, merging the data by DMISID and FY.
Treatment MCS Region	txmcsreg	\$2			Set to the ubu_reg variable from the DMIS ID table, merging the data by DMISID and FY. No longer required as of Jan 2025.
Treatment T-NEX Region	txtnxreg	\$1			Set to the tnexreg variable from the DMIS ID table, merging the data by DMISID and FY. No longer required as of Jan 2025.
Treatment DMISID T3 Region	mtf_t3_reg	\$2			t3_reg. No longer required as of Jan 2025.
Treatment DMIS ID T2017 Region	mtf_t17_reg	\$2			t17_reg
Treatment DMIS ID T5 Region	mtf_t5_reg	\$2			t5_reg

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
From DMISID Table Merge (By FY and Enrollment MTF)					
Enrollment Service	Enrsvc	\$1			Set to the ubu_svc variable from the DMIS ID table, merging the data by enrollment DMISID and FY. If no enrollment site, or enrollment site not found in MDR DMIS ID Table, set to "X".
Enrollment Site T3 Region	enr_t3_reg	\$2			T3_reg. No longer required as of Jan 2025
Enrollment Site T2017 Region	enr_t17_reg	\$2			T17_reg
Enrollment Site T5 region	enr_t5_reg				T5_Reg
From MPI Merge					
Sponsor SSN	sponssn	\$9			Fill with the raw Sponsor SSN from the appointment record. If the raw Sponsor SSN is blank, then fill with the Sponsor SSN from the MPI. (See the VM6 specification for information on the MPI.)
DEERS Dependent Suffix	dds	\$2			Obtain the DDS from the MPI. (See the VM6 specification for information on the MPI.)
Person Association Reason Code	PARC	\$2			Obtain the PARC from the MPI. (See the VM6 specification for information on the MPI.)
Person Identifier	edi_pn	\$10			Fill with the raw Patient Identifier (patuniq) from the appointment record. If the raw patient Identifier is blank, then fill with the edi_pn from the MPI. (See the VM6 specification for information on the MPI.)

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
CMAC Provider Specialty File					
CMAC Provider Specialty Class	cmac	\$1			Apply provider specialty proc format to the provider specialty code in the appointment data. If the provider specialty code is not found in the format, set CMAC to 0. The result is the CMAC Provider Specialty Class.

IX. DATA MARTS

N/A

X. 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, 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.

Table 4: MDR Appointment Summary File

Variable Name	Format	SAS Name	Transformation
DEERS Ben Cat Common	\$1	comben	No transformation
CM	\$2	cy	No transformation
CY	\$4	cm	No transformation
DMIS ID	\$4	dmisid	No transformation
FM	\$2	fm	No transformation
FY	\$4	fy	No transformation
Host Node DMIS ID	\$4	hostdmisid	No transformation
Inpatient Workload Volume	N	inpvol	Count of rows where Patient Status (patstat)= "I"
MEPRS 3 Code	\$3	mep3	No transformation
Outpatient Workload Volume	N	outpvol	Count of rows where patstat <> "I"
PRIME Enrollment Indicator	\$1	prime	"1" if Enrollment Group is "P", else "0"
CMAC Provider Group	\$1	provgrp	1 if CMAC Provider Class (CMAC) is "1", else 0
Sex	\$1	sex	No transformation
Summary Branch of Service	\$1	sumsvc	No transformation
Summary Age Group	\$1	sumage	'Y' if dmisage <'H', Else 'S'
Tel Con Indicator	\$1	telcon	1 if appointment status (apptstat) is 7, else 0

Variable Name	Format	SAS Name	Transformation
Total Workload Volume	N	totvol	Sum of inpatient volume (inpv) and outpatient volume (outpv)
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 Appointment 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 appointment data are available, 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 one 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 the MHS Address file is described in table 5.

Table 5: MHS Address File Feed

Variable Name	Format	SAS Name
Appointment Date	\$8	apptdt
Sponsor SSN	\$9	sponssn
DEERS Dependent 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	Derive STATE using PATZIP and the ZIPSTATE function available in SAS.
Zip Code	\$5	zip (use PATZIP field to populate)
Phone Number	\$14	fonhome
Date last modified	\$8	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.

M2 Data Feed: The M2 receives a weekly extract of Master Appointment Data from the MDR, including records from appointments that were kept and not-kept. This extract includes records from 2005 forward. The layout of the feed is described in the M2 Appointment data specification.

XI. QUALITY REVIEW REQUIREMENTS

The preparation of MDR appointment data is complex. In order to ensure processing is done correctly, several basic quality review requirements are presented in this section.

1. Basic Data Flow Process Check: A spreadsheet should be maintained that tracks record counts associated with each data step used in processing. Significant variations in appointment-based data should be noted and explored with DSD. The disposition of all appointment records should be accounted for in this spreadsheet. Record counts of reference files should also be recorded so that expectations of changes in record counts can be ascertained.
2. File Size: Record counts should increase as a file is updated.
3. There should a maximum of one record per CHCS Host / Appointment IEN in any one appointment file.
4. The number of records matched should be tracked and reviewed in each processing cycle, including the match of appointment records in weekly and monthly feeds, and also matches to reference files. Significant changes in match statistics should be reported to DSD.
5. Proc contents should be reviewed and compared against specifications to ensure conformance.
6. Frequency tabulations should be compared from cycle to cycle for the following variables: beneficiary category, acv, tnex region, mtf svc, and appointment status code.
7. Each month the values observed in certain fields should be checked to see if new or modified values are introduced. Fields that should be checked include raw fields used by the processor to derive other fields, raw fields used to identify individual records for specific types of processing (e.g., to remove cancellations), and raw fields used to control the flow of processing.
8. Routine feed and file management procedures should be followed for the MDR appointment processor.

Appendix A: MDR Basic File

Table 6: Format of MDR Basic File

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Access to Care Category	atc_cat	\$15	43	Access to Care Category	No transformation
Appointment Date and Time	aptdttm	yyyymmdd HH:MM	39	Appointment Date Time	Store as numeric (SAS date)
Appointment Duration	appt_dur	\$5	38	Appointment Duration	No transformation
Appointment Internal Entry Number	apptien	\$10	35	Host Appointment IEN	Record Key Field. Position 6-15 of the HOST_APTIEN
Appointment Status	apptstat_r	\$10	36	Appointment Status	No transformation
Appointment Type	appttype_r	\$6	37	Appointment Type	No transformation
ATC Request Date and Time	atcdttm	yyyymmdd HH:MM	70	ATC Request Date/Time	No transformation
CAPER Status	caperstat	\$1	28	CAPER Status	No transformation
CCE Status	ccestat	\$1	29	CCE Status	No transformation
CHCS Beneficiary Category	chcs_bc	\$3	59	Beneficiary Category	No transformation
CHCS Host	chcshost	\$4	1	Host DMIS ID	Record Key Field
CHCS PCM Group	chcs_group	\$30	61	NED Provider Group	No transformation
CHCS PCM ID	chcs_pcm	\$9	60	PCM ID	No transformation
CHCS Provider ID	provid	\$9	45	Provider ID	No transformation
CHCS Provider ID, Secondary	provid2	\$9	50	Secondary Provider ID	No transformation
Clinic Name	clinic_name	\$30	63	Clinic Name	No transformation
Countable Visit Indicator, Raw	wkld	\$9	41	Work Load	No transformation

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Date and Time Appointment Made	dtapmdttm	\$14	42	Date and Time Appointment Made	No transformation
DEERS Dependent Suffix	dds	\$2	5	DDS	If the DDS is one character long, and that one character is a number between 0 and 9, inclusive, then concatenate a 0 (zero) and the single-digit DDS value together to produce a 2-character DDS.
Detail Code 1	detail1	\$8	66	Detail Code (1 st)	No transformation
Detail Code 2	detail2	\$8	67	Detail Code (2 nd)	No transformation
Detail Code 3	detail3	\$8	68	Detail Code (3 rd)	No transformation
Detail Code 4	detail4	\$8	69	Detail Code (4 th)	No transformation
Enrollment DMIS ID (Raw)	enrdmis1	\$4	23	Enrolling DMIS ID	No transformation
Extract Date	extrdt	yyyymmdd	64	Harvest Date	Position 1-8; Store as numeric (SAS date)
Family Member Prefix	fmp	\$2	7	Patient Family Member Prefix (FMP)	If the FMP is one character long, and that one character is a number between 0 and 9, inclusive, then concatenate a 0 (zero) and the single-digit FMP value together to produce a 2-character FMP.
Health Care Delivery Program Code, Raw	chcshcdp	\$3	24	Health Care Delivery Plan (HCDP)	No transformation
Host Provider IEN	hostprovien	\$30	44	Host Provider IEN	No transformation
Inpatient Rounds MEPRS Code	rounds_meprs_cd	\$4	62	RNDS*MEPRS Code	No transformation
Location Type	pcmloc	\$1	34	Clinic Type	No transformation
Medicare Eligibility	medelig	\$26	31	Medicare Eligibility	No transformation
MEPRS 4 Code	meprs4	\$4	32	Clinical MEPRS	No transformation
MHCDP Code	mhcdp	\$3	77	MHCDP Code	No transformation
MHCDP Start Date	mhcdp_st	yyyymmdd	78	MHCDP Start Date	No transformation

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
MHCDP Stop Date	mhcdp_end	yyyymmdd	79	MHCDP Stop Date	No transformation
Patient Cancellation Reason Code	patcanrea	\$18	40N	Patient Cancellation Reason	No transformation
Patient Category Code	patcat	\$3	25	Patient Category Code	No transformation
Patient Category Status	cat_stat	\$1	65	Patient Category Status	No transformation
Patient Date of Birth	patdob	yyyymmdd	4	Patient DOB	Store as numeric (SAS date)
Patient First Name	firstname	\$20	8	Patient First Name	No transformation
Patient Gender	sex	\$6	12	Patient Sex	No transformation
Patient Last Name	lastname	\$26	9	Patient Last Name	No transformation
Patient SSN	patssn	\$9	10	Patient SSN	SSNs coming from the weekly feed must have the dashes removed.
Patient SSN Type Code	patssn_type	\$1	55	Patient Person ID Type Code	No transformation
Patient State	state	\$35	17	Patient State	No transformation
Patient Status	patstat	\$1	22	Patient Status	No transformation
Patient Zip Code at Time of Visit	patzip	\$5	21	Patient ZIP Code	No transformation
PCM EDIPN	pcmedipn	\$10	72	PCM EDI_PN	No transformation
PCM Internal Entry Number	pcmien	1-12	73	PCM IEN	No transformation
PCM Place of Care	pcm_group	\$30	74	PCM Group Place of Care (Clinic)	No transformation
PCM Provider Name	pcmnm	\$30	71	PCM Provider Name	No transformation
Person ID, Raw	EDIPN_R	\$10	3	Patient Identifier	No transformation
Provider EDIPN	provedipn	\$10	46	Provider EDI_PN	No transformation
Provider EDIPN, Secondary	prov2edipn	\$10	51	Secondary Provider EDI_PN	No transformation

MDR Data Element	MDR SAS Name	Format	ICD Field #	ICD Field Name	Business Rule
Provider Flag	provflag	\$1	75	Provider Flag	No transformation
Provider Name	provnrm	\$30	76	Provider Name	No transformation
Provider NPI	provnpi	\$10	57	Provider NPI	No transformation
Provider specialty (HIPAA)	hipaapr	\$10	47	Patient Tax	No transformation
Provider Specialty (Old)	provspe	\$3	48	Provider Specialty	No transformation
Referral Number	refnum	\$11	52	Host Reference IEN	Position 6-16 of HOST_REFIEN
Referral Refusal IEN	rfuien	\$30	54	Host Referral Refusal Reason IEN	No transformation
SADR Status	sadrstat	\$1	27	SADR Status	No transformation
Secondary Provider NPI	prov2npi	\$10	58	Secondary Provider NPI	No transformation
Source System	source	\$7	30	Source System	No transformation
Sponsor SSN	sponssn	\$9	16	Sponsor SSN	SSNs coming from the weekly feed must have the dashes removed.
Sponsor Rank	rank	\$35	15	Sponsor Rank	No transformation
Sponsor SSN Type Code	sponssn_type	\$1	56	Sponsor Person ID Type Code	No transformation
Treatment DMIS ID	mtf	\$4	33	Host Clinic DMIS ID	Substr(HOST_CLDMIS,6,4)
Walk-in Flag	walkin_r	\$11	53	Walk-in Appointment	No transformation
Internally Derived Fields					
Change Code	chgcode	\$1			This code describes the record type after processing. The type can indicate the record is: a newly-added record (N), an existing master record that was modified by the last processing cycle (U), or an existing master record that was not modified by the last processing cycle (blank).
Processing Date	procdt	yyyymmdd			Date that the processor most recently added/updated this record. Store as numeric (SAS date)

Appendix A: Rank to Rank Group derivation

Table 7: Rank Group Derivation Logic

RANK	Rank Group
ACADEMY CADET/MIDSHIPMAN	CD
AIR FORCE ACADEMY CADET	CD
AVIATION CADET	CD
CADET	CD
CADET/MIDSHIPMAN	CD
AIRMAN	EJ
AIRMAN APPRENTICE	EJ
AIRMAN BASIC	EJ
AIRMAN FIRST CLASS	EJ
AIRMAN RECRUIT	EJ
CORPORAL	EJ
LANCE CORPORAL	EJ
PETTY OFFICER THIRD CLASS	EJ
PRIVATE	EJ
PRIVATE E1	EJ
PRIVATE E2	EJ
PRIVATE FIRST CLASS	EJ
SEAMAN	EJ
SEAMAN APPRENTICE	EJ
SEAMAN RECRUIT	EJ
SENIOR AIRMAN	EJ
SPECIALIST	EJ
SPECIALIST 4	EJ
SPECIALIST 5	EJ
SPECIALIST 6	EJ
SPECIALIST 7	EJ
CAPTAIN	OJ
ENSIGN	OJ
FIRST LIEUTENANT	OJ
LIEUTENANT	OJ
LIEUTENANT JUNIOR GRADE	OJ
OFFICER 01 GRADE	OJ
OFFICER 03 GRADE	OJ
SECOND LIEUTENANT	OJ
CHIEF MASTER SERGEANT	ES
CHIEF PETTY OFFICER	ES
COMMAND SERGEANT MAJOR	ES
COMMAND SERGEANT MAJOR OF THE ARMY	ES

RANK	Rank Group
FIRST SERGEANT	ES
GUNNERY SERGEANT	ES
MASTER CHIEF PETTY OFFICER	ES
MASTER CHIEF PETTY OFFICER OF THE N	ES
MASTER GUNNERY SERGEANT	ES
MASTER SERGEANT	ES
PETTY OFFICER FIRST CLASS	ES
PETTY OFFICER SECOND CLASS	ES
SENIOR CHIEF PETTY OFFICER	ES
SENIOR MASTER SERGEANT	ES
SERGEANT	ES
SERGEANT 1ST CLASS	ES
SERGEANT MAJOR	ES
SERGEANT MAJOR OF THE ARMY	ES
STAFF SERGEANT	ES
STAFF SERGEANT MAJOR	ES
TECHNICAL SERGEANT	ES
ADMIRAL	OS
BRIGADIER GENERAL	OS
COLONEL	OS
COMMANDER	OS
COMMODORE	OS
FLEET ADMIRAL	OS
GENERAL	OS
GENERAL OF THE AIR FORCE	OS
GENERAL OF THE ARMY	OS
LIEUTENANT COLONEL	OS
LIEUTENANT COMMANDER	OS
LIEUTENANT GENERAL	OS
MAJOR	OS
MAJOR GENERAL	OS
OFFICER 04 GRADE	OS
OFFICER 05 GRADE	OS
OFFICER 06 GRADE	OS
OFFICER 09 GRADE	OS
OFFICER 10 GRADE	OS
REAR ADMIRAL	OS
VICE ADMIRAL	OS
AF GRADE UNKNOWN	XX
AF OFFICER/GRADE UNKNOWN	XX
AIRMAN/GRADE UNKNOWN	XX
ARMY GRADE UNKNOWN	XX

RANK	Rank Group
CG GRADE UNKNOWN	XX
CIVILIAN	XX
CONSTRUCTIONMAN	XX
CONSTRUCTIONMAN APPRENTICE	XX
CONSTRUCTIONMAN RECRUIT	XX
DENTALMAN	XX
DENTALMAN APPRENTICE	XX
DENTALMAN RECRUIT	XX
ENLISTED 31 GRADE	XX
ENLISTED 33 GRADE	XX
ENLISTED 35 GRADE	XX
ENLISTED 36 GRADE	XX
ENLISTED 37 GRADE	XX
ENLISTED 38 GRADE	XX
ENLISTED 39 GRADE	XX
FIREMAN	XX
FIREMAN APPRENTICE	XX
FIREMAN RECRUIT	XX
FOREIGN MIL ENLISTED/CIV EQUIV	XX
FOREIGN MIL OFFICER/CIV EQUIV	XX
HOSPITALMAN	XX
HOSPITALMAN APPRENTICE	XX
HOSPITALMAN RECRUIT	XX
MARINE GRADE UNKNOWN	XX
NAVY GRADE UNKNOWN	XX
NOAA GRADE UNKNOWN	XX
PLATOON SERGEANT	XX
UNKNOWN	XX
UNKNOWN PHS PERSONNEL	XX
CHIEF WARRANT OFFICER	XX
CHIEF WARRANT OFFICER 1	XX
CHIEF WARRANT OFFICER 2	XX
CHIEF WARRANT OFFICER 3	XX
CHIEF WARRANT OFFICER 4	XX
CHIEF WARRANT OFFICER 5	XX
WARRANT OFFICER	XX

Appendix B: Product Line Mapping Rules

Table 8: Product Line Mapping Table

Product Line	Full Name Description	Definition
PC	Primary Care	BGA, BHA, BDA, BAA, BJA, BHB, BHI, BDC, BDB, BKA, BHZ, BGZ, BHH
ORTHO	Orthopedics	BLA, BEA, BEF, BEZ, BEB, BEE, BEC, BED, BLB
MH	Mental Health	BFD, BFE, BFF, BFA, BFB, BFC
OBGYN	Obstetrics/Gynecology	BCC, BCB, BCD, BCA
OPTOM	Optometry	BHC, BBD
IMSUB	Internal Medicine Subspecialty	BAG, BAC, BAL, BAK, BAB, BAN, BAQ, BAS, BAM, BAF, BAJ, BAO, BAH, BAE, BAU, BAT, BAV
ER	Emergency Room	BIA
SURG	General Surgery	BBA
SURGSUB	Surgical Subspecialty	BBI, BBG, BBC, BBK, BBJ, BBH, BBB, BBZ, BBE
ENT	Otolaryngology	BBF
DERM	Dermatology	BAP
OTHER	Other	All other MEPRS Codes

Appendix C: Rank to Rank(4) proc format

This format will initially assign a blank value initially. It is intended that a replacement format file will be provided in the future which will map the 35 character rank element to the 4 character rank element. The structure of this format table will enable this without a code change.

```
PROC FORMAT;  
    VALUE $rank  
  
    other="    ";
```

Appendix D: ACV Group

For time periods before Jan 1, 2018, ACV is derived as follows:

For FY03 and before:

```
If ACV = A, D, or E then "PR"  
Else if ACV = G or L then "PL"  
Else if ACV = U then "DP"  
Else if Ben Cat Common = 4 then "R"  
Else "O"
```

For FY04 and after:

```
If ACV = A, E, H, or J then "PR"  
Else if ACV = B or F then "OP"  
Else if ACV = G or L then "PL"  
Else if ACV = U then "DP"  
Else if ACV = R or V then "O"  
Else if ACV = M or Q then "R"  
Else if Ben Cat Common = 4 then "R"  
Else "O"
```

This is a change in coding schema and it is recognized that not all years may be processed with the new values. The legacy rules are:

For FY03 and before:

```
If ACV = A, D, or E then "1"  
Else if ACV = G or L then "3"  
Else if ACV = U then "4"  
Else if Ben Cat Common = 4 then "5"  
Else "6"
```

For FY04 and after:

```
If ACV = A, E, H, or J then "1"  
Else if ACV = B or F then "2"  
Else if ACV = G or L then "3"  
Else if ACV = U then "4"  
Else if ACV = R or V then "6"  
Else if ACV = M or Q then "5"  
Else if Ben Cat Common = 4 then "5"  
Else "6"
```