

**Inpatient Discharge Data File and Supporting Documentation File Layouts (UB04), 1990- Present**

<b>INPATIENT DISCHARGE DATA FILE LAYOUT</b>				
<b>FIELD NAME</b>	<b>DATA ELEMENT DESCRIPTION</b>	<b>DATA FILE LOCATION</b>	<b>FORMAT* / SIZE</b>	<b>NOTES</b>
	<b>Record Identification</b>			
SYSID	System assigned unique record sequence number	001-007	X(7)	Unique code for each record for each quarter
YEAR	Processing Year	008-011	X(4)	Year
QUARTER	Processing Quarter	012	X(1)	Quarter of year
	<b>Facility Identification</b>			
PAF	Pennsylvania Facility Number (PAF)	013-016	X(4)	PHC4 assigned facility code
HREGION	Facility Region Code	017	X(1)	PHC4 assigned Region code (1 - 9)
MAID	MAID	018-025	X(8)	PA Medical Assistance Identifier; No longer available effective 2003Q1
	<b>Patient Data</b>			
PTSEX	Patient Sex Code	026	X(1)	Gender
ETHNIC	Hispanic/Latino Origin or Descent	027	X(1)	Ethnic descent; Available effective 1994Q1
RACE	Race Code	028	X(1)	Race; Available effective 1994Q1
PSEUDOID	Pseudo Patient Identifier	029-038	X(10)	PHC4 assigned unique patient code
AGE	Patient Age in Years	039-041	9(3)	Age of patient; Zero if less than 1 year or unknown
AGECAT	Patient Age in Days	042-043	X(2)	PHC4 assigned age groups of patient age in days; Only calculated if ≤1 year old
PTZIP	Patient Zip Code	044-048	X(5)	Zip code of patient
MKTSHARE	Home Market Share Area Code	049-051	X(3)	Blank filled
COUNTY	Patient Home County Code	052-054	X(3)	PA county code (1 – 67) or Federal County Code
STATE	Patient State Code	055-056	X(2)	USPS standard state code
ACCIDENTSTATE	Accident State	057-058	X(2)	Identifies state of where the auto accident occurred if services reported on the claim are related to the accident; Available effective 2011Q1
	<b>Admission Data</b>			
ADTYPE	Priority (Type of Visit)	059	X(1)	Defines urgency level of admission
ADSOURCE	Point of Origin for Admission or Visit	060	X(1)	Defines point of Origin for Admission or Visit
ADHOUR	Admission Hour	061-062	X(2)	Military time (24 hour clock); Available effective 1994Q1

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ADMDX	Admitting Diagnosis	063-069	X(7)	Defines diagnosis at admission; Available effective 1994Q1; (field size changed from 6 starting 2007Q3)
ADDOW	Admission Day of Week	070	X(1)	Code for day of admission (1 – 7)
	<b>Discharge Data</b>			
DCSTATUS	Patient Discharge Status	071-072	X(2)	Defines discharge destination
LOS	Length of Stay	073-077	9(5)	Number of hospitalization days
DCHOUR	Discharge Hour	078-079	X(2)	Military time (24 hour clock); Available effective 1994Q1
DCDOW	Discharge Day of Week	080	X(1)	Code for day of discharge (1 - 7)
	<b>Diagnosis Codes</b>			
ECODE1	External Cause of Injury Code (1)	081-087	X(7)	Defines external cause of injury code (ECI); Available effective 1994Q1; (field name changed from "ECODE" and field size changed from 6 starting 2007Q3)
ECODEPOA1	External Cause of Injury Code Present on Admission (POA) Indicator (1)	088	X(1)	Present on admission indicator for external cause of injury; Available effective 2011Q1
ECODE2	External Cause of Injury Code (2)	089-095	X(7)	Defines additional external cause of injury code (ECI); Available effective 2011Q1
ECODEPOA2	External Cause of Injury Code Present on Admission (POA) Indicator (2)	096	X(1)	Additional present on admission indicator for external cause of injury code; Available effective 2011Q1
ECODE3	External Cause of Injury Code (3)	097-103	X(7)	Defines additional external cause of injury code (ECI); Available effective 2011Q1
ECODEPOA3	External Cause of Injury Code Present on Admission (POA) Indicator (3)	104	X(1)	Additional present on admission indicator for external cause of injury code; Available effective 2011Q1
PDX	Principal Diagnosis Code	105-111	X(7)	Defines diagnosis at discharge; (field size changed from 6 starting 2007Q3)
PDXPOA	Principal Diagnosis Code Present on Admission (POA) Indicator	112	X(1)	Present on admission indicator for principal diagnosis; Available effective 2011Q1
SDX1	Secondary/Other Diagnosis Code (1)	113-119	X(7)	Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3)
SDXPOA1	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (1)	120	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1

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SDX2	Secondary/Other Diagnosis Code (2)	121-127	X(7)	Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3)
SDXPOA2	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (2)	128	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX3	Secondary/Other Diagnosis Code (3)	129-135	X(7)	Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3)
SDXPOA3	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (3)	136	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX4	Secondary/Other Diagnosis Code (4)	137-143	X(7)	Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3)
SDXPOA4	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (4)	144	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX5	Secondary/Other Diagnosis Code (5)	145-151	X(7)	Defines additional diagnosis conditions; Available effective 1994Q1; (field size changed from 6 starting 2007Q3)
SDXPOA5	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (5)	152	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX6	Secondary/Other Diagnosis Code (6)	153-159	X(7)	Defines additional diagnosis conditions; Available effective 1994Q1; (field size changed from 6 starting 2007Q3)
SDXPOA6	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (6)	160	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX7	Secondary/Other Diagnosis Code (7)	161-167	X(7)	Defines additional diagnosis conditions; Available effective 1994Q1; (field size changed from 6 starting 2007Q3)
SDXPOA7	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (7)	168	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX8	Secondary/Other Diagnosis Code (8)	169-175	X(7)	Defines additional diagnosis conditions; Available effective 1994Q1; (field size changed from 6 starting 2007Q3)
SDXPOA8	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (8)	176	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX9	Secondary/Other Diagnosis Code (9)	177-183	X(7)	Defines additional diagnosis conditions; Available effective 2011Q1
SDXPOA9	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (9)	184	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1

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SDX10	Secondary/Other Diagnosis Code (10)	185-191	X(7)	Defines additional diagnosis conditions; Available effective 2011Q1
SDXPOA10	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (10)	192	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX11	Secondary/Other Diagnosis Code (11)	193-199	X(7)	Defines additional diagnosis conditions; Available effective 2011Q1
SDXPOA11	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (11)	200	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX12	Secondary/Other Diagnosis Code (12)	201-207	X(7)	Defines additional diagnosis conditions; Available effective 2011Q1
SDXPOA12	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (12)	208	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX13	Secondary/Other Diagnosis Code (13)	209-215	X(7)	Defines additional diagnosis conditions; Available effective 2011Q1
SDXPOA13	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (13)	216	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX14	Secondary/Other Diagnosis Code (14)	217-223	X(7)	Defines additional diagnosis conditions; Available effective 2011Q1
SDXPOA14	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (14)	224	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX15	Secondary/Other Diagnosis Code (15)	225-231	X(7)	Defines additional diagnosis conditions; Available effective 2011Q1
SDXPOA15	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (15)	232	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX16	Secondary/Other Diagnosis Code (16)	233-239	X(7)	Defines additional diagnosis conditions; Available effective 2011Q1
SDXPOA16	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (16)	240	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1
SDX17	Secondary/Other Diagnosis Code (17)	241-247	X(7)	Defines additional diagnosis conditions; Available effective 2011Q1
SDXPOA17	Secondary/Other Diagnosis Code Present on Admission (POA) Indicator (17)	248	X(1)	Present on admission indicator for secondary diagnosis; Available effective 2011Q1

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<b>FIELD NAME</b>	<b>DATA ELEMENT DESCRIPTION</b>	<b>DATA FILE LOCATION</b>	<b>FORMAT* / SIZE</b>	<b>NOTES</b>
	<b>Procedure Codes</b>			
PPX	Principal Procedure Code	249-255	X(7)	Defines principal procedure
SPX1	Secondary Procedure Code (1)	256-262	X(7)	Defines additional procedure
SPX2	Secondary Procedure Code (2)	263-269	X(7)	Defines additional procedure
SPX3	Secondary Procedure Code (3)	270-276	X(7)	Defines additional procedure; Available effective 1994Q1
SPX4	Secondary Procedure Code (4)	277-283	X(7)	Defines additional procedure; Available effective 1994Q1
SPX5	Secondary Procedure Code (5)	284-290	X(7)	Defines additional procedure; Available effective 1994Q1
	<b>Procedure Day of Week</b>			
PPXDOW	Principal Procedure Day	291	X(1)	Code for day of principal procedure (1 - 7)
SPX1DOW	Secondary Procedure Code (1) Day	292	X(1)	Code for day of additional procedure (1 - 7)
SPX2DOW	Secondary Procedure Code (2) Day	293	X(1)	Code for day of additional procedure (1 - 7)
SPX3DOW	Secondary Procedure Code (3) Day	294	X(1)	Code for day of additional procedure (1 - 7); Available effective 1994Q1
SPX4DOW	Secondary Procedure Code (4) Day	295	X(1)	Code for day of additional procedure (1 - 7); Available effective 1994Q1
SPX5DOW	Secondary Procedure Code (5) Day	296	X(1)	Code for day of additional procedure (1 - 7); Available effective 1994Q1
	<b>Physician Data</b>			
REFID	Referring Physician – state license	297-305	X(9)	ID of referring physician; Available 1994Q1 through 2007Q2
ATTID	Attending Physician – state license	306-314	X(9)	ID of attending physician
OPERID	Operating Physician – state license	315-323	X(9)	ID of operating physician
OTHPROVQ1	Other Provider – Provider Type Qualifier (1)	324-325	X(2)	Code to identify if referring, other operating, or rendering physician; Available effective 2011Q1
OTHPROVID1	Other Provider – Secondary Identifier (1) – state license	326-334	X(9)	ID of other physician; Available effective 2011Q1
OTHPROVQ2	Other Provider – Provider Type Qualifier (2)	335-336	X(2)	Code to identify if referring, other operating, or rendering physician; Available effective 2011Q1
OTHPROVID2	Other Provider – Secondary Identifier (2) – state license	337-345	X(9)	ID of other physician; Available effective 2011Q1

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<b>FIELD NAME</b>	<b>DATA ELEMENT DESCRIPTION</b>	<b>DATA FILE LOCATION</b>	<b>FORMAT* / SIZE</b>	<b>NOTES</b>
	<b>Payer Identification</b>			
PAYTYPE1	Primary Payer	346-347	X(2)	Defines primary payor; Available effective 1994Q1
PAYTYPE2	Secondary Payer	348-349	X(2)	Defines secondary payor; Available effective 1994Q1
PAYTYPE3	Tertiary Payer	350-351	X(2)	Defines tertiary (third stage) payor; Available effective 1994Q1
ESTPAYER	Estimated Payer Code	352-353	X(2)	Available 1994Q1 through 1998Q3
HEALTHPLANID1	Payer ID/Health Plan ID (NAIC)	354-368	X(15)	Primary payer/health plan; (field name changed from "NAIC" and field size changed from 7 starting 2007Q3)
	<b>Additional Data Elements</b>			
BILLTYPE	Type of Bill	369-372	X(4)	Defines type of bill; (field size changed from 3 starting 2007Q3)
PPSCODE	Prospective Payment System (PPS) Code	373-376	X(4)	Hospital assigned DRG; (field name changed from "DRGHOSP" and field size changed from 3 starting 2007Q3)
PCMU	Procedure Coding Method Used	377	X(1)	Procedure coding method; Available 1994Q1 through 2007Q2
DRGHC4	PHC4 Diagnosis-Related Group (DRG)	378-380	X(3)	PHC4 assigned CMS Medicare DRG
DRGGRP	MS-DRG Grouper Version	381-382	X(2)	Grouper version used to assign the PHC4 DRG; Available effective 2011Q1
CANCER1	Cancer Code 1	383	X(1)	No longer available effective 2006Q1
CANCER2	Cancer Code 2	384	X(1)	No longer available effective 2006Q1
MDCHC4	Major Diagnostic Category (MDC)	385-386	X(2)	PHC4 assigned MDC
	<b>MediQual Data Elements</b>			
MQASG	MediQual Atlas Admission Severity	387	X(1)	Patient probability of in-hospital mortality; Available 1990Q1 through 2010Q1; (field name changed from "MQSEV" starting 2007Q3)
MQNRSP	MediQual Non-Responder	388	X(1)	Available 1996Q1 through 2002Q4
MQGCLUST	Total Charges Grouper Cluster	389-392	X(4)	Available 1997Q1 through 2005Q3
MQGCELL	Total Charges Grouper Cell	393-394	X(2)	Available 1997Q1 through 2005Q3; (field size changed from 1 starting 2007Q3)
MQMORBID	MediQual Morbidity	395	X(1)	No longer available effective 1994Q1

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	<b>Summary Charges</b>			
ROOMCHG	Room & Board Charges	396-406	X(11)	Total room and board charges
ANCLRCHG	Ancillary Charges	407-417	X(11)	Total ancillary charges
DRUGCHG	Drug Charges	418-428	X(11)	Total drug charges
EQUIPCHG	Equipment Charges	429-439	X(11)	Total equipment charges
SPECLCHG	Specialty Charges	440-450	X(11)	Total specialty charges
MISCCHG	Miscellaneous Charges	451-461	X(11)	Total of other charges
TOTALCHG	Total Charges	462-472	X(11)	Total charges excluding professional fees/charges
NONCVCHG	Non-covered Charges	473-483	X(11)	Total non-covered charges
PROFCHG	Professional Fees	484-494	X(11)	Total professional services fees/charges
	<b>APR Grouper Data</b>			
APRMDC	APR MDC	495-496	X(2)	Available 1996Q1 through 2002Q4
APRDRG	APR DRG	497-499	X(3)	Available 1996Q1 through 2002Q4
APRSOI	APR Severity of Illness Subclass	500	X(1)	Available 1996Q1 through 2002Q4
APRRM	APR Risk of Mortality Subclass	501	X(1)	Available 1996Q1 through 2002Q4
	<b>Physician Data – National Provider Identifier (NPI)</b>			
ATTNPI	Attending physician - NPI	502-512	X(11)	ID of attending physician; Available effective 2015Q3
OPERNPI	Operating physician - NPI	513-523	X(11)	ID of operating physician; Available effective 2015Q3
OTHPROV1NPI	Other Provider – Secondary national provider identifier number (1) - NPI	524-534	X(11)	ID of other physician; Available effective 2015Q3
OTHPROV2NPI	Other Provider – Secondary national provider identifier number (2) - NPI	535-545	X(11)	ID of other physician; Available effective 2015Q3

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<b>FACILITY PROFILE FILE LAYOUT</b> (Quote/comma delimited format)			
<b>FIELD NAME</b>	<b>DATA ELEMENT NAME</b>	<b>FORMAT* / SIZE</b>	<b>NOTES</b>
PAF	Pennsylvania Facility Number (PAF)	X(4)	PHC4 assigned facility code
FACNAME	Facility Name	X(100)	Name of facility
FACTYPE	Facility Type	X(3)	Defines type of facility; Available effective 1995Q1
BEDCOUNTS	Facility bed count	9(6)	Number of licensed beds
REGION	Facility Region Code	X(1)	PHC4 assigned Region code (1 - 9)
ZIP	Facility Zip Code	X(10)	Facility Zip code
COUNTY	Facility County Code	X(3)	PA county code (1 - 67)
NPI	National Provider Identifier	X(15)	Unique identification number assigned to the provider; Available effective 2007Q3
MAID	Master Provider Index	X(15)	PA Medical Assistance Identifier; Available 1990Q1 through 2007Q2; (field name changed from "UNITID1" starting 2003Q4)
UNITTYPE1	Unit Type (1)	X(3)	Defines type of unit; Available 1990Q1 through 2003Q3
UNITID2	Unit ID (2)	X(15)	MAID unit code; Available 1990Q1 through 2003Q3
UNITTYPE2	Unit Type (2)	X(3)	Defines type of unit; Available 1990Q1 through 2003Q3
UNITID3	Unit ID (3)	X(15)	MAID unit code; Available 1990Q1 through 2003Q3
UNITTYPE3	Unit Type (3)	X(3)	Defines type of unit; Available 1990Q1 through 2003Q3
UNITID4	Unit ID (4)	X(15)	MAID unit code; Available 1990Q1 through 2003Q3
UNITTYPE4	Unit Type (4)	X(3)	Defines type of unit; Available 1990Q1 through 2003Q3
UNITID5	Unit ID (5)	X(15)	MAID unit code; Available 1990Q1 through 2003Q3
UNITTYPE5	Unit Type (5)	X(3)	Defines type of unit; Available 1990Q1 through 2003Q3
IPDISCH	Inpatient Discharges	9(8)	Total discharges for facility during the quarter
OPDISCH	Outpatient Records	9(8)	Total outpatient cases for facility during the quarter; Available effective 1996Q1
ADDRESS1	Facility Address: Line 1	X(200)	First line of facility address; Available effective 2016Q2
ADDRESS2	Facility Address: Line 2	X(200)	Second line of facility address; Available effective 2016Q2
CITY	Facility Address: City	X(50)	City where facility is located; Available effective 2016Q2



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<b>PHYSICIAN PROFILE FILE LAYOUT</b> (Quote/comma delimited format)			
<b>FIELD NAME</b>	<b>DATA ELEMENT NAME</b>	<b>FORMAT* / SIZE</b>	<b>NOTES</b>
LICENSE/NPI	Physician License Number/National provider identifier	X(11)	PA assigned license number; Available 1990Q1 through 2015Q2: National Provider Identifier number; Available effective 2015Q3
LASTNAME	Physician Last Name	X(40)	Last name of physician
FIRSTNAME	Physician First Name and/or Initials	X(40)	First name and/or initials of physician
MATCHINDICATOR	Match Indicator	X(3)	Flag Indicator; Available effective 2006Q1

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### STATE & COUNTY CODES

AL – Alabama	IL – Illinois	MT – Montana	PR – Puerto Rico
AK – Alaska	IN – Indiana	NE – Nebraska	RI – Rhode Island
AZ – Arizona	IA – Iowa	NV – Nevada	SC – South Carolina
AR – Arkansas	KS – Kansas	NH – New Hampshire	SD – South Dakota
CA – California	KY – Kentucky	NJ – New Jersey	TN – Tennessee
CO – Colorado	LA – Louisiana	NM – New Mexico	TX – Texas
CT – Connecticut	ME – Maine	NY – New York	UT – Utah
DE – Delaware	MD – Maryland	NC – North Carolina	VT – Vermont
DC – District of Columbia	MA – Massachusetts	ND – North Dakota	VI – Virgin Islands
FL – Florida	MI – Michigan	OH – Ohio	VA – Virginia
GA – Georgia	MN – Minnesota	OK – Oklahoma	WA – Washington
HI – Hawaii	MS – Mississippi	OR – Oregon	WV – West Virginia
ID – Idaho	MO – Missouri	PA – Pennsylvania	WI – Wisconsin
			WY – Wyoming

### PENNSYLVANIA COUNTY CODES

01 – Adams (Region 5)	18 – Clinton (Region 4)	35 – Lackawanna (Region 6)	52 – Pike (Region 6)
02 – Allegheny (Region 1)	19 – Columbia (Region 4)	36 – Lancaster (Region 5)	53 – Potter (Region 2)
03 – Armstrong (Region 1)	20 – Crawford (Region 2)	37 – Lawrence (Region 2)	54 – Schuylkill (Region 7)
04 – Beaver (Region 1)	21 – Cumberland (Region 5)	38 – Lebanon (Region 5)	55 – Snyder (Region 4)
05 – Bedford (Region 3)	22 – Dauphin (Region 5)	39 – Lehigh (Region 7)	56 – Somerset (Region 3)
06 – Berks (Region 7)	23 – Delaware (Region 8)	40 – Luzerne (Region 6)	57 – Sullivan (Region 6)
07 – Blair (Region 3)	24 – Elk (Region 2)	41 – Lycoming (Region 4)	58 – Susquehanna (Region 6)
08 – Bradford (Region 6)	25 – Erie (Region 2)	42 – McKean (Region 2)	59 – Tioga (Region 4)
09 – Bucks (Region 8)	26 – Fayette (Region 1)	43 – Mercer (Region 2)	60 – Union (Region 4)
10 – Butler (Region 1)	27 – Forest (Region 2)	44 – Mifflin (Region 4)	61 – Venango (Region 2)
11 – Cambria (Region 3)	28 – Franklin (Region 5)	45 – Monroe (Region 6)	62 – Warren (Region 2)
12 – Cameron (Region 2)	29 – Fulton (Region 5)	46 – Montgomery (Region 8)	63 – Washington (Region 1)
13 – Carbon (Region 7)	30 – Greene (Region 1)	47 – Montour (Region 4)	64 – Wayne (Region 6)
14 – Centre (Region 4)	31 – Huntingdon (Region 5)	48 – Northampton (Region 7)	65 – Westmoreland (Region 1)
15 – Chester (Region 8)	32 – Indiana (Region 3)	49 – Northumberland (Region 4)	66 – Wyoming (Region 6)
16 – Clarion (Region 2)	33 – Jefferson (Region 2)	50 – Perry (Region 5)	67 – York (Region 5)
17 – Clearfield (Region 2)	34 – Juniata (Region 5)	51 – Philadelphia (Region 9)	

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