
NUCC

Provider Characteristics Codes

2009

VERSION 2

Designed and generated by Washington Publishing Company, www.wpc-edi.com.

Copyright 2009 American Medical Association

This material, including the [Provider Characteristics and Resources Code Set](#), is published in cooperation with the National Uniform Claim Committee (NUCC) by the American Medical Association (AMA).

Permission is granted for any non-commercial use of this material as long as the copyright notice and other disclaimers are included in any copy and the contents are not changed. For commercial use, including sales or licensing, a license must be obtained at www.nucc.org. The AMA, NUCC, and any of its members shall not be responsible for any liability in connection with use of this material. This material is provided "As Is" without warranty of any kind. Applicable FARS/DFARS restrictions apply.

Introduction The Provider Characteristics Code Set is for use with health care provider information for enrollment and credentialing transactions and their corresponding responses. It is intended to provide codified responses to questions presented to a health care provider applying to or registering with an entity and to report the outcome of such application or registration. It may also be used for responses to inquiries regarding provider participation or registration in a program or plan.

This is not intended to be a comprehensive list of services rendered by a health care provider.

This code set was formulated so that the absence of information is a meaningful statement and should describe the most common situation. (i.e. "2S" = x-rays are provided at this location. No data transmitted means x-rays are not provided, "2S" transmitted means x-rays are provided.) New statements should follow this guideline and should be screened so that conflicting information is not introduced (do not add "provider is participating" AND "provider is not participating". Select the least common statement to add to the list).

-
- 11 Provider receives public funding
 - 12 This is a multi-specialty group
 - 13 This is a primary care group
 - 14 Provider has ownership or financial interest in another medical establishment
 - 15 Professional liability coverage has been restricted/terminated/or modified
 - 16 This is the provider's primary insurance coverage
 - 17 This is the provider's excess insurance coverage
 - 18 Excess insurance coverage exists for this provider
 - 19 Provider is self-insured
 - 1A Provider's self-insurance is funded
 - 1B Provider's self-insurance is not funded
 - 1C Provider has had adverse action on state license, certificate, or registration
 - 1D Provider has had adverse action on DEA or other applicable narcotic registration
 - 1E Provider has had adverse action on hospital or other health care facility staff membership for privileges
 - 1F Provider has had adverse action on professional organization membership
 - 1G Provider has had adverse action on Medicare, Medicaid or other government health programs
 - 1H Provider has had adverse action on any prepaid health plan or managed care participation
 - 1I Provider has had adverse action with respect to educational or training institution or program
 - 1J Provider has had adverse action by professional society or association
 - 1K Provider is under health plan administrative sanction
 - 1L Provider accepts Workers' Compensation
 - 1M Provider accepts Medicare assignment
 - 1N Provider accepts Medicaid assignment
 - 1O Provider participates in Medicare and accepts assignment
 - 1P Provider participates in Medicaid and accepts assignment
 - 1Q Provider is not accepting new patients for obstetric care
 - 1R This location is handicapped accessible
 - 1S This location is less than 1 block from public transportation
 - 1T This location is less than 5 blocks from public transportation
 - 1U This location is less than 1 mile from public transportation
 - 1V This location is 1 or more miles from public transportation
 - 1W This location has a full time assistant available
 - 1X This location has a part time assistant available
 - 1Y This location has Telecommunication Device for the Deaf (TDD) equipment
 - 1Z This location is medically fragile equipped
 - 20 This location employs para-professional staff/employees
 - 21 This location maintains para-professional credentialing, licensure & malpractice information
 - 22 This location admits and cares for patients on its own hospital service
 - 23 The scheduling time for urgent care at this location is more than 24 hours
 - 24 The scheduling time for symptomatic care at this location is more than 72 hours
 - 25 The scheduling time for routine visits at this location is more than 7 days
 - 26 The scheduling time for preventive routine care at this location is more than 30 days
 - 27 The waiting time at this location is more than 30 minutes from time of scheduled appointment
 - 28 Allergy skin testing is provided at this location
 - 29 Asthma treatment is provided at this location
 - 2A EKG services are provided at this location
 - 2B Flexible sigmoidoscopy is provided at this location
 - 2C IV hydration/treatment is provided at this location
 - 2D Laceration repair is provided at this location
 - 2E Laboratory services/testing is provided at this location
 - 2F Massage therapy is provided at this location
 - 2G Minor fracture work is provided at this location

2H	Minor surgery is provided at this location
2I	Occupational therapy is provided at this location
2J	Gynecology services are provided at this location
2K	Obstetric services are provided at this location
2L	Osteopathic manipulation is provided at this location
2M	Physical therapy is provided at this location
2N	Pulmonary function studies are provided at this location
2O	Speech pathology is provided at this location
2P	Hearing tests are provided at this location
2Q	Visual screenings are provided at this location
2R	Mammography services are provided at this location
2S	X-rays are provided at this location
2T	This hospital has a Medicare Prospective Payment System (PPS) exempt rehabilitation unit
2U	This hospital has a Medicare Prospective Payment System (PPS) exempt psychiatric unit
10	Provider has a medical condition that impairs or limits him/her to practice
55	Accepted
56	Unspecified Error
57	Failed Field Edits
58	Minimum Fields Missing
59	Exact Duplicate
5A	Rejected by NPI Enumerator
5B	Invalid Taxonomy Code
5C	Taxonomy Code Mismatch
5D	SSN Validation Error
5E	Mailing Address Error
5F	Location Address Error
5G	NPI not on File
5H	Invalid Deactivation Reason Code
5I	Pended by GateKeeper
5J	Pended by L/S/T
5K	Duplicate record
5L	Schema validation failed
5M	Individual Verification – Found
5N	Individual Verification - Not Found
5O	Individual Verification - Close Match
5P	Individual Verification – Insufficient Data
5Q	Organization Verification – Found
5R	Organization Verification - Not Found
5S	Organization Verification – Close Match
5T	Organization Verification - Insufficient Data
5U	Individual Data Dissemination - Fulfilled
5V	Individual Data Dissemination - Not Fulfilled
5W	Organization Data Dissemination - Fulfilled
5X	Organization Data Dissemination - Not Fulfilled
5Y	Unspecified Response
2V	Assistive aid information not collected from the provider