

NCTRACKS DATA ELEMENT DICTIONARY FOR 834 AND GEF

2-20-19

BENEFIT PLAN ID

From Value	Thru Value	Short Description	Long Description
1	1	CAPAI	CAPAI - Obsolete 2006
2	2	CAPCH	CAP CHILDREN
3	3	CAPCO	CAP CHOICE
4	4	CAPDA	CAP DISABLED ADULTS
5	5	CAPMR	CAP MENTALLY RETARDED/DEVELOPMENTALLY DISABLED
6	6	MAFDN	MEDICAID FAMILY PLANNING
7	7	MQBQ	QUALIFIED MEDICARE BENEFICIARY
8	8	MQBB	QUALIFIED MEDICARE BENEFICIARY PART B PREMIUM ONLY
9	9	MQBE	QUALIFIED MEDICARE BENEFICIARY PART B PREMIUM ONLY
10	10	MFP	MONEY FOLLOWS THE PERSON
11	11	PACE	PLAN OF ALL- INCLUSIVE CARE FOR THE ELDERLY
12	12	PHPB	MANAGED CARE FOR BEHAVIORAL HEALTH SERVICES
13	13	PHPC	INNOVATIONS WAIVER - CAP SERVICES
15	15	MCAID	MEDICAID
16	16	NCHC	NORTH CAROLINA HEALTH CHOICE
52	52	ITP	INFANT/TODDLER PROGRAM
53	53	SC	SICKLE CELL PROGRAM
54	54	EHDI	EARLY HEARING DETECTION AND INTERVENTION
100	100	MCSTD	MEDICAID MANAGED CARE – STANDARD PLAN
101	101	MCCRV	MEDICAID MANAGED CARE – CARVE OUT
102	102	HCSTD	HEALTH CHOICE MANAGED CARE – STANDARD PLAN
103	103	HCCRV	HEALTH CHOICE MANAGED CARE – CARVE OUT

CITIZENSHIP

From Value	Thru Value	Short Description	Long Description
Y	Y	CITIZEN	CITIZEN
N	N	NON-CITIZEN	NON-CITIZEN

ELIGIBILITY COVERAGE CODE

From Value	Thru Value	Short Description	Long Description
AAFCN	AAFCN	AAFCN	Recipients of Work First or Work First transitional benefits
AAFCY	AAFCY	AAFCY	Work First transitional benefits also receiving SSI
HSFCN	HSFCN	HSFCN	Medicaid for Foster Children - Categorically Needy
HSFCY	HSFCY	HSFCY	Medicaid for Foster Children also receiving SSI
HSFFN	HSFFN	HSFFN	Medicaid for Foster Children - non-qualified alien eligible for emergency services only
HSFGN	HSFGN	HSFGN	Medicaid for Foster Children - qualified alien eligible for full coverage
HSFHN	HSFHN	HSFHN	Medicaid for Foster Children - qualified alien eligible for emergency services only
HSFMN	HSFMN	HSFMN	Medicaid for Foster Children - Medically Needy
HSFNN	HSFNN	HSFNN	Medicaid for Foster Children – Categorically Needy
HSFON	HSFON	HSFON	Medicaid for Foster Children - non-qualified alien eligible for emergency services only
HSFPN	HSFPN	HSFPN	Medicaid for Foster Children - qualified alien eligible for full coverage
HSFRN	HSFRN	HSFRN	Medicaid for Foster Children - qualified alien eligible for emergency services only
IASCN	IASCN	IASCN	Title IV-E Foster Care/Adoption Assistance
IASCY	IASCY	IASCY	Title IV-E Foster Care/Adoption Assistance also receiving SSI
MAABN	MAABN	MAABN	Medicaid to the Aged - also eligible as Special Low-Income Medicare Beneficiaries
MAACY	MAACY	MAACY	Medicaid to the Aged -Categorically Needy - receiving SSI
MAAFN	MAAFN	MAAFN	Medicaid to the Aged - non-qualified alien eligible for emergency services only
MAAGN	MAAGN	MAAGN	Medicaid to the Aged - qualified alien eligible for full coverage
MAAHN	MAAHN	MAAHN	Medicaid to the Aged - qualified alien eligible for emergency services only
MAAMN	MAAMN	MAAMN	Medicaid to the Aged - Medically Needy
MAANN	MAANN	MAANN	Medicaid to the Aged -Categorically Needy
MAAON	MAAON	MAAON	Medicaid to the Aged - non-qualified alien eligible for emergency services only
MAAPN	MAAPN	MAAPN	Medicaid to the Aged - qualified alien eligible for full coverage
MAAQN	MAAQN	MAAQN	Medicaid to the Aged - also eligible as Qualified Medicare Beneficiaries

From Value	Thru Value	Short Description	Long Description
MAAQY	MAAQY	MAAQY	Medicaid to the Aged receiving SSI also eligible as Qualified Medicare Beneficiaries
MAARN	MAARN	MAARN	Medicaid to the Aged - qualified alien eligible for emergency services only
MABBN	MABBN	MABBN	Medicaid to the Blind also eligible as Special Low-Income Medicare Beneficiaries
MABCY	MABCY	MABCY	Medicaid to the Blind receiving SSI
MABFN	MABFN	MABFN	Medicaid to the Blind -non-qualified alien eligible for emergency services only
MABGN	MABGN	MABGN	Medicaid to the Blind - qualified alien eligible for full coverage
MABHN	MABHN	MABHN	Medicaid to the Blind - qualified alien eligible for emergency services only
MABMN	MABMN	MABMN	Medicaid to the Blind - Medically Needy
MABNN	MABNN	MABNN	Medicaid to the Blind - Categorically Needy
MABON	MABON	MABON	Medicaid to the Blind - non-qualified alien eligible for emergency services only
MABPN	MABPN	MABPN	Medicaid to the Blind - qualified alien eligible for full coverage
MABQN	MABQN	MABQN	Medicaid to the Blind - also eligible as Qualified Medicare Beneficiaries
MABQY	MABQY	MABQY	Medicaid to the Blind - receiving SSI also eligible as Qualified Medicare Beneficiaries
MABRN	MABRN	MABRN	Medicaid to the Blind - qualified alien eligible for emergency services only
MADBN	MADBN	MADBN	Medicaid to the Disabled - also eligible as Special Low-Income Medicare Beneficiaries
MADCY	MADCY	MADCY	Medicaid to the Disabled receiving SSI
MADFN	MADFN	MADFN	Medicaid to the Disabled -non-qualified alien eligible for emergency services only
MADGN	MADGN	MADGN	Medicaid to the Disabled - qualified alien eligible for full coverage
MADHN	MADHN	MADHN	Disabled individual - qualified alien eligible for emergency services only
MADMN	MADMN	MADMN	Medicaid to the Disabled - Medically Needy
MADNN	MADNN	MADNN	Medicaid to the Disabled – Categorically Needy
MADON	MADON	MADON	Medicaid to the Disabled - non-qualified alien eligible for emergency services only
MADPN	MADPN	MADPN	Medicaid to the Disabled - qualified alien eligible for full coverage
MADQN	MADQN	MADQN	Medicaid to the Disabled - also eligible as Qualified Medicare Beneficiaries
MADQY	MADQY	MADQY	Medicaid to the Disabled -receiving SSI also eligible as Qualified Medicare Beneficiaries
MADRN	MADRN	MADRN	Medicaid to the Disabled -Medically Needy qualified aliens eligible for emergency services only
MAFCN	MAFCN	MAFCN	Medicaid for Families - Categorically Needy
MAFDN	MAFDN	FPW	Medicaid Family Planning

From Value	Thru Value	Short Description	Long Description
MAFFN	MAFFN	MAFFN	Medicaid for Families - non-qualified aliens eligible for emergency services only
MAFGN	MAFGN	MAFGN	Medicaid for Families - qualified aliens eligible for all services
MAFHN	MAFHN	MAFHN	Medicaid for Families - qualified aliens eligible for emergency services only
MAFMN	MAFMN	MAFMN	Medicaid for Families - Medically Needy
MAFNN	MAFNN	MAFNN	Medicaid for Families - Categorically Needy
MAFON	MAFON	MAFON	Medicaid for Families - non-qualified aliens eligible for emergency services only
MAFPN	MAFPN	MAFPN	Medicaid for Families - qualified aliens eligible for all services
MAFRN	MAFRN	MAFRN	Medicaid for Families - qualified aliens eligible for emergency services only
MAFTN	MAFTN	MAFTN	Breast and Cervical Cancer Medicaid - qualified aliens eligible for all services
MAFUN	MAFUN	MAFUN	Breast and Cervical Cancer Medicaid - qualified aliens eligible for emergency services only
MAFVN	MAFVN	MAFVN	Breast and Cervical Cancer Medicaid - non-qualified aliens eligible for emergency services only
MAFWN	MAFWN	MAFWN	Breast and Cervical Cancer Medicaid
MFCNN	MFCNN	MFCNN	Medicaid for Former Foster Children
MFCGN	MFCGN	MFCGN	Medicaid for Former Foster Children – qualified aliens eligible for all services
MICAN	MICAN	MICAN	Health Choice - American Indian/Alaskan Native Infants and Children
MICFN	MICFN	MICFN	Medicaid Infants and Children - non-qualified aliens eligible for emergency services only
MICGN	MICGN	MICGN	Medicaid Infants and Children - qualified aliens eligible for all services
MICHN	MICHN	MICHN	Medicaid Infants and Children - qualified aliens eligible for emergency services only
MICJN	MICJN	MICJN	Health Choice
MICKN	MICKN	MICKN	Health Choice
MICLN	MICLN	MICLN	Health Choice - Optional Extended Coverage
MICNN	MICNN	MICNN	Medicaid Infants and Children
MICSN	MICSN	MICSN	Health Choice - American Indian/Alaskan Native Infants and Children
MIC1N	MIC1N	MCHIP0-5	Medicaid Infants and Children
MPWFN	MPWFN	MPWFN	Medicaid for Pregnant Women - non-qualified alien eligible for emergency services only
MPWHN	MPWHN	MPWHN	Medicaid for Pregnant Women -qualified alien eligible for emergency services only
MPWIN	MPWIN	MPWIN	Medicaid for Pregnant Women - qualified alien
MPWNN	MPWNN	MPWNN	Medicaid for Pregnant Women
MQBBN	MQBBN	QMB-B	Special Low-Income Medicare Beneficiaries – Part B Premium Only
MQBEN	MQBEN	MQBEN	Qualified Medicare Beneficiary – Part B Premium Only
MQBQN	MQBQN	MQBQN	Qualified Medicare Beneficiaries
MRFMN	MRFMN	MRFMN	Medicaid for Refugees – Medically Needy

From Value	Thru Value	Short Description	Long Description
MRFNN	MRFNN	MRFNN	Medicaid for Refugees -Categorically Needy
RRFCN	RRFCN	RRFCN	Refugee Cash Assistance
SAABN	SAABN	SAABN	Special Assistance to the Aged - also eligible as Special Low-Income Medicare Beneficiaries
SAACN	SAACN	SAACN	Special Assistance to the Aged – Categorically Needy
SAACY	SAACY	SAACY	Special Assistance to the Aged - receiving SSI
SAAQN	SAAQN	SAAQN	Special Assistance to the Aged - also eligible as Qualified Medicare Beneficiaries
SAAQY	SAAQY	SAAQY	Special Assistance to the Aged - receiving SSI and eligible as Qualified Medicare Beneficiaries
SADBN	SADBN	SADBN	Special Assistance to the Disabled - also eligible as Special Low-Income Medicare Beneficiaries
SADCN	SADCN	SADCN	Special Assistance to the Disabled – Categorically Needy
SADCY	SADCY	SADCY	Special Assistance to the Disabled - receiving SSI
SADQN	SADQN	SADQN	Special Assistance to the Disabled - also eligible as Qualified Medicare Beneficiaries
SADQY	SADQY	SADQY	Special Assistance to the Disabled – receiving SSI and eligible as Qualified Medicare Beneficiaries

ETHNICITY CODE

From Value	Thru Value	Short Description	Long Description
C	C	Hisp-Cub	Hispanic Cuban
H	H	Hisp-Oth	Hispanic Other
M	M	MexAme	Hispanic Mexican American
N	N	N-Hisp/Lat	Not Hispanic/Latino
P	P	Puerto	Hispanic Puerto Rican
U	U	Unreported	Unreported

HEALTH PLAN ID

From Value	Thru Value	Short Description	Long Description
1	1	NCXIX	TITLE NCXIX
2	2	NCXXI	TITLE NCXXI
3	3	MENTAL HEALTH	MENTAL HEALTH SERVICES
4	4	SUBSTANCE ABUSE	SUBSTANCE ABUSE SERVICES
5	5	DEVELOP DISABILITY	DEVELOPMENTALLY DISABLED SERVICES
6	6	PUBLIC HEALTH	PUBLIC HEALTH
7	7	RURAL HEALTH	RURAL HEALTH

LIVING ARRANGEMENT CODE

From Value	Thru Value	Short Description	Long Description
10	10	Priv-No1/3	Private Living Arrangement (not 1/3 reduction)

From Value	Thru Value	Short Description	Long Description
11	11	Private1/3	Private Living Arr (with 1/3 reduction) (Medicaid)
12	12	WithAnoFam	Living with Another Work First Family
13	13	WithSSIRes	Living with SSI Recipient(s)
14	14	PACEPriv	PACE Private Living Arrangement
15	15	PACELiv	PACE Living with SSI Recipient(s)
16	16	Susp-Incar	Medicaid suspended - Incarcerated
17	17	Susp-IMD	Medicaid suspended - Institution for Mental Diseases (IMD)
18	18	SA-IMD	Medicaid suspended – SA facility classified as Institution for Mental Disease
19	19	INCAR-CNTY	Medicaid suspended – County/Local Incarceration
50	50	SNF	Skilled Nursing Facility
51	51	DomicCare5	Domiciliary Care, 5 or Fewer Beds (SAA, SAD)
52	52	DomicCare6	Domiciliary care, Six or More Beds (SAA, SAD)
53	53	FosterCare	Foster Care (MAF, MIC, HSF, IAS)
54	54	PACELivNF	PACE Living in Nursing Facility
56	56	AdultGrp	Adult Group Home (SAA, SAD, MAF, MRF)
57	57	ChildGrp	Children's Group Home (MAF, MIC, MAF, HSF, IAS)
58	58	ICF	Intermediate Care Facility
59	59	ICF/MR	Intermediate Care Facility/Mental Retardation Center
60	60	PRTF	Hos, Over 30Days/Psych Res Treat-Facility (PRTF)
70	70	CherryHos	Cherry Hospital
71	71	DoroDixHos	Dorothea Dix Hospital
72	72	UmsteHos	Umstead Hospital
73	73	BrougHos	Broughton Hospital
75	75	OthMedIns	Other Medical Institution
76	76	CenRegHos	Central Regional Hospital
80	80	AdoptHome	Adoptive Home (MAF, MIC, MRF, HSF, IAS)

MEDICARE COVERAGE TYPE CODE

From Value	Thru Value	Short Description	Long Description
BA	BA	BUY IN A	BUY-IN PART A
BB	BB	BUY IN B	BUY-IN PART B
MA	MA	MCARE A	MEDICARE PART A
MB	MB	MCARE B	MEDICARE PART B
MC	MC	MCARE C	MEDICARE PART C
MD	MD	MCARE D	MEDICARE PART D

MEDICARE STATUS CODE

From Value	Thru Value	Short Description	Long Description
A	A	ACTIVE	ACTIVE
V	V	VOID	VOID

PATIENT MONTHLY LIABILITY TYPE

From Value	Thru Value	Short Description	Long Description
D	D	DED BAL	DEDUCTIBLE BALANCE
N	N	NOTREPORT	NOT REPORTED
P	P	PAT LIAB	PATIENT MONTHLY LIABILITY

PROVIDER LOCATOR CODE

From Value	Thru Value	Short Description	Long Description
001	001	Pay-to	Pay-to
002	002	CORSPNDNCE	Correspondence
003	999	Service	Service Location

RACE CODE

From Value	Thru Value	Short Description	Long Description
A	A	ASIAN	ASIAN
B	B	BLACK	BLACK
I	I	AMERIND	AMERICAN INDIAN
P	P	HAWPAC	HAWAIIAN OR PACIFIC ISLANDER
U	U	UNREPORTED	UNREPORTED
W	W	WHITE	WHITE

RECIPIENT LANGUAGE CODE

From Value	Thru Value	Short Description	Long Description
AR	AR	ARABIC	ARABIC
CA	CA	CAMBODIAN	CAMBODIAN
CH	CH	CHINESE	CHINESE
EN	EN	ENGLISH	ENGLISH
FC	FC	FRENCREOLE	FRENCH CREOLE
FR	FR	FRENCH	FRENCH
GE	GE	GERMAN	GERMAN
GR	GR	GREEK	GREEK
GU	GU	GUJARATI	GUJARATI
HI	HI	HINDI	HINDI
HM	HM	HMONG	HMONG
HU	HU	HUNGARIAN	HUNGARIAN
IT	IT	ITALIAN	ITALIAN
JA	JA	JAPANESE	JAPANESE
KO	KO	KOREAN	KOREAN
LA	LA	LAOTIAN	LAOTIAN
MI	MI	MIAO	MIAO
MK	MK	MON-KHMER	MON-KHMER
OT	OT	OTHER	OTHER
PC	PC	PORTCREOLE	PORTUGUESE CREOLE
PE	PE	PERSIAN	PERSIAN
PG	PG	PORTUGUESE	PORTUGUESE
PO	PO	POLICH	POLICH
RU	RU	RUSSIAN	RUSSIAN
SC	SC	SERBOCROAT	SERBO-CROATIAN
SP	SP	SPANISH	SPANISH
TA	TA	TAGALOG	TAGALOG
TH	TH	THAI	THAI
UR	UR	URDU	URDU
VI	VI	VIETNAM	VIETNAMESE

SPECIAL COVERAGE CODE

From Value	Thru Value	Short Description	Long Description
BH	BH	TBI-HOSP	TRAUMATIC BRAIN INJURY – SPECIALTY HOSPITAL
BN	BN	TBI-NF	TRAUMATIC BRAIN INJURY – NURSING FACILITY
CI	CI	CI-CAP/DA	CI-CAP/DA ICF LEVEL OF CARE
CM	CM	CM-CAPMR/DD	CM-CAP-MR/DD ICF MR LEVEL OF CARE
CS	CS	CS-CAP/DA	CS-CAP/DA SNF LEVEL OF CARE
C2	C2	C2-CAPMR/DD	C2-CAP-MR/DD ICF MR LEVEL OF CARE EFF 11/01/08
HC	HC	HC-CAP/CH	HC-CAP/CHILDREN HOSPITAL-EFF.11/01/95
IC	IC	IC-CAP/CH	IC-CAP/CHILDREN ICF-EFFECTIVE 11/01/95
ID	ID	ID-CAPCH	ID-CAP CHOICE ICF
IN	IN	INNOVATION	INNOVATIONS
LT	LT	SA	SPECIAL ASSISTANCE-CASES AWAITING A HIGHER LEVEL OF CARE
SC	SC	SC-CAP/CH	SC-CAP/CHILDREN SNF-EFFECTIVE 11/01/95
SD	SD	SD-CAPCH	SD-CAP CHOICE SNF

STATUS CODE- MEDICAID

From Value	Thru Value	Short Description	Long Description
A	A	Active	Active
C	C	Closed	Closed
M	M	Merged	Merged
S	S	Soft-Del	Soft Deleted
V	V	Void	Voided

SUB-PROGRAM CODES 1 THROUGH 4

From Value	Thru Value	Short Description	Long Description
AS	AS	AS	OUT OF STATE ADOPTION ASSISTANCE
B1	B1	BASICLE150	HCWD BASIC LE 150 FPL
B2	B2	B151-200	HCWD - BASIC 151 TO 200 FPL
CH	CH	QLFY ALIEN	CH-QUALIFIED ALLEN
ED	ED	EXTND DUE	EXTENDED DUE TO LOSS OF INCOME & EXPENSE DISREAGARD
FC	FC	FOSTERCARE	FOSTER CARE
HD	HD	HD	HEMODIALYSIS
ID	ID	ID CARD	ID CARD ISSUE
IF	IF	CHILD FC	CHILD IN FOSTER CARE
MF	MF	MFP	MONEY FOLLOWS PERSON
M5	M5	MCIDLE150	HCWD MEDICALLY IMPROVED LE 150 FPL
M6	M6	M151-200	HCWD - MEDICALLY IMPROVED 151 TO 200 FPL
PC	PC	PC	Pass-along COLA
PD	PD	PD	Pass-along Disabled Adult Child (DAC)
PE	PE	PRES ELIG	Presumptive Eligibility for Medicaid Pregnant Women program
PW	PW	PW	PASSALONG WIDOWER
P1	P1	PREG 1	1st Pregnancy
P2	P2	PREG 2	2nd Pregnancy
P3	P3	PREG 3	3rd Pregnancy
P4	P4	PREG 4	4th Pregnancy
P5	P5	PREG 5	5th Pregnancy
P6	P6	PREG 6	6th Pregnancy
UC	UC	UNCOLA	NO COST OF LIVING ADJUSTMENT

TPL INSURANCE TYPE CODE

From Value	Thru Value	Short Description	Long Description
00	00	MAJMEDCVRG	MAJOR MEDICAL COVERAGE (ANY POLICY THAT HAS NO COMPLEMENTARY INSURANCE CODE 16 MUST REMAIN IN THIS CODE AT CONVERSION (WHEN GO LIVE THIS CODE WILL NO LONGER BE VALID FOR NEW POLICY ENTRIES))
01	01	BSCHSPWSUR	BASIC HOSPITAL WITH SURGICAL COVERAGE ONLY
02	02	BSCHSPONLY	BASIC HOSPITAL COVERAGE ONLY
03	03	DENTALONLY	DENTAL COVERAGE ONLY
04	04	CANCERONLY	CANCER COVERAGE ONLY
05	05	ACCDNTONLY	ACCIDENT COVERAGE ONLY
06	06	INPTHSPFLT	INPATIENT HOSPITAL FLAT RATE COVERAGE ONLY
07	07	LNGTRMONLY	LONG TERM CARE COVERAGE ONLY
08	08	BSCMEDISUP	BASIC MEDICARE SUPPLEMENT COVERAGE ONLY
09	09	NOT USED	NOT USED
10	10	MAJMEDDNTL	MAJOR MEDICAL AND DENTAL COVERAGE (WHEN GO LIVE THIS CODE WILL NO LONGER BE VALID FOR NEW POLICY ENTRIES)
11	11	MAJMEDLT	MAJOR MEDICAL AND LONG-TERM CARE COVERAGE (WHEN GO LIVE THIS CODE WILL NO LONGER BE VALID FOR NEW POLICY ENTRIES)
12	12	INTNSVCARE	INTENSIVE CARE COVERAGE ONLY
13	13	HOSPOUTPT	HOSPITAL OUTPATIENT COVERAGE ONLY
14	14	DOCTORONLY	PHYSICIAN COVERAGE ONLY
15	15	HEARTATTCK	HEART ATTACK COVERAGE ONLY
16	16	RXONLYCOV	PRESCRIPTION DRUGS COVERAGE ONLY
17	17	VISIONCARE	VISION CARE COVERAGE ONLY
18	18	MAJMEDWRX	MAJOR MEDICAL WITH PRESCRIPTION DRUG COVERAGE (TO BE USE IF RX CLAIMS GO TO SAME ADDRESS AS MAJOR MEDICAL CLAIMS)
19	19	CSLTYTRMA	CASUALTY/ TRAUMA (ONLY USED BY TPR)
20	20	MAJMEDWORX	MAJOR MEDICAL WITHOUT PRESCRIPTION DRUG COVERAGE (TO BE USED WHEN THE POLICY DOES NOT COVER RX DRUGS OR IF THE RX DRUG CLAIMS ARE PROCESSED BY A PBM)
21	21	CMMRCLHMO	COMMERCIAL HMO

TPL STATUS CODE

From Value	Thru Value	Short Description	Long Description
A	A	ACTIVE	ACTIVE
V	V	VOID	VOID

TRIBAL CODE

From Value	Thru Value	Short Description	Long Description
001	933	TRIBAL CODE	TRIBAL CODE
BLANK	BLANK	NON-TRIBAL MEMBER	NON-TRIBAL MEMBER

TRIBAL SERVICES RECEIVED

From Value	Thru Value	Short Description	Long Description
BLANK	BLANK	NON-TRIBAL MEMBER	NON-TRIBAL MEMBER
Y	Y	YES	TRIBAL MEMBER RECEIVED SERVICES FROM A TRIBAL PROVIDER OR BY REFERRAL FROM A TRIBAL PROVIDER
N	N	NO	TRIBAL MEMBER HAS NOT RECEIVED SERVICES FROM A TRIBAL PROVIDER OR BY REFERRAL FROM A TRIBAL PROVIDER