

## Appendix A4 – Beneficiary Hospice data

Field	Size	Usage	Location	Remarks
1. Trailer Code	2	9	1-2	Value '02'
2. Hospice Period	1	9	3	Values: '0', '1', '2', '3', '4'
3. First Start Date	7	C3 4	4-7	CCYYDDD packed
4. Filler	4	X	8-11	
5. First Hospice Provider Number	13	X	12-24	
6. First Hospice NPI	10	X	25-34	
7. First Hospice Intermediary Num.	5	X	35-39	
8. First Ownership Change Start Date	7	C3 4	40-43	CCYYDDD packed
9. Filler	4	X	44-47	
10. First Ownership Change Provider	13	X	48-60	
11. First Ownership Change NPI	10	X	61-70	
12. First Ownership Change Intermed.	5	X	71-75	
13. Second Start Date	7	C3 4	76-79	CCYYDDD packed
14. Filler	4	X	80-83	
15. Second Ownership Provider Number	13	X	84-96	
16. Second Ownership NPI	10	X	97-106	
17. Second Ownership Intermediary Num	5	X	107-111	
18. Second Ownership Change Start Date	7	C3 4	112-115	
19. Filler	4	X	116-119	
20. Second Ownership Change Provider	13	X	120-132	
21. Second Ownership	10	X	133-142	

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Field	Size	Usage	Location	Remarks
Change NPI				
22. Second Ownership Change Intermed.	5	X	143-147	
23. Second Ownership Term Date	7	C3 4	148-151	
24. Filler	4	X	152-155	