

ID	Name	Column Definition	Datatype	Notes
1	CASE_ID	Client Case Number	VARCHAR2(9)	
2	HD_OF_HSEHLD_NM	Head of Household Name	VARCHAR2(767)	
3	CLNT_TYP	Client Type by Aid Category	VARCHAR2(43)	
4	CLNT_PRGNCY_DUE_DT	Pregnancy Due Date	DATE	
5	CLNT_ID	Medicaid ID	VARCHAR2(255)	
6	CLNT_SSN_NBR	Social Security Number	VARCHAR2(11)	
7	CLNT_FRST_NM	First Name	VARCHAR2(255)	
8	CLNT_MDL_NM	Middle Name	VARCHAR2(255)	
9	CLNT_LST_NM	Last Name	VARCHAR2(255)	
10	CLNT_BRTH_DT	Birth Date	DATE	
11	CLNT_GNDR_DESC	Gender	VARCHAR2(4000)	
12	CLNT_CNTY_DESC	County	VARCHAR2(4000)	
13	CLNT_ADDR_TX	Address	VARCHAR2(511)	
14	CLNT_CTY_NM	City	VARCHAR2(255)	
15	CLNT_ST_CD	State	VARCHAR2(255)	
16	CLNT_PSTL_CD	Zip Code	VARCHAR2(255)	
17	CLNT_PHN_NBR	Phone Number	VARCHAR2(14)	
18	CLNT_EMAIL_ADDR_TX	Email Address	VARCHAR2(255)	
19	PRMY_LANG_DESC	Primary Language Spoken	VARCHAR2(4000)	
20	CLNT_TPL_CD_DESC	Third Party Liability Indicator	VARCHAR2(28)	
21	CLNT_ELIG_BGN_DT	Eligibility Begin Date	DATE	Indicates the member's eligibility begin date. Note; this may not match the member's ACC enrollment begin date
22	CLNT_ELIG_END_DT	Eligibility End Date	DATE	Indicates the member's eligibility end date Note; this may not match the member's ACC enrollment end date
23	ELGB_TYP_DESC	Eligibility Type	VARCHAR2(4000)	
24	PGM_AID_CTG_DESC	Program Aid Category	VARCHAR2(4000)	Should be Medicaid State Plan or CHP
25	PGM_NM	Program Name	VARCHAR2(8)	Should be Medicaid or CHP
26	HSEHLD_NM	Household Name	VARCHAR2(265)	Head of Household's Last Name
27	ACC_ENRL_BGN_DT	ACC Enrollment Begin Date	DATE	Indicates the start date for RAE enrollment
28	ACC_ENRL_END_DT	ACC Enrollment End Date	DATE	Indicates the end date for RAE enrollment
29	PCMP_ID	PCMP Medicaid ID	VARCHAR2(255)	
30	PCMP_NAME	PCMP Name	VARCHAR2(255)	
31	PCMP_INDX_ID	PCMP NPI-Medicaid ID	VARCHAR2(511)	
32	PCMP_ENRL_BGN_DT	PCMP Enrollment Begin Date	DATE	Indicates the start date for PCMP enrollment Note; This should match RAE enrollment date
33	PCMP_ENRL_END_DT	PCMP Enrollment End Date	DATE	Indicates the end date for PCMP enrollment Note; This should match RAE enrollment end date

34	RAE_MCAID_ID	RAE Medicaid ID	VARCHAR2(255)	
35	CMA_AGENCY_NM	Case Management Agency Name	VARCHAR2(255)	
36	FED_POV_LVL_PC	Federal Poverty Level Percentage	NUMBER(15,5)	Member's reported income as a percentage of the federal poverty level
37	REDTRM_DT	Redetermination Date	DATE	Member's renewal date
38	STOP_RSN_DESC	Eligibility Stop Reason Description	VARCHAR2(4000)	Indicates the reason the member's eligibility is being terminated. This field will be null if no eligibility stop date is on record
39	INS_CARR_NM	TPL Insurance Carrier Name	VARCHAR2(255)	Member's third party insurance carrier name
40	Heart Attack'	Heart Attack'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
41	Stroke'	Stroke'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
42	Pneumonia'	Pneumonia'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
43	Cardiac Dysrhythmia'	Cardiac Dysrhythmia'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
44	Diabetes'	Diabetes'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
45	Rheumatoid Arthritis'	Rheumatoid Arthritis'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
46	Juvenile Arthritis'	Juvenile Arthritis'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
47	Other Arthritis'	Other Arthritis'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
48	Osteoarthritis'	Osteoarthritis'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
49	Hypertension'	Hypertension'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
50	Congestive Heart Failure'	Congestive Heart Failure'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
51	Congestive Heart Disease'	Congestive Heart Disease'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
52	Asthma'	Asthma'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
53	Chronic Obstructive Pulmonary Disease (COPD)'	Chronic Obstructive Pulmonary Disease (COPD)'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not

54	Chronic Liver Disease'	Chronic Liver Disease'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
55	Alzheimers'	Alzheimers'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
56	Dementia'	Dementia'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
57	HIV/AIDS'	HIV/AIDS'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
58	Capitated BH Mental Health'	Capitated BH Mental Health'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
59	Capitated BH Substance Use Disorder'	Capitated BH Substance Use Disorder'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
60	Fracture'	Fracture'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
61	Cancer'	Cancer'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
62	Septicemia'	Septicemia'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
63	Organ/Tissue Transplant'	Organ/Tissue Transplant'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
64	Pregnancy'	Pregnancy'	NUMBER	1 indicates the member had a claim with this condition in the last 12 months, 0 indicates the member has not
65	SPECIALIST_CLAIMS	SPECIALIST_CLAIMS	NUMBER	Indicates the number of specialist claims the member has had in the last 12 months
66	SPECIALIST_CLAIMS_3_MTH	SPECIALIST_CLAIMS_3_MTH	NUMBER	Indicates the number of specialist claims the member has had in the last 3 months
67	LOCK_IN_IND	Lock in Indicator	CHAR(1)	Indicates the member is currently locked in due to the PHE
68	MASS_COMM_EMAIL_SW	Mass Communication Email Preference	CHAR(1)	Indicates the member is open to receiving mass communication e-mails
69	EMAIL_SW	Email Preference	CHAR(1)	Indicates the member is open to receiving e-mails
70	PRINT_MAIL_SW	Print Mail Preference	CHAR(1)	Indicates the member is open to receiving communications via print mail
71	TEXT_SW	Text Message Preference	CHAR(1)	Indicates the member is open to receiving communications via text message