



# Authoritative Physician Database™ (APD) Field Descriptions

[https://www.careprecise.com/detail\\_authoritative\\_physician\\_database.htm](https://www.careprecise.com/detail_authoritative_physician_database.htm)

| Data Table/File Name                                       | Field Name         | Description   | Data Type | Size |
|--|--------------------|---|-----------|------|
| <b>DB FILE: AuthoritativePhysicianDB.mdb</b>               |                    |   |           |      |
| <b>APD_Physician</b><br>All U.S. HIPAA-covered physicians. | NPI                | National Provider Identifier assigned by the federal government to every HIPAA-covered healthcare provider. All physicians are required to have one, and only one, Type 1 NPI number. | Text      | 10   |
|  | PhysPACID          | Unique Physician ID assigned by PECOS (Medicare ID)   | Text      | 20   |
|  | LN                 | Last name   | Text      | 35   |
|  | FN                 | First name  | Text      | 20   |
|  | MN                 | Middle name   | Text      | 20   |
|  | PN                 | Name Prefix (Dr, Ms, etc.)  | Text      | 5    |
|  | SN                 | Name Suffix (Jr, II, etc.)  | Text      | 5    |
|  | Cred               | Credential(s)   | Text      | 20   |
|  | Prac1stAddr        | Practice address line 1   | Text      | 55   |
|  | Prac2ndAddr        | Practice address line 2   | Text      | 55   |
|  | PracCity           | Practice address city   | Text      | 40   |
|  | PracState          | Practice address state  | Text      | 40   |
|  | PracZip            | Practice address Zip Code   | Text      | 20   |
|  | County             | Practice address county   | Text      | 45   |
|  | <b>CoLoCode™</b>   | Practice co-location code; may be used to link providers practicing at the same location; derived algorithmically based on co-location data   | Text      | 40   |
|  | Rural/Urban/Sub    | R = Rural, U = Urban, S = Suburban/other  | Text      | 1    |
|  | PhysicianPracPhone | Physician's Practice phone number   | Text      | 20   |
|  | PhysicianFax       | Fax number  | Text      | 20   |
|  | EnumDate           | Date provider registered with the federal NPI database  | Text      | 10   |
|  | UpdateDate         | Date provider most recently updated their NPI record  | Text      | 10   |
|  | Gender             | Provider's gender   | Text      | 1    |
|  | IsSoleProp         | Y = sole proprietor business type   | Text      | 1    |
|  | IndepProfile       | Y = physician's profile indicates independent practice or group of 2 or fewer physicians  | Text      | 1    |
|  | InPECOS            | Y = enrolled to bill Medicare (may order and refer)   | Text      | 1    |
|  | Warning            | Y = physician is barred from billing Medicare due to an infraction  | Text      | 1    |
|  | ExclType           | Code of the infraction (see the ExclCode table for definitions)   | Text      | 10   |
|  | PriSpec            | Primary medical specialty from NPI Type   | Text      | 50   |

**APD\_Physician\_Type2**

All U.S. HIPAA-covered physicians.

|                 |   |        |     |
|-----------------|---|--------|-----|
|                 | 1 record (NOTE: All specialties are listed in APD_Specialty)  |        |     |
| School          | Physician's medical school  | Text   | 100 |
| GradYear        | Physician's medical school graduation year  | Text   | 4   |
| EstPracYears    | Number of years in practice, estimated based on medical school graduation year and/or NPI enumeration date post-2009  | Text   | 3   |
| TotalPayments   | Total estimated Medicare payments to this practitioner in the most recent reported year, 0 through 10 (11 levels)   | Number |     |
| Level           | Level of Medicare service payments received by practitioner in the most recent reported year, 0 through 10 (11 levels)  | Number |     |
| Placekey        | As announced in the December 2025 and January 2025 releases, this is a deprecated field. It will remain in the file to maintain compatibility. The CarePrecise CoLoCode provides the same functionality in matching records, and is less prone to compatibility issues. | Text   | 100 |
| MSA             | MSA/CBSA of the service location  | Text   | 5   |
| NPI             | National Provider Identifier (Type 2) assigned by the federal government to a physician's business entity. Every physician is required to have one and only one Type 1 (individual) NPI registration, but may have additional Type 2 (organization) NPI registrations.  | Text   | 10  |
| OrgName_LBN     | Legal Business Name of physician's business entity  | Text   | 255 |
| LN              | Last name of authorized official for physician business entity  | Text   | 35  |
| FN              | First name of authorized official for physician business entity   | Text   | 20  |
| MN              | Middle name of authorized official for physician business entity  | Text   | 20  |
| PN              | Name Prefix (Dr, Ms, etc.) of authorized official for physician business entity   | Text   | 5   |
| SN              | Name Suffix (Jr, II, etc.) of authorized official for physician business entity   | Text   | 5   |
| Cred            | Credential(s) of authorized official for physician business entity  | Text   | 20  |
| Title           | Title of authorized official for physician business entity  | Text   | 100 |
| Prac1stAddr     | Practice address line 1   | Text   | 55  |
| Prac2ndAddr     | Practice address line 2   | Text   | 55  |
| PracCity        | Practice address city   | Text   | 40  |
| PracState       | Practice address state  | Text   | 40  |
| PracZip         | Practice address Zip Code   | Text   | 20  |
| County          | Practice address county   | Text   | 45  |
| CoLoCode        | Business entity's co-location code, derived algorithmically based on co-location data   | Text   | 40  |
| Rural/Urban/Sub | R = Rural, U = Urban, S = Suburban/other  | Text   | 1   |

|   |                    |   |      |     |
|---|--------------------|---|------|-----|
|   | PhysicianPracPhone | Business entity phone number  | Text | 20  |
|   | PhysicianFax       | Business entity fax number  | Text | 20  |
|   | EnumDate           | Date provider registered this Type 2 NPI enumeration with the federal NPI database  | Text | 10  |
|   | UpdateDate         | Date provider most recently updated this Type 2 NPI record  | Text | 10  |
|   | IsSoleProp         | Y = sole proprietor business type   | Text | 1   |
|   | InPECOS            | Y = enrolled to bill Medicare (may order and refer)   | Text | 1   |
|   | Warning            | Y = physician is barred from billing Medicare due to an infraction  | Text | 1   |
|   | ExclType           | Code of the infraction (see the ExclCode table for definitions)   | Text | 10  |
|   | PriSpec            | Primary medical specialty from business entity's NPI Type 1 record (NOTE: All specialties are listed in APD_Specialty)  | Text | 50  |
|   | Placekey           | As announced in the December 2025 and January 2025 releases, this is a deprecated field. It will remain in the file to maintain compatibility. The CarePrecise CoLoCode provides the same functionality in matching records, and is less prone to compatibility issues. | Text | 100 |
|   | MSA                | MSA/CBSA of the service location  | Text | 5   |
|   | NPI                | National Provider Identifier  | Text | 10  |
|   | ReportedOrder      | Number of taxonomy field in which reported (1 - 15)   | Byte | 1   |
|   | Taxonomy           | Taxonomy code   | Text | 10  |
|   | License            | License number  | Text | 20  |
| <b>APD_Specialty</b><br>All physicians' specialties. May be up to 15 per physician.   | LicenseState       | Licensing state   | Text | 2   |
|   | IsPrimary          | Y = primary taxonomy code (primary specialty)   | Text | 6   |
|   | Specialty          | Taxonomy description, i.e., specialty   | Text | 255 |
|   | PACID              | Unique Group Practice ID assigned by PECOS to the Group Practice that the individual professional works with  | Text | 20  |
|   | NPI                | Group National Provider Identifier; derived algorithmically from NPI registry data; groups may have additional NPI numbers  | Text | 10  |
|   | OrgLBN             | Legal name of the Group Practice  | Text | 70  |
|   | CountGroupPracMem  | Total number of individual professionals affiliated with the Group Practice based on Group Practice PAC ID  | Text | 4   |
|   | StreetAddr1        | Group Practice line 1 address   | Text | 55  |
|   | StreetAddr2        | Group Practice line 2 address   | Text | 55  |
|   | City               | Group Practice city   | Text | 30  |
| <b>APD_Group</b><br>Physicians' affiliated practice groups. May be up to five per physician. Ongoing extraction from Medicare claims data.<br><br>NOTE: Medical procedure performed per group can be viewed as a summary of procedures performed by each group's affiliated physicians. See example query in AuthoritativeHospDB.mdb. | State              | Group Practice state  | Text | 2   |
|   | Zip                | Group Practice zip code (9 digits when available)   | Text | 9   |
|   | County             | Group Practice County   | Text | 45  |
|   | Rural/Urban/Sub    | R = Rural, U = Urban, S = Suburban/other  | Text | 1   |
|   | CoLoCode           | Group co-location code; may be used to link providers practicing at the same location; derived algorithmically based on   | Text | 40  |

|   |                     |   |        |     |
|---|---------------------|---|--------|-----|
| <b>APD_GroupAff</b><br>Linking table connects physicians with practice group affiliations. Collected from Medicare claims data during a moving window of twelve months prior to release date. |                     | co-location data  |        |     |
|   | GroupPhone          | Phone Number  | Text   | 24  |
|   | GroupFax            | Fax Number  | Text   | 24  |
|   | AuthPN              | Contact name prefix   | Text   | 5   |
|   | AuthFN              | Contact first name  | Text   | 20  |
|   | AuthMN              | Contact middle name   | Text   | 20  |
|   | AuthLN              | Contact last name   | Text   | 35  |
|   | AuthSN              | Contact name suffix   | Text   | 5   |
|   | AuthCred            | Contact credential  | Text   | 20  |
|   | AuthTitle           | Contact title   | Text   | 35  |
|   | TotalPayments_Group | Total estimated Medicare payments to this practice group in the most recent reported year, 0 through 10 (11 levels)   | Number |     |
|   | Level_Group         | Level of Medicare service payments to this group in the most recent reported year, 0 through 10 (11 levels)   | Number |     |
|   | Placekey            | As announced in the December 2025 and January 2025 releases, this is a deprecated field. It will remain in the file to maintain compatibility. The CarePrecise CoLoCode provides the same functionality in matching records, and is less prone to compatibility issues. | Text   | 100 |
|   | MSA                 | MSA/CBSA of the service location  | Text   | 5   |
|   | NPI                 | Unique physician ID assigned by NPPES   | Text   | 11  |
|   | PACID               | Unique Group Practice ID assigned by PECOS to the Group Practice that the individual professional works with  | Text   | 20  |
| <b>APD_Hospital</b><br>Physician's affiliated hospitals. May be up to five per physician. Ongoing extraction from Medicare claims data.   | AcceptsMedicareAsmt | Y = Professional accepts Medicare approved amount as payment in full at this group location. M = Professional may accept Medicare Assignment.   | Text   | 1   |
|   | CCN                 | CMS Certification Number  | Text   | 6   |
|   | NPI                 | Priority National Provider Identifier of hospital; derived as best NPI based on taxonomy hierarchy; hospitals may have additional NPI numbers   | Text   | 10  |
|   | HospitalName        | Hospital name as reported by the hospital in its NPPES record   | Text   | 255 |
|   | HospitalLBN         | Hospital legal business name as listed in the hospital quality data   | Text   | 70  |
|   | Address1            | Hospital line 1 address   | Text   | 100 |
|   | Address2            | Hospital line 2 address   | Text   | 100 |
|   | City                | Hospital City   | Text   | 100 |
|   | State               | Hospital State  | Text   | 2   |
|   | ZIP Code            | Hospital Zip Code   | Text   | 5   |
|   | County              | Hospital County   | Text   | 45  |
|   | Rural/Urban/Sub     | R = Rural, U = Urban, S = Suburban/other  | Text   | 1   |
|   | HospitalPhone       | Hospital Phone  | Text   | 10  |
|   | HospitalFax         | Hospital Fax Number   | Text   | 24  |
|   | HospitalType        | Hospital Type, as recorded in hospital quality data   | Text   | 50  |
|   | HospitalOwnership   | Hospital ownership structure  | Text   | 100 |
|   | EmergencyService    | Y= Hospital has emergency service   | Text   | 50  |
|   | CoLoCode            | Hospital co-location code; may be used to link providers practicing at the same   | Text   | 40  |

|   |           |   |      |     |
|---|-----------|---|------|-----|
|   |           | location; derived algorithmically based on co-location data   |      |     |
|   | AuthPN    | Contact name prefix   | Text | 5   |
|   | AuthFN    | Contact first name  | Text | 20  |
|   | AuthMN    | Contact middle name   | Text | 20  |
|   | AuthLN    | Contact last name   | Text | 35  |
|   | AuthSN    | Contact name suffix   | Text | 5   |
|   | AuthCred  | Contact credential  | Text | 20  |
|   | AuthTitle | Contact Official title  | Text | 35  |
|   | Placekey  | As announced in the December 2025 and January 2025 releases, this is a deprecated field. It will remain in the file to maintain compatibility. The CarePrecise CoLoCode provides the same functionality in matching records, and is less prone to compatibility issues. | Text | 100 |
|   | MSA       | MSA/CBSA of the service location  | Text | 5   |
| <b>APD_HospitalAff</b>  | CCN       | CCN of hospital where individual professional provides service  | Text | 6   |
| Linking table connects physicians with their hospital affiliations. Collected from Medicare claims data during a moving window of twelve months prior to data release date. | NPI       | Unique physician ID assigned by NPPES   | Text | 11  |

|  |           |   |      |     |
|--|-----------|---|------|-----|
| <b>Lookup_ExclusionDescriptions</b>  | ExclType  | Exclusion type code   | Text | 24  |
| Describes the exclusion code for sanctions indicated in the APD_Physician table. Exclusion from billing Medicare or other federal programs due to a sanction of other infraction. Sourced from Centers for Medicare and Medicaid Services Office of Inspector General. | ExclDescr | Description of exclusions imposed by the OIG expanded from Medicare and State health care programs to all Federal health care programs, federal code 1128B(f)(1). | Text | 255 |

#### DB FILE: AuthoritativePhysicianDB\_Procedures.mdb

|   |                  |   |      |    |
|---|------------------|---|------|----|
| <b>APD_PhysicianProcedure</b>   | NPI              | National Provider Identifier of clinician   | Text | 10 |
| Physician procedure volumes and counts of services and patients served, from CMS-collected reporting, according to Medicare Clinician Utilization data.   | Proc_Code        | Code identifying procedure  | Text | 24 |
| Effective 7/22/2022, Procedures will include the CMS Clinician Utilization data release, in compliance with copyright, and the procedure code field name will be changed to Proc_Code. For the complete procedure report, user may review and download at <a href="#">this link</a> . | ServiceCount     | Frequency of individual clinician's performance of the associated procedure within the calendar year. | Text | 10 |
|   | BeneficiaryCount | The number of beneficiaries that received the service or procedure                                    | Text | 10 |
|   | MeasureYear      | The most recent year of procedure data reported by CMS.   | Text | 4  |
|   | Proc_Code        | Code identifying procedure  | Text | 24 |

**APD\_ProcedureDescriptions**

Physician procedure volumes according to Medicare Clinician Utilization data. Ongoing extraction from CMS-collected reporting. Abbreviated descriptions. [Click for code list...](#)

ProcedureDescription

Lay-friendly description of procedure associated with code

Long Text

Long Text

**DB FILE: AuthoritativePhysicianDB\_DMEPOS.mdb****APD\_PhysicianDMEPOS**

Physician Durable Medical Equipment (DME) orders, listing DME ordered by physician, and counts of services, claims, suppliers and patients served, from CMS-collected reporting.

|                           |   |        |    |
|---------------------------|---|--------|----|
| NPI                       | National Provider Identifier of clinician   | Text   | 10 |
| DME_Code                  | Code identifying DMEPOS type  | Text   | 24 |
| Suppliers                 | Number of suppliers rendering DMEPOS products/services ordered by the referring provider  | Text   | 12 |
| Beneficiaries             | Number of beneficiaries associated with the supplier DMEPOS products/services ordered by the referring provider. Beneficiary counts fewer than 11 have been suppressed to protect the privacy of Medicare beneficiaries.  | Text   | 12 |
| Claims                    | Number of DMEPOS claims submitted by the supplier, reflecting products/services ordered by the referring provider. Aggregated records based on claims fewer than 11 are not included.   | Text   | 12 |
| Services                  | Number of DMEPOS products/services rendered by the supplier   | Text   | 12 |
| AvgSubmittedCharge        | Average of the charges that suppliers submit for DMEPOS products/services. Total submitted charges can be calculated by multiplying the AvgSubmittedCharge by the Services.   | Double |    |
| AvgMedicareAllowAmount    | Average Medicare allowed amounts for the DMEPOS product/service rendered by suppliers. Allowed: amount Medicare pays, deductible and coinsurance the beneficiary pays, amounts that a third party pays. Total Medicare allowed amounts can be calculated by multiplying the AvgMedicareAllowAmount by the Services. | Double |    |
| AvgMedicarePaymentAmount  | Average amount Medicare paid suppliers after deductible and coinsurance amounts have been deducted for the line item DMEPOS product/service. Total Medicare payment amounts can be calculated by multiplying the AvgMedicarePaymentAmount by the Services.  | Double |    |
| AvgMedicareStandardAmount | Average amount Medicare paid suppliers after deductible and coinsurance amounts have been deducted for the line item DMEPOS product/service. Total Medicare payment amounts can be calculated by multiplying the AvgMedicarePaymentAmount by the  | Double |    |

|   |                 |   |           |     |
|---|-----------------|---|-----------|-----|
|   |                 | Services.   |           |     |
|   | MeasureYear     | Year of care the data reflects (most recent CMS data release on this physician) | Text      | 4   |
|   | EntityType      | NPI Record Type 1=individual, 2=organization                                    | Text      |     |
|   | DME_Code        | Code identifying order  | Text      | 24  |
| <b>APD_DMEPOSDescriptions</b>   | DME_Description | Lay-friendly description of procedure associated with the DME or POS            | Long Text | 255 |
| Physician procedure volumes. Ongoing extraction from CMS-collected reporting. Abbreviated descriptions. |                 |   |           |     |

**DB FILE: AuthoritativePhysicianDB\_Medicare\_OptOut.mdb**

|   |                             |   |      |     |
|---|-----------------------------|---|------|-----|
| <b>APD_Medicare_OptOut</b><br>Clinicians who have opted out of Medicare participation | NPI                         | National Provider Identifier of clinician               | Text | 10  |
|   | First Name                  | Clinician's first name                                  | Text | 255 |
|   | Last Name                   | Clinician's last name                                   | Text | 255 |
|   | Specialty                   | Clinician's specialty                                   | Text | 255 |
|   | Optout Effective Date       | Date this opt-out record becomes/became effective       | Date |     |
|   | Optout End Date             | Date this opt-out record will be/was void               | Date |     |
|   | First Line Street Address   | Street address line 1                                   | Text | 255 |
|   | Second Line Street Address  | Street address line 2                                   | Text | 255 |
|   | City Name                   | Clinician's address city                                | Text | 255 |
|   | State Code                  | Clinician's address state                               | Text | 2   |
|   | Zip code                    | Clinician's address Zip Code®                           | Text | 10  |
|   | Eligible to Order and Refer | Clinician is eligible to refer for covered services     | Text | 1   |
|   | Last updated                | Date clinician most recently updated the opt-out record | Date |     |