

Texas All-Payor Claims Database – Common Data Layout Components and Requirements – v3.0.2 - ERRATA					
Section	Element Number	Element Name	Column Change	Old Value	New Value
Eligibility	TXME1029	Plan Name	Data Type	char	varchar
Medical	CDLMC160	Claim Line Type	Description	Report the code that defines the claim line status in terms of adjudication. Valid codes are: O = Original; V = Void; R = Replacement; B = Back Out; A = Amendment; D = Denial.	Report the code that defines the claim line status in terms of action resulting from adjudication. Valid codes are: O = Original B = Backout A = Amendment V = Void For further definitions, please refer to the Claim Versioning Guide (https://go.uth.edu/VERSIONS).
Pharmacy	CDLPC066	Claim Line Type	Description	Report the code that defines the claim line status in terms of adjudication. Valid codes are: O = Original; V = Void; R = Replacement; B = Back Out; A = Amendment; D = Denial.	Report the code that defines the claim line status in terms of action resulting from adjudication. Valid codes are: O = Original B = Backout A = Amendment V = Void For further definitions, please refer to the Claim Versioning Guide (https://go.uth.edu/VERSIONS).
Dental	CDLDC084	Claim Line Type	Description	Report the code that defines the claim line status in terms of adjudication. Valid codes are: O = Original; V = Void; R = Replacement; B = Back Out; A = Amendment; D = Denial.	Report the code that defines the claim line status in terms of action resulting from adjudication. Valid codes are: O = Original B = Backout A = Amendment V = Void For further definitions, please refer to the Claim Versioning Guide (https://go.uth.edu/VERSIONS).
Appendix	G-1	Table	Code(s)	12, 13, 14, 15, 16, 17, 18, 19, 41, 42, 43, 47, AP, C1, CO, CP ,D, DB, E, EP, FH, FP, FF, HM, HN, HS, IN	MC, MA, MF, MB, MD, CM, CI, CF, CS, SP, MS, RX, DN, VS, VA, TR, FD