## )ata SnapShot - Patient

t Modified on 07/11/2025 4:08 pm EDT

## <sup>2</sup>atient

Denoted below are the specific **Patient Demographic** data items and their issociated data types to assist with processing a data snapshot.

Field	Description	Values
ACCTTYPE	The patient's account type.	0: Other 1: Insurance 2: Worker's Comp 3: Corporate 4: Self Pay 5: Courtesy 6: Collection 7: Pre-collectior 8: Type I 9: Type II 10: Payment Plan 11: Payment Plan Collection 12: Auto
ETHNICITY	The patient's ethnicity.	0: Unknown 1: Hispanic or Latino 2: Not Hispanic or Latino
GRNTORRELATION	The guarantor's relationship to the patient.	N: None S: Spouse P: Parent C: Child R: Relative O: Other
INSEMGCP1	Not Used / Ignore	N/A
INSEMGCP2	Not Used / Ignore	N/A

INSEMGCP3	Not Used / Ignore	N/A
<del>ISSNO</del>	Insured SSN	Not used anymore
MAILTOPATIENT	Mail To (Statements)	N: Insured Y: Patient O: Other Insured P: Primary Insurance S: Secondary Insurance G: Patient Guarantor
OADDR1	Other Insured Address Line 1	Not used anymore
<del>OADDR2</del>	Other Insured Address Line 2	Not used anymore
OBDATE	Other Insured Date of Birth	Not used anymore
OCITY	Other Insured City	Not used anymore

<del>OEMPLOY</del>	Other Insured Employment Status	Not used anymore
OEMPNAME	Other Insured Employer Name	Not used anymore
OFIRST	Other Insured First Name	Not used anymore
OHOMEPH	Other Insured Home Phone	Not used anymore
OLAST	Other Insured Last Name	Not used anymore
OMI	Other Insured Middle Name	Not used anymore
ORELATION	Other Insured Relationship to Patient	Not used anymore
OSEX	Other Insured Sex	Not used anymore

<del>OSSNO</del>	Other Insured SSN	Not used anymore
OSTATE	Other Insured State	Not used anymore
OWORKPH	Other Insured Work Phone	Not used anymore
<del>OZIPCODE</del>	Other Insured Zip Code	Not used anymore
PACCTNO	Unique identifier for the patient.	Numeric - 8 digits
PATHASSEC	Internal flag used to differentiate patients with two (2) insurances under the same policy holder versus two (2) insurances under different individuals	Not used anymore
PEMPLOY	Employment Status	0: Employed full time 1: Employed part-time 2: Not employed 3: Self employed 4: Retired 5: On active military duty 6: Unknown

PHYSREFEREDBY	Referral Type	00: None 01: Friend 02: Physician 03: Newspaper 04: Radio 05: Television 06: Driving By 07: Mailing 08: Internet 09: Phonebook 10: Other 11: Insurance Company 12: Family 13: Screening 14: Lecture
PLANG	Language	0: English 1: Spanish 2: Other
PMARITAL	Marital Status	0: Married 1: Single 2: Divorced 3: Widowed 4: Legally Separated 5: Unknown
POLICY1	Primary Payer Policy Type	Not used anymore
POLICY2	Secondary Payer Policy Type	Not used anymore
POLICY3	Tertiary Payer Policy Type	Not used anymore
PRESIDENCE	Residence Type	0: Private Home 1: Nursing Home 2: Residential Treatment Patient 3: Skilled Nursing Home

PSEX	Patient Sex	0: Female 1: Male
PSTUDENT	Student Status	0: Not a student 1: Full-time student 2: Part-time student
RACE	Race	0: Unknown 1: American Indian or Eskimor Aleut 2: Asian or Native Hawaiiar or Pacific Islander 3: Black or African American 4: White 5: Other Race 6: Refused to Answer
RADDR1	Insured Address Line 1	Not used anymore
<del>RADDR2</del>	Insured Address Line 2	Not used anymore
RCITY	Insured City	Text Field
RELATION	Insured Relationship to Patient	Not used anymore

RFIRST	Insured First Name	Not used anymore
RLAST	Insured Last Name	Not used anymore
RSTATE	Insured State	Not used anymore
RZIPCODE	Insured Zip Code	Not used anymore
STMTTYPE	Statement Type	0: Single 1: Family