State Demonstrations Group

December 15, 2020

Teresa Miller
Secretary
Pennsylvania Department of Human Services
625 Forster Street, Room 333
Harrisburg, PA 17120

Dear Ms. Miller:

The Centers for Medicare & Medicaid Services (CMS) has completed its review of the substance use disorder (SUD) monitoring protocol, which is required by the Special Terms and Conditions (STC) of Pennsylvania's section 1115 demonstration, "Pennsylvania Medicaid Coverage for Former Foster Care Youth from a Different State and Substance Use Disorder Demonstration" (Project Number 11-W-00308/3). CMS has determined that the monitoring protocol, which was submitted on December 10, 2020, meets the requirements set forth in the STCs, and thereby approves Pennsylvania's SUD monitoring protocol.

The monitoring protocol is approved for the demonstration period through September 30, 2022 and is hereby incorporated into the demonstration STCs as Attachment G. In accordance with STC 42 (Public Access), the approved SUD monitoring protocol may now be posted to your state's Medicaid website.

If you have any questions, please contact your CMS project officer, Mr. Felix Milburn. Mr. Milburn is available to answer any questions concerning your section 1115 demonstration and may be reached by email at Felix.Milburn@cms.hhs.gov.

We look forward to our continued partnership on Pennsylvania's Substance Use Disorder (SUD) Program section 1115 Medicaid demonstration.

Sincerely,

Danielle Daly -S
Digitally signed by Danielle Daly -S
Date: 2020.12.15 12:35:41 -05'00'

Angela D. Garner -S
Digitally signed by Angela D. Garner -S
Date: 2020.12.16 15:14:10 -05'00'

Danielle Daly
Director
Division of Demonstration
Monitoring and Evaluation

Angela D. Garner
Director
Division of System Reform
Demonstrations

cc: Dan Belnap, State Monitoring Lead, CMS Medicaid and CHIP Operations Group

July 5th, 2018

*Note: This template is being finalized for review and approval by OMB. It is structured for easy and consistent use by states and will facilitate cross-state assessment and the identification of trends, challenges and best practices to support learning collaboration and policy / operations enhancements as may be needed. Until such time, its use is optional, although it conveys the nature and extent of monitoring information that CMS is seeking on SUD demonstrations, and the state's comments on its structure and ease of use are helpful in finalizing it. The SUD STCs require the state's compliance with Federal Systems Updates. As federal systems continue to evolve and incorporate additional 1115 waiver reporting and analytics functions, the state is required to work with CMS to:

    a. Revise the reporting templates and submission processes to accommodate timely compliance with the requirements of the new systems;
    b. Ensure all 1115, T-MSIS, and other data elements that have been agreed to for reporting and analytics are provided by the state; and
    c. Submit deliverables to the appropriate system as directed by CMS.

When this template is OMB approved, then the state will be required to use it.

1. Transmittal Title Page for the State's SUD Demonstration or SUD Components of Broader Demonstration

The state should complete this Transmittal Title Page as part of its SUD Monitoring Protocol. This form should be submitted as the title page of all Monitoring Reports. The content of this transmittal table should stay consistent over time.

State	State of Pennsylvania
Demonstration Name	Medicaid Coverage for Former Foster Care Youth from a Different State and Substance Use Disorder Demonstration
Approval Date	July 1, 2018
Approval Period	July 1, 2018 through September 30, 2022
SUD (or if broader demonstration, then SUD Related) Demonstration Goals and Objectives	Under this demonstration, the State expects to achieve the following: Objective 1. Increase rates of identification, initiation, and engagement in treatment. Objective 2. Increase adherence to and retention in treatment. Objective 3. Reduce overdose deaths, particularly those due to opioids. Objective 4. Reduce utilization of emergency department and inpatient hospital settings for treatment where the utilization is preventable or medically inappropriate through improved access to other continuum of care services. Objective 5. Fewer readmissions to the same or higher level of care where the readmission is preventable or medically inappropriate. Objective 6. Improve access to care for physical health conditions among beneficiaries.

2. Proposed Modifications to SUD Narrative Information on Implementation, by Reporting Topic

Summary of proposed modification	Related metric (if any)	Justification for modification
1. Assessment of Need and Qualification for SUD Services		
The state does not expect to make any changes or modifications in its narrative reporting.	Metric #3 Medicaid Beneficiaries with SUD Diagnosis (monthly) Metric #4: Medicaid Beneficiaries with SUD Diagnosis (annually) Metric #5: Medicaid Beneficiaries Treated in an IMD for SUD	
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
2. Access to Critical Levels of Care for OUD and other SUDs (Milestone 1)		
The state does not expect to make any changes or modificiations in its narrative reporting.	Metric #6 Any SUD Treatment Metric #7 Early Intervention	

	Metric #8: Outpatient Services	
	Metric #9: Intensive Outpatient and Partial Hospitalization Services	
	Metric #10: Residential and Inpatient Services	
	Metric #11 – Withdrawal Management	
	Metric #12 – Medication Assisted Treatment	
	Metric #36 Average Length of Stay in IMDs	
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
3. Use of Evidence-based, SUD-specific Patient Placement Criteria (Milestone 2)		
The state does not expect to make any changes or modificiations in its narrative reporting.	There are no CMS-provided metrics related to Milestone 2	
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		

⊠ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		

4. Use of Nationally Recognized SUD-specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities (Milestone 3)

The state does not expect to make any changes or modificiations in its narrative reporting.	There are no CMS-provided metrics related to Milestone 3	

☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		

⊠ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		

5. Sufficient Provider Capacity at Critical Levels of Care including for Medication Assisted Treatment for OUD (Milestone 4)

The state does not expect to make any changes or modifications in its narrative reporting.	Metric #13 SUD Provider Availability Metric #14: SUD Provider Availability - MAT	No planned modification.

☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		

⊠ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		

6. Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD (Milestone 5)

The state does not expect to make any changes or modifications in its narrative reporting.	Metric #15: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment	

	Metric #18 Use of Opioids at High Dosage in Persons Without Cancer Metric #21 Concurrent Use of Opioids and Benzodiazepine Metric #22: Continuity of Pharmacotherapy for Opioid Use Disorder	
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
7. Improved Care Coordination and Transitions between Levels of Care (Milestone 6)		
The state does not expect to make any changes or modificiations in its narrative reporting.	**Metric #17: Follow-up after Emergency Department Visit for Mental Illness or Alcohol and Other Drug Abuse or Dependence**	.
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		

8. SUD Health Information Technology (Health IT)		
The state does not expect to make any changes or modificiations in its narrative reporting.	Q1. PDMP checking by provider types (prescribers, dispensers).	
	S1. Opioid prescriptions submitted to the PDMP	
	Q2. SSO Connections live.	
	S2. PDMP MME/D threshold exceeded alerts generated	
	S3. PDMP Multiple Provider Alerts generated	
	Q3. Corrections Facilities on-boarded to ADT	
	S4. EDs connected to ADT	
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
9. Other SUD-Related Metrics		
The state does not expect to make any changes or modificiations in its narrative reporting.	Metric #23: Emergency Department Utilization for SUD per 1,000 Medicaid Beneficiaries	

	Metric #24: Inpatient Stays for SUD per 1,000 Medicaid Beneficiaries	
	Metric #25: Readmissions Among Beneficiaries with SUD	
	Metric #26: Drug Overdose Deaths (count)	
	Metric #32: Access to Preventive/Ambulatory Health Services for Adult Medicaid Beneficiaries with SUD	
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
10. Budget Neutrality		
Pennsylvania will use the existing spreadsheet through DY1, Q3 using state reports. Beginning with the DY1, Q4 report, the state will use the CMS updated BN spreadsheets and the costs	Budget Neutrality	Pennsylvania has not yet reported costs for the demonstration on the CMS 64 and has not received the final version of the BN spreadsheets from CMS. The State is in the process of making prior period adjustments for all costs under the demonstration to date and anticipates the adjustments to be finalized in time for the DY1, Q4 report.

reported through the CMS-64 Schedule C.		Pennsylvania began reporting on the final version of the BN spreadsheets with the DY2Q1 report. Pennsylvania has not yet finalized the prior period adjustments for all costs under the demonstration.
☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
11. SUD-Related Demonstration Operations and Policy		
The state does not expect to make any changes or modificiations in its narrative reporting.		
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		
12. SUD Demonstration Evaluation Update		
The state does not expect to make any changes or modificiations in its narrative reporting.		
☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.		
☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).		

13. Other Demonstration Reporting		
The state does not expect to make any changes or modificiations in its narrative reporting.		

☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.

☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).

14. Notable State Achievements and/or Innovations		
The state does not expect to make any changes or modificiations in its narrative reporting.		

☐ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information with the modifications described above.

☒ The state has reviewed the corresponding prompts for narrative information in the SUD Monitoring Report Template and confirms that it will report the narrative information as requested (no modifications).

3. Acknowledgement of Budget Neutrality Reporting-

☒ The state has reviewed the Budget Neutrality workbook provided by the project officer and understands the expectations for quarterly and annual monitoring reports. The state will provide the requested budget neutrality information (no modifications) beginning with the DY1, Q4 report.

4. Retrospective reporting

If a state's monitoring protocol is approved after its first quarterly monitoring report submission date, the state should report data to CMS retrospectively for any prior quarters of SUD demonstration implementation. States are expected to submit retrospective metrics data in the state's second monitoring report submission after monitoring protocol approval, or propose an alternative plan for reporting retrospectively on its SUD demonstration.

In the monitoring report submission containing retrospective metrics data, the state should also provide a general assessment of metrics trends from the start of the state's demonstration through the end of the current reporting period. The state should report this information in Part B of its report submission (Table 3: Narrative Information on Implementation, by Milestone and Reporting Topic). This general assessment is not intended to be a comprehensive description of every trend observed in metrics data (for example, unlike other monitoring report submissions, the state is not required to describe all metrics changes (+ or - greater than 2 percent). Rather, the assessment is an opportunity for states to provide context for its retrospective metrics data, to support CMS's review and interpretation. For example, consider a state that submits data showing an increase in the number of medication assisted treatment (MAT) providers (Metric #14) over the course of the retrospective reporting period. The state may decide to highlight this trend to CMS in Part B of its report (under Milestone 4) by briefly summarizing the trend and providing context that during this period, the state implemented a grant that supported training for new MAT providers throughout the state.

☐ The state will report retrospectively for any quarters prior to monitoring protocol approval as described above, in the state's second monitoring report submission after protocol approval.

☒ The state proposes an alternative plan to report retrospectively for any quarters prior to monitoring protocol approval: *Insert narrative description of proposed alternative plan for retrospective reporting. State should provide justification for its proposed alternative plan.*

Response: In DY2Q2, the Commonwealth has already resubmitted retrospective reporting for quarterly and monthly metrics for all quarters consistent with Technical Specifications 2.0 and noted all deviations that are necessary to ensure that metrics accurately reflect the delivery of SUD services. In DY2Q3, the Commonwealth will resubmit the annual metrics calculated using CMS-defined definitions. In the DY2 annual report the Commonwealth will submit the annual metrics established with quality measures for CY19 using the most current technical specifications.

5. Reporting SUD Demonstration Metrics and Narrative Information

The state should review the guidance in Appendix A of the instructions document in order to attest it will follow CMS's guidance on reporting metrics and narrative information, or propose any deviations. The state should complete Table A below to reflect its proposed reporting schedule for the duration of its SUD demonstration approval period.

☒ The state has completed the table below according to the guidance in Appendix A of the instructions document and attests to reporting metrics and narrative information in its quarterly and annual reports according as described.

☒ The state has reviewed Appendix A of the instructions document and completed the table below with the following deviations: *Insert narrative description of proposed changes to reporting. State should provide justification for any proposed deviation*

All Deviations are listed in the Monitoring workbook as requested in the CMS Protocol comments with justification of those changes noted in the "Explanation of any deviations from the CMS-provided specifications" column.

4. SUD Demonstration Monitoring Reporting Schedule

Dates of reporting quarter	Broader 1115 DY (if applicable)	SUD DY	Report due (per STCs schedule)	Measurement period associated with SUD information in report, by reporting category**
July 1, 2018 – September 30, 2018	DY1 Q4 (Annual)	DY1 Q1	12/29/2018	• Protocol in development***
October 1, 2018 – December 31, 2018	DY2 Q1	DY1 Q2	3/1/2019	• Protocol in development
January 1, 2019 – March 31, 2019	DY2 Q2	DY1 Q3	5/30/2019	• Protocol in development
April 1, 2019 – June 30, 2019	DY2 Q3	DY1 Q4	8/29/2019	• Protocol in development
July 1, 2019 – September 30, 2019	DY2 Q4 (Annual)	DY2 Q1	12/29/2019	• Protocol in development
October 1, 2019 – December 31, 2019	DY3 Q1	DY2 Q2	2/29/2020	• Narrative information for SUD DY2 Q2 • Monthly and quarterly metrics for SUD DY2 Q1
January 1, 2020 – March 31, 2020	DY3 Q2	DY2 Q3	1/23/2021	• Narrative information for SUD DY2 Q3 • Monthly and quarterly metrics for SUD DY2 Q2
April 1, 2020 – June 30, 2020	DY3 Q3	DY2 Q4	1/23/2021	• Narrative information for SUD DY2 Q4 • Monthly and quarterly metrics for SUD DY2 Q3 • Annual grievance and appeal reporting
July 1, 2020- September 30, 2020	DY3 Q4 (Annual)	DY3 Q1	3/21/2021	• Narrative information for SUD DY3 Q1 • Monthly and quarterly metrics for SUD DY2 Q4 • Annual CMS-constructed and state-identified metrics (calculated for SUD DY 2) • Annual metrics that are established quality measures (calculated for CY 2019) (V3.0)
October 1, 2020- December 31, 2020	DY4 Q1	DY3 Q2	3/21/2021	• Narrative information for SUD DY3 Q2 • Monthly and quarterly metrics for SUD DY3 Q1

January 1, 2021- March 31, 2021	DY4 Q2	DY3 Q3	5/29/2021	• Narrative information for SUD DY3 Q3 • Monthly and quarterly metrics for SUD DY3 Q2
April 1, 2021- June 30, 2021	DY4 Q3	DY3 Q4	8/29/2021	• Narrative information for SUD DY3 Q4 • Monthly and quarterly metrics for SUD DY3 Q3 • Annual metrics that are established quality measures (calculated for CY 2020). (Use V4.0) • Annual grievance and appeal reporting
July 1, 2021- September 30, 2021	DY4 Q4 (Annual)	DY4 Q1	12/29/2021	• Narrative information for SUD DY4 Q1 • Monthly and quarterly metrics for SUD DY3 Q4 • Annual CMS-constructed and state-identified metrics (calculated for SUD DY 3)
October 1, 2021- December 31, 2021	DY5 Q1	DY4 Q2	3/1/2022	• Narrative information for SUD DY4 Q2 • Monthly and quarterly metrics for SUD DY4 Q1
January 1, 2022- March 31, 2022	DY5 Q2	DY4 Q3	5/29/2022	• Narrative information for SUD DY4 Q3 • Monthly and quarterly metrics for SUD DY4 Q2
April 1, 2022- June 30, 2022	DY5 Q3	DY4 Q4	8/29/2022	• Narrative information for SUD DY4 Q4 • Monthly and quarterly metrics for SUD DY4 Q3 • Annual metrics that are established quality measures (calculated for CY 2021). (Use V5.0) • Annual grievance and appeal reporting
July 1, 2022- September 30, 2022****	DY5 Q4 (Annual)	DY5 Q1	12/29/2022	• Narrative information for SUD DY5 Q1 • Monthly and quarterly metrics for SUD DY5 Q4 • Annual CMS-constructed and state-identified metrics (calculated for SUD DY 4) • Annual grievance and appeal reporting

* The state began reporting March 14, 2019 per instructions from the State's project officer. The DY1, Q1-3 and Annual report as well as DY2 Q1 and Q2 reports can be found on the CMS website under the PA SUD 1115 demonstration reporting.

**** Per STC #51.e, PA's SUD DY 5 is 3 months long (July 1, 2022- September 30, 2022).

DY = demonstration year; PA= Pennsylvania; Q = quarter; STC = special terms and conditions; UD = substance use disorder; CY = calendar year.

* The proposed reporting schedule assumes that the state will begin reporting in the SUD DY2 Q2 report, due February 29, 2020. If the state's protocol is not approved prior to submission of its SUD DY2 Q2 report, the state should revise the content of this table to reflect reporting beginning in the next anticipated report (e.g., SUD DY2 Q3).

** PA is not reporting the CMS-constructed quarterly grievances and appeals metrics (#33-35). However, reporting on grievances and appeals is required in annual reports per 42 CFR 431.428a(5). If the state elects to report quarterly grievances and appeals metrics, the state should revise this table to indicate when it will report these data. The Commonwealth will report on an annual basis in the annual report consistent with the regulation.

*** The state began reporting metrics for the SUD DY1 Q1- Q4 measurement period in its SUD DY1 Q4 report, submitted on September 30, 2019. Should CMS determine that the state should revise previous reporting to align with its approved protocol, CMS will discuss an appropriate timeline and resubmission plan with the state. The Commonwealth will update metrics #8 and #10, which are the only two metrics that need updated, in the next quarterly report submission.

**** Per STC #51.e, PA's SUD DY 5 is 3 months long (July 1, 2022- September 30, 2022).

DY = demonstration year; PA= Pennsylvania; Q = quarter; STC = special terms and conditions; UD = substance use disorder; CY = calendar year.

Appendix A: Additional Proposed Coding Deviations

The state has included an explanation of each of the following deviations in the "Explanation of any deviations from the CMS-provided specifications" column in its monitoring workbook. The Pennsylvania unique coding system will not result in any significant deviations in the set of services included in the metric. If the deviations noted in the "Explanation of any deviations from the CMS-provided specifications" column are not included, Pennsylvania's metrics will not be comparable to other states' metrics.

Table A.1. Deviations

Proposed deviation	Related metric(s)
1. The Commonwealth will use additional codes (DRGs 433 and 521-3; revenue codes 944-5, 760-2, and 769) to capture inpatient and residential services.	5, 6, 10, 15, 17, 18, 21, 24, 25, 36
2. The Commonwealth will utilize HCPCS code H0004 using only the HF modifier.	3, 4, 6, 8, 15, 17, 18, 21
3. The Commonwealth will utilize HCPCS code H0014 only with the HG modifier.	3, 4, 6, 8, 11, 15, 17, 18, 21
4. The Commonwealth will adding HCPCS codes H0006 and H0006TF to the outpatient claims.	3, 4, 6, 8, 15, 17, 18, 21
5. The Commonwealth will use HCPCS code T1015 with HF and UB modifiers for the outpatient metric in order to ensure that only relevant RHC/FQHC encounters are included.	3, 4, 6, 8, 15, 17, 18, 21
6. The Commonwealth will add PT/PS filters to the following revenue codes to ensure they are limited to outpatient services (without these filters the revenue codes capture residential and inpatient services): 0900, 0901, 0902, 0903, 0904, 0911, 0915, 0916, 0917, 0918, 0919 0944, 0945	3, 4, 6, 8, 15, 17, 18, 21
7. The Commonwealth utilizes different detoxification codes than the national dataset and will add a number of DRG and revenue codes to identify these claims.	3, 4, 6, 8, 9, 11, 15, 17, 18, 21

8. The Commonwealth will add HCPCS codes H2010, H0038, and H0038 with modifiers U7, UB/HA, U7/U2, U7/HB/UA, and UB/UA to the intensive outpatient/partial hospitalization code set, to be combined with POS code 52.	6, 9, 15, 17, 18, 21
9. The Commonwealth will add HCPCS codes H2034, H0013, H0014, H0020, T2048, H0038, and H0006 to completely encompass outpatient, IOP, and PH visits. They will also add 96101, 96118, and T1015 UB for PT/PS 08/184.	3, 4, 15, 17, 18, 21
10. The Commonwealth will include HCPCS code T1015 only with HF, HG, and UB modifiers, and H0004 only with the HF modifier to ensure that only SUD services are included in the metrics.	3, 4, 15, 17, 18, 21
11. The Commonwealth will remove HCPCS code H2035 from the outpatient data set.	8
12. The Commonwealth will program utilization for H0020 for PT/PS 11/129 for both the MAT and outpatient metrics in order to include medication and outpatient counseling utilization accurately.	8, 12, 22
13. The Commonwealth will program utilization for HCPCS code T1015HG for both MAT and outpatient services to include utilization accurately.	8, 12, 22
14. The Commonwealth will program utilization for HCPCS code H0020 UB for PT/PS 08/084 in both MAT and outpatient services metrics.	8, 12, 22
15. The Commonwealth will add HCPCS code H2035 to the intensive outpatient/partial hospitalization data metric.	9

• The Commonwealth will use the following hierarchy to exclude beneficiaries receiving hospice services:
   o Procedure codes (Q5001-Q5009 or T2042-T2046) OR
   o Procedure code modifier (GV) OR
   o Bill Type (81 or 82) OR
   o Provider Type (06).
	15, 17, 18, 21