

DRAFT

September 3, 1998

Provider/Organization

Data Elements

VIII. PROVIDER/ORGANIZATION DATA ELEMENTS [Data reported once but may be corrected as needed.]:

Item	FN-11	Source	Other	← ----- Committee Recommendation ----- ----->	
#	Data Element	Document	Name	Definition	Workgroup Comments
1	Provider Identification (individual clinician)	EE #35 FN-10 p.132	Provider Identification (ambulatory); Name and Identifier of the mental health organization	Federal ID Number or Nation Provider ID Number	
2	Organization Identifier	EE #34 FN-10 p.149		Federal ID Number or National Provider ID Number	
3	Provider location	EE #36 FN-10 p.132	Provider location or address (ambulatory); Mailing address of the mental health organization	P.O. Box number or street number and name, city or town, State, zip-code	
4	Type of Facility	EE #33, 39	Provider Specialty;	The category that best characterizes its	

		<p>FN-10 p.134</p>	<p>Rural Health Clinic; Type of Organization</p>	<p>general type.</p> <p>Psychiatric hospital</p> <p>Psychiatric unit of general hospital</p> <p>Organization providing residential services</p> <p>Outpatient mental health clinic</p> <p>Mental Health partial day organization</p> <p>Multi-service mental health organization</p> <p>Consumer-Run Rural Health</p> <p>Other Consumer-Run Mental Health Organization</p> <p>FQHC (Federally Qualified Health Clinic)</p> <p>Other mental health organization</p>	
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