



OMB Control No: 0938-1237

Expiration Date: 07/31/2026

Open Payments Public Use Files: Methodology Overview & Data Dictionary

O P E N P A Y M E N T S

CREATING PUBLIC TRANSPARENCY
INTO INDUSTRY - PHYSICIAN
FINANCIAL RELATIONSHIPS

June 2025

Disclaimer: The Centers for Medicare & Medicaid Services (CMS) is providing this guidance document as informational material on Open Payments. Although every reasonable effort has been made to assure the accuracy of the information, it is the responsibility of the user to ensure adherence to the requirements of the Open Payments implementing regulations, the Medicare, Medicaid, Children's Health Insurance Programs; Transparency Reports and Reporting of Physician Ownership or Investment Interests Final Rule codified at 42 CFR Parts 402 and 403 [CMS-5060-F]. This document is not intended as a supplement or replacement of the Final Rule.

Table of Contents

1	Introduction	4
2	Methodology	5
2.1	Steps 1 and 2: Data Collection and Submission	6
2.2	Step 3: Review and Dispute Data/Review and Correct Data	6
2.3	Step 4: Data Publication	7
2.3.1	Effect of Disputes on Data Publication	8
2.4	Data Sources and Types	9
2.5	Reporting Limitations and Exclusions	10
2.6	Publication Rules	10
2.6.1	Publishing Limitations	10
3	Accessing the Public Data	12
3.1	Online Data Access	12
3.2	Downloading the Data	12
3.3	PY 2024 Files	14
3.4	PY 2023 Files	15
3.5	PY 2022 Files	16
3.6	PY 2021 Files	16
3.7	PY 2020 Files	17
3.8	PY 2019 Files	17
3.9	PY 2018 Files	18
3.10	Covered Recipient Profile Supplement File	18
3.10.1	Contents of the Covered Recipient Profile Supplement File	19
3.10.2	How to Use the Covered Recipient Profile Supplement File	19
	Appendix A: Key Dates for the Open Payments System for PY 2024	20

Expiration Date: 07/31/2026

Appendix B: General Payments Detail (PY 2016 and Onwards)	21
Appendix C: General Payments Detail (PYs 2013-2015)	33
Appendix D: Research Payments Detail (PY 2016 and Onwards).....	44
Appendix E: Research Payments Detail (PYs 2013-2015)	80
Appendix F: Physician Ownership Information Detail (All PYs)	104
Appendix G: Deleted and Removed Records File	109
Appendix H: Covered Recipient Profile Supplement File	110
Disclosure	128

List of Figures

Figure 1: Steps of the Open Payments Program	5
--	---

List of Tables

Table 1: Records Identified as Disputed.....	9
Table 2: Change Type Values and Meanings.....	13
Table 3: PY 2024 Data Files	14
Table 4: PY 2023 Data Files	15
Table 5: PY 2022 Data Files	16
Table 6: PY 2021 Data Files	16
Table 7: PY 2020 Data Files	17
Table 8: PY 2019 Data Files	17
Table 9: PY 2018 Data Files	18
Table 10: Covered Recipient Profile Supplement File	19
Table 11: Key Dates for PY 2024	20
Table 12: General Payment File Attributes (PY 2016 until 2024)	21
Table 13: General Payment File Attributes (PY 2013-2015)	33
Table 14: Research Payment File Attributes (PY 2016 until 2024)	44
Table 15: Research Payment File Attributes (PY 2013-2015)	80
Table 16: Physician Ownership Information File Attributes	104
Table 17: Deleted Records File.....	109
Table 18: Covered Recipient Profile Supplement File	110

1 Introduction

Open Payments, which is managed by the Centers for Medicare & Medicaid Services (CMS), is a national disclosure program created by the Affordable Care Act (ACA). The program promotes transparency and accountability by helping consumers understand the financial relationships between pharmaceutical and medical device companies, physicians, Non-Physician Practitioners (NPP) and teaching hospitals. The health care providers included in Open Payments are collectively referred to as ‘covered recipients’.

- In 2021, the Open Payments Program was expanded to include: physician assistants, nurse practitioners, clinical nurse specialists, certified registered nurse anesthetists, anesthesiologist assistants, and certified nurse midwives. For the purpose of the Open Payments program, this particular subset of covered recipients are referred to as, “Non-Physician Practitioners (NPPs)”. NPPs are reportable for Program Year (PY) 2021 and all subsequent years.

These financial relationships may include consulting fees, research grants, travel reimbursements, and payments made from the industry to medical practitioners.

It is important to note that financial ties between reporting entities and covered recipients do not necessarily indicate an improper relationship; the data is open to personal interpretation.

This document provides a guide to how CMS publishes the informational data gathered by Open Payments for public use. It explains the sources of the data, the data files that are available from CMS, and the fields contained in each data file. View the data and learn more about the Open Payments program by visiting <https://www.cms.gov/openpayments>.

2 Methodology

The Open Payments program functions on a yearly cycle of four key activities: (1) Data Collection, (2) Data Submission, (3) Pre-Publication Review, Dispute, and Correction, and (4) Data Publication.

Reporting entities collect data on payments made to covered recipients from January 1 through December 31 of each year, along with any ownership or investment interests held by physicians or physicians' immediate family members in the reporting entity during that time. Following the data collection, reporting entities are required to submit this data to CMS.

This data may be reviewed and, if necessary, disputed by the covered recipient associated with the record(s) in the Open Payments system.

Data submitted to Open Payments that are eligible for publication is published twice annually: first, in an initial publication, and then in a refresh publication. Refer to Section 2.3 for more information. Publishing rules, limitations, and exclusions are given in Section 2.6. The data is made available on the Open Payments public data site, also called the search tool, at (<https://openpaymentsdata.cms.gov/>).

Figure 2-1, below, provides a high-level representation of the various steps during a given PY. Exact dates for the current PY are given in Appendix A: Key Dates for the Open Payments System for PY 2024.

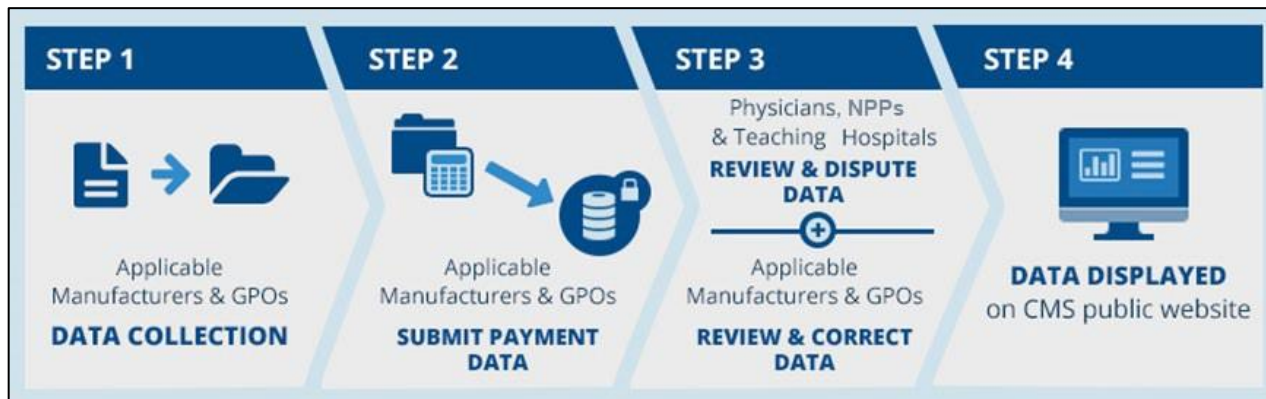


Figure 1: Steps of the Open Payments Program

2.1 Steps 1 and 2: Data Collection and Submission

Applicable Manufacturers and applicable GPOs submit their data for a PY during a designated submission period in the subsequent calendar year. For example, data collected from January 1- December 31, 2023 (“Program Year 2023”) was submitted during the submission period, which ran from February 1 to March 31, 2024. During the submission period, Applicable Manufacturers and applicable GPOs may also submit data from prior PYs as well as update previously submitted data.

Physicians and Non-Physician Practitioners (NPPs) may be identified as covered recipients of payments or transfers of values or as principal investigators associated with research-related payment records. Applicable Manufacturers and applicable GPOs are required to include the names of the covered recipients and other identifying information, including the covered recipient’s state medical license number(s) and National Provider Identifier (NPI), if the covered recipient has one. These details aid in accurately identifying the covered recipient(s) associated with each record.

Teaching hospitals may also be identified as covered recipients. Teaching hospitals are defined by CMS as any hospitals receiving payments for Medicare direct graduate medical education (GME), inpatient prospective payment system (IPPS), indirect medical education (IME), or psychiatric hospital IME programs during the last calendar year for which such information is available. CMS has made available lists of reportable teaching hospitals for each PY, which is available on the Resources page of the Open Payments website (<https://www.cms.gov/OpenPayments/About/Resources.html>).

During the submission process, the Open Payments system checks the submitted information to verify that the reported identifying data matches valid physicians, NPPs, and teaching hospitals. This initial system matching can result in some records being rejected. These records must be corrected and re-submitted by the Applicable Manufacturer or applicable GPO in order for the records to be eligible for review, dispute, and publication.

2.2 Step 3: Review and Dispute Data/Review and Correct Data

Physicians, NPPs, and teaching hospitals may review the data attributed to them in the Open Payments system prior to its publication. Their participation is voluntary, but they can choose to affirm their data is correct or dispute any data they believe to be inaccurate. Each PY has a designated pre-publication review, dispute, and correction period that follows the data submission period. The PY 2024 dates for this period and all other periods referenced in this section are provided in Appendix A.

The pre-publication review, dispute, and correction period starts with a 45-day review and dispute period (April 1 – May 15) for covered recipients, to review, affirm, or if necessary dispute records that were attributed to them, and work with the Applicable Manufacturer or Applicable GPO to resolve any disputed record(s); this includes records submitted for the previous PY and any newly submitted records from prior PYs. Similarly, records that are flagged for delay in publication by the reporting entity are eligible for review and dispute by physicians, NPPs, and teaching hospitals.

Immediately following the pre-publication 45-day review and dispute period is an additional 15-day correction period for reporting entities, from May 16 to May 30, to make final corrections to records and resolve any active disputes ahead of the annual data publication

The designated pre-publication review and dispute period affects how the record is displayed in the initial data publication. Covered recipients may continue reviewing, affirming, and/ or disputing records within the Open Payments System through the end of the calendar year (December 31). However, data that is disputed after the pre-publication review and dispute period will not be published as disputed or published with corrected information until a subsequent data refresh or data publication.

- More information about how disputes affect records eligible for publication is provided in Section 2.3.1, Effects of Disputes on Data Publication. After December 31, records that were available for review and dispute will no longer be available to review or dispute within the Open Payments system. For example, records submitted during the PY 2023 submission period (February 1 – March 31, 2024) were available in the Open Payments system between April 1, 2024 and May 15, 2024 for the designated pre-publication Review and Dispute period. These records will remain available through December 31, 2024 for covered recipient review and dispute activities.

On January 1, 2025, these records will not be available within the Open Payments System for review and dispute. If a covered recipient wishes to take action on any of these records after the December 31 deadline, they must work with the reporting entity outside of the Open Payments System to reach a resolution.

Therefore, covered recipients should continue to seek a resolution until a dispute is resolved, and are encouraged to contact the reporting entity outside of the Open Payments system if any corrections are required to the published data after the end of the calendar year.

2.3 Step 4: Data Publication

Only data submitted and attested to by the submission closing date is eligible for publication in the subsequent initial and refresh publications. Data submitted and attested after the submission closing date is considered late and will not be eligible for publication until the initial publication in the following calendar year. The Modified-Without-Dispute Cutoff Date is the end date for edits to undisputed record to be included in the refresh publication; data that did not have any disputes against it and was modified after the modified- without-dispute cutoff date in November, will not be available for review and dispute until the next calendar year during the review and dispute period. This data will not be included for the refresh publication but will be eligible for the next initial publication.

Data submitted to Open Payments that are eligible for publication is published twice annually, as explained below. Explanations of record limitations, exclusions, and ineligibility are provided in Section 2.6.

- Initial Data Publication
 - Occurs annually on or by June 30.
 - The first publication of the eligible records submitted and attested on or before the submission closing date of the latest PY.
 - The republication of eligible records from prior PYs, including updates to records made since the previous publication.
 - The data published is the latest attested version of disputed and resolved payment records at the end of the correction period.
- Refresh Publication
 - Occurs at least once annually, typically at the beginning of the calendar year.
 - Publishes updates to the data made since the initial publication.
 - Contains updates made to records after the correction period of the latest PY and before the end of the calendar year (or before the modified-without-dispute cutoff date in November for records, not under dispute).
 - The data published is the latest attested version of the data at the end of the calendar year.

CMS publishes the Open Payments data for public use at <https://openpaymentsdata.cms.gov>.

2.3.1 Effect of Disputes on Data Publication

Disputes initiated within the pre-publication review, and dispute period and resolved by the end of the correction period will be published and identified as non-disputed in the initial data publication. If an initiated dispute is not resolved by the end of the correction period, the record will be published and identified as disputed. Disputes initiated or resolved after the full 60-day review, dispute, and correction period are not reflected in the initial data publication and will be published as original attested-to data. Those disputes and any related data changes will be published in the next publication which may be a refresh publication or the next PY data publication.

The table below lists scenarios for dispute initiation and resolution and explains how records are identified in data publications based upon those scenarios.

Table 1: Records Identified as Disputed

Dispute Initiated/Resolved	Published As Disputed in Initial Publication?	Published As Disputed in Refresh Publication?
Initiated: During the 45-day Pre-Publication Review and Dispute Period Resolved: By the end of the 15-day Correction Period	No	No
Initiated: During the Pre-Publication 45-day Review and Dispute Period Resolved: After the end of the 15-day Correction Period	Yes	Yes, unless the dispute is resolved before the end of the calendar year
Initiated: During the 15-day Correction Period Resolved: By the end of the 15-day Correction Period	No	No
Initiated: During the 15-day Correction Period Resolved: After the end of the 15-day Correction Period	No	Yes, unless the dispute is resolved before the end of the calendar year
Initiated: After the Correction Period Resolved: By the end of the calendar year	No	No
Initiated: After the Correction Period Resolved: After the end of the calendar year	No	Yes

Note: If a record was initially disputed during the Pre-Publication 45-day review and dispute period and more disputes are initiated on that same record during the 15-day correction period, then the data attested to as of the end of the 15-day correction period is published in the initial publication, including any changes made due to dispute resolution.

2.4 Data Sources and Types

Applicable manufacturers and applicable GPOs must enter detailed information about payments, other transfers of value, or investment interests into the CMS Open Payments system. These payments, other transfers of value, and ownership or investment interests are categorized into three (3) payment types:

1. General Payments: Payments or other transfers of value made that are not in connection with a research agreement or research protocol.
2. Research Payments: Payments or other transfers of value made in connection with a research agreement or research protocol.

3. Physician Ownership or Investment Interest Information: Information about physicians who hold an ownership or investment interest in an applicable manufacturer or applicable GPO or who have an immediate family member holding such interest.

2.5 Reporting Limitations and Exclusions

The Open Payments data published by CMS is subject to limitations and exclusions.

Certain payments or other transfers of value are excluded from reporting, such as product samples and educational materials intended for patient use. Records of such payments and other transfers of value should not be submitted to the Open Payments system. These exclusions are outlined in the Open Payments final rule, at 42 C.F.R. § 403.904(i), available at <https://www.cms.gov/OpenPayments/Law-and-Policy>.

Payment records are only accepted by the Open Payments system if they are both successfully validated and successfully matched to a valid physician, NPP, or teaching hospital.

2.6 Publication Rules

The publication rules for Open Payments are as follows:

- Eligible records submitted and attested before the end of the data submission period will be published in that year's initial and data refresh publications.
- The data published in the June (initial) publication is the latest attested version of the data at the end of the correction period.
- The data published in the early year (refresh) publication is the latest attested version of the data at the end of the preceding calendar year (December 31).

Records may not be eligible for publication based upon publishing limitations. See Section 2.6.1 for details.

2.6.1 Publishing Limitations

The following limitations apply to what records are published:

1. **Data attested after the submission closing date** is considered late and will not be included in the initial publication or the next data refresh publication. Late submissions may be eligible for publication in the following calendar year's data publication.
2. **Records in which physician/NPP or principal investigator identifying information is changed after the submission end date** will not be included in the initial publication or the next data refresh publication. Such a change requires the deletion of the original record and submission of a new corrected record; after the submission closing date, the corrected record would be a late submission.
 - a. These corrected records may be eligible for publication in the following calendar year's initial data publication.

3. **Records deleted** prior to the end of the correction period for that year will not be published in the initial data publication or in any subsequent publications.
 - a. Records deleted after the correction period but prior to December 31 of that calendar year will be published in the initial publication but will be removed in the data refresh publication and any subsequent publications.
4. **Records without disputes that are updated after the submission period** will not be published in the initial data publication.
 - a. The record may be eligible for the next data refresh publication if it was resubmitted and attested by the modified-without-dispute cutoff date in November of that year.
 - b. Updates to undisputed records that are resubmitted and attested after the modified-without-dispute cutoff date in November will not be published in the subsequent refresh publication but may be eligible for publication in the following calendar year's publication.
5. **Records that were previously published and were edited after their publication and not re-attested by the end of the next correction period are not published.**
6. **Reporting entities may request a delay in the publication of research payment record(s)** if the record(s) relate to research or development of a new drug, biological, device, or medical supply; a new application of an existing drug, biological, device, or medical supply; or clinical investigations regarding a new drug, biological, device, or medical supply. These payments will be published in later publications of Open Payments as appropriate. See the Open Payments Final Rule, 42 C.F.R. § 403.910, available at <https://www.cms.gov/OpenPayments/Law-and-Policy>.
 - a. Records for which submitters requested a delay in publication or a renewal of a delay in a publication prior to the end of the submission period will not be published for the year they are delayed. These records will be eligible for publication in the next year's publication, unless the delay in publication is renewed.
 - b. Records may be delayed up to four years from the year of the payment (i.e., the record's PY).
 - c. Records without disputes that are updated to remove the delay in publication after the submission period will not be published in the initial publication but will be published in the refresh publication.
7. **Reporting entities may not submit records for PYs that are closed or archived.** PYs 2013 – 2018 are no longer eligible for submissions.
8. **Open Payments archives older PY data.** Archived PYs 2013 - 2017 are available publicly through the archived PY Dataset Downloads) (<https://openpaymentsdata.cms.gov/datasets/archived>. PYs 2017 and 2018 are no longer eligible for submissions, and PY 2017 is archived with the June 2025 Publication.

3 Accessing the Public Data

Open Payments data is published at <https://openpaymentsdata.cms.gov>. From this site, all published Open Payments data can be viewed online and downloaded.

3.1 Online Data Access

The Open Payments data is accessible through the Open Payments Search Tool and the Open Payments Data Explorer. The Search Tool (<https://openpaymentsdata.cms.gov/search>) allows users to search Open Payments data for physicians, NPPs, teaching hospitals, and companies. The Data Explorer (<https://openpaymentsdata.cms.gov/datasets>) allows users to browse PY datasets and filter by reported record fields

3.2 Downloading the Data

CMS allows anyone to download complete Open Payments data sets. Data sets for all PYs are available. The data sets are contained in downloadable ZIP files. Each PY ZIP file contains several comma-delimited character-separated value (CSV) files and a README text file. The PY is included in each ZIP file's name.

Also available for download is a supplement file that contains detailed information about physicians/NPPs indicated as recipients of payments, other transfers of value, or physicians as holding ownership or investment interests in applicable manufacturers on records that were published through the Open Payments program. The supplement file also contains information about principal investigators who were associated with research payments or other transfers of value in records published by CMS through the Open Payments program. The supplement file contains only physicians/NPPs who have at least one payment record associated with them that has been published. This list is available in a downloadable ZIP file, which contains a comma-delimited character-separated value (CSV) file and a README text file.

Programs recommended for file decompression are WinZip, WinRAR, and 7-Zip. CMS does not recommend using Windows File Compression to decompress downloaded files.

The **Program Year ZIP files** contain CSV files of the following types:

- **General Payments Details**
 - General payment records provide the total value of general payments or other transfers of value to a particular recipient for a particular date.
 - Each record includes identifying information for the applicable manufacturer or applicable GPO who made the payment and identifying information for the recipient.

- **Research Payments Details**
 - Research payment records provide the total value of a payment or other transfer of value made for research purposes to a particular recipient for a particular date.
 - Each record includes identifying information for the applicable manufacturer or applicable GPO who made the payment, as well as identifying information for the recipient. Information is provided for up to five principal investigators associated with the payment.
- **Physician Ownership Details** – The complete published data set for physician ownership or investment interest data. Physician ownership records provide information on physician ownership or investment interests in an applicable manufacturer or applicable GPO.

Records for all the three payment categories (general, research, physician ownership) include a Change Type indicator that explains the record's status relating to previous publications.

Table 2: Change Type Values and Meanings

Change Type value	Meaning
NEW	The payment record was submitted during the most recent submission window and is being published for the first time.
ADD	The payment record was submitted prior to the most recent submission window but was not eligible for publication until the current publication. The record is being published for the first time.
CHANGED	The payment record has been published in a previous publication and has been modified since its last publication, which may include an update to its dispute status.
UNCHANGED	The payment record has been published in the previous publication and is being republished without change in the current publication.

- **Deleted and Removed Records** – The Deleted Records File contains the Record ID, Payment Type, and PY of records that were previously published and have been deleted or removed from the Open Payments system for that PY. Each record also has a Change Type indicator, which shows if the record was deleted or removed.
 - The initial publication of the latest PY's data will not include a Deleted and Removed Record file, as the initial publication contains records that have not been deleted or removed.
 - In the event, there are no REMOVED or DELETED records for a PY, the Removed and Deleted Records file will not be included in the compressed (.zip) file.
 - Starting for the PY 2023 submission window, records that have been attested cannot be

Expiration Date: 07/31/2026

deleted without providing a reason for deletion. Records that are deleted and resubmitted must also be linked when resubmitting using the Record ID.

The text file in the PY ZIP files is:

- **README** - A text file that provides information about the files available for download, their formats, special handling considerations, and other alternatives for viewing the Open Payments data.

Also available for download is the **Covered Recipient Profile Supplement Detail ZIP file**, which contains one (1) CSV file and one (1) README file. The CSV file contains all of the identifying information for physicians and NPPs who were indicated as recipients of payments, other transfers of value, or ownership and investment interest in Open Payments records, as well as principal investigators who were associated with payments or other transfers of value. The README file provides information about the contents of the CSV file.

Appendices B through H list the data elements displayed in the General Payments Details files, Research Payments Details files, Physician Ownership Details files, and Deleted Records files. These appendices also provide descriptions and sample data for each data element. Note that general and research payments have separate appendices for PY 2015 and for PY 2016 and onwards. Appendix J provides a complete list of data elements displayed in the Covered Recipient Profile Supplement File, including descriptions and sample data for each data element.

Note: The CSV data files may be too large for Microsoft Excel and other common spreadsheet programs. Excel cannot display worksheets with more than 1,048,576 rows. To display the data in its entirety requires the use of programs capable of handling very large numbers of records.

3.3 PY 2024 Files

The ZIP file OP_DTL_PGYR2024_P06302025.zip contains the three (3) CSV files and one (1) text file as described above for Program Year 2024 data. The table below summarizes key information for each of the above-referenced files.

Table 3: PY 2024 Data Files

File Name	Number of Rows	Number of Columns	Raw Data File Size
General Payments Details	15,397,627	91	8.8 GB
Research Payments Details	756,193	252	722.5 MB
Physician Ownership Details	4,626	30	2.1 MB

3.4 PY 2023 Files

The ZIP file OP_DTL_PGYR2023_P06302025.zip contains the three (3) CSV files and one (1) text file as described previously for PY 2023 data. Table 3-4 summarizes key information for each of the previously described referenced files.

Table 4: PY 2023 Data Files

File Name	Number of Rows	Number of Columns	Raw Data File Size
General Payments Details	14,704,233	91	8.2 GB
Research Payments Details	1,078,015	252	1.0 GB
Physician Ownership Details	4,339	30	1956 KB
Deleted and Removed Records Details	4238	4	138 KB

3.5 PY 2022 Files

The ZIP file OP_DTL_PGYR2022_P06302025.zip contains the four (4) CSV files and one (1) text file as described previously for PY 2022 data. Table 3-5 summarizes key information for each of the previously described referenced files.

Table 5: PY 2022 Data Files

File Name	Number of Rows	Number of Columns	Raw Data File Size
General Payments Details	13,306,436	91	7.4 GB
Research Payments Details	1,003,016	252	947.4 MB
Physician Ownership Details	4,159	30	1785KB
Deleted and Removed Records Details	2687	4	85KB

3.6 PY 2021 Files

The ZIP file OP_DTL_PGYR2021_P06302025.zip contains the four (4) CSV files and one (1) text file as described previously for PY 2021 data. Table 3-6 summarizes key information for each of the previously referenced files.

Table 6: PY 2021 Data Files

File Name	Number of Rows	Number of Columns	Raw Data File Size
General Payments Details	11,552,263	91	6.5 GB
Research Payments Details	735,511	252	746.5 MB
Physician Ownership Details	4,212	30	1789 KB
Deleted and Removed Records Details	1013	4	5 KB

3.7 PY 2020 Files

The ZIP file OP_DTL_PGYR2020_P06302025.zip contains the four (4) CSV files and one (1) text file as described previously for PY 2020 data. Table 3-7 summarizes key information for each of the previously referenced files.

Table 7: PY 2020 Data Files

File Name	Number of Rows	Number of Columns	Raw Data File Size
General Payments Details	5,850,069	91	3.3 GB
Research Payments Details	759,960	252	722.4 MB
Physician Ownership Details	3,572	30	1567 KB
Deleted and Removed Records Details	141	4	5 KB

3.8 PY 2019 Files

The ZIP file OP_DTL_PGYR2019_P06302025.zip contains the four (4) CSV files and one (1) text file as described previously for PY 2019 data. Table 3-8 summarizes key information for each of the previously referenced files.

Table 8: PY 2019 Data Files

File Name	Number of Rows	Number of Columns	Raw Data File Size
General Payments Details	10,558,061	91	6.0 GB
Research Payments Details	807,283	252	765.0 MB
Physician Ownership Details	3,053	30	1105 KB
Deleted and Removed Records Details	53	4	2 KB

3.9 PY 2018 Files

The ZIP file OP_DTL_PGYR2018_P06302025.zip contains the four (4) CSV files and one (1) text file as described previously for PY 2018 data. Table 3-9 summarizes key information for each of the previously referenced files.

Table 9: PY 2018 Data Files

File Name	Number of Rows	Number of Columns	Raw Data File Size
General Payments Details	10,937,931	91	6.2 GB
Research Payments Details	794,019	252	763.2MB
Physician Ownership Details	3,613	30	1522 KB
Deleted and Removed Records Details	-	4	0 KB

3.10 Covered Recipient Profile Supplement File

The Covered Recipient Profile Supplement File contains all of the identifying information for physicians and NPPs who were indicated as recipients of payments, other transfers of value, or physician ownership and investment interest in records published by CMS through Open Payments as well as principal investigators who were associated with payments or other transfers of value in records published in Open Payments. This list can be used as a resource when analyzing Open Payments datasets.

The ZIP file OP_CVRD_RCPNT_PRFL_SPLMTL_P06302025.zip contains one (1) CSV file with the Covered Recipient Profile Supplement File and one (1) text file, a README file that provides information about the file available for download, its format, special handling considerations, and other alternatives for viewing the data.

Table 10: Covered Recipient Profile Supplement File

File Name	Number of Rows	Number of Columns	Raw Data File Size
Covered Recipient Profile Supplement	1,530,412	32	382.8 MB

3.10.1 Contents of the Covered Recipient Profile Supplement File

The file contains physicians who were associated with at least one payment record published in Open Payments since PY2018, and NPPs with at least one associated payment record from PY 2021. Each record includes the physician's or NPP's demographic information, specialties, and states in which the physician holds a medical license(s), as well as the Open Payments' unique identification number (Covered Recipient Profile ID) for each physician/NPP. The Covered Recipient Profile ID is a unique identifier for a physician or NPP within the Open Payments system and can be used to search the data files to find payments made to that specific physician/NPP as well as to link physician/NPP records across PYs.

3.10.2 How to Use the Covered Recipient Profile Supplement File

Individuals and organizations can use the identifying information provided in the Covered Recipient Profile Supplement File as an analytical resource to search for records of payments or other transfers of value made to a particular physician/NPP, as well as to link physician/NPP data across PYs. A complete list of data elements displayed in the Covered Recipient Profile Supplement File, including descriptions and sample data for each data element, can be found in Appendix H.

Information related to the taxonomy codes included in the covered recipient profiles is provided in the "Taxonomy / Specialty Lookup Document," available on the Resources page of the Open Payments website, at <https://www.cms.gov/OpenPayments/Resources>.

Appendix A: Key Dates for the Open Payments System for PY 2024

Table 11: Key Dates for PY 2024

Program Activity	Start Date	End Date
Applicable manufacturers and applicable GPOs collected payment data	January 1, 2024	December 31, 2024
Applicable manufacturers and applicable GPOs submitted data to the Open Payments system	February 1, 2025	March 31, 2025
Physicians, non-physician practitioners and teaching hospitals reviewed data and disputed records as necessary	April 1, 2025	May 15, 2025
Applicable manufacturers and applicable GPOs corrected data as necessary	May 16, 2025	May 30, 2025
Data published by CMS	N/A	June 30, 2025
Data refresh published by CMS	N/A	January 2026

Registration for applicable manufacturers, applicable GPOs, physicians, NPPs and teaching hospitals is available year-round.

Record review, dispute, and correction can take place year-round. The dates above are the dates that drive how the data is reflected in the initial data publication of June 2025. Disputes initiated after May 15, 2025, or changes to records made after May 30, 2025, may be reflected in the data refresh publication in early 2026. See Sections 2.2 and 2.3 of this document for details.

Appendix B: General Payments Detail (PY 2016 and Onwards)

Table 12: General Payment File Attributes (PY 2016 until 2024)

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Change_Type	<p>An indicator showing if the payment record is New, Added, Changed, or Unchanged in the current publication compared to the previous publication.</p> <p>NEW - To identify “new” records added from the end of the previous submission deadline until the current submission period deadline date</p> <p>ADDED - To identify records that were not eligible at the time of previous publication, which is eligible for current publication.</p> <p>CHANGED - To identify previously published records modified after the last publication.</p> <p>UNCHANGED - To identify previously published records that remain “unchanged” in current publication.</p>	NEW	VARCHAR 2(20)	string	20
Covered_Recipient_Type	An indicator showing if the recipient of the payment or transfer of value is a physician-covered recipient or non-physician practitioner or a teaching hospital.	Physician	VARCHAR 2(50)	string	50
Teaching_Hospital_CCN	A unique identifying number (CMS Certification Number) of the Teaching Hospital receiving the payment or other transfer of value.	330024	VARCHAR 2(6)	string	6
Teaching_Hospital_ID	The system generated a unique identifier of the Teaching Hospital receiving the payment or other transfer of value.	1000000999	NUMBER(38,0)	number	38
Teaching_Hospital_Name	The name of the Teaching Hospital receiving the payment or other transfer of value. The name displayed is as listed in CMS teaching hospital list under Hospital name.	Healthy Heart Hospital	VARCHAR 2 (100)	string	100

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_ID	System generated unique identifier for covered recipient physician or covered recipient non-physician practitioner profile receiving the payment or other transfer of value.	1000000378	NUMBER (38,0)	number	38
Covered_Recipient_NPI	National Provider Identifier is a unique identification number for covered recipient physician or covered recipient non-physician practitioner (and not the NPI of a group the physician/non-physician practitioner belongs to).	2495351826	NUMBER (10,0)	number	10
Covered_Recipient_First_Name	First name of the covered recipient physician or covered recipient non-physician practitioner receiving the payment or transfer of value, as reported by the submitting entity.	John	VARCHAR 2 (50)	string	50
Covered_Recipient_Middle_Name	Middle name of the covered recipient physician or covered recipient non-physician practitioner receiving the payment or transfer of value, as reported by the submitting entity.	A	VARCHAR 2 (35)	string	35
Covered_Recipient_Last_Name	Last name of the covered recipient physician or covered recipient non-physician practitioner receiving the payment or transfer of value, as reported by the submitting entity.	Smith	VARCHAR 2 (35)	string	35
Covered_Recipient_Name_Suffix	Name suffix of the covered recipient physician or covered recipient non-physician practitioner receiving the payment or transfer of value, as reported by the submitting entity.	III	VARCHAR 2 (20)	string	20
Recipient_Primary_Business_Street_Address_Line1	The first line of the primary practice/business street address of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value.	7500 Security Blvd.	VARCHAR 2 (100)	string	100
Recipient_Primary_Business_Street_Address_Line2	The second line of the primary practice/business street address of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value.	Suite 100	VARCHAR 2 (75)	string	75
Recipient_City	The primary practice/business city of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value.	Baltimore	VARCHAR 2 (40)	string	40
Recipient_State	The primary practice/business state or territory abbreviation of the physician or teaching hospital (covered recipient) receiving the payment or transfer of value, if the primary practice/business address is in United States.	MD	CHAR(2)	string	2

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Recipient_Zip_Code	The 9-digit zip code for the primary practice/business location of the physician or teaching hospital (covered recipient) receiving the payment or transfer of value.	21244-3712	VARCHAR 2 (10)	number - number	10
Recipient_Country	The primary practice/business address country name of the physician or teaching hospital (covered recipient) receiving the payment or transfer of value.	US	VARCHAR 2 (100)	string	100
Recipient_Province	The primary practice/business province name of the physician (covered recipient) receiving the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable.	Manitoba	VARCHAR 2 (35)	string	35
Recipient_Postal_Code	The international postal code for the primary practice/business location of the physician (covered recipient) receiving the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR 2 (20)	string	20
Covered_Recipient_Primary_Type_1	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient).	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR 2 (100)	string	100
Covered_Recipient_Primary_Type_2	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient). Note: OP began accepting this field in PY2021.	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR 2 (100)	string	100
Covered_Recipient_Primary_Type_3	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient). Note: OP began accepting this field in PY2021.	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR 2 (100)	string	100
Covered_Recipient_Primary_Type_4	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient). Note: OP began accepting this field in PY2021.	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR 2 (100)	string	100
Covered_Recipient_Primary_Type_5	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient). Note: OP began accepting this field in PY2021.	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR 2 (100)	string	100

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Primary_Type_6	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient). Note: OP began accepting this field in PY2021.	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR 2 (100)	string	100
Covered_Recipient_Specialty_1	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR 2 (300)	string	300
Covered_Recipient_Specialty_2	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR 2 (300)	string	300
Covered_Recipient_Specialty_3	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR 2 (300)	string	300
Covered_Recipient_Specialty_4	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR 2 (300)	string	300
Covered_Recipient_Specialty_5	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR 2 (300)	string	300

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Specialty_6	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR 2 (300)	string	300
Covered_Recipient_License_State_code 1	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 license states, if a physician is licensed in multiple states.	MA	CHAR(2)	string	2
Covered_Recipient_License_State_code 2	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 license states, if a physician is licensed in multiple states.	PA	CHAR(2)	string	2
Covered_Recipient_License_State_code 3	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 license states, if a physician is licensed in multiple states.	VA	CHAR(2)	string	2
Covered_Recipient_License_State_code 4	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 license states, if a physician is licensed in multiple states.	MI	CHAR(2)	string	2
Covered_Recipient_License_State_code 5	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 license states, if a physician is licensed in multiple states.	WI	CHAR(2)	string	2
Submitting_Applicable_Manufacturer_or_Applicable_GPO_Name	The textual proper name of the submitting applicable manufacturer or submitting applicable GPO.	ABCDE Manufacturing	VARCHAR 2 (100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_ID	System generated unique identifier of the Applicable Manufacturer or Applicable Group Purchasing Organization (GPO) Making a payment or other transfer of value	1000000049	VARCHAR 2 (38)	Number	38

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Name	The textual proper name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	ABCDE Manufacturing	VARCHAR 2 (100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_State	State name of the submitting applicable manufacturer or submitting applicable GPO as provided in Open Payments	VA	CHAR(2)	string	2
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Country	Country name of the Submitting Applicable Manufacturer or Submitting Applicable Group Purchasing Organization (GPO) as provided in Open Payments	United States	VARCHAR 2 (100)	string	100
Total_Amount_of_Payment_US_Dollars	U.S. dollar amount of payment or other transfer of value to the recipient (manufacturer must convert to dollar currency if necessary)	1978.00	NUMBER (12,2)	decimal	12
Date_of_Payment	If a singular payment, then this is the actual date the payment was issued; if a series of payments or an aggregated set of payments, this is the date of the first payment to the covered recipient in this PY	04/01/2015	DATE	Date MM/DD / YYYY	12
Number_of_Payments_Included_in_Total_Amount	The number of discrete payments being reported in the "Total Amount of Payment".	1	NUMBER (3,0)	number	3
Form_of_Payment_or_Transfer_of_Value	The method of payment used to pay the covered recipient or to make the transfer of value.	In-kind items and services	VARCHAR 2 (100)	string	100
Nature_of_Payment_or_Transfer_of_Value	The nature of payment used to pay the covered recipient or to make the transfer of value.	Consulting Fee	VARCHAR 2 (200)	string	200
City_of_Travel	For "Travel and Lodging" payments, destination city where covered recipient traveled.	San Diego	VARCHAR 2 (40)	string	40
State_of_Travel	For "Travel and Lodging" payments, the destination state where the covered recipient traveled.	CA	CHAR(2)	string	2
Country_of_Travel	For "Travel and Lodging" payments, the destination country where the covered recipient traveled.	United States	VARCHAR 2 (100)	string	100

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Physician_Ownership_Indicator	Indicates whether the physician holds an ownership or investment interest in the applicable manufacturer; this indicator is limited to physician's ownership, not the physician's family members' ownership	No	CHAR(3)	string	3
Third_Party_Payment_Recipient_Indicator	Indicates if a payment or transfer of value was paid to a third party entity or individual at the request of or on behalf of a covered recipient (physician or teaching hospital).	Entity	VARCHAR 2 (50)	string	50
Name_of_Third_Party_Entity_Receiving_Payment_or_Transfer_of_Value	The name of the entity that received the payment or other transfer of value.	EDCBA Manufacturing	VARCHAR 2 (100)	string	100
Charity_Indicator	Indicates the third party entity that received the payment or other transfer of value is a charity.	No	CHAR(3)	string	3
Third_Party_Equals_Covered_Recipient_Indicator	An indicator showing the "Third Party" that received the payment or other transfer of value is a Covered Recipient.	No	CHAR(3)	string	3
Contextual_Information	Any free String, which the reporting entity deems helpful or appropriate regarding this payment or other transfer of value.	Transfer made to promote the use of the product	VARCHAR 2 (500)	string	500
Delay_in_Publication_Indicator	An indicator showing if an Applicable Manufacturer/GPO is requesting a delay in the publication of a payment or other transfer of value	No	CHAR(3)	string	3
Record_ID	System-assigned identifier to the general transaction at the time of submission	100000000241	NUMBER (38,0)	number	38
Dispute_Status_for_Publication	Indicates whether the payment or other transfer of value is disputed by the covered recipient or not	Yes	CHAR(3)	string	3
Related_Product_Indicator	The indicator allows the applicable manufacturer or applicable GPO to select whether the payment or other transfer of value is related to one or more product(s) (drugs, devices, biologicals, or medical supplies). If the payment was not made in relation to a product, select "No". If the payment was related to one or more products, select "Yes".	Y	VARCHAR 2 (100)	string	100

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Covered_or_Noncovered_Indicator_1	Each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR 2 (100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_1	Each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Drug	VARCHAR 2 (100)	string	100
Product_Category_or_Therapeutic_Area_1	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR 2 (100)	string	100
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_1	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 1	VARCHAR 2 (500)	string	500
Associated_Drug_or_Biological_NDC_1	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-61	VARCHAR 2 (13)	string	13
Associated_Device_or_Medical_Supply_PDI_1	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	0084865700026 0	VARCHAR (100)	string	100
Covered_or_Noncovered_Indicator_2	For each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR 2 (100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_2	For each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Drug	VARCHAR 2 (100)	string	100

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Product_Category_or_Therapeutic_Area_2	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR 2 (100)	string	100
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_2	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 2	VARCHAR 2 (500)	string	500
Associated_Drug_or_Biological_NDC_2	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-62	VARCHAR 2 (13)	string	13
Associated_Device_or_Medical_Supply_PDI_2	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	0084865700026 0	VARCHAR (100)	string	100
Covered_or_Noncovered_Indicator_3	For each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR 2 (100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_3	For each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Drug	VARCHAR 2 (100)	string	100
Product_Category_or_Therapeutic_Area_3	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR 2 (100)	string	100

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_3	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 3	VARCHAR 2 (500)	string	500
Associated_Drug_or_Biological_NDC_3	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-272-63	VARCHAR 2 (13)	string	13
Associated_Device_or_Medical_Supply_PDI_3	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	0084865700026 0	VARCHAR (100)	string	100
Covered_or_Noncovered_Indicator_4	For each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR 2 (100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_4	For each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Biological	VARCHAR 2 (100)	string	100
Product_Category_or_Therapeutic_Area_4	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR 2 (100)	string	100
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_4	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 4	VARCHAR 2 (500)	string	500

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Associated_Drug_or_Biological_NDC_4	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-64	VARCHAR 2 (13)	string	13
Associated_Device_or_Medical_Supply_PDI_4	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	0084865700026 0	VARCHAR (100)	string	100
Covered_or_Noncovered_Indicator_5	For each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR 2 (100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_5	For each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Device	VARCHAR 2 (100)	string	100
Product_Category_or_Therapeutic_Area_5	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR 2 (100)	string	100
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_5	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 5	VARCHAR 2 (500)	string	500
Associated_Drug_or_Biological_NDC_5	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-272-65	VARCHAR 2 (13)	string	13

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Associated_Device_or_Medical_Supply_PDI_5	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	0084865700026 0	VARCHAR (100)	string	100
Program_Year	The year in which the payment occurred, as reported by submitting entity.	2016	CHAR(4)	number	4
Payment_Publication_Date	The predefined date when the payment or other transfer of value is scheduled to be published	06/30/2017	DATE	DATE MM/DD /YYYY	12

Appendix C: General Payments Detail (PYs 2013-2015)

Table 13: General Payment File Attributes (PY 2013-2015)

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Change_Type	<p>An indicator showing if the payment record is New, Added, Changed, or Unchanged in the current publication compared to the previous publication.</p> <ul style="list-style-type: none"> NEW - To identify “new” records added from the end of the previous submission deadline until the current submission period deadline date ADDED - To identify records that were not eligible at the time of previous publication, which is eligible for current publication. CHANGED - To identify previously published records modified after the last publication. UNCHANGED - To identify previously published records that remain “unchanged” in current publication. 	NEW	VARCHAR2(20)	String	20
Covered_Recipient_Type	An indicator showing if the recipient of the payment or other transfer of value is a physician covered recipient or a teaching hospital	Physician	VARCHAR2(50)	string	50
Teaching_Hospital_CCN	A unique identifying number (CMS Certification Number) of the Teaching Hospital receiving the payment or other transfer of value	330024	VARCHAR2(06)	string	6
Teaching_Hospital_ID	Open Payments system-generated unique identifier of the teaching hospital receiving the payment or other transfer of value	1000000999	NUMBER(38,0)	number	38

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Teaching_Hospital_Name	The name of the teaching hospital receiving the payment or other transfer of value – the name displayed is as listed in the CMS teaching hospital list	Healthy Heart Hospital	VARCHAR2(100)	string	100
Physician_Profile_ID	Open Payments system-generated unique identifier for physician profile receiving the payment or other transfer of value	1000000378	NUMBER(38,0)	number	38
Physician_NPI	National Provider Identifier is a unique identification number for covered recipient physician (and not the NPI of a group the physician belongs to).	2495351826	NUMBER(10,0)	number	10
Physician_First_Name	First name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	John	VARCHAR2(500)	string	50
Physician_Middle_Name	The middle name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	A	VARCHAR2(20)	string	20
Physician_Last_Name	Last name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	Smith	VARCHAR2(35)	string	35
Physician_Name_Suffix	Name suffix of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	III	VARCHAR2(5) 0	string	5

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Primary_Business_Street_Address_Line1	The first line of the primary practice/business street address of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Recipient_Primary_Business_Street_Address_Line2	The second line of the primary practice/business street address of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Recipient_City	The primary practice/business city of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	Baltimore	VARCHAR2(40)	string	40
Recipient_State	The primary practice/business state or territory abbreviation of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value, if the primary practice/business address is in the United States	MD	CHAR(2)	string	2
Recipient_Zip_Code	The 9-digit zip code for the primary practice/business location of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	21244-3712	VARCHAR2(10)	number-number	10
Recipient_Country	The primary practice/business address country name of the physician or teaching hospital (covered recipient) receiving the payment or other transfer of value	US	VARCHAR2(100)	string	100

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Province	The primary practice/business province name of the physician (covered recipient) receiving the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20
Recipient_Postal_Code	The international postal code for the primary practice/business location of the physician (covered recipient) receiving the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Physician_Primary_Type	The primary type of medicine practiced by the physician (covered recipient)	Medical Doctor (MD)	VARCHAR2(100)	string	100
Physician_Specialty	Physician's single-specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR2(300)	string	300
Physician_License_State_code1	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MA	CHAR(2)	string	2
Physician_License_State_code2	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	PA	CHAR(2)	string	2

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Physician_License_State_code3	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Physician_License_State_code4	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MI	CHAR(2)	string	2
Physician_License_State_code5	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	WI	CHAR(2)	string	2
Submitting_Applicable_Manufacturer_or_Applicable_GPO_Name	The textual proper name of the submitting applicable manufacturer or applicable GPO	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_ID	Open Payments system-generated unique identifier of the applicable manufacturer or applicable GPO making payment or other transfer of value	1000000049	VARCHAR2(38)	Number	38
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Name	The textual proper name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_State	State name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	VA	CHAR(2)	string	2
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Country	Country name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	United States	VARCHAR2(100)	string	100

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Total_Amount_of_Payment_USDollars	US dollar amount of payment or other transfer of value to the recipient (manufacturer must convert to dollar currency if necessary)	1978.00	NUMBER(12,2)	decimal	12
Date_of_Payment	If a singular payment, then this is the actual date the payment was issued; if a series of payments or an aggregated set of payments, this is the date of the first payment to the covered recipient in this PY	04/01/2015	DATE	Date MM/DD/ YYYY	12
Number_of_Payments_Included_in_Total_Amount	The number of discrete payments being reported in the "Total Amount of Payment"	1	NUMBER(3,0)	number	3
Form_of_Payment_or_Transfer_of_Value	The method of payment used to pay the covered recipient or to make the transfer of value	In-kind items and services	VARCHAR2(100)	string	100
Nature_of_Payment_or_Transfer_of_Value	The nature of payment used to pay the covered recipient or to make the transfer of value	Consulting Fee	VARCHAR2(200)	string	200
City_of_Travel	For "Travel and Lodging" payments, destination city where covered recipient traveled	San Diego	VARCHAR2(40)	string	40
State_of_Travel	For "Travel and Lodging" payments, destination state where covered recipient traveled	CA	CHAR(2)	string	2
Country_of_Travel	For "Travel and Lodging" payments, the destination country where the covered recipient traveled	United States	VARCHAR2(100)	string	100
Physician_Ownership_Indicator	Indicates whether the physician holds ownership or investment interest in the applicable manufacturer; this indicator is limited to physician's ownership, not physician's family members' ownership	No	CHAR(3)	string	3

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Third_Party_Payment_Recipient_Indicator	Indicates if payment or other transfer of value was paid to a third party entity or individual at the request of or on behalf of a covered recipient (physician or teaching hospital)	Entity	VARCHAR2(50)	string	50
Name_of_Third_Party_Entity_Receiving_Payment_or_Transfer_of_Value	The name of the entity that received the payment or other transfer of value	EDCBA Manufacturing	VARCHAR2(50)	string	50
Charity_Indicator	Indicates the third party entity that received the payment or other transfer of value is a charity	No	CHAR(3)	string	3
Third_Party_Equals_Covered_Recipient_Indicator	An indicator showing the "Third Party" that received the payment or other transfer of value is a covered recipient	No	CHAR(3)	string	3
Contextual_Information	Any free text which the reporting entity deems helpful or appropriate regarding this payment or other transfer of value	Transfer made to promote use of the product	VARCHAR2(500)	string	500
Delay_in_Publication_Indicator	An indicator showing if an applicable manufacturer or applicable GPO is requesting a delay in the publication of a payment or other transfer of value	No	CHAR(3)	string	3
Record_ID	Open Payments system-assigned identifier to the general transaction at the time of submission	100000000241	NUMBER(38,0)	number	38
Dispute_Status_for_Publication	Indicates whether the payment or other transfer of value is being disputed by the covered recipient or not	Yes	CHAR(3)	string	3

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Product_Indicator	An indicator that allows the applicable manufacturer or applicable GPO to select whether the payment or other transfer of value is associated with only covered drugs, devices, biologicals, or medical supplies ("Covered"), or only non-covered drugs, devices, biologicals, or medical supplies ("Non-covered"), or neither covered or non-covered drugs, devices, biologicals or medical supplies ("None"), or both covered and/or non-covered drugs, devices, biologicals or medical supplies ("Covered" or "Combination")	Covered	VARCHAR2(50)	string	50
Name_of_Associated_Covered_Drug_or_Biological1	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 1	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Drug_or_Biological2	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 2	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Drug_or_Biological3	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 3	VARCHAR2(500)	string	500

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Drug_or_Biological4	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 4	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Drug_or_Biological5	The marketed name of the drug or biological associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 5	VARCHAR2(500)	string	500
NDC_of_Associated_Covered_Drug_or_Biological1	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-62	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological2	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-272-62	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological3	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-2726-2	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological4	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-62	VARCHAR2(12)	string	12

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
NDC_of_Associated_Covered_Drug_or_Biological5	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-2726-2	VARCHAR2(12)	string	12
Name_of_Associated_Covered_Device_or_Medical_Supply1	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 1	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Device_or_Medical_Supply2	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 2	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Device_or_Medical_Supply3	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 3	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Device_or_Medical_Supply4	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 4	VARCHAR2(500)	string	500

Attribute Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Device_or_Medical_Supply5	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 5	VARCHAR2(500)	string	500
Program_Year	The year in which the payment occurred	2014	CHAR(4)	number	4
Payment_Publication_Date	The predefined date when the payment or other transfer of value is scheduled to be published	06/30/2015	DATE	DATE MM/DD/YY YY	12

Appendix D: Research Payments Detail (PY 2016 and Onwards)

Table 14: Research Payment File Attributes (PY 2016 until 2024)

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Change_Type	<p>An indicator showing if the payment record is New, Added, Changed, or Unchanged in the current publication compared to the previous publication.</p> <ul style="list-style-type: none"> NEW - To identify “new” records added from the end of the previous submission deadline until the current submission period deadline date ADDED - To identify records that were not eligible at the time of previous publication, which is eligible for current publication. CHANGED - To identify previously published records modified after the last publication. UNCHANGED - To identify previously published records that remain “unchanged” in current publication. 	NEW	VARCHAR2(20)	string	20
Covered_Recipient_Type	An indicator showing if the recipient of the payment or other transfer of value is a physician covered recipient, or non-physician practitioner, teaching hospital covered recipient, non-covered recipient entity, or non-covered recipient individual	Covered Recipient Teaching Hospital	VARCHAR2(50)	string	50
Noncovered_Recipient_Entity_Name	The name of the non-covered recipient entity receiving the payment or other transfer of value	EDCBA Corporation	VARCHAR2(100)	string	100
Teaching_Hospital_CCN	A unique identifying number (CMS Certification Number) of the Teaching Hospital receiving the payment or other transfer of value.	330024	VARCHAR2(6)	string	6

Expiration Date: 07/31/2026

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Teaching_Hospital_ID	System generated unique identifier of the Teaching Hospital receiving the payment or other transfer of value.	1000000999	NUMBER(38,0)	number	38
Teaching_Hospital_Name	The name of the Teaching Hospital receiving the payment or other transfer of value. The name displayed is as listed in CMS teaching hospital list under Hospital name.	Healthy Heart Hospital	VARCHAR2(100)	string	100
Covered_Recipient_Profile_ID	System generated unique identifier for covered recipient physician profile or covered recipient non-physician practitioner profile receiving the payment or other transfer of value.	1000000378	NUMBER(38,0)	number	38
Covered_Recipient_NPI	National Provider Identifier is a unique identification number for covered recipient physician or non-physician practitioner (and not the NPI of a group the physician/non-physician practitioner belongs to).	2495351826	NUMBER(10,0)	number	10
Covered_Recipient_First_Name	First name of the physician (covered recipient) or covered recipient non-physician practitioner receiving the payment or transfer of value, as reported by the submitting entity.	John	VARCHAR2(50)	string	50
Covered_Recipient_Middle_Name	Middle name of the covered recipient physician or covered recipient non-physician practitioner receiving the payment or transfer of value, as reported by the submitting entity.	A	VARCHAR2(35)	string	35
Covered_Recipient_Last_Name	Last name of the covered recipient physician or covered recipient non-physician practitioner receiving the payment or transfer of value, as reported by the submitting entity.	Smith	VARCHAR2(35)	string	35
Covered_Recipient_Name_Suffix	Name suffix of the covered recipient physician or covered recipient non-physician practitioner receiving the payment or transfer of value, as reported by the submitting entity.	III	VARCHAR2(20)	string	20

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Recipient_Primary_Business_Street_Address_Line1	The first line of the primary business street address of the physician or non-physician practitioner or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(100)	string	100
Recipient_Primary_Business_Street_Address_Line2	The second line of the primary business street address of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value	Suite 100	VARCHAR2(75)	string	75
Recipient_City	The primary practice/business address city of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value	Baltimore	VARCHAR2(40)	string	40
Recipient_State	The state or territory abbreviation of the primary business address of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary business address is in the United States.	MD	CHAR(2)	string	2
Recipient_Zip_Code	The 9-digit zip code for the primary business location of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Recipient_Country	The primary practice/business address country of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary practice address is in the United States	US	VARCHAR2(100)	string	100
Recipient_Province	The primary practice/business province name of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable.	Manitoba	VARCHAR2(35)	string	35

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Recipient_Postal_Code	The international postal code for the primary business location of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary business address is outside the United States	5600098	VARCHAR2(20)	string	20
Covered_Recipient_Primary_Type_1	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient).	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR2(100)	string	100
Covered_Recipient_Primary_Type_2	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient). Note: OP began accepting this field in PY2021.	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR2(100)	string	100
Covered_Recipient_Primary_Type_3	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient). Note: OP began accepting this field in PY2021.	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR2(100)	string	100
Covered_Recipient_Primary_Type_4	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient). Note: OP began accepting this field in PY2021.	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR2(100)	string	100
Covered_Recipient_Primary_Type_5	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient). Note: OP began accepting this field in PY2021.	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR2(100)	string	100
Covered_Recipient_Primary_Type_6	Primary type of medicine practiced by the physician or Non-Physician Practitioner (covered recipient).	Medical Doctor (MD)/ Physician Assistant (PA)	VARCHAR2(100)	string	100

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Specialty_1	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR2(300)	string	300
Covered_Recipient_Specialty_2	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR2(300)	string	300
Covered_Recipient_Specialty_3	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR2(300)	string	300
Covered_Recipient_Specialty_4	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR2(300)	string	300
Covered_Recipient_Specialty_5	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR2(300)	string	300
Covered_Recipient_Specialty_6	Physician's or non-physician practitioner's specialty chosen from the standardized "provider taxonomy" code list. Note: OP began accepting this field in PY2021.	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR2(300)	string	300

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_License_State_code1	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician or non-physician practitioner is licensed in multiple states.	MD	CHAR(2)	string	2
Covered_Recipient_License_State_code2	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician or non-physician practitioner is licensed in multiple states.	CA	CHAR(2)	string	2
Covered_Recipient_License_State_code3	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician or non-physician practitioner is licensed in multiple states.	TX	CHAR(2)	string	2
Covered_Recipient_License_State_code4	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician or non-physician practitioner is licensed in multiple states.	VA	CHAR(2)	string	2
Covered_Recipient_License_State_code5	The state license number of the covered recipient physician or covered recipient non-physician practitioner, which is a 2-letter state abbreviation; the record may include up to 5 physician license states, if a physician or non-physician practitioner is licensed in multiple states.	MA	CHAR(2)	string	2
Principal_Investigator_1_Profile_ID	An identifier for Principal Investigator profile after validation	3843332	NUMBER(38,0)	number	38

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_1_First_Name	The first name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	John	VARCHAR2(50)	string	50
Principal_Investigator_1_Middle_Name	The middle name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	A	VARCHAR2(35)	string	35
Principal_Investigator_1_Last_Name	Last name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	Smith	VARCHAR2(35)	string	35
Principal_Investigator_1_Name_Suffix	Name suffix of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	III	VARCHAR2(20)	string	20
Principal_Investigator_1_Business_Street_Address_Line1	The first line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	7500 Security Blvd.	VARCHAR2(100)	string	100
Principal_Investigator_1_Business_Street_Address_Line2	The second line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	Suite 100	VARCHAR2(75)	string	75
Principal_Investigator_1_City	The primary practice/business city of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	Baltimore	VARCHAR2(40)	string	40

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_State	The primary practice/business state or territory abbreviation of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	MD	CHAR(2)	string	2
Principal_Investigator_1_Zip_Code	The 9-digit zip code for the primary business location of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Principal_Investigator_1_Country	The primary practice/business address country name of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_1_Province	The primary practice/business province name of the Principal Investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable.	Manitoba	VARCHAR2(35)	string	35
Principal_Investigator_1_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_1_Primary_Type_1	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_1_Primary_Type_2	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_1_Primary_Type_3	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_Primary_Type_4	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_1_Primary_Type_5	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_1_Primary_Type_6	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_1_Specialty_1	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_1_Specialty_2	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_1_Specialty_3	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_1_Specialty_4	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_Specialty_5	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_1_Specialty_6	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_1_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	MD	CHAR(2)	string	2
Principal_Investigator_1_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	VA	CHAR(2)	string	2
Principal_Investigator_1_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	ME	CHAR(2)	string	2
Principal_Investigator_1_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	NY	CHAR(2)	string	2

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	MI	CHAR(2)	string	2
Principal_Investigator_2_Profile_ID	An identifier for Principal Investigator profile after validation	3843342	NUMBER(38,0)	number	38
Principal_Investigator_2_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_2_First_Name	The first name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	John	VARCHAR2(50)	string	50
Principal_Investigator_2_Middle_Name	The middle name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	A	VARCHAR2(35)	string	35
Principal_Investigator_2_Last_Name	The last name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	Smith	VARCHAR2(35)	string	35
Principal_Investigator_2_Name_Suffix	Name suffix of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	III	VARCHAR2(20)	string	20
Principal_Investigator_2_Business_Street_Address_Line1	The first line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	7500 Security Blvd.	VARCHAR2(100)	string	100
Principal_Investigator_2_Business_Street_Address_Line2	The second line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	Suite 100	VARCHAR2(75)	string	75

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_City	The primary practice/business city of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_2_state	The primary practice/business state or territory abbreviation of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	MD	CHAR(2)	string	2
Principal_Investigator_2_Zip_Code	The 9-digit zip code for the primary business location of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Principal_Investigator_2_Country	The primary practice/business address country name of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_2_Province	The primary practice/business province name of the Principal Investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable.	Manitoba	VARCHAR2(35)	string	35
Principal_Investigator_2_Postal_Code	The international postal code for the primary practice/business location of the principal Investigator associated with the payment or other transfer of value if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_2_Primary_Type_1	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_Primary_Type_2	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_2_Primary_Type_3	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_2_Primary_Type_4	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_2_Primary_Type_5	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_2_Primary_Type_6	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_2_Specialty_1	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_2_Specialty_2	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_2_Specialty_3	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_Specialty_4	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_2_Specialty_5	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_2_Specialty_6	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_2_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	MD	CHAR(2)	string	2
Principal_Investigator_2_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	VA	CHAR(2)	string	2
Principal_Investigator_2_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	TX	CHAR(2)	string	2

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	CA	CHAR(2)	string	2
Principal_Investigator_2_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	AL	CHAR(2)	string	2
Principal_Investigator_3_Profile_ID	An identifier for Principal Investigator profile after validation	3843347	NUMBER(38,0)	number	38
Principal_Investigator_3_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_3_First_Name	The first name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	John	VARCHAR2(50)	string	50
Principal_Investigator_3_Middle_Name	The middle name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	A	VARCHAR2(35)	string	35
Principal_Investigator_3_Last_Name	The last name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	Smith	VARCHAR2(35)	string	35
Principal_Investigator_3_Name_Suffix	Name suffix of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	III	VARCHAR2(20)	string	20

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_Business_Street_Address_Line1	The first line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	7500 Security Blvd.	VARCHAR2(100)	string	100
Principal_Investigator_3_Business_Street_Address_Line2	The second line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	Suite 100	VARCHAR2(75)	string	75
Principal_Investigator_3_City	The primary practice/business city of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_3_State	The primary practice/business state or territory abbreviation of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	MD	CHAR(2)	string	2
Principal_Investigator_3_Zip_Code	The 9-digit zip code for the primary business location of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Principal_Investigator_3_Country	The primary practice/business address country name of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_3_Province	The primary practice/business province name of the Principal Investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable.	Manitoba	VARCHAR2(35)	string	35

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_Postal_Code	The international postal code for the primary practice/business location of the principal Investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_3_Primary_Type_1	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_3_Primary_Type_2	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_3_Primary_Type_3	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_3_Primary_Type_4	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_3_Primary_Type_5	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_3_Primary_Type_6	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_3_Specialty_1	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_Specialty_2	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_3_Specialty_3	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_3_Specialty_4	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_3_Specialty_5	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_3_Specialty_6	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	MD	CHAR(2)	string	2
Principal_Investigator_3_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	VA	CHAR(2)	string	2
Principal_Investigator_3_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	CA	CHAR(2)	string	2
Principal_Investigator_3_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	TX	CHAR(2)	string	2
Principal_Investigator_3_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	AL	CHAR(2)	string	2
Principal_Investigator_4_Profile_ID	An identifier for Principal Investigator profile after validation	3843347	NUMBER(38,0)	number	38
Principal_Investigator_4_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_4_First_Name	The first name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	John	VARCHAR2(50)	string	50

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_Middle_Name	The middle name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	A	VARCHAR2(35)	string	35
Principal_Investigator_4_Last_Name	The last name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	Smith	VARCHAR2(35)	string	35
Principal_Investigator_4_Name_Suffix	Name suffix of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	III	VARCHAR2(20)	string	20
Principal_Investigator_4_Business_Street_Address_Line1	The first line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	7500 Security Blvd.	VARCHAR2(100)	string	100
Principal_Investigator_4_Business_Street_Address_Line2	The second line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	Suite 100	VARCHAR2(75)	string	75
Principal_Investigator_4_City	The primary practice/business city of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_4_State	The primary practice/business state or territory abbreviation of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	MD	CHAR(2)	string	2
Principal_Investigator_4_Zip_Code	The 9-digit zip code for the primary business location of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_Country	The primary practice/business address country name of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_4_Province	The primary practice/business province name of the Principal Investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable.	Manitoba	VARCHAR2(35)	string	35
Principal_Investigator_4_Postal_Code	The international postal code for the primary practice/business location of the principal Investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_4_Primary_Type_1	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_4_Primary_Type_2	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_4_Primary_Type_3	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_4_Primary_Type_4	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_4_Primary_Type_5	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_4_Primary_Type_6	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_Specialty_1	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_4_Specialty_2	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_4_Specialty_3	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_4_Specialty_4	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_4_Specialty_5	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_Specialty_6	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_4_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	MD	CHAR(2)	string	2
Principal_Investigator_4_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	VA	CHAR(2)	string	2
Principal_Investigator_4_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	CA	CHAR(2)	string	2
Principal_Investigator_4_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	TX	CHAR(2)	string	2
Principal_Investigator_4_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	AL	CHAR(2)	string	2
Principal_Investigator_5_Profile_ID	An identifier for Principal Investigator profile after validation	3843347	NUMBER(38,0)	number	38

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_5_First_Name	The first name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	John	VARCHAR2(50)	string	50
Principal_Investigator_5_Middle_Name	Middle name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	A	VARCHAR2(35)	string	35
Principal_Investigator_5_Last_Name	Last name of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	Smith	VARCHAR2(35)	string	35
Principal_Investigator_5_Name_Suffix	Name suffix of the Principal Investigator associated with the payment or transfer of value, as reported by the submitting entity.	III	VARCHAR2(20)	string	20
Principal_Investigator_5_Business_Street_Address_Line1	The first line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	7500 Security Blvd.	VARCHAR2(100)	string	100
Principal_Investigator_5_Business_Street_Address_Line2	The second line of the primary practice/business street address of the Principal Investigator associated with the payment or other transfer of value.	Suite 100	VARCHAR2(75)	string	75
Principal_Investigator_5_City	The primary practice/business city of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	Baltimore	VARCHAR2(40)	string	40

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_State	The primary practice/business state or territory abbreviation of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States.	MD	CHAR(2)	string	2
Principal_Investigator_5_Zip_Code	The 9-digit zip code for the primary business location of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Principal_Investigator_5_Country	The primary practice/business address country name of the Principal Investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_5_Province	The primary practice/business province name of the Principal Investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable.	Manitoba	VARCHAR2(35)	string	35
Principal_Investigator_5_Postal_Code	The international postal code for the primary practice/business location of the principal Investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_5_Primary_Type_1	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_5_Primary_Type_2	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_Primary_Type_3	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_5_Primary_Type_4	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_5_Primary_Type_5	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_5_Primary_Type_6	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_5_Specialty_1	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_5_Specialty_2	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_5_Specialty_3	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_Specialty_4	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_5_Specialty_5	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_5_Specialty_6	Principal Investigator's single-specialty chosen from the standardized "provider taxonomy" code list.	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_5_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	MD	CHAR(2)	string	2
Principal_Investigator_5_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	VA	CHAR(2)	string	2
Principal_Investigator_5_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	CA	CHAR(2)	string	2

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	TX	CHAR(2)	string	2
Principal_Investigator_5_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states.	AL	CHAR(2)	string	2
Submitting_Applicable_Manufacturer_or_Applicable_GPO_Name	Textual proper name of either the Submitting Applicable Manufacturer or Submitting Applicable Group Purchasing Organization (GPO).	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_ID	System generated unique identifier of the Applicable Manufacturer or Applicable Group Purchasing Organization (GPO) Making payment or other transfer of value	1000000049	NUMBER(38,0)	number	38
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Name	Textual proper name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_State	State name of the submitting applicable manufacturer or submitting applicable GPO as provided in Open Payments	VA	CHAR(2)	string	2
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Country	Country name of the Submitting Applicable Manufacturer or Submitting Applicable Group Purchasing Organization (GPO) as provided in Open Payments	United States	VARCHAR2(100)	string	100

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Related_Product_Indicator	Indicator allows the applicable manufacturer or applicable GPO to select whether the payment or other transfer of value is related to one or more product(s) (drugs, devices, biologicals, or medical supplies). If the payment was not made in relation to a product, select "No". If the payment was related to one or more product, select "Yes".	Y	VARCHAR2(100)	string	100
Covered_or_Noncovered_Indicator_1	For each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR2(100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_1	For each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Drug	VARCHAR2(100)	string	100
Product_Category_or_Therapeutic_Area_1	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR2(100)	string	100
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_1	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 1	VARCHAR2(500)	string	500
Associated_Drug_or_Biological_NDC_1	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-61	VARCHAR2(13)	string	13

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Associated_Device_or_Medical_Supply_PDI_1	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	00848657000260	VARCHAR(100)	string	100
Covered_or_Noncovered_Indicator_2	For each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR2(100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_2	For each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Device	VARCHAR2(100)	string	100
Product_Category_or_Therapeutic_Area_2	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR2(100)	string	100
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_2	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 2	VARCHAR2(500)	string	500
Associated_Drug_or_Biological_NDC_2	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-272-62	VARCHAR2(13)	string	13

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Associated_Device_or_Medical_Supply_PDI_2	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	00848657000260	VARCHAR(100)	string	100
Covered_or_Noncovered_Indicator_3	For each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR2(100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_3	For each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Device	VARCHAR2(100)	string	100
Product_Category_or_Therapeutic_Area_3	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR2(100)	string	100
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_3	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 3	VARCHAR2(500)	string	500
Associated_Drug_or_Biological_NDC_3	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-2726-3	VARCHAR2(13)	string	13

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Associated_Device_or_Medical_Supply_PDI_3	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	00848657000260	VARCHAR(100)	string	100
Covered_or_Noncovered_Indicator_4	For each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR2(100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_4	For each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Drug	VARCHAR2(100)	string	100
Product_Category_or_Therapeutic_Area_4	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR2(100)	string	100
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_4	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 4	VARCHAR2(500)	string	500
Associated_Drug_or_Biological_NDC_4	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-64	VARCHAR2(13)	string	13

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Associated_Device_or_Medical_Supply_PDI_4	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	00848657000260	VARCHAR(100)	string	100
Covered_or_Noncovered_Indicator_5	For each product listed in relation to the payment or other transfer of value, indicates if the product is a covered or non-covered product per the covered product definition in the Open Payments final rule.	Covered	VARCHAR2(100)	string	100
Indicate_Drug_or_Biological_or_Device_or_Medical_Supply_5	For each product listed in relation to the payment or other transfer of value, indicates if the product is a drug, device, biological, or medical supply.	Drug	VARCHAR2(100)	string	100
Product_Category_or_Therapeutic_Area_5	Provide the product category or therapeutic area for the covered drug, device, biological, or medical supply listed in relation to the payment or other transfer of value.	Endocrinology	VARCHAR2(100)	string	100
Name_of_Drug_or_Biological_or_Device_or_Medical_Supply_5	The marketed name of the drug, device, biological, or medical supply. May report the marketed name of up to five products (drugs, devices, biologicals, or medical supplies) associated with the payment or other transfer of value.	Sample Drug 5	VARCHAR2(500)	string	500
Associated_Drug_or_Biological_NDC_5	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-2726-5	VARCHAR2(13)	string	13

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Associated_Device_or_Medical_Supply_PDI_5	The Primary Device Identifier, if any, of the covered device or covered medical supply associated with the payment or other transfer of values (if applicable); the record may report up to 5 codes. Note: OP Program began collecting PDI information during PY 2021.	00848657000260	VARCHAR(100)	string	100
Total_Amount_of_Payment_USDollars	U.S. dollar amount of payment or transfer of value to recipient (manufacturer must convert to dollar currency if necessary).	1912.50	NUMBER(12,2)	decimal	12
Date_of_Payment	If a singular payment, then this is the actual date the payment was issued; if a series of payments or an aggregated set of payments, this is the date of the first payment to the covered recipient in this PY	06/30/2017	DATE	Date MM/DD/YYYY	12
Form_of_Payment_or_Transfer_of_Value	The method of payment used to pay the covered recipient or to make the transfer of value.	In-kind items and services	VARCHAR2(100)	string	100
Expenditure_Category1	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category2	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category3	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category4	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category5	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Expenditure_Category6	Contextual category for this research payment or other transfer of value	Patient Care	VARCHAR2(50)	string	50
Preclinical_Research_Indicator	An indicator showing if payment or other transfer of value is related to research, which is pre-clinical	Yes	CHAR(3)	string	3
Delay_in_Publication_Indicator	An indicator showing if an applicable manufacturer or applicable GPO is requesting a delay in publication of a payment or other transfer of value when the payment or other transfer of value is made in connection with: (1) research on or development of a new product (drug, device, biological, or medical supply) or (2) clinical investigation regarding a new product (drug, device, biological, or medical supply)	No	CHAR(3)	string	3
Name_of_Study	The textual name of the study for which the covered recipient is receiving this payment or other transfer of value. The textual name of the study for which the covered recipient is receiving this payment or other transfer of value	A Comparison of the Heart	VARCHAR2(500)	string	500
Dispute_Status_for_Publication	Indicates whether the payment or other transfer of value is disputed by the covered recipient or not	Yes	CHAR(3)	string	3
Record_ID	System assigned identifier to the research transaction at the time of submission	100000000023	NUMBER(38,0)	number	38
Program_Year	The year in which the payment occurred, as reported by submitting entity.	2016	CHAR(4)	number	4
Payment_Publication_Date	The predefined date when the payment or other transfer of value is scheduled to be published	06/30/2017	DATE	Date MM/DD/YYYY	12
ClinicalTrials_Gov_Identifier	Identifier assigned if research study is registered on clinicaltrials.gov	NCT21498631	VARCHAR2(11)	string	11

Field Name	Field Description	Sample Data	Data Type	Format	Max Length
Research_Information_Link	Optional link to information relevant to the research study for which this payment or other transfer of value is being reported (there can be a maximum of five links reported)	Research	VARCHAR2(2083)	string	2083
Context_of_Research	Textual description of research context or research objectives	Objective is new designs for heart valve replacements	VARCHAR2(500)	string	500

Appendix E: Research Payments Detail (PYs 2013-2015)

Table 15: Research Payment File Attributes (PY 2013-2015)

Name	Description	Sample Data	Data Type	Format	Max Length
Change_Type	<p>An indicator showing if the payment record is New, Added, Changed, or Unchanged in the current publication compared to the previous publication.</p> <p>NEW - To identify “new” records added from the end of the previous submission deadline until the current submission period deadline date</p> <p>ADDED - To identify records that were not eligible at the time of previous publication, which is eligible for current publication.</p> <p>CHANGED - To identify previously published records modified after the last publication.</p> <p>UNCHANGED - To identify previously published records that remain “unchanged” in current publication.</p>	NEW	VARCHAR2(20)	String	20
Covered_Recipient_Type	An indicator showing if the recipient of the payment or other transfer of value is a physician covered recipient, teaching hospital covered recipient, non-covered recipient entity, or non-covered recipient individual	Covered Recipient Teaching Hospital	VARCHAR2(50)	string	50
Teaching_Hospital_CCN	A unique identifying number (CMS Certification Number) of the Teaching Hospital receiving the payment or other transfer of value	330024	VARCHAR2(06)	string	6
Noncovered_Recipient_Entity_Name	The name of the non-covered recipient entity receiving the payment or other transfer of value	EDCBA Corporation	VARCHAR2(50)	string	50

Name	Description	Sample Data	Data Type	Format	Max Length
Teaching_Hospital_ID	Open Payments system-generated unique identifier of the teaching hospital receiving the payment or other transfer of value	1000000999	NUMBER(38,0)	number	38
Teaching_Hospital_Name	The name of the teaching hospital receiving the payment or other transfer of value – the name displayed is as listed in the CMS teaching hospital list	Healthy Heart Hospital	VARCHAR2(100)	string	100
Physician_Profile_ID	Open Payments system-generated unique identifier for physician profile receiving the payment or other transfer of value	1000000378	NUMBER(38,0)	number	38
Physician_NPI	National Provider Identifier is a unique identification number for covered recipient physician (and not the NPI of a group the physician belongs to).	2495351826	NUMBER(10,0)	number	10
Physician_First_Name	First name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	John	VARCHAR2(20)	string	20
Physician_Middle_Name	The middle name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	A	VARCHAR2(20)	string	20
Physician_Last_Name	Last name of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	Smith	VARCHAR2(35)	string	35
Physician_Name_Suffix	Name suffix of the physician (covered recipient) receiving the payment or other transfer of value, as reported by the submitting entity	III	VARCHAR2(5)	string	5

Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Primary_Business_Street_Address_Line1	The first line of the primary business street address of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Recipient_Primary_Business_Street_Address_Line2	The second line of the primary business street address of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Recipient_City	The primary practice/business address city of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value	Baltimore	VARCHAR2(40)	string	40
Recipient_State	The state or territory abbreviation of the primary business address of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary business address is in the United States	MD	CHAR(2)	string	2
Recipient_Zip_Code	The 9-digit zip code for the primary business location of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Recipient_Country	The primary practice/business address country of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary practice address is in the United States	US	VARCHAR2(100)	string	100
Recipient_Province	The primary practice/business province name of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20

Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Postal_Code	The international postal code for the primary business location of the physician or teaching hospital or non-covered recipient entity receiving the payment or other transfer of value if the primary business address is outside the United States	5600098	VARCHAR2(20)	string	20
Physician_Primary_Type	Primary type name of medicine practiced by the physician covered recipient	Doctor of Osteopathy (DO)	VARCHAR2(50)	string	50
Physician_Specialty	Physician's single-specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR2(300)	string	300
Physician_License_State_code1	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Physician_License_State_code2	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	CA	CHAR(2)	string	2
Physician_License_State_code3	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	TX	CHAR(2)	string	2

Name	Description	Sample Data	Data Type	Format	Max Length
Physician_License_State_code4	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Physician_License_State_code5	The state license number of the covered recipient physician, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MA	CHAR(2)	string	2
Principal_Investigator_1_Profile_ID	An Open Payments system-generated unique identifier for principal investigator profile after validation	3843332	NUMBER(38,0)	number	38
Principal_Investigator_1_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_1_First_Name	The first name of the Principal investigator associated with the payment or other transfer of value	John	VARCHAR2(20)	string	20
Principal_Investigator_1_Middle_Name	Middle name of the principal investigator associated with the payment or other transfer of value	A	VARCHAR2(20)	string	20
Principal_Investigator_1_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value	Smith	VARCHAR2(35)	string	35
Principal_Investigator_1_Name_Suffix_	Name suffix of the principal investigator associated with the payment or other transfer of value	III	VARCHAR2(5)	string	5
Principal_Investigator_1_Business_Street_Address_Line1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_Business_Street_Address_Line2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Principal_Investigator_1_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_1_State	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2
Principal_Investigator_1_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Principal_Investigator_1_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_1_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_1_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_1_Specialty	Principal investigator's single-specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_1_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Principal_Investigator_1_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_1_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	ME	CHAR(2)	string	2

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_1_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	NY	CHAR(2)	string	2
Principal_Investigator_1_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MI	CHAR(2)	string	2
Principal_Investigator_2_Profile_ID	An Open Payments system-generated unique identifier for principal investigator profile after validation	3843342	NUMBER(38,0)	number	38
Principal_Investigator_2_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_2_First_Name	The first name of the Principal investigator associated with the payment or other transfer of value, as reported by the submitting entity	John	VARCHAR2(20)	string	20
Principal_Investigator_2_Middle_Name	The middle name of the principal investigator associated with the payment or other transfer of value, as reported by the submitting entity	A	VARCHAR2(20)	string	20
Principal_Investigator_2_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value, as reported by the submitting entity	Smith	VARCHAR2(35)	string	35
Principal_Investigator_2_Name_Suffix	Name suffix of the principal investigator associated with the payment or other transfer of value, as reported by the submitting entity	III	VARCHAR2(5)	string	5

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_Business_Street_Address_Line1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Principal_Investigator_2_Business_Street_Address_Line2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Principal_Investigator_2_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_2_state	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2
Principal_Investigator_2_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Principal_Investigator_2_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_2_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_2_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_2_Specialty	Principal investigator's single-specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_2_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Principal_Investigator_2_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_2_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	TX	CHAR(2)	string	2
Principal_Investigator_2_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	CA	CHAR(2)	string	2

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_2_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	AL	CHAR(2)	string	2
Principal_Investigator_3_Profile_ID	An Open Payments system-generated unique identifier for principal investigator profile after validation	3843347	NUMBER(38,0)	number	38
Principal_Investigator_3_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_3_First_Name	The first name of the Principal investigator associated with the payment or other transfer of value	John	VARCHAR2(20)	string	20
Principal_Investigator_3_Middle_Name	The middle name of the principal investigator associated with the payment or other transfer of value	A	VARCHAR2(20)	string	20
Principal_Investigator_3_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value	Smith	VARCHAR2(35)	string	35
Principal_Investigator_3_Name_Suffix	Name suffix of the principal investigator associated with the payment or other transfer of value	III	VARCHAR2(5)	string	5
Principal_Investigator_3_Business_Street_Address_Line1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Principal_Investigator_3_Business_Street_Address_Line2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_3_State	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2
Principal_Investigator_3_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Principal_Investigator_3_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_3_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20
Principal_Investigator_3_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_3_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_3_Specialty	Principal investigator's single-specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_3_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Principal_Investigator_3_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_3_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	CA	CHAR(2)	string	2
Principal_Investigator_3_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	TX	CHAR(2)	string	2
Principal_Investigator_3_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	AL	CHAR(2)	string	2
Principal_Investigator_4_Profile_ID	An Open Payments system-generated unique identifier for principal investigator profile after validation	3843347	NUMBER(38,0)	number	38

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_4_First_Name	The first name of the Principal investigator associated with the payment or other transfer of value	John	VARCHAR2(20)	string	20
Principal_Investigator_4_Middle_Name	The middle name of the principal investigator associated with the payment or other transfer of value	A	VARCHAR2(20)	string	20
Principal_Investigator_4_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value	Smith	VARCHAR2(35)	string	35
Principal_Investigator_4_Name_Suffix	Name suffix of the principal investigator associated with the payment or other transfer of value	III	VARCHAR2(5)	string	5
Principal_Investigator_4_Business_Street_Address_Line1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Principal_Investigator_4_Business_Street_Address_Line2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Principal_Investigator_4_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_4_State	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10
Principal_Investigator_4_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_4_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(20)	string	20
Principal_Investigator_4_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_4_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_4_Specialty	Principal investigator's single specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_4_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MD	CHAR(2)	string	2
Principal_Investigator_4_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_4_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	CA	CHAR(2)	string	2
Principal_Investigator_4_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	TX	CHAR(2)	string	2
Principal_Investigator_4_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	AL	CHAR(2)	string	2
Principal_Investigator_5_Profile_ID	An Open Payments- system-generated unique identifier for principal investigator profile after validation	3843347	NUMBER(38,0)	number	38
Principal_Investigator_5_NPI	National Provider Identifier is a unique identification number for principal investigator, if available.	2495351826	NUMBER(10,0)	number	10
Principal_Investigator_5_First_Name	The first name of the Principal investigator associated with the payment or other transfer of value	John	VARCHAR2(20)	string	20

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_Middle_Name	Middle name of the principal investigator associated with the payment or other transfer of value	A	VARCHAR2(20)	string	20
Principal_Investigator_5_Last_Name	Last name of the principal investigator associated with the payment or other transfer of value	Smith	VARCHAR2(35)	string	35
Principal_Investigator_5_Name_Suffix	Name suffix of the principal investigator associated with the payment or other transfer of value	III	VARCHAR2(5)	string	5
Principal_Investigator_5_Business_Street_Address_Line1	The first line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	7500 Security Blvd.	VARCHAR2(55)	string	55
Principal_Investigator_5_Business_Street_Address_Line2	The second line of the primary practice/business street address of the principal investigator associated with the payment or other transfer of value	Suite 100	VARCHAR2(55)	string	55
Principal_Investigator_5_City	The primary practice/business city of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	Baltimore	VARCHAR2(40)	string	40
Principal_Investigator_5_State	The primary practice/business state or territory abbreviation of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	MD	CHAR(2)	string	2
Principal_Investigator_5_Zip_Code	The 9-digit zip code for the primary business location of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_Country	The primary practice/business address country name of the principal investigator associated with the payment or other transfer of value if the primary practice address is in the United States	United States	VARCHAR2(100)	string	100
Principal_Investigator_5_Province	The primary practice/business province name of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States, and if applicable	Manitoba	VARCHAR2(35)	string	35
Principal_Investigator_5_Postal_Code	The international postal code for the primary practice/business location of the principal investigator associated with the payment or other transfer of value, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Principal_Investigator_5_Primary_Type	Primary type name of medicine practiced by the principal investigator	Medical Doctor	VARCHAR2(50)	string	50
Principal_Investigator_5_Specialty	Principal investigator's single-specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians/ Independent Medical Examiner	VARCHAR2(300)	string	300
Principal_Investigator_5_License_State_code1	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	MD	CHAR(2)	string	2

Name	Description	Sample Data	Data Type	Format	Max Length
Principal_Investigator_5_License_State_code2	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	VA	CHAR(2)	string	2
Principal_Investigator_5_License_State_code3	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	CA	CHAR(2)	string	2
Principal_Investigator_5_License_State_code4	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	TX	CHAR(2)	string	2
Principal_Investigator_5_License_State_code5	The state license number of the principal investigator, which is a 2-letter state abbreviation; the record may include up to 5 physician license states if a physician is licensed in multiple states	AL	CHAR(2)	string	2
Submitting_Applicable_Manufacturer_or_Applicable_GPO_Name	The textual proper name of either the submitting applicable manufacturer or applicable GPO	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_ID	Open Payments system-generated unique identifier of the applicable manufacturer or applicable GPO making the payment or other transfer of value	1000000049	NUMBER(38,0)	number	38
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Name	The textual proper name of the applicable manufacturer or applicable GPO making the payment or other transfer of value	ABCDE Manufacturing	VARCHAR2(100)	string	100

Name	Description	Sample Data	Data Type	Format	Max Length
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_State	State name of the submitting applicable manufacturer or applicable GPO	VA	CHAR(2)	string	2
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Country	Country name of the applicable manufacturer or applicable GPO	United States	VARCHAR2(100)	string	100
Product_Indicator	An indicator that allows the applicable manufacturer or applicable GPO to select whether the payment or other transfer of value is associated with only covered drugs, devices, biologicals, or medical supplies ("Covered"), only non-covered drugs, devices, biologicals, or medical supplies ("Non-covered"), neither covered or non-covered drugs, devices, biologicals or medical supplies ("None"), or both covered and/or non-covered drugs, devices, biologicals or medical supplies ("Covered" or "Combination")	Covered	VARCHAR2(50)	string	50
Name_of_Associated_Covered_Drug_or_Biological1	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 1	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Drug_or_Biological2	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 2	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Drug_or_Biological3	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 3	VARCHAR2(500)	string	500

Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Drug_or_Biological4	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 4	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Drug_or_Biological5	The marketed name of the drug or biological associated with this payment or other transfer of value; may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Drug 5	VARCHAR2(500)	string	500
NDC_of_Associated_Covered_Drug_or_Biological1	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-62	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological2	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-272-62	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological3	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	36987-2726-2	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological4	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-62	VARCHAR2(12)	string	12
NDC_of_Associated_Covered_Drug_or_Biological5	The National Drug Code, if any, of the drug or biological associated with the payment or other transfer of value (if applicable); the record may report up to 5 codes	3698-7272-62	VARCHAR2(12)	string	12
Name_of_Associated_Covered_Device_or_Medical_Supply1	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 1	VARCHAR2(500)	string	500

Name	Description	Sample Data	Data Type	Format	Max Length
Name_of_Associated_Covered_Device_or_Medical_Supply2	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 2	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Device_or_Medical_Supply3	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 3	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Device_or_Medical_Supply4	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 4	VARCHAR2(500)	string	500
Name_of_Associated_Covered_Device_or_Medical_Supply5	The marketed name of the device or medical supply associated with this payment or other transfer of value; the record may report the marketed name of up to 5 covered products (drugs, devices, biologicals, or medical supplies)	Sample Device 5	VARCHAR2(500)	string	500
Total_Amount_of_Payment_US_Dollars	US dollar amount of payment or other transfer of value to the recipient (manufacturer must convert to dollar currency if necessary)	1978.00	NUMBER(12,2)	decimal	12
Date_of_Payment	If a singular payment, then this is the actual date the payment was issued; if a series of payments or an aggregated set of payments, this is the date of the first payment to the covered recipient in this PY	04/01/2014	DATE	Date MM/DD/YYYY	12
Form_of_Payment_or_Transfer_of_Value	The method of payment used to pay the covered recipient or to make the transfer of value	In-kind items and services	VARCHAR2(100)	string	100
Expenditure_Category1	Contextual category for this research payment or other transfer of value (up to 6)	Patient Care	VARCHAR2(50)	string	50

Name	Description	Sample Data	Data Type	Format	Max Length
Expenditure_Category2	Contextual category for this research payment or other transfer of value (up to 6)	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category3	Contextual category for this research payment or other transfer of value (up to 6)	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category4	Contextual category for this research payment or other transfer of value (up to 6)	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category5	Contextual category for this research payment or other transfer of value (up to 6)	Patient Care	VARCHAR2(50)	string	50
Expenditure_Category6	Contextual category for this research payment or other transfer of value (up to 6)	Patient Care	VARCHAR2(50)	string	50
Preclinical_Research_Indicator	An indicator showing if payment or other transfer of value is related to research, which is pre-clinical	Yes	CHAR(3)	string	3
Delay_in_Publication_Indicator	An indicator showing if an applicable manufacturer or applicable GPO is requesting a delay in the publication of a payment or other transfer of value when the payment or other transfer of value is made in connection with: (1) research on or development of a new product (drug, device, biological, or medical supply) or (2) clinical investigation regarding a new product (drug, device, biological, or medical supply)	No	CHAR(3)	string	3
Name_of_Study	The textual name of the study for which the covered recipient is receiving this payment or other transfer of value	A Comparison of the Heart	VARCHAR2(500)	string	500
Dispute_Status_for_Publication	Indicates whether the payment or other transfer of value is disputed by the covered recipient or not	Yes	CHAR(3)	string	3

Name	Description	Sample Data	Data Type	Format	Max Length
Record_ID	Open Payments system-generated unique identifier of the research transaction at the time of submission	100000000023	NUMBER(38,0)	number	38
Program_Year	The year in which the payment occurred, as reported by submitting entity	2014	CHAR(4)	number	4
Payment_Publication_Date	The predefined date when the payment or other transfer of value is scheduled to be published	06/30/2015	DATE	Date MM/DD/ YYYY	12
ClinicalTrials_Gov_Identifier	Open Payments identifier assigned if a research study is registered on https://clinicaltrials.gov	NCT21498631	VARCHAR2(11)	string	11
Research_Information_Link	Optional link to information relevant to the research study for which this payment or other transfer of value is being reported (there can be a maximum of five links reported)	Research	VARCHAR2(2083)	string	2083
Context_of_Research	Textual description of research context or research objectives	Objective is new designs for heart valve replacements	VARCHAR2(500)	string	500

Appendix F: Physician Ownership Information Detail (All PYs)

Table 16: Physician Ownership Information File Attributes

Name	Description	Sample Data	Data Type	Format	Max Length
Change_Type	<p>An indicator showing if the payment record is New, Added, Changed, or Unchanged in the current publication compared to the previous publication.</p> <p>NEW - To identify “new” records added from the end of the previous submission deadline until the current submission period deadline date</p> <p>ADDED - To identify records that were not eligible at the time of previous publication, which is eligible for current publication.</p> <p>CHANGED - To identify previously published records modified after the last publication.</p> <p>UNCHANGED - To identify previously published records that remain “unchanged” in current publication.</p>	NEW	VARCHAR2(20)	String	20
Physician_Profile_ID	Open Payments system-generated unique identifier for physician profile with the ownership or investment interest being reported	1000000378	NUMBER(38,0)	number	38
Physician_NPI	National Provider Identifier is a unique identification number for covered recipient physician (and not the NPI of a group the physician belongs to).	2495351826	NUMBER(10,0)	number	10
Physician_First_Name	First name of the physician (covered recipient) with the ownership or investment interest being reported	John	VARCHAR2(50)	string	50

Name	Description	Sample Data	Data Type	Format	Max Length
Physician_Middle_Name	Middle name of the physician (covered recipient) with the ownership or investment interest being reported	A	VARCHAR2(35)	string	35
Physician_Last_Name	Last name of the physician (covered recipient) with the ownership or investment interest being reported	Smith	VARCHAR2(35)	string	35
Physician_Name_Suffix	Name suffix of the physician (covered recipient) with the ownership or investment interest being reported	Jr.	VARCHAR2(20)	string	20
Recipient_Primary_Business_Street_Address_Line1	The first line of the primary practice street address of the physician with the ownership or investment interest being reported	7500 Security Blvd.	VARCHAR2(100)	string	100
Recipient_Primary_Business_Street_Address_Line2	The second line of the primary practice street address of the physician with the ownership or investment interest being reported	Suite 100	VARCHAR2(75)	string	75
Recipient_City	The primary practice city of the physician with the ownership or investment interest being reported	Baltimore	VARCHAR2(40)	string	40
Recipient_State	The primary practice/business state or territory abbreviation of the physician with the ownership or investment interest being reported, if the primary practice/business address is in the United States	MD	CHAR(2)	string	2
Recipient_Zip_Code	The 9-digit zip code for the primary practice location of the physician with the ownership or investment interest being reported, if the primary practice address is in the United States	21244-3712	VARCHAR2(10)	number-number	10

Name	Description	Sample Data	Data Type	Format	Max Length
Recipient_Country	The primary practice/business address country name of the physician with the ownership or investment interest being reported	US	VARCHAR2(100)	string	100
Recipient_Province	The primary practice/business province name of the physician with the ownership or investment interest being reported, if the primary practice/business address is outside the United States, and if applicable	Ontario	VARCHAR2(35)	string	35
Recipient_Postal_Code	The international postal code for the primary practice/business location of the physician with the ownership or investment interest being reported, if the primary practice/business address is outside the United States	5600098	VARCHAR2(20)	string	20
Physician_Primary_Type	The primary type of medicine practiced by the physician covered recipient with the ownership or investment interest being reported	Doctor of Dentistry (DDS)	VARCHAR2(50)	string	50
Physician_Specialty	Physician's single-specialty chosen from the standardized "provider taxonomy" code list	Allopathic & Osteopathic Physicians Obstetrics & Gynecology	VARCHAR2(300)	string	300
Record_ID	Open Payments system-generated unique identifier for the ownership payment record	10000000052	NUMBER(38,0)	number	38
Program_Year	The year in which the ownership/investment interest occurred	2015	CHAR(4)	number	4

Name	Description	Sample Data	Data Type	Format	Max Length
Total_Amount_Invested_USDollars	The dollar amount the physician or immediate family member has invested in the applicable manufacturer or applicable GPO during the PY, in US dollars	6000.22	NUMBER(12,2)	decimal	12
Value_of_Interest	The cumulative value of ownership or investment interest held by the physician or immediate family member in the applicable manufacturer or applicable GPO, in US dollars	6000.22	NUMBER(12,2)	decimal	12
Terms_of_Interest	Description of any applicable terms of the ownership or investment interest	Terms of interest are standard	VARCHAR2(500)	string	500
Submitting_Applicable_Manufacturer_or_Applicable_GPO_Name	The textual proper name of either the submitting applicable manufacturer or applicable GPO	ABCDE Manufacturing	VARCHAR2(100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_ID	Open Payments ID of either the submitting applicable manufacturer or applicable GPO	1000000049	NUMBER(38,0)	number	38
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Name	The textual proper name of either the submitting applicable manufacturer or applicable GPO	EDCBA	VARCHAR2(100)	string	100
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_State	State name of either the submitting applicable manufacturer or applicable GPO	VA	CHAR(2)	string	2
Applicable_Manufacturer_or_Applicable_GPO_Making_Payment_Country	Country name of the submitting applicable manufacturer or applicable GPO	US	VARCHAR2(100)	string	100
Dispute_Status_for_Publication	Indicates whether the ownership or investment interest is disputed by the physician	Yes	CHAR(3)	string	3

Name	Description	Sample Data	Data Type	Format	Max Length
Interest_Held_by_Physician_or_a_n_Immediate_Family_Member	An indicator showing if the ownership or investment interest is held by the physician or by an immediate family member	Immediate family member	VARCHAR2(50)	string	50
Payment_Publication_Date	The predefined date when the ownership or investment interest is scheduled to be published	06/30/2016	DATE	Date MM/DD/YYYY	12

Appendix G: Deleted and Removed Records File

Table 17: Deleted Records File

Name	Description	Sample Data	Data Type	Format	Max Length
Change_Type	<p>An indicator showing if the payment record is deleted or removed in the current publication compared to the previous publication.</p> <p>DELETED - The payment record was published in the last publication and since then it was deleted by the reporting entity and the payment record no longer exists in the Open Payments system</p> <p>REMOVED - Payment record was published in the last publication, since then it became ineligible for publication</p>	DELETED	VARCHAR2(20)	string	20
Program_Year	An indicator showing the PY of the deleted or removed record.	2015	CHAR(4)	number	4
Payment_Type	An indicator showing the payment category (General Payment, Research Payment, or Ownership/Investment) of the deleted or removed record	General	VARCHAR2(50)	string	50
Record_ID	Open Payments system-generated unique identifier assigned to the record at the time of submission	13641	NUMBER(38,0)	number	38

Appendix H: Covered Recipient Profile Supplement File

Table 18: Covered Recipient Profile Supplement File

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_Type	Indicator showing if recipient of the payment or other transfer of value is a covered recipient physician or covered recipient non-physician practitioner. Example values: Covered Recipient Physician (If the profile is a Physician profile) Covered Recipient Non-Physician Practitioner (If the profile is a Non-Physician Practitioner profile), Covered Recipient Physician/Covered Recipient Non-Physician Practitioner (If the profile is identified as both Physician and a Non-Physician Practitioner)	Covered ecipient Non-Physician Practitioner Covered Recipient Physician Covered Recipient Physician/Cove red Recipient Non-Physician Practitioner	VARCHAR 2(100,0)	string	100
Covered_Recipient_Profile_ID	System generated unique identifier for physician/non-physician practitioner profile receiving the payment or other transfer of value.	3843322	NUMBER(38,0)	number	38
Associated_Covered_Recipient_Profile_ID_1	Covered_Recipient_Profile_ID of first profile (with/without NPI) associated with the same physician/non-physician practitioner.	1567986	NUMBER(38,0)	number	38
Associated_Covered_Recipient_Profile_ID_2	Covered_Recipient_Profile_ID of second profile (with/without NPI) associated with the same physician/non-physician practitioner.	4567831	NUMBER(38,0)	number	38
Covered_Recipient_NPI	National Provider Identifier is a unique identification number for covered recipient physician or non-physician practitioner (and not the NPI of a group the physician/non-physician practitioner belongs to).	2495351826	NUMBER(10,0)	number	10

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_First_Name	The first name as available in the CMS-provided Master Profile List (MPL) for Physician\NPPs and non-physician practitioner that were successfully matched on the list. For physicians/non-physician practitioner who are not on the CMS-provided MPL and were matched against the external physician/ non-physician practitioner matching service, the name as verified against the external physician/ non-physician practitioner matching service is displayed.	CONRAD	VARCHAR2(50)	string	50
Covered_Recipient_Profile_Middle_Name	The middle name as available in the CMS-provided MPL for physician/ non-physician practitioners that were successfully matched on the list. For physician/non-physician practitioner s who are not on the CMS-provided MPL and were matched against the external physician/ non-physician practitioner matching service, the middle name is determined by the most frequently reported by AM/GPOs through the record submission in the latest year when the physician/ non-physician practitioner is reported.	MICHAEL	VARCHAR2(35)	string	35
Covered_Recipient_Profile_Last_Name	The last name as available in the CMS-provided MPL provided by CMS for physician/ non-physician practitioners that were successfully matched on the list. For physician/ non-physician practitioners who are not on the CMS-provided MPL and were matched against the external physician/ non-physician practitioner matching service, the name as verified against the external physician/ non-physician practitioner matching service is displayed.	KELLY	VARCHAR2(35)	string	35

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_Suffix	The suffix as available in the CMS-provided MPL for physician/non-physician practitioners that were successfully matched on the list. For physician/non-physician practitioners who are not on the CMS-provided MPL and were matched against the external physician/non-physician practitioner matching service, the suffix is determined by the most frequently reported by AM/GPOs through the record submission in the latest year when the physician/non-physician practitioner is reported.	Jr	VARCHAR2(20)	string	20
Covered_Recipient_Profile_Alternate_First_Name	The alternate first name as available in the CMS-provided MPL for physician/non-physician practitioner that were successfully matched on the list. For physician/non-physician practitioner who are not on the CMS-provided MPL and were matched against the external physician/non-physician practitioner matching service, the alternate first name is displayed blank.	CONNIE	VARCHAR2(50)	string	50
Covered_Recipient_Profile_Alternate_Middle_Name	The alternate middle name as available in the CMS-provided MPL for physician/non-physician practitioner that were successfully matched on the list. For physician/non-physician practitioner r who are not on the CMS-provided MPL and were matched against the external physician/non-physician practitioner matching service, the alternate middle name is displayed blank.	KELL	VARCHAR2(35)	string	35

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_Alternate_Last_Name	The alternate last name as available in the CMS-provided MPL for physician/non-physician practitioners that were successfully matched on the list. For physician/non-physician practitioner who are not on the CMS-provided MPL and were matched against the external physician/non-physician practitioner matching service, the alternate last name is displayed blank.	SMITH	VARCHAR2(35)	string	35
Covered_Recipient_Profile_Alternate_Suffix	The alternate suffix as available in the CMS-provided MPL for physician/non-physician practitioner that were successfully matched on the list. For physician/non-physician practitioner who are not on the CMS-provided MPL and were matched against the external physician/non-physician practitioner matching service, the alternate suffix is displayed blank.	Jr	VARCHAR2(20)	string	20

Expiration Date: 07/31/2026

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_Address_Line_1	<p>The first line of latest “Provider Business Practice Location Address” for all physician/non-physician practitioner that matched as listed in the CMS-provided MPL. If address information is blank in MPL, the second line of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPO’s through the records submission in the latest year when the physician/non-physician practitioner is reported.</p> <p>For physician/non-physician practitioner not on the CMS-provided MPL and matched against the external physician/non-physician practitioner matching service, the second line of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPOs through the records submission in the latest year when the physician/non-physician practitioner is reported. AM/GPOs through the records submission in the latest year when the physician/non-physician practitioner is reported.</p>	3106 Lord Baltimore Dr.	VARCHAR2(100)	string	100

Expiration Date: 07/31/2026

Covered_Recipient_Profile_Address_Line_2	<p>The second line of latest “Provider Business Practice Location Address” for all physician/non-physician practitioner that matched as listed in the CMS-provided MPL. If address information is blank in MPL, the second line of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPO’s through the records submission in the latest year when the physician/non-physician practitioner is reported.</p> <p>For physician/non-physician practitioner not on the CMS-provided MPL and matched against the external physician/non-physician practitioner matching service, the second line of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPOs through the records submission in the latest year when the physician/non-physician practitioner is reported. AM/GPOs through the records submission in the latest year when the physician/non-physician practitioner is reported.</p>	Suite 90	VARCHAR2(75)	string	75
--	---	----------	--------------	--------	----

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_City	<p>The city of the latest "Provider Business Practice Location Address" for all physician/non-physician practitioner that matched as listed in the CMS-provided MPL. If Address information is blank in MPL, the city of the latest "Provider Business Practice Location Address"" will be determined by the most frequently reported address by AM/GPO's through the records submission in the latest year when the physician/non-physician practitioner is reported.</p> <p>For physician/non-physician practitioner not on the CMS-provided MPL and matched against the external physician/non-physician practitioner matching service, the city of the latest "Provider Business Practice Location Address" will be determined by the most frequently reported address by AM/GPOs through the records submission in the latest year when the physician/non-physician practitioner is reported.</p>	Ellicott City	VARCHAR2(40)	string	40

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_State	<p>The state of latest “Provider Business Practice Location Address” for all physician/non-physician practitioners that matched as listed in the CMS-provided MPL. If Address information is blank in MPL, the state of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPO’s through the records submission in the latest year when the physician/non-physician practitioner is reported.</p> <p>For physician/non-physician practitioners not on the CMS-provided MPL and matched against the external physician/non-physician practitioner matching service, the state of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPOs through the records submission in the latest year when the physician/non-physician practitioner is reported.</p>	MD	CHAR(2)	string	2

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_Zipcode	<p>The zip code of latest “Provider Business Practice Location Address” for all physician/non-physician practitioners that matched as listed in the CMS-provided MPL. If Address information is blank in MPL, the zip code of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPO’s through the records submission in the latest year when the physician/non-physician practitioner is reported.</p> <p>For physician/non-physician practitioners not on the CMS-provided MPL and matched against the external physician/non-physician practitioner matching service, the zip code of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPOs through the records submission in the latest year when the physician/non-physician practitioner is reported. AM/GPOs through the records submission in the latest year when the physician/non-physician practitioner is reported.</p>	21244-3712	VARCHAR2(10)	number-number	10

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_Country_Name	<p>The country of latest “Provider Business Practice Location Address” provided as listed in the CMS-provided MPL for all physician/non-physician practitioners that were successfully matched on the list. If Address information is blank in MPL, the country name of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPO’s through the records submission in the latest year when the physician/non-physician practitioner is reported.</p> <p>For physician/non-physician practitioners who are not on the CMS-provided MPL and were matched against the external physician/non-physician practitioner matching service, the country of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPOs through the record submission in the latest year when the physician/non-physician practitioner is reported.</p>	United States	VARCHAR2(100)	string	100

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_Province_Name	<p>The state of latest “Provider Business Practice Location Address” for all physician/non-physician practitioners that matched as listed in CMS provided Master Profile List (MPL), if the primary practice/business address is outside the United States and if applicable. If Address information is blank in MPL, the province name of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPO’s through the records submission in the latest year when the physician/non-physician practitioner is reported</p> <p>For physician/non-physician practitioners not on the CMS provided Master physician/non-physician practitioner List (MPL) and matched against external physician/non-physician practitioner matching service, the province name of latest “Provider Business Practice Location Address” will be determined by the most frequently reported address by AM/GPO’s through the records submission in the latest year when the physician/non-physician practitioner is reported, if the primary practice/business address is outside the United States and if applicable.</p>	Manitoba	VARCHAR2(35)	string	35
Covered_Recipient_Profile_Primary_Specialty	The primary specialty as listed in the CMS-provided MPL for physician/non-physician practitioners that were successfully matched on the list and have a valid Open Payments primary taxonomy. For physician/non-physician practitioners on the list and any other primary taxonomy than the valid Open Payments primary taxonomy and for physician/non-physician practitioners who are not on the CMS-provided MPL and were matched against the external physician/non-physician practitioner matching service, the primary specialty displayed as blank.	Allopathic & Osteopathic Physicians Internal Medicine Rheumatology	VARCHAR2(300)	string	300

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_OPS_Taxonomy_1	<p>The primary or secondary Open Payments valid taxonomy code as listed in the CMS-provided MPL for physician/non-physician practitioners that were successfully matched on the list and have a valid Open Payments taxonomy.</p> <p>For physician/non-physician practitioners on the list with Primary or Secondary Taxonomy other than a valid Open Payments taxonomy, it will be displayed as the most frequently reported valid taxonomy by AM/GPO's in the published records across all PYs in all payment categories where the physician/non-physician practitioner was reported. If no valid taxonomy is reported, it should remain blank.</p> <p>For physician/non-physician practitioners who are not on the CMS provided MPL and were matched against external data source, the Open Payments Taxonomy will be displayed as the most frequently reported by AM/GPO's, assuming that it corresponds to a valid OP Taxonomy code.</p>	207ZN0500X	VARCHAR2(10)	string	10

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_OPS_Taxonomy_2	<p>The secondary Open Payments valid taxonomy code as listed in the CMS-provided MPL for physician/non-physician practitioners that were successfully matched on the list and have a valid Open Payments taxonomy.</p> <p>For physician/non-physician practitioners on the list with Primary or Secondary Taxonomy other than a valid Open Payments taxonomy, it will be displayed as the most frequently reported valid taxonomy by AM/GPO's in the published records across all PYs in all payment categories where the physician/non-physician practitioner was reported. If no valid taxonomy is reported, it should remain blank.</p> <p>For physician/non-physician practitioners who are not on the CMS provided MPL and were matched against external data source, the Open Payments Taxonomy will be displayed as the most frequently reported by AM/GPO's, assuming that it corresponds to a valid OP Taxonomy code.</p>	2080B0002X	VARCHAR2(10)	string	10

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_OPS_Taxonomy_3	<p>The secondary Open Payments valid taxonomy code as listed in the CMS-provided MPL for physician/non-physician practitioners that were successfully matched on the list and have a valid Open Payments taxonomy.</p> <p>For physician/non-physician practitioners on the list with Primary or Secondary Taxonomy other than a valid Open Payments taxonomy, it will be displayed as the most frequently reported valid taxonomy by AM/GPO's in the published records across all PYs in all payment categories where the physician/non-physician practitioner was reported. If no valid taxonomy is reported, it should remain blank.</p> <p>For physician/non-physician practitioners who are not on the CMS provided MPL and were matched against external data source, the Open Payments Taxonomy will be displayed as the most frequently reported by AM/GPO's, assuming that it corresponds to a valid OP Taxonomy code.</p>	111NT0100X	VARCHAR2(10)	string	10

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_OPS_Taxonomy_4	<p>The secondary Open Payments valid taxonomy code as listed in the CMS-provided MPL for physician/non-physician practitioners that were successfully matched on the list and have a valid Open Payments taxonomy.</p> <p>For physician/non-physician practitioners on the list with Primary or Secondary Taxonomy other than a valid Open Payments taxonomy, it will be displayed as the most frequently reported valid taxonomy by AM/GPO's in the published records across all PYs in all payment categories where the physician/non-physician practitioner was reported. If no valid taxonomy is reported, it should remain blank.</p> <p>For physician/non-physician practitioners who are not on the CMS provided MPL and were matched against external data source, the Open Payments Taxonomy will be displayed as the most frequently reported by AM/GPO's, assuming that it corresponds to a valid OP Taxonomy code.</p>	1223P0221X	VARCHAR2(10)	string	10

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_OPS_Taxonomy_5	<p>The secondary Open Payments valid taxonomy code as listed in the CMS-provided MPL for physician/non-physician practitioners that were successfully matched on the list and have a valid Open Payments taxonomy.</p> <p>For physician/non-physician practitioners on the list with Primary or Secondary Taxonomy other than a valid Open Payments taxonomy, it will be displayed as the most frequently reported valid taxonomy by AM/GPO's in the published records across all PYs in all payment categories where the physician/non-physician practitioner was reported. If no valid taxonomy is reported, it should remain blank.</p> <p>For physician/non-physician practitioners who are not on the CMS provided MPL and were matched against external data source, the Open Payments Taxonomy will be displayed as the most frequently reported by AM/GPO's, assuming that it corresponds to a valid OP Taxonomy code.</p>	152WL0500X	VARCHAR2(10)	string	10

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_OPS_Taxonomy_6	<p>The secondary Open Payments valid taxonomy code as listed in the CMS-provided MPL for physician/non-physician practitioners that were successfully matched on the list and have a valid Open Payments taxonomy.</p> <p>For physician/non-physician practitioners on the list with Primary or Secondary Taxonomy other than a valid Open Payments taxonomy, it will be displayed as the most frequently reported valid taxonomy by AM/GPO's in the published records across all PYs in all payment categories where the physician/non-physician practitioner was reported. If no valid taxonomy is reported, it should remain blank.</p> <p>For physician/non-physician practitioners who are not on the CMS provided MPL and were matched against external data source, the Open Payments Taxonomy will be displayed as the most frequently reported by AM/GPO's, assuming that it corresponds to a valid OP Taxonomy code.</p>	152WL0500X	VARCHAR2(10)	string	10
Covered_Recipient_Profile_License_State_Code_1	The license state code of the physician/non-physician practitioner profile in Open Payments system, which is a 2-letter state abbreviation. The physician/non-physician practitioner may have up to 5 license states, if a physician/non-physician practitioner is licensed in multiple states.	VA	CHAR(2)	string	2
Covered_Recipient_Profile_License_State_Code_2	The license state code of the physician profile/Non-Physician Practitioner in Open Payments system, which is a 2-letter state abbreviation. The physician/non-physician practitioner may have up to 5 license states, if a physician/non-physician practitioner is licensed in multiple states.	MD	CHAR(2)	string	2

Name	Description	Sample Data	Data Type	Format	Max Length
Covered_Recipient_Profile_License_State_Code_3	The license state code of the physician/non-physician practitioner profile in Open Payments system, which is a 2-letter state abbreviation. The physician/non-physician practitioner may have up to 5 license states, if a physician/non-physician practitioner is licensed in multiple states.	MT	CHAR(2)	string	2
Covered_Recipient_Profile_License_State_Code_4	The license state code of the physician/non-physician practitioner profile in Open Payments system, which is a 2-letter state abbreviation. The physician/non-physician practitioner may have up to 5 license states, if a physician/non-physician practitioner is licensed in multiple states.	DC	CHAR(2)	string	2
Covered_Recipient_Profile_License_State_Code_5	The license state code of the physician/non-physician practitioner profile in Open Payments system, which is a 2-letter state abbreviation. The physician/non-physician practitioner may have up to 5 license states, if a physician/non-physician practitioner is licensed in multiple states.	MO	CHAR(2)	string	2

Disclosure

- **Disclaimer:** The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.
- **Activities/persons addressed by this document:** Guidance to published Open Payments data, including sources of the data, how the data files are presented by CMS, and the fields contained in each data file.
- **Date of document issuance:** June 2025
- **Replacement / Revision Status:** Revision to previous versions
- **Agency Identifier:** OBRHI CFRG 4385
- **Summary of Document:** A guide to published Open Payments data, including sources of the data, how the data files are presented by CMS, and the fields contained in each data file.
- **Citation to statutory provision/regulation applicable to this document:**
 - Statute citation: Social Security Act SEC. 1128G. [42 U.S.C. 1320a-7h]
 - Rule citation: 42 C.F.R. §403.900-14