



CO L O R A D O

**Department of Health Care
Policy & Financing**

SOLICITATION #:

2017000265

Appendix EE

Provider Type Codes

APPENDIX EE
Provider Type Codes

Provider Type Code	Provider Type Description
01	GENERAL HOSPITAL
02	MENTAL HOSPITAL
04	DENTIST
05	PHYSICIAN
06	PODIATRIST
07	OPTOMETRIST
08	OPTICIAN
09	PHARMACY
10	HOME HEALTH
11	CASE MANAGER
12	INDEPENDENT LABORATORY
13	AMBULANCE
14	SUPPLY
16	CLINIC
17	PHYSICAL THERAPIST
18	QMB BENEFITS ONLY
19	AUDIOLOGIST
20	SKILLED NURSING
21	INTERMEDIATE NURSING
22	NURSE MID-WIFE
23	HMO
24	NON-PHYSICIAN PRACTITIONER
25	NON-PHYSICIAN PRACTITIONER GRP
26	OSTEOPATH
27	SPEECH THERAPIST
28	OCCUPATIONAL THERAPIST
29	FAMILY PLANNING
30	PSYCHIATRIC RES TREATMENT FAC
31	MENTL HLTH ASSESS AND SVC AGCY
32	FEDLLY QUALIFIED HEALTH CENTER
33	DIALYSIS CENTER
34	HCBS-EBD/BI/MI/CWA/PHW
35	COMMUNITY MNTL HLTH CENTER
36	HCBS-DD HCBS-CHRP
37	PSYCHOLOGIST
38	MA PSYCHOLOGIST
39	PHYSICIAN ASSISTANT
40	CRNA

APPENDIX EE
Provider Type Codes

Provider Type Code	Provider Type Description
41	FAMILY/PEDIATRIC NURSE PRACT
44	AMBULATORY SURGICAL CENTER
45	RURAL HEALTH CLINIC
47	DENTAL CLINIC
48	REHABILITATION AGENCY
49	X-RAY FACILITY
50	HOSPICE
51	SCHOOL BASED CLINIC-DISTRICT
52	THERAPEUTIC RES CHILD CARE FAC
53	BILLING AGENT
57	REG CARE COORD ORG