Layout for CSV Flat File
Revised 10-24-2012

	Format	Length	Notes
Provider Medicaid ID	Character	7	
Delimiter		1	Value “,”
Recipient ID	Character	12	
Delimiter		1	Value “,”
Recipient Last Name	Character	15	
Delimiter		1	Value “,”
Recipient First Name	Character	15	
Delimiter		1	Value “,”
HH Effective Date	Number	8	CCYYMMDD
Delimiter		1	Value “,”
HH End Date	Number	8	CCYYMMDD Default to 22991231 when open-ended
Delimiter		1	Value “,”
Recipient Date of Birth	Number	8	CCYYMMDD
Delimiter		1	Value “,”
Recipient SSN	Number	9	
Delimiter		1	Value “,”
Recipient Gender	Character	1	F - Female M - Male U- Unknown
Delimiter		1	Value “,”