

All-in Roster	
Field Name	Field Description
Billing NPI*	The 10-digit Billing NPI of each IHP clinic to be considered for attribution purposes. Use * to indicate consolidated NPI
Name	Clinic Name
Measurement ID	Minnesota Community Measurement ID # or Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) #
Address	Street Address of clinic or provider
City, State, Zip	City, state and zip code of clinic or provider
IHP ID/UMPI	If applicant is an existing IHP, please include 10-digit alpha-numeric ID (beginning with 'A' and followed by 9 numbers) This is the Unique Minnesota Provider ID (UMPI) that a new IHP is assigned as part of the initial provider enrollment process.
IHP Name	IHP organization name
Federal Tax ID/EIN	9-digit Federal Tax Identification Number (aka Employer ID Number) of the clinic
Billing and Treating Provider	
Field Name	Field Description
IHP ID/UMPI	If applicant is an existing IHP, please include 10-digit alpha-numeric ID (beginning with 'A' and followed by 9 numbers) This is the Unique Minnesota Provider ID (UMPI) that a new IHP is assigned as part of the initial provider enrollment process.
IHP Name	IHP organization name
Treating Provider NPI	The 10-digit NPI of each treating provider included in the IHP's roster.
Federal Tax ID/EIN	9-digit Federal Tax Identification Number (aka Employer ID Number) of the clinic
Clinic NPI	10-digit NPI of clinic (billing provider)
Specialty	The corresponding specialty of the treating provider. Either 'SPE' for specialty or 'PCP' for primary care provider. (Note: If not provided, the Specialty field will be assigned based on provider taxonomy code.)
Name	Clinic Name
Measurement ID	Minnesota Community Measurement ID # or Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) #
Address	Street Address of clinic or provider
City, State, Zip	City, state and zip code of clinic or provider

Tax ID	
Field Name	Field Description
Federal Tax ID	Federal Tax Identification Number
Name	