**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

| | *AMBULATORY/OUTPATIENT PROCEDURE DATA FILE LAYOUT* | | | |
|---|---|---|---|---|
| **FIELD NAME** | **DATA ELEMENT DESCRIPTION** | **DATA FILE LOCATION** | **FORMAT * / SIZE** | **NOTES** |
| | **Record Identifier** | | | |
| SYSID | System assigned unique record sequence number | 001-007 | X(7) | Unique code for each record for each quarter |
| YEAR | Processing Year | 008-011 | X(4) | Year |
| QUARTER | Processing Quarter | 012 | X(1) | Quarter of year |
| CLAIMTYPE | Data Type | 013 | X(1) | An indicator to identify type of record; (field name changed from "SUBTYPE" starting 2007Q3) |
| | **Facility Identification** | | | |
| PAF | Pennsylvania Facility Number (PAF) | 014-017 | X(4) | PHC4 assigned facility code |
| HREGION | Facility Region Code | 018 | X(1) | PHC4 assigned Region code (1 - 9) |
| MAID | MAID | 019-026 | X(8) | PA Medical Assistance Identifier; No longer available effective 2003Q1 |
| | **Patient Data** | | | |
| PTSEX | Patient Sex Code | 027 | X(1) | Gender |
| ETHNIC | Hispanic/Latino Origin or Descent | 028 | X(1) | Ethnic descent |
| RACE | Race Code | 029 | X(1) | Race |
| PSEUDOID | Pseudo Patient Identifier | 030-039 | X(10) | PHC4 assigned unique patient code |
| AGE | Patient Age in Years | 040-042 | 9(3) | Age of patient; Zero if less than 1 year or unknown |
| AGECAT | Patient Age in Days | 043-044 | X(2) | PHC4 assigned age groups of patient age in days; Only calculated if ≤1 year old |
| PTZIP | Patient Zip Code | 045-049 | X(5) | Zip code of patient |
| MKTSHARE | Home Market Share Area Code | 050-052 | X(3) | Blank filled |
| COUNTY | Patient Home County Code | 053-055 | X(3) | PA county code (1 – 67) or Federal County Code |
| STATE | Patient State Code | 056-057 | X(2) | USPS standard state code |
| ACCIDENTSTATE | Accident State | 058-059 | X(2) | Identifies state of where the auto accident occurred if services reported on the claim are related to the accident; Available effective 2011Q1 |
| | **Admission Data** | | | |
| ADTYPE | Priority (Type of Visit) | 060 | X(1) | Defines urgency level of admission; No longer available effective 2007Q3 |
| ADSOURCE | Point of Origin for admission or visit | 061 | X(1) | Defines point of Origin for admission or visit |

**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

| | *AMBULATORY/OUTPATIENT PROCEDURE DATA FILE LAYOUT* | | | |
|---|---|---|---|---|
| **FIELD NAME** | **DATA ELEMENT DESCRIPTION** | **DATA FILE LOCATION** | **FORMAT * / SIZE** | **NOTES** |
| ADHOUR | Admission Hour | 062-063 | X(2) | Military time (24 hour clock); No longer available effective 2007Q3 |
| ADMDX | Admitting Diagnosis | 064-070 | X(7) | Defines diagnosis at admission; No longer available effective 2007Q3; (field size changed from 6 starting 2007Q3) |
| ADDOW | Admission Day of Week | 071 | X(1) | Code for day of admission (1 – 7); No longer available effective 2007Q3 |
| | **Discharge Data** | | | |
| DCSTATUS | Patient Discharge Status | 072-073 | X(2) | Defines discharge destination; No longer available effective 2007Q3 |
| DCHOUR | Discharge Hour | 074-075 | X(2) | Military time (24 hour clock); No longer available effective 2007Q3 |
| DCDOW | Discharge Day of Week | 076 | X(1) | Code for day of discharge (1 - 7) |
| | **Diagnosis Codes** | | | |
| ECODE1 | External Cause of Injury Code (1) | 077-083 | X(7) | Defines external cause of injury code (ECI); (field name changed from "ECODE" and field size changed from 6 starting 2007Q3) |
| ECODE2 | External Cause of Injury Code (2) | 084-090 | X(7) | Defines additional external cause of injury code (ECI); Available effective 2011Q1 |
| ECODE3 | External Cause of Injury Code (3) | 091-097 | X(7) | Defines additional external cause of injury code (ECI); Available effective 2011Q1 |
| PDX | Principal Diagnosis Code | 098-104 | X(7) | Defines diagnosis at discharge; (field size changed from 6 starting 2007Q3) |
| SDX1 | Secondary/Other Diagnosis Code (1) | 105-111 | X(7) | Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3) |
| SDX2 | Secondary/Other Diagnosis Code (2) | 112-118 | X(7) | Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3) |
| SDX3 | Secondary/Other Diagnosis Code (3) | 119-125 | X(7) | Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3) |
| SDX4 | Secondary/Other Diagnosis Code (4) | 126-132 | X(7) | Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3) |
| SDX5 | Secondary/Other Diagnosis Code (5) | 133-139 | X(7) | Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3) |

**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

| | *AMBULATORY/OUTPATIENT PROCEDURE DATA FILE LAYOUT* | | | |
|---|---|---|---|---|
| **FIELD NAME** | **DATA ELEMENT DESCRIPTION** | **DATA FILE LOCATION** | **FORMAT * / SIZE** | **NOTES** |
| SDX6 | Secondary/Other Diagnosis Code (6) | 140-146 | X(7) | Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3) |
| SDX7 | Secondary/Other Diagnosis Code (7) | 147-153 | X(7) | Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3) |
| SDX8 | Secondary/Other Diagnosis Code (8) | 154-160 | X(7) | Defines additional diagnosis conditions; (field size changed from 6 starting 2007Q3) |
| SDX9 | Secondary/Other Diagnosis Code (9) | 161-167 | X(7) | Defines additional diagnosis conditions; Available effective 2011Q1 |
| SDX10 | Secondary/Other Diagnosis Code (10) | 168-174 | X(7) | Defines additional diagnosis conditions; Available effective 2011Q1 |
| SDX11 | Secondary/Other Diagnosis Code (11) | 175-181 | X(7) | Defines additional diagnosis conditions; Available effective 2011Q1 |
| SDX12 | Secondary/Other Diagnosis Code (12) | 182-188 | X(7) | Defines additional diagnosis conditions; Available effective 2011Q1 |
| SDX13 | Secondary/Other Diagnosis Code (13) | 189-195 | X(7) | Defines additional diagnosis conditions; Available effective 2011Q1 |
| SDX14 | Secondary/Other Diagnosis Code (14) | 196-202 | X(7) | Defines additional diagnosis conditions; Available effective 2011Q1 |
| SDX15 | Secondary/Other Diagnosis Code (15) | 203-209 | X(7) | Defines additional diagnosis conditions; Available effective 2011Q1 |
| SDX16 | Secondary/Other Diagnosis Code (16) | 210-216 | X(7) | Defines additional diagnosis conditions; Available effective 2011Q1 |
| SDX17 | Secondary/Other Diagnosis Code (17) | 217-223 | X(7) | Defines additional diagnosis conditions; Available effective 2011Q1 |
| | **Procedure Codes** | | | |
| PPX | Principal Procedure Code | 224-230 | X(7) | Defines principal procedure; No longer available effective 2007Q3 |
| SPX1 | Secondary Procedure Code (1) | 231-237 | X(7) | Defines additional procedure; No longer available effective 2007Q3 |
| SPX2 | Secondary Procedure Code (2) | 238-244 | X(7) | Defines additional procedure; No longer available effective 2007Q3 |
| SPX3 | Secondary Procedure Code (3) | 245-251 | X(7) | Defines additional procedure; No longer available effective 2007Q3 |

**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

| FIELD NAME | DATA ELEMENT DESCRIPTION | DATA FILE LOCATION | FORMAT * / SIZE | NOTES |
|---|---|---|---|---|
| | *AMBULATORY/OUTPATIENT PROCEDURE DATA FILE LAYOUT* | | | |
| SPX4 | Secondary Procedure Code (4) | 252-258 | X(7) | Defines additional procedure; No longer available effective 2007Q3 |
| SPX5 | Secondary Procedure Code (5) | 259-265 | X(7) | Defines additional procedure; No longer available effective 2007Q3 |
| | **Procedure Day of Week** | | | |
| PPXDOW | Principal Procedure Day | 266 | X(1) | Code for day of principal procedure (1 - 7) ; No longer available effective 2007Q3 |
| SPX1DOW | Secondary Procedure Code (1) Day | 267 | X(1) | Code for day of additional procedure (1 - 7) ; No longer available effective 2007Q3 |
| SPX2DOW | Secondary Procedure Code (2) Day | 268 | X(1) | Code for day of additional procedure (1 - 7) ; No longer available effective 2007Q3 |
| SPX3DOW | Secondary Procedure Code (3) Day | 269 | X(1) | Code for day of additional procedure (1 - 7) ; No longer available effective 2007Q3 |
| SPX4DOW | Secondary Procedure Code (4) Day | 270 | X(1) | Code for day of additional procedure (1 - 7) ; No longer available effective 2007Q3 |
| SPX5DOW | Secondary Procedure Code (5) Day | 271 | X(1) | Code for day of additional procedure (1 - 7) ; No longer available effective 2007Q3 |
| | **Physician Data** | | | |
| REFID | Referring Physician – state license | 272-280 | X(9) | ID of referring physician; No longer available effective 2007Q3 |
| ATTID | Attending Physician – state license | 281-289 | X(9) | ID of attending physician; No longer available effective 2007Q3 |
| OPERID | Operating Physician – state license | 290-298 | X(9) | ID of operating physician |
| OTHPROVQ1 | Other Provider – Provider Type Qualifier (1) | 299-300 | X(2) | Code to identify if referring, other operating, or rendering physician; Available effective 2011Q1 |
| OTHPROVID1 | Other Provider – Secondary Identifier (1) – state license | 301-309 | X(9) | ID of other physician; Available effective 2011Q1 |
| OTHPROVQ2 | Other Provider – Provider Type Qualifier (2) | 310-311 | X(2) | Code to identify if referring, other operating, or rendering physician; Available effective 2011Q1 |
| OTHPROVID2 | Other Provider – Secondary Identifier (2) – state license | 312-320 | X(9) | ID of other physician; Available effective 2011Q1 |
| | **Payer Identification** | | | |
| PAYTYPE1 | Primary | 321-322 | X(2) | Defines primary payer |
| PAYTYPE2 | Secondary | 323-324 | X(2) | Defines secondary payer |

**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

| | | | | |
|---|---|---|---|---|
| <td colspan="5" align="center">*AMBULATORY/OUTPATIENT PROCEDURE DATA FILE LAYOUT*</td> |
| **FIELD NAME** | **DATA ELEMENT DESCRIPTION** | **DATA FILE LOCATION** | **FORMAT * / SIZE** | **NOTES** |
| PAYTYPE3 | Tertiary | 325-326 | X(2) | Defines tertiary (third-stage) payer |
| ESTPAYER | Estimated Payer Code | 327-328 | X(2) | No longer available effective 1998Q3 |
| HEALTHPLANID1 | Payer ID/Health Plan ID (NAIC) | 329-343 | X(15) | Primary payer/health plan; (field name changed from "NAIC" and field size changed from 7 starting 2007Q3) |
| | **Additional Data Elements** | | | |
| BILLTYPE | Type of Bill | 344-347 | X(4) | Defines type of bill; (field size changed from 3 starting 2007Q3) |
| PCMU | Procedure Coding Method Used | 348 | X(1) | Procedure coding method; No longer available effective 2007Q3 |
| CANCER1 | Cancer Code 1 | 349 | X(1) | Available 1998Q4 through 2005Q4 |
| CANCER2 | Cancer Code 2 | 350 | X(1) | Available 1998Q4 through 2005Q4 |
| | **Summary Charges** | | | |
| ROOMCHG | Room & Board Charges | 351-361 | X(11) | Total room and board charges |
| ANCLRCHG | Ancillary Charges | 362-372 | X(11) | Total ancillary charges |
| DRUGCHG | Drug Charges | 373-383 | X(11) | Total drug charges |
| EQUIPCHG | Equipment Charges | 384-394 | X(11) | Total equipment charges |
| SPECLCHG | Specialty Charges | 395-405 | X(11) | Total specialty charges |
| MISCCHG | Miscellaneous Charges | 406-416 | X(11) | Total of other charges |
| TOTALCHG | Total Charges | 417-427 | X(11) | Total charges excluding professional fees/charges |
| NONCVCHG | Non-covered Charges | 428-438 | X(11) | Total non-covered charges |
| PROFCHG | Professional Fees | 439-449 | X(11) | Total professional services fees/charges |
| | **Procedure Days After Admission** | | | |
| PXDTAA | Principal Procedure Days in between | 450-457 | X(8) | Number of days between date of admission to principal procedure; No longer available effective 2007Q3 |
| SPXDTAA1 | Secondary Procedure (1) Days in between | 458-465 | X(8) | Number of days between date of admission to procedure; No longer available effective 2007Q3 |
| SPXDTAA2 | Secondary Procedure (2) Days in between | 466-473 | X(8) | Number of days between date of admission to procedure; No longer available effective 2007Q3 |
| SPXDTAA3 | Secondary Procedure (3) Days in between | 474-481 | X(8) | Number of days between date of admission to procedure; No longer available effective 2007Q3 |

**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

<table>
<tr><td colspan="5" align="center">*AMBULATORY/OUTPATIENT PROCEDURE DATA FILE LAYOUT*</td></tr>
<tr>
<th>FIELD NAME</th>
<th>DATA ELEMENT DESCRIPTION</th>
<th>DATA FILE LOCATION</th>
<th>FORMAT * / SIZE</th>
<th>NOTES</th>
</tr>
<tr>
<td>SPXDTAA4</td>
<td>Secondary Procedure (4) Days in between</td>
<td>482-489</td>
<td>X(8)</td>
<td>Number of days between date of admission to procedure; No longer available effective 2007Q3</td>
</tr>
<tr>
<td>SPXDTAA5</td>
<td>Secondary Procedure (5) Days in between</td>
<td>490-497</td>
<td>X(8)</td>
<td>Number of days between date of admission to procedure; No longer available effective 2007Q3</td>
</tr>
<tr>
<td></td>
<td>**Physician Data – National Provider Identifier (NPI)**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OPERNPI</td>
<td>Operating physician - NPI</td>
<td>498-508</td>
<td>X(11)</td>
<td>ID of operating physician; Available effective 2015Q3</td>
</tr>
<tr>
<td>OTHPROV1NPI</td>
<td>Other Provider – Secondary national provider identifier number (1) - NPI</td>
<td>509-519</td>
<td>X(11)</td>
<td>ID of other physician; Available effective 2015Q3</td>
</tr>
<tr>
<td>OTHPROV2NPI</td>
<td>Other Provider – Secondary national provider identifier number (2) - NPI</td>
<td>520-530</td>
<td>X(11)</td>
<td>ID of other physician; Available effective 2015Q3</td>
</tr>
</table>

**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

<table>
<tr><td colspan="5" align="center">*AMBULATORY/OUTPATIENT SUPPLEMENTAL PROCEDURE FILE LAYOUT*<br><br>*NEW FILE EFFECTIVE 2007Q3*<br><br>Use the SYSID field with the YEAR, QUARTER, and CLAIMTYPE fields to successfully link these records to the corresponding records in the ambulatory/outpatient procedure data file(s).</td></tr>
<tr><th>FIELD NAME</th><th>DATA ELEMENT DESCRIPTION</th><th>DATA FILE LOCATION</th><th>FORMAT* / SIZE</th><th>NOTES</th></tr>
<tr><td></td><td>**Record Identification**</td><td></td><td></td><td></td></tr>
<tr><td>SYSID</td><td>System assigned unique record sequence number</td><td>01-07</td><td>X(7)</td><td>Unique code for each record for each quarter</td></tr>
<tr><td>YEAR</td><td>Processing Year</td><td>08-11</td><td>X(4)</td><td>Year</td></tr>
<tr><td>QUARTER</td><td>Processing Quarter</td><td>12</td><td>X(1)</td><td>Quarter of year</td></tr>
<tr><td>CLAIMTYPE</td><td>Data Type</td><td>13</td><td>X(1)</td><td>An indicator to identify type of record</td></tr>
<tr><td></td><td>**Procedure Data**</td><td></td><td></td><td></td></tr>
<tr><td>HCPCSRAT</td><td>HCPCS Codes + modifiers(s)</td><td>14-27</td><td>X(14)</td><td>The Healthcare Common Procedure Coding System (HCPCS) applicable to ancillary service and outpatient bills</td></tr>
<tr><td>PXDOW</td><td>Procedure day of week</td><td>28</td><td>X(1)</td><td>Code for day of procedure (1-7)</td></tr>
<tr><td>DAYSBETW</td><td>Procedure Days After Services Began</td><td>29-36</td><td>X(8)</td><td>Number of days between procedure and date services began</td></tr>
</table>

**\*<u>Field Format</u>**
X=text
9=numeric

**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

| | | | |
|---|---|---|---|
| | **FACILITY PROFILE FILE LAYOUT** (Quote/comma delimited format) | | |
| **FIELD NAME** | **DATA ELEMENT NAME** | **FORMAT\* / SIZE** | **NOTES** |
| PAF | Pennsylvania Facility Number (PAF) | X(4) | PHC4 assigned facility code |
| FACNAME | Facility Name | X(100) | Name of facility |
| FACTYPE | Facility Type | X(3) | Defines type of facility; Available effective 1995Q1 |
| BEDCOUNTS | Facility bed count | 9(6) | Number of licensed beds |
| REGION | Facility Region Code | X(1) | PHC4 assigned Region code (1 - 9) |
| ZIP | Facility Zip Code | X(10) | Facility Zip code |
| COUNTY | Facility County Code | X(3) | PA county code (1 - 67) |
| NPI | National Provider Identifier | X(15) | Unique identification number assigned to the provider; Available effective 2007Q3 |
| MAID | Master Provider Index | X(15) | PA Medical Assistance Identifier; Available 1990Q1 through 2007Q2; (field name changed from "UNITID1" starting 2003Q4) |
| UNITTYPE1 | Unit Type (1) | X(3) | Defines type of unit; Available 1990Q1 through 2003Q3 |
| UNITID2 | Unit ID (2) | X(15) | MAID unit code; Available 1990Q1 through 2003Q3 |
| UNITTYPE2 | Unit Type (2) | X(3) | Defines type of unit; Available 1990Q1 through 2003Q3 |
| UNITID3 | Unit ID (3) | X(15) | MAID unit code; Available 1990Q1 through 2003Q3 |
| UNITTYPE3 | Unit Type (3) | X(3) | Defines type of unit; Available 1990Q1 through 2003Q3 |
| UNITID4 | Unit ID (4) | X(15) | MAID unit code; Available 1990Q1 through 2003Q3 |
| UNITTYPE4 | Unit Type (4) | X(3) | Defines type of unit; Available 1990Q1 through 2003Q3 |
| UNITID5 | Unit ID (5) | X(15) | MAID unit code; Available 1990Q1 through 2003Q3 |
| UNITTYPE5 | Unit Type (5) | X(3) | Defines type of unit; Available 1990Q1 through 2003Q3 |
| IPDISCH | Inpatient Discharges | 9(8) | Total discharges for facility during the quarter |
| OPDISCH | Outpatient Records | 9(8) | Total outpatient cases for facility during the quarter; Available effective 1996Q1 |
| ADDRESS1 | Facility Address: Line 1 | X(200) | First line of facility address; Available effective 2016Q2 |
| ADDRESS2 | Facility Address: Line 2 | X(200) | Second line of facility address; Available effective 2016Q2 |
| CITY | Facility Address: City | X(50) | City where facility is located; Available effective 2016Q2 |

**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

| | PHYSICIAN PROFILE FILE LAYOUT | | |
|---|---|---|---|
| | (Quote/comma delimited format) | | |
| **FIELD NAME** | **DATA ELEMENT NAME** | **FORMAT\* / SIZE** | **NOTES** |
| LICENSE/NPI | Physician License Number/National provider identifier | X(11) | PA assigned license number; Available 1990Q1 through 2015Q2: |
| | | | National Provider Identifier number; Available effective 2015Q3 |
| LASTNAME | Physician Last Name | X(40) | Last name of physician |
| FIRSTNAME | Physician First Name and/or Initials | X(40) | First name and/or initials of physician |
| MATCHINDICATOR | Match Indicator | X(3) | Flag Indicator; Available effective 2006Q1 |

**Ambulatory/Outpatient Procedure Data File and Supporting Documentation File Layouts (UB04), 1996- Present**

## STATE & COUNTRY CODES

| | | | |
|---|---|---|---|
| AL – Alabama | IL – Illinois | MT – Montana | PR – Puerto Rico |
| AK – Alaska | IN – Indiana | NE – Nebraska | RI – Rhode Island |
| AZ – Arizona | IA – Iowa | NV – Nevada | SC – South Carolina |
| AR – Arkansas | KS – Kansas | NH – New Hampshire | SD – South Dakota |
| CA – California | KY – Kentucky | NJ – New Jersey | TN – Tennessee |
| CO – Colorado | LA – Louisiana | NM – New Mexico | TX – Texas |
| CT – Connecticut | ME – Maine | NY – New York | UT – Utah |
| DE – Delaware | MD – Maryland | NC – North Carolina | VT – Vermont |
| DC – District of Columbia | MA – Massachusetts | ND – North Dakota | VI – Virgin Islands |
| FL – Florida | MI – Michigan | OH – Ohio | VA – Virginia |
| GA – Georgia | MN – Minnesota | OK – Oklahoma | WA – Washington |
| HI – Hawaii | MS – Mississippi | OR – Oregon | WV – West Virginia |
| ID – Idaho | MO – Missouri | PA – Pennsylvania | WI – Wisconsin |
| | | | WY – Wyoming |

## PENNSYLVANIA COUNTY CODES

| | | | |
|---|---|---|---|
| 001 – Adams (Region 5) | 018 – Clinton (Region 4) | 035 – Lackawanna (Region 6) | 052 – Pike (Region 6) |
| 002 – Allegheny  (Region 1) | 019 – Columbia (Region 4) | 036 – Lancaster (Region 5) | 053 – Potter (Region 2) |
| 003 – Armstrong (Region 1) | 020 – Crawford (Region 2) | 037 – Lawrence (Region 2) | 054 – Schuylkill (Region 7) |
| 004 – Beaver (Region 1) | 021 – Cumberland  (Region 5) | 038 – Lebanon (Region 5) | 055 – Snyder (Region 4) |
| 005 – Bedford (Region 3) | 022 – Dauphin (Region 5) | 039 – Lehigh (Region 7) | 056 – Somerset (Region 3) |
| 006 – Berks (Region 7) | 023 – Delaware (Region 8) | 040 – Luzerne (Region 6) | 057 – Sullivan (Region 6) |
| 007 – Blair (Region 3) | 024 – Elk (Region 2) | 041 – Lycoming (Region 4) | 058 – Susquehanna (Region 6) |
| 008 – Bradford (Region 6) | 025 – Erie (Region 2) | 042 – McKean (Region 2) | 059 – Tioga (Region 4) |
| 009 – Bucks (Region 8) | 026 – Fayette (Region 1) | 043 – Mercer (Region 2) | 060 – Union (Region 4) |
| 010 – Butler (Region 1) | 027 – Forest (Region 2) | 044 – Mifflin (Region 4) | 061 – Venango (Region 2) |
| 011 – Cambria (Region 3) | 028 – Franklin (Region 5) | 045 – Monroe (Region 6) | 062 – Warren (Region 2) |
| 012 – Cameron (Region 2) | 029 – Fulton (Region 5) | 046 – Montgomery (Region 8) | 063 – Washington (Region 1) |
| 013 – Carbon (Region 7) | 030 – Greene (Region 1) | 047 – Montour (Region 4) | 064 – Wayne (Region 6) |
| 014 – Centre (Region 4) | 031 – Huntingdon (Region 5) | 048 – Northampton (Region 7) | 065 – Westmoreland (Region 1) |
| 015 – Chester (Region 8) | 032 – Indiana (Region 3) | 049 – Northumberland (Region 4) | 066 – Wyoming (Region 6) |
| 016 – Clarion (Region 2) | 033 – Jefferson (Region 2) | 050 – Perry (Region 5) | 067 – York (Region 5) |
| 017 – Clearfield (Region 2) | 034 – Juniata (Region 5) | 051 – Philadelphia (Region 9) | |