

- Unique Population File Layout

Field/Data Name	Size	Actual Positions		Remarks
		From	To	
AHCCCS ID	9	1	9	
BHS Type	6	10	15	
Health Plan ID	6	16	21	
Last Name	20	22	41	
First Name	10	42	51	
Middle Initial	1	52	52	
Date of Birth	10	53	62	YYYY/MM/DD
Begin Date	10	63	72	YYYY/MM/DD
End Date	10	73	82	YYYY/MM/DD 9999/12/31 indicates no end date
Eligibility Desc	39	83	121	
Filler	79	122	200	