

REPORTING and PROCEDURES MANUAL

for

Texas Health-Related Institutions

Current Version

In Effect Spring 2023

Foreword

The reports discussed in this <u>Health-Related Institution</u> manual fulfill provisions of the Higher Education Coordinating Act of 1965 as amended (codified as Subtitle B, Chapter 61, Texas Education Code, 1971).

All reports must be submitted electronically. (See detail in Electronic Data Transfer System section of manual.) Associated with each report is a set of instructions for preparing the data in the Coordinating Board format.

If you need to write to the Educational Data Center, the address is:

Educational Data Center
Texas Higher Education Coordinating Board
P.O. Box 12788
Austin, TX 78711

The fax number is (512) 427-6147.

If you have questions concerning the use or implementation of this manual, contact Tanya Trevino or John Dinning at the above address or at the following telecommunication numbers:

	<u>Telephone</u>	Email Address
Tanya Trevino	(512) 427-6123	Tanya.Trevino@highered.texas.gov
John Dinning	(512) 427-6137	John Dinning@highered.texas.gov

Click on <u>Memos Related to Changes to the CBM Manual for Health-Related Institutions</u> for memos related to changes made to the *Reporting and Procedures Manual* prior to the memo(s) appearing in this manual.

Health-Related Institutions

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Additional Reports/Important Dates

Preliminary Headcount Enrollment – Preliminary 12th class day fall enrollment due third week of September of each year for release in October

Nursing Shortage Reduction Program (NSRP) – CBM009 data submitted annually by October 1 of each year to count nursing graduates for funding; the nursing graduates must be error-free to be counted (for participating institutions)

Graduate Medical Education (GME) Funding – Certified CBM00R data submitted annually, run in October of even years; must be certified by October 1 to be included in the formula calculation

Cost Study – Certified fiscal year CBM001 data run in December of each year

Accountability – Certified fall CBM reports run December 1 of each year

Space Model – Certified fall CBM001, CBM008, and annual CBM00R run in December of each year

Formula Funding for Appropriations -

- Initial run in October of even years using prior spring CBM001 hours; sent to the LBB in November
- Final run in February of odd years using certified base year CBM001 hours

Reporting Periods

The following is a schedule of due dates for the reports contained in this manual.

Fall Semester Reports (Fall Quarter)		Initial Submission Due Date	Certification Date
Student Report Faculty Report	CBM001* CBM008	October 15 October 15	November 15 November 15
Spring Semester Reports (Winter Quarte	<u>r)</u>	Initial Submission Due Date	Certification Date
Student Report Student Report	CBM001 CBM001	February 15 in Odd Year March 15	March 15 April 15
Summer Semester Reports (Spring & Su	mmer Qtrs)	Initial Submission Due Date	Certification Date
Student Report	CBM001	August 15	September 15
Annual Reports Graduation Report Residents/Fellows Report	CBM009 CBM00R*	Initial Submission Due Date October 1 October 1	Certification Date November 1 November 1
Any Time Reports		Due Date	
Student Number Change Report Facilities Room Inventory Report Facilities Building Inventory Report	CBM00N CBM011 CBM014	Any Time January – October certified by Nov. 1 January – October certified by Nov. 1	

^{*}Note – Error-free due on October 15th in even years for Formula Funding calculations

Coordinating Board Contacts

- I. CBM Reporting: Educational Data Center, 512-427-6302, FAX: 512-427-6147
 - A. All Health-Related Institutions' CBM Reports Tanya Trevino, Data Analyst 512-427-6123 Tanya.Trevino@highered.texas.gov
 - B. EDC and MOVEit Portals
 Doug Parker, Data Analyst 512-427-6136
 Douglas.Parker@highered.texas.gov
 - C. General Questions
 John Dinning, Director 512-427-6137

 <u>John.Dinning@highered.texas.gov</u>
- II. Program Inventory and CIP Questions: Graduate and Professional Education, FAX: 512-427-6249 James Goeman, PhD, Director 512-427-6217 <u>James.Goeman@highered.texas.gov</u>
- III. Financial Aid Database: Educational Data Center, FAX: 512-427-6147 Tanya Trevino, Data Analyst 512-427-6123 Tanya.Trevino@highered.texas.gov
- IV. Funding Questions: Finance and Resource Planning, FAX: 512-427-6147 Jennifer Gonzales, Senior Director 512-427-6235 Jennifer.Gonzales@highered.texas.gov
- V. Residents and Postdoctoral/Research Fellows Questions: Finance and Resource Planning, FAX: 512-427-6147
 Jennifer Gonzales, Senior Director 512-427-6235
 Jennifer.Gonzales@highered.texas.gov
- VI. Student Tuition and Residency Issues: Student Services, FAX: 512-427-6420 DeCha Reid, Senior Director 512-427-6393 DeCha.Reid@highered.texas.gov

Electronic Data Transfer System

The submission of CBM reports must be by electronic transfer. If any data items need to be changed, make the changes to your file and re-submit it as a complete report.

State and federal security requirements mandate that confidential data be transferred using a secure process. New and modified CBM reports are required to be submitted through the new EDC Portal which can be accessed via CBPass. All other CBM reports are required to be submitted or retrieved via the MOVEit® DMZ portal. Institutions will be able to access the secure site using a web browser or a SFTP client (FileZilla, WinSCP, SSH Secure, etc.). Detailed instructions for MOVEit® DMZ are available on the CB Data Exchange page - Data Submission & Reporting - Texas Higher Education Coordinating Board.

You may create the data file containing a header record, data records, and a trailer record by whatever method available.

The data content of the files will be as defined in the Data Processing Record Layout of each report in this manual. The format and content of the HEADER and TRAILER records are critical and must be valid. Identification of the data depends totally on the accuracy of the information contained in the header record.

File Transfer System Input File Format

HEADER R	ECORD	Beginning <u>Position</u>	<u>Length</u>
Item #1	File Label-ID – Always 'HY2K'	1	4
Item #2	Institution Code - FICE - Numeric	5	6
Item #3	Data Identifier, e.g., CBM009	11	6
Item #4	Semester – Numeric ('1', '2', '3', or '5')	17	1
Item #5	Year – Numeric - YYYY	18	4
Item #6	Record Type – C for a Complete report	22	1
Item #7	Length of data records within report – Numeric, leading zeros, i.e., "0080", "0102", "0120", "0136"	23	4
Item #8	Name and E-mail address of person submitting file	27	As Required

NOTE: Use a space (not a special character) to separate the name and e-mail address. The length of the record may extend up to 400 characters in order to contain the name and e-mail address.

DATA RECORDS

For CBM Reports, data record formats must match the record formats specified in the documentation for each report.

Record size may be any length up to 400 characters

TRAILER RECORD		Beginning <u>Position</u>	<u>Length</u>
Item #1	File Label-ID – Always 'EOF1'	1	4
Item #2	Record Count – Numeric, leading zeros (Number of data records in file, not including "Header" and "Trailer" records)	5	5

Edit Report Output Files

The following file name is an example of the naming convention used for the edit report output files:

CBM009_FALL_2020_H_002201_202010150136262.TXT

CBM009 – CBM report type

- used as a separator

FALL – the report semester (can also be SPRING, SUMMER, ANNUAL)

- used as a separator

2020 - Report Year

_ - used as a separator

H - Institution type

- used as a separator

002201– FICE code of institution

used as a separator

202010150136262 – Date Time stamp (Year, Month, Day, Hour, Minute, Second, Tenth of Second)

Edit Summary Report Year-to-Year Comparisons

The standard Summary Report is compared to the previous year to aid in early detection of potentially erroneously reported data. It shows the percentage increase/decrease of items and evaluates the items identified with a Review message. If the absolute value of the difference between the current year and prior year item is:

- 1) less than 50, a Review message is not printed;
- 2) between 50 and 10,000, a percentage change greater than 25% is identified;
- 3) between 10,000 and 100,000, a percentage change greater than 20% is identified; or
- 4) greater than 100,000, a percentage change greater than 10% is identified.

If the original report had only one column, the comparison data is in the adjacent column. If the original report had multiple columns, the comparison data is in the next row and asterisks are printed below the column in question.

Certification Tracking

The goal of these procedures is to have the CBM reports collected by the Educational Data Center and certified by the institutions as available for use within <u>four</u> working weeks of the due date. Since there are six edit cycles each workday, turn-around time should be less of an issue. Also, the desire is to have the most current data available for formula committee work, accountability measures, and appropriation requests. Here is a fall example of the follow-up procedures for ensuring timely certification of the reports are:

- 1. The EDC Data Analyst will telephone or e-mail the Reporting Official if there has been no initial submission of a specific report within 2 weeks of the due date or if a specific report is not received within two days after the certification date.¹
- An email from the Director of the Educational Data Center will be sent to the Reporting Official if the report has not been received and certified by December 1st.
- 3. An inquiry letter will be emailed to the THECB liaison from the Assistant Commissioner if the report has not been received and certified by December 8th.
- 4. A letter indicating that the certification of the CB report is delinquent will be emailed to the President from the Assistant Commissioner if the report has not been certified by December 15th.

CHANGES TO CERTIFIED REPORTS

- A. Changes to certified data will not be permitted unless an executive officer of the reporting institution requests the change in writing and the reporting error would have a significant impact on future year funding or statistical analysis.
- B. Requests made prior to the data being published may be approved by the Educational Data Center and must not delay standard publish dates.
- C. Requests to change data which are already published must be approved by the Commissioner.

Certification Statement Instructions

When the edit materials for a CBM report are returned to the reporting institution for verification, one of two actions is required. If the edit reveals errors in the report, corrections should be submitted. Justification of all "Review" items is **required** before certification can be applied. When all the information is correct, the reporting official certifies the report by completing a certification statement and returning it to the Educational Data Center. An e-mail stating which report is certified is an acceptable alternative.

The example below shows the certification of Lone Star Health Science Center's Fall 2021 CBM001, CBM008, and CBM009.

CERTIFICATION STATEMENT INSTITUTION: LONE STAR HEALTH SCIENCE CENTER 002201 DATE: NOVEMBER 1, 2021 I hereby certify that the following report(s) is (are) correct and the data are usable in all output reports. REPORT NUMBER SEMESTER AND YEAR CBM001 Fall 2021 CBM008 Fall 2021 CBM009 Fall 2021 Justification of Review items is as follows: REPORTING OFFICIAL

CBM001 Student Report

The health-related institution (HRI) CBM001 report reflects all students enrolled at the reporting institution as of the official census date, which is the 12th class day for the fall and spring semesters (16-week session) and the 4th class day for each of the summer terms (6-week session). To be counted for state funding, the students must be registered as of the official census date, and the institution must collect in full from the student (or have a valid accounts receivable on record) by the 20th class day or the 15th class day during summer sessions. Students are required to have a fully operational installment contract (in accordance with Chapter 54, Section 54.007 of the Texas Education Code) by the payment due date in order to be in good standing. This includes receipt of a first installment payment prior to the beginning of the semester.

Students who withdraw from the institution prior to or on the official census date will not be reported for that term. The CBM001 report provides an unduplicated headcount of all students registered at the reporting institution, whether a student's courses are taught on-campus or off-campus, or whether the student is in an academic or professional practice program.

Students who are participating in joint degree programs (e.g., MD/PhD) should be classified according to the majority of course work they are enrolled in during the semester. For example, if a jointly admitted student is completing the second year of medical school, the student should be reported in Item #5 as 'B.' However, if that student is enrolled primarily in PhD courses or lab work, the student should be reported in Item #5 as '7.'

Students will be reported in each term (fall, spring, or summer) if they have not withdrawn from classes by the census date of the term. Use the latest occurring academic census date as the census date for medical and dental programs. If other professional and academic programs have different start-dates, use the actual 12th class day in the fall and spring semesters as the census date for each program. Programs within a school/college may have different census dates.

All summer sessions will be combined into one report. When combined, the headcount reported should be non-duplicative. Combined reports should be coded as '3' (summer) in Item #14.

The student records for all components of the HRI will be submitted as one report under the FICE code of the health science center. The specific component in which each student is enrolled will be identified in Item #33.

Census Dates for other than 16 or 6 week terms are outlined below:

Fall and Spring Semesters		Summer Semester	
Length of Term (Weeks)	Length of Term (Weeks) Census Date		Census Date
2 or less	1st Class Day	2 or less	1st Class day
3	2nd Class Day	3	2nd Class Day
4	3rd Class Day	4	3rd Class Day
5 – 6	4th Class Day	5 – 6	4th Cass Day
7	5th Class Day	7	5th Class Day
8	6th Class Day	8	6th Class Day
9 – 10	7th Class Day	9	7th Class Day
11	8th Class Day	10 or more	12th Class Day
12	9th Class Day		· ·
13 – 14	10th Class Day		
15	11th Class Day		
16	12th Class Day		

Flexible Entry Students

Students enrolled in classes organized after the official census date should be included in the data submitted in the semester following; i.e., (1) students enrolled in the classes organized after the 12th class day of the fall semester will be reported in the following spring semester 12th class day report; (2) students enrolled in classes organized after the 12th class day of the spring semester will be reported in the summer semester report; etc. These students will be identified by inserting a '1' in Item #17 to denote "flexible entry."

NOTE: A class is organized when students have registered and have paid fees or established accounts receivable. Classes organized with regular semester classes, but whose first class day is not until after the term census date, may be reported as a regular class, except:

- A. Students who register for the class after the term census date cannot have the hours reported for state funding on the CBM001;
- B. Students who drop the class before its first class day cannot be reported for state funding on the CBM001.

Inter-institutional Credit Hours

If the instruction of a student is being provided by the faculty of another institution, both the institution in which the student is enrolled and the institution providing the faculty instruction cannot claim the credit hours attempted by the student. If the institution providing the instruction reports the student's credit hours, then the institution in which the student is enrolled shall report the student's credit hours as inter-institutional. Neither the location of the class nor the delivery mode affects the reporting.

Remote Teaching Sites

Use the assigned FICE codes below to identify the location of a remote teaching site on the student report in Item #34. Please contact John Dinning at John.Dinning@highered.texas.gov to make any changes to the following institution locations. Documentation, such as legislative authorization, is required for the addition of teaching sites.

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The Texas A&M University System Health Science Center
      000850 Dallas Campus (Baylor College of Dentistry, School of Graduate Studies)
      000851 Austin (School of Rural Public Health)
      000852 Houston Downtown Campus (Institute for Biosciences and Technology, School
               of Graduate Studies. School of Rural Public Health)
      000853 Round Rock Campus (College of Medicine, College of Nursing, School of Rural
               Public Health)
      000854 Temple Campus (College of Medicine, School of Graduate Studies, School of
               Rural Public Health)
      000855 Houston (Health Science Center)
      000856 Kingsville Campus (Irma Rangel College of Pharmacy, School of Graduate
               Studies)
      000857 McAllen Campus (School of Rural Public Health)
Texas Tech University Health Sciences Center
      000860 Amarillo (Graduate School of Biomedical Sciences, School of Allied Health,
               School of Medicine, School of Pharmacy)
      000861 Abilene (School of Nursing, School of Pharmacy)
      000863 Midland (School of Allied Health)
      000864 Odessa (School of Allied Health, School of Medicine, School of Nursing)
      000866 Dallas (School of Pharmacy)
The University of Texas Health Science Center at Houston
      000871 Austin (School of Public Health)
      000872 Brownsville RAHC (School of Public Health)
      000874 Dallas (School of Public Health)
      000876 El Paso (School of Nursing, School of Public Health)
      000878 San Antonio (School of Public Health)
      000879 Smithville (Grad School of Biomedical Science)
The University of Texas Health Science Center at San Antonio
      000880 Edinburg Research Division (Medical School)
      000882 Harlingen Research Division (Medical School)
      000884 Laredo Research Division (Medical School, School of Health Professions)
      000886 McAllen Research Division (Medical School)
      000312 Houston (The Center for Hearing and Speech)
The University of Texas M.D. Anderson Cancer Center
      000896 Veterinary Science Bastrop
      000898 Science Park Operations Smithville
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The University of Texas Medical Branch at Galveston 000870 Austin (Medical School)

Multi-Campus Adjustment

Institutions seeking to add a site to the Multi-Campus Adjustment must complete the HRI Multi-Site Adjustment Form that can be found on the following page - Space Projection Model - Texas Higher Education Coordinating Board. The form contains instructions and eligibility requirements.

Reporting Semester Credit Hours

Item #10 should be the total SCH a student attempted in the current term. For undergraduate students, Item #10 should equal the sum of the other SCH Items (#16, #22, #24, and #25):

Item #16 - SCH in inter-institutional courses that DO qualify for state funding

Item #22 - SCH in collegiate courses that DO NOT qualify for state funding

Item #24 - SCH in inter-institutional courses that DO NOT qualify for state funding

Item #25 - SCH in collegiate courses that DO qualify for state funding

These items are mutually exclusive. When combined, they represent the total semester credit hours for a student.

<u>Undergraduate Semester Credit Hours in Excess of State Limit</u> and <u>Formula Funding Exceptions for</u> Repeated Courses

See rules at https://www.highered.texas.gov/about-us/rules-statutes/, Chapter 13, Subchapter F, Section 13.100-13.109.

<u>Undergraduate Students Approaching Funding Limit for a Baccalaureate Degree</u>

Six reports are produced each edit run – three for students affected by the 45-hour funding limit and three for students affected by the 30-hour funding limit. The reports identify those students who are approaching the funding limit (within 30 SCH of the limit), who will exceed the funding limit in the following semester, and who exceed the funding limit (prior to the semester reports). Item #28, Student Affected by Undergraduate Funding Limitation, will be used to determine the funding limit the student is affected by. The total number of undergraduate SCH the student has accumulated and Item #27, SCH of Undergraduate Degree Program, will be used to determine if the student will appear on any of the reports.

Funding Limitation for Doctoral Students

The statutory limitation of 99 funded SCHs per doctoral student and the allowable exceptions for funding up to 130 hours are described in the Texas Education Code (TEC), 61.059 (1) through (3). Two reports are provided during each CBM001 edit cycle. One report provides the students who have exceeded 70 doctoral SCHs, but who have not exceeded 99 doctoral SCHs. The other report identifies the students who have exceeded the 99 doctoral SCH limit. Prior to the formula runs each base year, each institution is given the opportunity to identify which of their doctoral students should be granted program or individual exceptions during the next funding period.

Distance Education

Institutions should not report non-resident students who are taking only distance education courses delivered outside the state (Texas Administrative Code, Title 19, Part 1, Chapter 4, Subchapter P).

Instructions for Student Report

Note: The term "medical" used in the CBM001 refers to both MD and DO students.

Item #1 Record Code. Always enter '1' for all students.

Item #2 Institution Code. Enter the FICE Code of the health-related institution.

Item #3 Student Identification Number. Enter the social security number of the student. The institution will assign unique nine-digit identification numbers to students without social security numbers. A second record with the same student identification number will only be accepted if a student is being reported as a "flex-entry" student from a prior term and is enrolled in the current term being reported.

Item #4 Gender. Enter the gender of the student.

M = Male F = Female

Item #5 Classification. Enter the classification of the student.

1 Freshman 8 Doctor's Level-Professional Practice

Sophomore
 Junior
 Second Year Medical/Dental
 Senior
 Post-Baccalaureate
 A First Year Medical/Dental
 B Second Year Medical/Dental
 Third Year Medical/Dental
 Fourth Year Medical/Dental

6 Master's Level M Postdoctoral Specialty (Advanced Dentistry)

7 Doctor's Level-Research/ Scholarship

Use the following guidelines to classify students:

1 Freshman

2 Sophomore Institutions will use their guidelines

3 Junior for these categories

4 Senior

- 5 Post-Baccalaureate a student possessing a baccalaureate degree who has not been admitted to a graduate program and is not currently enrolled in an undergraduate degree program
- 6 Master's Level a student possessing a baccalaureate degree or the equivalent and admitted to a master's degree program at the institution
- 7 Doctor's Level-Research/Scholarship a student admitted to an approved research/scholarship doctoral degree program at the institution
- 8 Doctor's Level-Professional Practice a student admitted to an approved doctoral level professional practice program at the institution
- A First Year student in a Medical, Osteopathic Medical, Podiatric, or Dental degree program
- B Second Year student in a Medical, Osteopathic Medical, Podiatric, or Dental degree program

- C Third Year student in a Medical, Osteopathic Medical, Podiatric, or Dental degree program
- D Fourth Year student in a Medical, Osteopathic Medical, Podiatric, or Dental degree program
- M Postdoctoral Specialty (Advanced Dentistry) a post dental resident or advanced dentistry student who is contractually obligated or admitted to a professional dental specialty program at the institution
- Item #6 Date of Birth. Enter all four digits of the year and the two digits of the month and the day of birth for the student in the YYYYMMDD format.

YYYY = Year; MM = Month; DD = Day

NOTE: If the month of birth is known and the year is unknown, enter for unknown as '00000000'. If the year of birth is known and the month and day are unknown, code the month as '06' and the day as '01'.

- Item #7 Tuition Status. Enter the code indicating the status of the student for tuition purposes.
 - 1 Resident Tuition (regular)
 - 2 Non-Resident Tuition (regular)
 - 3 Tuition Exemption for Texas Resident
 - 5 Thesis or Dissertation
 - A Student classified as a resident based on Texas Education Code, Section 54.052(a)(3) who is not a U.S. citizen or permanent resident, but is allowed to pay resident tuition
 - C An applicant for permanent resident status or holder of a visa that allows a person to domicile in the U.S. who is classified as a resident and is allowed to pay resident tuition
 - E Tuition Waiver that allows non-resident or foreign students to pay the resident rate as well as recipients of Tuition Exemptions through Texas Education Code, Section 54.207 (Good Neighbor Scholarship)

NOTE:

- a) Students who are allowed to pay the "Resident Tuition" rate due to a waiver should be coded 'E'.
- b) Students who qualify as residents through the 36-months' residence in Texas and who are not U.S. citizens or permanent residents should be coded as 'A' if they are paying regular resident tuition. Students coded 'A' must complete the affidavit.
- c) Students who are eligible for permanent resident status (whose I-485 applications have not been rejected and are being processed by BCIS) and students who hold visas that allow them to domicile in the U.S. should be coded 'C' if they actually established a domicile in Texas and have been classified as residents eligible to pay regular resident tuition.
- Item #8 Residence. Enter the code representing the county, state, or foreign country of which the student is a resident as identified by the student as his/her permanent address at the time of application to the institution. See Appendix B for codes.

- a. Enter the Texas county code for students who are Texas residents
- b. Enter the state code for students who are U.S. citizens or permanent residents and who are residents of other states
- Enter the foreign country code for foreign country citizens who are not Texas residents

Item #9

Transfer Student or First-Time-in-College. Enter the FICE code (see Appendix A) of the institution of higher education from which a student transfers the first semester that the student enrolls at your institution. Enter '999999' for an out-of-state institution if the FICE code is not known. A transfer is a student entering the reporting institution for the first time, but who is known to have previously attended another postsecondary institution at the same level (e.g., undergraduate to undergraduate or graduate to graduate; not undergraduate to graduate). This does not include an institution's own graduates who enter for further education.

If the student has never attended college or other postsecondary institution, enter '000001' to indicate a first-time student. Also, include as first-time students those who entered with advanced standing (college credits earned before graduation from high school). For a first-time-entering medical or dental student (Item #5, Classification, coded an 'A') enter '000001' in this Item.

In the term that the student is accepted into a master's program, doctoral program, or doctoral professional practice program (e.g., AUD, PharmD, DNP, DRPH, DPT – refer to Item #35), enter '000001' in this item; otherwise, for a graduate or doctoral professional practice student leave blank, unless the student is a first-time transfer at that level. If the student is a first-time transfer, enter the FICE of the institution transferring from. This will allow the CB to determine time-to-degree of such students.

NOTE: A student should not be coded as first-time until he/she has completed high school.

Leave blank if not applicable.

Item #10 Semester Credit H

Semester Credit Hour Load. Enter the number of semester credit hours (SCHs) the student is registered for in the current semester. Item #10 should equal the sum of the other SCH items (#16, #22, #24, and #25). The SCHs attempted in courses that begin after the census date of the prior term, which are identified as flexible-entry, are to be reported in a separate record and a '1' entered in Item #17. Where applicable, convert quarter hours to semester hours – 3 quarter hours equal 2 semester hours; right justify with leading zeros. Do not enter decimals. Enter zeros for medical and dental students.

Item #11 Unused

Item #12 Unused

Item #13 Unused

Item #14 Semester. Enter the appropriate code.

- 1 Fall
- 2 Spring
- 3 Summer
- Item #15 Year. Enter all four digits of the calendar year in which the semester occurs.
- Inter-institution SCH Load. Enter the number of semester credit hours (SCHs) in inter-institutional courses the student is registered for during the current semester that DO qualify for state funding. Exclude SCHs attempted in inter-institutional courses that do not qualify for state funding (Item #24) and all other collegiate-level courses (Items #22 and #25). Inter-institutional classes are those in which the faculty and courses of one institution are provided to another institution's students and there is an inter-institutional agreement on file at the CB. For additional information, see section Inter-Institutional Credit Hours in the introduction. Enter zeros for medical and/or dental students.
- Item #17 Flexible Entry. Enter a '1' if the student is enrolled in a Flexible Entry (FE) class that is being reported this semester. Enter a '2' if a professional student is enrolled in academic class work as a "dual degree" student; item #33 will be the school code of the academic unit, Item #5 should include the classification corresponding to the professional student's dual degree, and Item #19 should include the CIP Code of the academic major. If the professional student is also engaged in their professional program, then they should also have a separate record with Item #17, Flexible Entry left blank. Enter a '4' if an academic student is taking inter-institutional courses at a health science center. Leave the item blank if not applicable.
- Item #18 <u>Correctional Entity</u>. If the student is confined in a correctional institution, enter a '5'. If not, leave the item blank. Not applicable for professional practice students.
- Item #19 Major Area of Concentration. Enter the CIP code of the major area of concentration. See Appendix C. Undergraduate, graduate, and professional medical and dental students should be coded with an appropriate major area; not undeclared. Use the general CIP code for graduate students who have not identified their specialty.

Item #20 Unused

- Item #21 Tuition Exemption/Waiver Code. When Item #7 is coded '3' and the student is a resident receiving a Hazlewood exemption (authorized in Texas Education Code 54.203), enter the code '01'; otherwise leave blank. When Item #7 is coded 'E' and the student is a nonresident eligible to pay the resident rate due to the state's waiver for members of the military and their families (Texas Education Code 54.058), enter '21'; otherwise leave blank.
 - 01 Exemption of certain veterans, dependents, etc. of the Armed Forces of the United States from payment of tuition
 - 21 Application of resident rather than nonresident tuition to military personnel and dependents

Item #22 SCH Load - NOT State Funded. Enter the number of attempted semester credit hours (SCHs) the student is registered for that DO NOT qualify for state funding during the current semester. Include SCHs of undergraduate classes that are not allowed to be state-funded if attempted three or more times. Exclude SCHs attempted in courses that are state-funded (Item #25) and all inter-institutional courses (Items #16 and #24). Examples are attempted SCHs of an undergraduate student who has exceeded the state limit and attempted SCHs of a student in physical education courses that are not allowed for state funding (see discussion on SCHs that exceed state limits in the introduction). Enter zeros for medical and dental students.

Item #23 Unused

- Item #24 SCH Load Inter-Institutional NOT State Funded. Enter the number of semester credit hours (SCHs) in inter-institutional courses the student is registered for during the current semester that DO NOT qualify for state funding. Exclude SCHs attempted in state-funded inter-institutional courses (Item #16) and all other collegiate-level courses (Items #22 and #25). Enter zeros for medical and dental students.
- Item #25 SCH Load State Funded. Enter the number of attempted semester credit hours (SCHs) the student is registered for that DO qualify for state funding during the current semester. Exclude SCHs attempted in collegiate courses that are not state-funded (Item #22) and all inter-institutional courses (Items #16 and #24). For more information, see section Inter-institutional Credit Hours in the introduction. Enter zeros for medical and dental students.

Item #26 Unused

- Item #27 SCH of Undergraduate Degree Program. Enter the number of semester credit hours (SCHs) the student is enrolled for in the undergraduate degree program. Enter '000' if the student is not classified as a senior. For students who have exceeded 100 hours and are not considered seniors, report the hours in the degree program. A student who is enrolled on a temporary basis or who has not enrolled in a degree program is considered to be enrolled in a degree program requiring a minimum of 120 SCHs. Enter zeros for students who are not undergraduates.
- Item #28 Student Affected by Undergraduate Funding Limitation. Enter a '1' if the student first enrolled in an institution of higher education in fall 1999 through summer 2006 (45-hour rule). Enter a '2' if the student first enrolled in an institution of higher education in the fall 2006 semester or later (30-hour rule). Otherwise enter a '0'. Not required for graduate students.
- Item #29 <u>Last Name</u>. Enter the student's last name. Truncate if the name contains more than 20 characters.
- Item #30 <u>First Name</u>. Enter the student's first name. Truncate if the name contains more than 10 characters.
- Item #31 Middle Name Initial. Enter the initial of the student's middle name.

- Item #32 Full-Time Equivalency of Student. Enter the student's percent of time enrolled, in relation to a full or normal workload at the institution, during the reporting period. Each institution has a policy that determines a full or normal workload. For an undergraduate, a long term workload may be 18 credit hours and 12 credit hours in the summer. For a master's student, a long term workload may be 15 credit hours and 9 credit hours in the summer. For a doctoral student, a long term workload may be 12 credit hours and 6 credit hours in the summer. An equivalency for a medical or dental student should be entered by semester too. In calculating an annual FTE, the fall and spring FTEs will be divided by 2 and the summer FTE will be divided by 3 and added per student. A student who enrolls in several courses, and the sum of the credit hours is in excess of a "normal" workload, is coded as 100 percent. A student may not be counted greater than 100 percent, or full-time.
- Item #33 School or College. Enter the six-digit assigned code of the school or college in which the student is to be funded, as identified in Appendix A.
- Item #34 Remote Teaching Site. Enter the six-digit assigned code of the remote teaching site listed, if one has been identified in the Remote Teaching Site section in the introduction, or enter the FICE code of the institution if the remote site is another institution. Include the semester credit hours in Item #11. If the student is not at a remote teaching site, leave blank.
- Item #35 Restricted Program Admission. The Coordinating Board uses restricted admission codes to distinguish students who have a declared major in a particular discipline from those who are actually admitted to a certificate or degree program through a restricted or separate admission process. The distinction provides more accurate enrollment and graduation numbers in key, high-demand occupations, and the data are often linked to special legislative initiatives.

To ensure accuracy of the number of students in these programs, enter the appropriate code for each student who is admitted to and continuing his/her enrollment in a certificate or degree program in the following areas or CIP codes. Leave blank if not. Not required for medical and dental students.

- 10 Nursing (51.3801.00) RN to BSN degree program
- 12 Nursing (51.3801.00) Initial RN licensure, generic baccalaureate degree program
- 13 Nursing (51.3801.00) Initial RN licensure, master's degree program
- 15 Nursing (51.3801.00) Initial RN licensure, LVN to BSN transition program
- 40 Doctor's Level-Professional Practice Audiology (AUD)
- 44 Doctor's Level-Professional Practice Pharmacy (PharmD)
- 45 Doctor's Level-Research/Scholarship Doctor of Nursing Practice (DNP)
- 46 Doctor's Level-Professional Practice Doctor of Physical Therapy (DPT)
- 47 Doctor's Level-Research/Scholarship Doctor of Public Health (DrPH)
- 48 Doctor's Level Professional Practice Medical Physics (DMP)

Definitions:

The Restricted Program Admission codes for Nursing are needed in the calculation of graduation rates (Education Code 61.0901) and for the distribution of funds under the

Nursing Shortage Reduction Program (Education Code 61.9623).

- Nursing (51.3801.00) RN to BSN degree program a student admitted to and continuing his/her enrollment in an approved BSN nursing program who already possesses an ADN degree or a diploma in nursing and is a registered nurse. The Board uses the data to count graduates.
- Nursing (51.3801.00) Initial RN licensure, generic baccalaureate degree program a student admitted to and continuing his/her enrollment in an approved BSN nursing program who is not a registered nurse. (Previously reported as NL.) For the Board's purpose of counting graduates and calculating completion rates, this program is considered a two-year program.
- Nursing (51.3801.00) Initial RN licensure, master's degree program a student admitted to and continuing his/her enrollment in an approved MSN nursing program who is not a registered nurse. Report graduates in the nursing specialty. (Previously reported as NL.) The Board uses the data to count graduates.
- Nursing (51.3801.00) Initial RN Licensure, LVN to BSN transition program a student admitted to and continuing his/her enrollment in an approved BSN nursing program who already possesses an LVN certificate or degree and who is not a registered nurse. For the Board's purpose of counting graduates and calculating completion rates, this program is considered a two-year program.
- 40 Doctor's Level-Professional Practice Audiology (AUD) a student admitted to an approved Audiology program.
- Doctor's Level-Professional Practice Pharmacy (PharmD) a student admitted to an approved PharmD program; prior to admission to pharmacy school, a student must complete at least 60 semester credit hours (SCH) of pre-pharmacy coursework.
- Doctor's Level-Research/Scholarship Doctor of Nursing Practice (DNP) a student admitted to a doctoral program in Nursing Practice.
- Doctor's Level-Professional Practice Doctor of Physical Therapy (DPT) a student admitted to an entry-level or post-professional practice-focused doctoral program in Physical Therapy.
- 47 Doctor's Level-Research/Scholarship Doctor of Public Health (DrPH) a student admitted to a doctoral program in Public Health.
- Doctor's Level Professional Practice Medical Physics (DMP) a student admitted to an approved Medical Physics program.
- Item #36 Non-Disclosure. Enter a '2' to indicate that the individual student has notified the institution of his/her refusal to have "directory information" disclosed; else zero fill.
- Item #37 <u>High School Code</u>. Enter the College Board CEEB High School code of the high school that the student graduated from. Required for Texas high school graduates that are coded

as First-time-in-College (Item #9 = 000001). The Texas CEEB codes are in Appendix M. Not required for students over the age of 25. Not required for medical and dental students or students in master's or doctoral programs for the first time. Leave blank if not applicable.

May be reported for all students. Use the CB-created special CEEB codes in Appendix M for students who did not graduate from a Texas high school.

Item #38 PEIMS Identification Number. Enter the PEIMS identification number of the student if you collect this information. The PEIMS identification number is a state-approved alternative student identification number provided by TEA to the school districts that is to be used when the student does not provide an SSN. It may be found in the student's high school transcript. This number begins with an 'S' which is then followed by eight digits. Leave blank if you do not collect this information.

Item #39 <u>Ethnic Origin</u>. Enter the code indicating whether the student is of Hispanic or Latino origin or not.

- 1 Hispanic or Latino origin
- 2 Not Hispanic or Latino origin
- 3 Not answered

Item #40 Race. Select one or more codes indicating the race of the student.

Item #40A 1 White Item #40B 2 Black or African-American Item #40C Asian Item #40D 5 American Indian or Alaskan Native Item #40E 6 International Item #40F 7 Unknown or Not Reported Item #40G Native Hawaiian or Other Pacific Islander

Definitions:

- Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- American Indian or Alaskan Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African-American: A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White: A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

- International denotes a person who is not a citizen or permanent resident of the United States
 and who is in this country on a temporary basis and does not have the right to remain
 indefinitely.
- Unknown or Not Reported: The unknown classification should only be used if the student has not selected a racial designation.

Notes:

- a) Even though a student is allowed to pay the "Resident Tuition" rate due to a waiver (coded 'E' in Item #7), report with the international code.
- b) Report the ethnicity of students who were coded 'A' in Item #7.
- c) Report the ethnicity of students who have applied to or have a petition pending with the Bureau of Citizenship and Immigration Services and students who base their residency on visas that allow them to domicile in the U.S.
- d) Report students who are Refugees, asylees, parolees, and those who are here under Temporary Protective Status as international students.
- Individual with Intellectual or Developmental Disabilities (IDD). Student has been identified as having an intellectual or developmental disability based on the definitions provided below. If a student is identified as having both an Intellectual Disability and identified as being on the Autism Spectrum, prioritize the reporting of the Intellectual Disability (enter '1'). Institutions may only report students who have been identified through self-identification and/or documented receipt of special services.

Definition of Intellectual and Developmental Disability (IDD):

For reporting purposes, for Items #41 and #41A, Intellectual and Developmental Disability (IDD) is defined as a neurodevelopmental disorder that must meet the following criteria:

- a. Deficits in intellectual functions, such as reasoning, problem solving, planning, abstract thinking, judgement, academic learning, and learning from experience.
- Deficits in adaptive functioning that result in failure to meet developmental and sociocultural standards for personal independence and social responsibility.
 Without ongoing support, the adaptive deficits limit functioning in one or more activities of daily life, such a communication, social participation, and independent living, across multiple environments, such as home, school, work and community.
- c. (a) and (b) may occur after the developmental period (such as in the case of a traumatic brain injury).
- d. Students with IDD may include those diagnosed with an Autism Spectrum Disorder.
- 0. Student not identified as having an IDD
- 1. Student identified as having an IDD as defined above
- 2. Student identified as having an Autism Spectrum Disorder but not an Intellectual Disability (Report '1' if student is also identified as having an Intellectual Disability)
- Item #41A Individual enrolled in a transitional or other program for students with Intellectual and Developmental Disabilities (IDD). Enter '1' if student was ever enrolled in a program for

students with IDD at your institution. Report if student was enrolled in program at any time. Report only if coded '1' or '2' in Item #41. Enter '0' if student was not enrolled in a program for students with IDD. A record should NOT be created for students who are not otherwise reported on the CBM001. See definition of program below.

Definition of Postsecondary Transitional Program or Program for Students with IDD:

A degree, certificate or non-degree program for students with IDD that is offered by an institution of higher education. These programs are designed to support students with IDD who want to continue academic, career, and independent living instruction following completion of secondary education.

- 0. Student never participated in a postsecondary program for students with IDD at this institution
- 1. Student participated in a postsecondary program for students with IDD at this institution
- 2. It is unknown if the student participated in a postsecondary program for students with IDD at this institution

Data Processing Record Layout

		Beginning Position	<u>Length</u>
Item #1	Record Code - Always '1' - Numeric	1	1
Item #2	Institution Code - FICE – Numeric	2	6
Item #3	Student Identification Number – Alphanumeric	8	9
Item #4	Gender - 'M' or 'F' – Alpha	17	1
Item #5	Classification – Alphanumeric	18	1
Item #6	Date of Birth - YYYYMMDD – Numeric	19	8
Item #7	Tuition Status – Alphanumeric	27	1
Item #8	Residence – Numeric, leading zeros	28	3
Item #9	Transfer/First-Time-In-College – Numeric or blank	31	6
Item #10 *	SCH Load – Numeric - No decimals, zero fill	37	2
Item #11 *	Unused	39	2
Item #12	Unused	41	2
Item #13	Unused	43	1
Item #14	Semester – Numeric	44	1
Item #15	Year - YYYY – Numeric	45	4
Item #16 *	Inter-institution SCH Load State Funded – No decimals	49	2
Item #17	Flexible Entry – Numeric or blank	51	1
Item #18 *	Correctional Entity – Numeric or blank	52	1
Item #19	Major Area of Concentration - CIP – Numeric	53	8
Item #20	Unused	61	2
Item #21	Tuition Exemption/Waiver Code – Numeric or blank	63	
Item #21	SCH NOT State Funded – Numeric - No decimals	65	2 2
Item #23	Unused	67	2
Item #24 *	SCH - Inter-institutional NOT State Funded – Numeric	69	2
Item #25 *	SCH - State Funded – Numeric - No decimals	71	2
Item #26	Unused	73	2 2 2
Item #27 *	SCH - Undergraduate Degree Program – Numeric	75 75	3
Item #28 *	Student Affected by UG Funding Limit – Numeric	73 78	1
Item #29	Last Name	78 79	20
Item #30	First Name	99	10
Item #31	Middle Name Initial	109	10
Item #32	FTE Student – Numeric - 2 decimals	110	3
Item #33	School or College – Numeric	113	6
Item #34	Remote Teaching Site – Numeric or blank	119	6
Item #35 *	Restricted Program Admission	125	2
Item #36	Non-Disclosure – Numeric	127	1
Item #37 *	High School Code – Numeric	128	6
Item #38	PEIMS Identification Number	134	9
Item #39		143	9
Item #40	Ethnic Origin – Numeric	143	ļ
Item #40A	Race: White – '1' or blank	144	1
Item #40A	Black or African-American – '2' or blank	145	1
Item #40C	Asian – '4' or blank	146	1 1
Item #40D	Asian – 4 or blank American Indian or Alaskan Native – '5' or blank	146	1
116111 #40D	American mulan di Alaskan Native - 3 di Dialik	147	ı

		Beginning Position	<u>Length</u>
Item #40E	International – '6' or blank	148	1
Item #40F	Unknown or Not Reported – '7' or blank	149	1
Item #40G	Native Hawaiian or Other Pacific Islander – '8' or blank	150	1
Item #41	Individual with IDD – Numeric	151	1
Item #41A	Individual enrolled in IDD program – Numeric	152	1

^{*} Indicates item not required to be reported for medical and dental students.

Questionable and Error Values

The following values are used in the Coordinating Board's edit program to determine Questionable and Error Values of each element.

ITEM	1 NUMBER	QUESTIONABLE VALUE	ERROR VALUE
1.	Record Code	N/A	Any value except '1'
2.	Institution Code	N/A	Must match value in header record and be on the list of valid FICE codes
3.	Student ID Number	N/A	Blank or duplicate entries; not alpha and/or numeric
4.	Gender	N/A	Any value except 'M' or 'F'
5.	Classification	N/A	Any value except '1' thru '8', 'A' thru' D', or 'M'; if coded '8', Item #35 must = '40', '44', '46', or '48'
6.	Date of Birth	Value less than 16 or greater than 75 years of age	Any non-numerical data; month greater than '12' or less than '01'
7.	Tuition Status	N/A	Any value except '1', '2', '3', '5', 'A', 'C', or 'E'
8.	Residence	Not '001' thru '254' if Item #21 coded '01'	Not on residence file
9.	Transfer/First-Time-In- College	Zero students coded '000001'	Any non-numerical characters or embedded spaces or invalid FICE
10.	SCH Load	Value greater than 22	Any non-numerical value; unused positions should be zero-filled
11.	Unused	N/A	N/A
12.	Unused	N/A	N/A
13.	Unused	N/A	N/A
14.	Semester	N/A	Must match value on header record

<u>ITEM</u>	NUMBER	QUESTIONABLE VALUE	ERROR VALUE
15.	Year	N/A	Must match value on header record
16.	Inter-Institution SCH	Sum of Items #16, #22, #24, and #25 less than 1 or greater than 22	Non-numerical
17.	Flexible Entry	N/A	Any value except spaces, '1', '2', or '4' when Item #33 is coded an academic school; any value except spaces when Item #33 is coded a professional school
18.	Correctional Entity	N/A	Any value except '5' or spaces
19.	Major (CIP)	N/A	Not numeric or '99999999' or '240101'; must be a valid CIP code; not '51380100' if Item #35 is coded '10', '12', '13','15'
20.	Unused	N/A	N/A
21.	Tuition Exemption/Waiver	Any value except '01' when Item #7 is coded '3' and Item #8 > '254'	Any value except '01' when Item #7 is coded '3' or '21' when Item #7 is coded 'E'
22.	SCH Load Not Funded	Sum of Items #16, #22, #24, and #25 less than 1 or greater than 22	Non-numerical
23.	Unused	N/A	N/A
24.	SCH Inter-Inst. Not Funded	See Item #22	Non-numerical
25.	SCH Load Funded	See Item #22	Non-numerical
26.	Unused	N/A	N/A
27.	SCH of UG Degree Program	Value less than 120	Non-numerical or greater than 195 when Item #5 is coded '4'
28.	Student Affected by UG Level	N/A	Any value except '0', '1', or '2'
29.	First Name	N/A	Blank or numerical

ITEM NUMBER		QUESTIONABLE VALUE	ERROR VALUE
30.	Middle Initial	Blank	N/A
31.	Last Name	N/A	Blank or numerical
32.	FTE Student	N/A	Non-numerical; percentage greater than 100 percent
33.	School or College	N/A	Not on FICE file
34.	Remote Teaching Site	N/A	Not on FICE file
35.	Restricted Program Adm	N/A	Any value except blank or '10', '12', and '15' when Item #19 is coded '51380100' and Item #5 = '1' - '4' or '13' when Item #19 is coded '51380100' and Item #5 = '6' or '40', '44', '46', and '48' when Item #5 = '8' or '45' and '47' when Item #5 = '7'
36.	Non-Disclosure	N/A	Any value except '2' or '0'
37.	High School Code	N/A	Blank if Item #9 = '000001' and Item #5 = '1', '2', or '3' and Item #8 = '001' thru '254'
38.	PEIMS Ident. Number	N/A	First position not 'S' with remaining positions not numeric
39.	Ethnic Origin	N/A	Value other than '1', '2', or '3'
40A.	White	N/A	Value other than '1' or space or value = '1' and '7'
40B.	Black/African-Amer	N/A	Value other than '2' or space or value = '2' and '7'
40C.	Asian	N/A	Value other than '4' or space or value = '4' and '7'
40D.	Amer Ind/Alask Nat	N/A	Value other than '5' or space or value = '5' and '7'
40E.	International	N/A	Value other than '6' or space or
40F.	Unknown/Not Rep	N/A	value = '6' and '7' Value other than '7' or space; value = '7' plus value = '1', '2', '4',
40G.	Nat Hawaiian/Pac Is	N/A	'5', '6', or '8' Value other than '8' or space or value = '8' and '7'

ITEM NUMBER		QUESTIONABLE VALUE	ERROR VALUE
41. 41A.	Individual with IDD Individual enrolled in IDD program	N/A	Any value other than '0', '1', or '2'
		N/A	Any value other than '0', '1', or '2'

NOTE: The number of duplicate records is indicated.

DISCREPANCY: The number of records received in each submission is compared to the number in the trailer record (control total). The difference is shown on the edit report as a discrepancy.

Summary of Student Data

Summaries are produced for each unit within each health science center, as well as the health science center as a whole. For this manual, the summary for the health science center will be shown as the example.

HEADCOUNT: The headcount is a summation of CBM001 records less the number of flexible entry students. The headcount is categorized by gender, age, first-time students, residence, ethnic origin, classification, tuition status, and non-disclosure.

AGE: The age distribution is calculated by subtracting the date of birth (Item #6) from the beginning date of the semester. For this report the beginning date of each semester is:

Fall September 1
Spring January 1
Summer June 1

FIRST-TIME STUDENTS: The first-time-in-college student is based on a code of '000001' in Item #9. A first-time-entering medical and dental student is based on a code of '000001' in Item #9 and an 'A' in Item #5. All other numeric values are considered a transfer code and cause a counter to be incremented to show the number of students who have transferred to your institution. Item #37 is used for first-time students from Texas and out-of-state high schools.

SCH REGISTERED: Item #10 is summed to produce a total. Hours of flexible entry students are not included. Also Items #16, #22, #24, and #25 are summed for undergraduate students.

FLEXIBLE ENTRY: All records with a '1' in Item #17 are summed separately and are <u>not</u> included in the headcount summaries. Records coded '2' are summed as professional dual degree students; records coded '4' are summed as inter-institutional academic students.

DOCTORAL, 30-HOUR AND 45-HOUR-LIMIT REPORTS

These reports are generated each time the CBM001 edit report is generated in each semester and will appear on the edit. The reports are listed below.

- 1. Doctoral Students Approaching Doctoral SCH Limit
- 2. Doctoral Students Exceeding Doctoral SCH Limit
- 3. UG Students Approaching 30-Hour Funding Limit
- 4. UG Students Who Will Exceed the 30-Hour Funding Limit After This Term
- 5. UG Students Exceeding 30-Hour Funding Limit
- UG Students Approaching 45-Hour Funding Limit
- 7. UG Students Who Will Exceed the 45-Hour Funding Limit After This Term
- 8. UG Students Exceeding 45-Hour Funding Limit

HRI Faculty Report (CBM008)

CBM008 Faculty Report

The purpose of this report is to collect data on each person who is an employee of the institution who is paid a salary or receives benefits associated with the institution, and who has any type of faculty appointment, regardless of their source of funds or their assignment, during the year. Submit all such persons who are on the payroll of the institution as of October 1. Include research faculty, librarians, and administrators if they have faculty titles. Do not include student assistants, laboratory assistants, and graders whose duties are limited to grading, clerical functions, store keeping, and preparations of class or laboratory or other subordinate functions. The report will include the annual budgeted salary or benefit for the employee and be due on October 15 each year.

HRI Faculty Report (CBM008)

Instructions for Faculty Report

Item #1	Record Code. Always enter '8'.			
Item #2	Institution Code. Enter the FICE Code of the Health Science Center. See Appendix A.			
Item #3	Faculty Identification Number. Enter the social security number of the faculty member.			
Item #4	Last Name. Enter the faculty member's last name.			
Item #5	First Name Initial. Enter the initial of the faculty member's first name.			
Item #6	Middle Name Initial. Enter the initial of the faculty member's middle name.			
Item #7	Rank. Enter the code indicating the highest academic rank of the faculty member.			
	Rank	<u>Definition</u>		
	1 Professor	Include only faculty on tenure track or with tenure at your institution.		
	2 Associate Professor	Include only faculty on tenure track or with tenure at your institution.		
	3 Assistant Professor	Include only faculty on tenure track or with tenure at your Institution.		
	4 Instructor	Include all faculty on tenure track or with tenure at your institution who do not hold the rank of assistant professor, associate professor, or professor.		
	5 Other faculty	Includes faculty without tenure and not on tenure track including, but not limited to, adjunct, special, clinical, visiting, emeritus, and lecturer at your institution. Also include faculty with tenure or on tenure track from another institution.		
	6 Teaching Assistant	A graduate student who is teaching and/or assists a faculty member in teaching a class or laboratory. Exclude those who only serve as graders or who are included in one of the categories above.		
Item #8	<u>Tenure</u> . Use the institution's criteria or requirements to determine tenure status.			
	0 Non-tenured1 Tenured2 On tenure trace	ck		
Item #9	Gender. Enter the appropriate code indicating the gender of the faculty member.			
	M = Male F =	Female		

HRI Faculty Report (CBM008)

Item #10 Unused

Item #11 Unused

Item #12 <u>Date of Birth</u>. Enter the year and month in which the faculty member was born in the YYYYMM format where

YYYY = Century and Year; MM = Month; If unknown enter '000000'.

Item #13

Percent of Time. Enter the faculty member's percent of time, in relation to a full or normal workload at the institution, for each appointment (Items #13A-E) during the reporting period. Each institution has a policy that determines a full or normal workload (example, 12 semester credit hours, four classes, etc.). For multiple assignments, apportion the percent of time according to the contracted or required duties. The total percent time must never exceed 100 percent.

NOTE: In this report the appointments are associated with a specific Item #13A-E so the appointment code will not be entered, only the percent of time.

Item #13A is related to the Instruction function:

Item #13A Appointment 01 Percent. Instruction: Direct instructional activities which include interaction with students related to instruction, preparation for such instruction, and evaluation of student performance. Also include administrative assignments which directly supplement the teaching function, such as heads of teaching departments, coordinator of special programs or multi-section courses, etc., and any other professional assignments which an institution considers to be directly related to the teaching function.

Appointments related to functions other than Instruction:

- Item #13B <u>Appointment 03 Percent</u>. Patient Care: Faculty assignments for activities specifically organized for patient care.
- Item #13C Appointment 11 Percent. Academic Support: Assignments include activities in the offices of academic and graduate deans; directors of major teaching department groupings like colleges, schools, or divisions; and librarians. Not included are the offices of the heads of teaching departments which are included in Item #13A.
- Item #13D Appointment 12 Percent. Research: Faculty assignments for activities specifically organized to produce research outcomes.
- Item #13E Appointment 13 Percent. Public Service, Student Services, Institutional Support,
 Operation and Maintenance of Plant, Auxiliary Enterprise Operations: Activities associated
 with admissions and registration, financial aid, student affairs, executive direction and
 control, business and fiscal management, personnel, administrative data processing,
 campus security, purchasing, physical plant administration, and auxiliary enterprise
 operations.

- Item #14 Salary. Enter the annual budgeted salary and supplements (non-fringe benefits) of the faculty member based on the source of funds as identified in Items #14A thru #14X. Each amount must be entered in whole dollars, right justified, with leading zeros.
- Item #14A <u>State Appropriations</u>. Enter all funds from state appropriations including special items, whether funded by general revenue or other educational and general income.
- Item #14D <u>Designated</u>. Enter funds arising from sources that have been designated by the Board or management to be used for specific purposes. This fund distinguishes such internally designated funds from externally restricted funds as well as other current funds. Physician practice plan funds and revolving and clearing accounts are also included in this fund group.
- Item #14R Restricted. Enter funds available for current purposes, the use of which has been restricted by outside agencies or persons.
- Item #14X <u>Auxiliary Enterprises</u>. Enter funds for activities which furnish a service to students, faculty, or staff for which charges are made that are directly related to the cost of the service such as residence halls, bookstores, intercollegiate athletics, etc.

Item #14Z Unused

NOTE: For the purposes of this report, annual salaries are to be computed as follows:

Salary Computations:

- 1. Sum the percent of time assigned for all appointments (Items #13A-13E).
- 2. Sum the salary amounts for all funds (Items #14A-X).
- 3. Divide the total percent of time assigned for all appointments (step 1) into the sum of all salary amounts (step 2) giving a full-time equivalent (FTE) salary for all appointments.
- 4. Summarize the FTE salaries (results of step 3) of ONLY the faculty who have percents of time assigned to appointment 01.
- 5. Tally all faculty with appointment code 01 where FTE salaries are greater than zero.
- 6. Divide the total faculty with appointment code 01 (results of step 5) into the total FTE salaries of faculty with 01 appointments (results of step 4) to yield the average FTE salaries.
- Item #15 Appointment Length. Enter the number of months of the appointment. Enter a leading zero for an appointment of less than 10 months.
- Item #16 Unused.
- Item #17 Semester. Enter a '1' indicating the Fall semester.
- Item #18 Year. Enter the calendar year in which the semester occurred. Use the YYYY format. Example, 2019.
- Item #19 School or College. Enter the six-digit school or college identifier which may be the FICE code of the entity or may be a number assigned by the Coordinating Board. When the assignments of a faculty member involve more than one school or college, choose the one in which the faculty is most closely associated.

Item #20 <u>Ethnic Origin</u>. Enter the code indicating whether the faculty member is of Hispanic or Latino origin or not.

- 1 Hispanic or Latino origin
- 2 Not Hispanic or Latino origin
- 3 Not answered

Item #21	Race.	Sele	ect one or more codes indicating the race of the faculty member.
Item #21A		1	White
Item #21B		2	Black or African-American
Item #21C		4	Asian
Item #21D		5	American Indian or Alaskan Native
Item #21E		6	International
Item #21F		7	Unknown or Not Reported
Item #21G		8	Native Hawaiian or Other Pacific Islander

Definitions:

- Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- American Indian or Alaskan Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African-American: A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White: A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- International denotes a person who is not a citizen or permanent resident of the United States and who is in this country on a temporary basis and does not have the right to remain indefinitely.
- Unknown or Not Reported: The unknown classification should only be used if the faculty member has not selected a racial designation.

Data Processing Record Layout

		Beginning <u>Position</u>	<u>Length</u>
Item #1	Record Code - Always '8' - Numeric	1	1
Item #2	Institution Code - FICE – Numeric	2	6
Item #3	Faculty Identification Number – Numeric	8	9
Item #4	Last Name – Alpha	17	10
Item #5	First Name Initial – Alpha	27	1
Item #6	Middle Name Initial – Alpha or blank	28	1
Item #7	Rank – Numeric	29	1
Item #8	Tenure - '0', '1' or '2' – Numeric	30	1
Item #9	Gender - 'M' or 'F' - Alpha	31	1
Item #10	Unused	32	4
Item #11	Unused	36	1
Item #12	Date of Birth - YYYYMM - Numeric	37	6
Item #13	Percent of Time:		
Item #13A	Appointment 01 % - Numeric, zero fill	43	3
Item #13B	Appointment 03 % – Numeric, zero fill	46	3
Item #13C	Appointment 11 % – Numeric, zero fill	49	3
Item #13D	Appointment 12 % – Numeric, zero fill	52	3
Item #13E	Appointment 13 % – Numeric, zero fill	55	3
Item #14	Salary Fields – Right justified, no decimals		
Item #14A	State Appropriations – Numeric, zero fill	58	7
Item #14D	Designated – Numeric, zero fill	65	7
Item #14R	Restricted – Numeric, zero fill	72	7
Item #14X	Auxiliary Enterprises – Numeric, zero fill	79	6
Item #14Z	Unused	85	6
Item #15	Appointment Length – Numeric, zero fill	91	2
Item #16	Unused	93	1
Item #17	Semester - '1' – Numeric	94	1
Item #18	Year - YYYY – Numeric	95	4
Item #19	School or College – Numeric	99	6
Item #20	Ethnic Origin	105	1
Item #21	Race:		
Item #21A	White – '1' or blank	106	1
Item #21B	Black or African-American – '2' or blank	107	1
Item #21C	Asian – '4' or blank	108	1
Item #21D	American Indian or Alaskan Native – '5' or blank	109	1
Item #21E	International – '6' or blank	110	1
Item #21F	Unknown or Not Reported – '7' or blank	111	1
Item #21G	Native Hawaiian or Other Pacific Islander – '8' or blank	112	1

Questionable and Error Values

The following values are used in the Coordinating Board's edit program to determine Questionable and Error Values for each faculty record.

<u>ITEM</u>	NUMBER	QUESTIONABLE VALUE	ERROR VALUE
1.	Record Code	N/A	Any value except '8'
2.	Institution Code	N/A	Must match value in header record and be on the list of valid FICE codes
3.	Faculty ID	Alphanumeric	Blank or all zeros
4.	Last Name	Non-alphabetic	Numbers or spaces
5.	First Initial	N/A	Number or space
6.	Middle Initial	N/A	Number or special character
7.	Rank	N/A	Any value other than '1' thru '6'
8.	Tenure	N/A	Any value other than '0', '1', or '2'
9.	Gender	N/A	Any value other than 'M' or 'F'
10.	Unused	N/A	N/A
11.	Unused	N/A	N/A
12.	Date of Birth	,000000,	Non-numerical data; month less than '01' or greater than '12'
13A-E	E. Percent of Time	Value of 0	Non-numerical; sum of time for all appointments is greater than 100

ITEM NUMBER		QUESTIONABLE VALUE	ERROR VALUE
14A->	<. Salary	RankSalaryLessGreaterthanthan124,000500,000224,000400,0003,510,000350,00043,200150,00063,20055,000	Non-Numerical
14Z.	Unused	N/A	N/A
15.	Appointment Length	Value equal to '00'	Value greater than '12'
16.	Unused	N/A	N/A
17.	Semester	N/A	Value other than '1'
18.	Year	N/A	Non-numerical; must match header record
19.	School or College	N/A	Must on the list of valid FICE codes
20.	Ethnic Origin	N/A	Value other than '1', '2', or '3'
21A.	White	N/A	Value other than '1' or space or
21B.	Black/African-Amer	N/A	value = '1' and '7' Value other than '2' or space or
21C.	Asian	N/A	value = '2' and '7' Value other than '4' or space or
21D.	Amer Ind/Alaska Nat	N/A	value = '4' and '7' Value other than '5' or space or
21E.	International	N/A	value = '5' and '7' Value other than '6' or space or
21F.	Unknown/Not Rep	N/A	value = '6' and '7' Value other than '7' or space;
21G.	Nat Hawaiian/Pac Is	N/A	value = '7' plus value = '1', '2', '4', '5', '6', or '8' Value other than '8' or space or value = '8' and '7'

Reporting Examples

NOTE: Items #1, #2, #20, and #21 will be omitted from the examples.

 Mary A. Jones, a professor of Clinical Medical Technology, is chairman of the Department of Medical Technology and also teaches Medical Lab Technology. Professor Jones is paid \$62,000 for the 12-month period. Professor Jones's workload is distributed as follows: three fourths of her time in direct instructional activities and one-fourth as departmental chair. CBM008 would be coded:

Item #3	99999999
Item #4	Jones
Item #5	M
Item #6	Α
Item #7	1
Item #8	1
Item #9	F
Item #10	blank
Item #11	blank
Item #12	194405
Item #13A	100
Item #13B,C,D,E	000,000,000,000
Item #14A	062000
Item #14D,R,X	000000, 000000, 000000
Item #15	12
Item #16	0
Item #17	1
Item #18	2019
Item #19	000222

2. Professor John E. Smith, is chair of Health Services, teaches, and is involved with Patient Care 25% of his time. Professor Smith is paid \$48,000 for the nine-month period. Professor Smith's workload is distributed as follows: three fourths of his time in direct instructional activities and one-fourth to Patient Care. CBM008 would be coded:

99999999 Item #3 Item #4 Smith Item #5 J Ε Item #6 Item #7 1 Item #8 1 Item #9 Μ Item #10 blank Item #11 blank Item #12 194003 Item #13A 075 Item #13B 025 000,000,000 Item #13C,D,E Item #14A 048000 Item #14D,R,X 000000,000000,000000 Item #15 09 Item #16 0 Item #17 1 Item #18 2019 Item #19 000222

3. Dr. William E. Frederickson is a visiting teacher in the Department of Allied Health Science on special assignment as follows: Teaching - ten percent; Research - ninety percent. All of Dr. Frederickson's salary of \$90,000 is paid from a federal grant. CBM008 should be coded:

Item #3 Item #4	999999999 Fredericks (only 10 characters allowed)
Item #5	W
Item #6	Ë
Item #7	5
Item #8	0
Item #9	M
Item #10	blank
Item #11	blank
Item #12	194210
Item #13A	010
Item #13B,C	000,000
Item #13D	090
Item #13E	000
Item #14A,D	00000,000000
Item #14R	090000
Item #14X	000000
Item #15	10
Item #16	0
Item #17	1
Item #18	2019
Item #19	000222

4. Charles Martin has been hired to teach in the spring term, teaching half-time in occupational therapy and half-time in physical therapy, each of which is administered in separate departments. Assistant Professor Martin's nine-month salary of \$42,000 is budgeted equally between the two departments. Choose the department with which Dr. Martin is most closely associated. CBM008 for the fall semester would be coded:

Item #3 99999999 Item #4 Martin Item #5 C Item #6 blank Item #7 3 Item #8 1 Item #9 M Item #10 blank Item #11 blank Item #12 195108 Item #13A 050 Item #13B,C,D,E 000,000,000,000 Item #14A 021000 Item #14D,R,X 000000,000000,000000 Item #15 05 Item #16 3 Item #17 1 Item #18 2019 Item #19 000222

5. Associate Professor A. B. Jarrold is a full-time librarian who is teaching one class this semester in medical records. His eleven-month salary is \$45,000. He receives no extra salary for teaching. CBM008 is coded:

Item #3 99999999 Item #4 **JARROLD** Item #5 Α Item #6 В 2 Item #7 Item #8 1 Item #9 Μ Item #10 blank Item #11 blank Item #12 194702 Item #13A,B 000,000 Item #13C 100 Item #13D,E 000,000 Item #14A 045000 Item #14D,R,X 000000, 000000, 000000 Item #15 11 Item #16 0 Item #17 1 Item #18 2019 Item #19 000222

6. Dr. D. R. Frank is a Research Professional with an academic rank of assistant professor. During the fall semester she was conducting research 100 percent of her time. Her nine-month salary of \$38,000 is from a federal grant. She also teaches a class in medical pharmacology, which is an overload, for which she is paid \$2,500 from state appropriations. CBM008 is coded:

Item #3 99999999 Item #4 **FRANK** Item #5 D R Item #6 Item #7 3 Item #8 2 F Item #9 blank Item #10 Item #11 blank Item #12 195706 Item #13A,B,C 000, 000, 000 Item #13D 100 Item #13E 000 Item #14A 002500 Item #14D 000000 Item #14R 038000 Item #14X 000000 Item #15 09 Item #16 0 Item #17 1 Item #18 2019 Item #19 000222

Summary of Faculty Data

- **NOTE**: Error records are not included in the summary counts. There will be a report for each college/school and one summed for the health science center.
- TOTAL FACULTY: The total faculty headcount is a summation of all CBM008 records. The headcount is summed by gender, ethnic origin, faculty age, tenure, and rank.
- FACULTY AGE: The faculty age distribution is calculated using the date of birth (Item #12) of the faculty member and the date of the beginning of the fall semester, which is considered September 1.
- SALARIES BY SOURCE: These summaries are compiled from the values summed from Items #14A-X.
- FACULTY FTE BY APPOINTMENT: Sum the percent items from all faculty reported at the institution for each appointment code (Items #13A-E) and divide the results by 100.

CBM009 Graduation Report

This report will reflect degrees conferred during the fiscal year immediately preceding the fall semester in which the report is submitted. The initial report and any updates should be transmitted using the Electronic Data Transfer System.

Only degrees listed in the institution's Inventory of Approved Degree Programs are to be reported.

If a student is awarded more than one degree in a reporting period, enter separate records for each degree.

The CBM009 Appendix is extracted from the current Degree Program Inventory file. It contains (a) the degree designation to be reported, (b) the level, and (c) the CIP code of each program authorized by the Texas Higher Education Coordinating Board. The data submitted in Items #7, #8 and #9 of each CBM009 record correspond to (a), (b), and (c) above, and will be validated against the Degree Program Inventory file.

For the academic units, this report will include all students who have been awarded an Associate Degree or above during the fiscal year.

For the professional schools, this report will include all students who have been awarded a professional degree ('DDS', 'DO', 'MD', 'DPM', 'PharmD') during the fiscal year.

Nursing Shortage Reduction Program

Institutions participating in the Nursing Shortage Reduction Program (NSRP) are required to submit their nursing graduates on the CBM009 by October 1. The nursing records must be error-free to be included in the count for funding.

Special codes for Medical (GME) Residency Programs (Items #20 and #22)

9900000001 – No match

990000002 – Did not participate in match

9900000003 – Early match

9900000004 - Military match

9900000005 - Oral surgery

Instructions for Graduation Report

Item #1 Record Code. Always enter '9'.

Item #2 Institution Code. Enter the FICE Code of the institution.

Item #3 <u>Student Identification Number</u>. Enter the social security number of the student or the nine-digit identification for students without a social security number.

Item #4 Gender. Enter the gender of the student.

M = Male F = Female

Item #5 Unused

Item #6 <u>Date of Birth</u>. Enter all four digits of the year, the two digits of the month, and the day of birth for the student.

YYYY - Year MM - Month DD - Day

NOTE: The CBM009 Appendix containing the information for each institution regarding Items #7, #8, and #9 will be provided. ONLY the authorized degrees listed in the Appendix will be accepted. If your degree inventory is incomplete, you must communicate with the Universities and Health-Related Institutions Division.

- Item #7

 Degree Conferred. Enter the abbreviation of the degree (e.g., 'CER', 'BS', 'MS', 'DDS', 'DO", 'DPM', "MD', 'PharmD') as it appears on the institution's CBM009 Appendix; left justified and space filled. The degree conferred for baccalaureate-level and graduate-level certificates will be identified with 'CER'. Do not include certificates that are awarded to continuing education students and to not include students who have taken courses toward their teacher certification.
- Item #8 <u>Level of Degree Conferred</u>. (i.e., '1' Associate, '2' Baccalaureate, etc.) See CBM009 Appendix for level of degree. The level of the courses dictates the certificate level.
 - 1 Associate (Certificate only)
 - 2 Baccalaureate
 - 3 Master's
 - 4 Doctor's Degree-Research/Scholarship
 - 5 Doctor's Degree-Professional Practice (AUD, DDS, DO, DPT, DPM, MD, OTD, PharmD)
 - 6 Baccalaureate-Level Certificate
 - 8 Graduate-Level Certificate

NOTE:

Baccalaureate-Level Certificate – An upper-level undergraduate certificate requiring

completion of an organized program of study that includes 21-36 hours in disciplinary areas where the institution already offers an undergraduate degree program.

Graduate-Level Certificate – a graduate-level certificate that requires the completion of an organized program of study that includes 16-29 hours in disciplinary areas where the institution already offers a graduate program at the same level as the certificate. Use this code to identify the certificates that previously were coded '3'.

- Item #9

 Major. Enter the eight-digit CIP code in which the degree was earned. (See CBM009 Appendix for authorized CIP code of degree.) The CIP classification you will provide for baccalaureate-level and graduate-level certificates must be the same as the baccalaureate or graduate level degree program on the Program Inventory to which they support, unless the certificate program is on the Program Inventory.
- Item #10 Reporting Period. Always enter '1'.
- Item #11 Year. Enter all four digits of the year in which the report is submitted.
- Item #12 School or College. Enter the six-digit school or college identifier which may be the FICE code of the entity or may be an assigned number by the Coordinating Board.
- Item #13 Non-Disclosure. Enter a '2' to indicate that the individual student has notified the institution of his/her refusal to have "directory information" disclosed; else zero fill.
- Item #14 Month of Award. Enter the two-digit number for the month in which the award was conferred (e.g., '05' for May).
- Item #15 <u>Last Name</u>. Enter the student's last name. Truncate if the name contains over 20 characters.
- Item #16 <u>First Name</u>. Enter the student's first name. Truncate if the name contains over 10 characters.
- Item #17 Middle Name Initial. Enter the initial of the student's middle name.
- Item #18 <u>Ethnic Origin</u>. Enter the code indicating whether the student is of Hispanic or Latino origin or not.
 - 1 Hispanic or Latino origin
 - 2 Not Hispanic or Latino origin
 - 3 Not answered
- Item #19 Race. Select one or more codes indicating the race of the student.
- Item #19A 1 White
- Item #19B 2 Black or African-American
- Item #19C 4 Asian
- Item #19D 5 American Indian or Alaskan Native

Item #19E 6 International

Item #19F 7 Unknown or Not Reported

Item #19G 8 Native Hawaiian or Other Pacific Islander

Definitions:

 Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

- American Indian or Alaskan Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African-American: A person having origins in any of the black racial groups of Africa
- Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White: A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- International denotes a person who is not a citizen or permanent resident of the United States and who is in this country on a temporary basis and does not have the right to remain indefinitely.
- Unknown or Not Reported: The unknown classification should only be used if the student has not selected a racial designation.

Notes:

- a) Even though a student is allowed to pay the "Resident Tuition" rate due to a waiver (coded 'E' in Item #7 on the CBM001), report with the international code.
- b) Report the ethnicity of students who were coded 'A' in Item #7 on the CBM001.
- c) Report the ethnicity of students who have applied to or have a petition pending with the Bureau of Citizenship and Immigration Services and students who base their residency on visas that allow them to domicile in the U.S.
- d) Report students who are Refugees, asylees, parolees, and those who are here under Temporary Protective Status as international students.

- Item #20 <u>Initial Program Code</u>. Enter the appropriate 10-digit code for the initial medical (GME) residency program. Required for medical graduates only. Leave blank if not applicable.
- Item #21 <u>Initial Program Sponsor Code</u>. Enter the six-digit ACGME code of the health-related institution or independent organization that sponsors the initial program. Leave blank if not applicable.
- Item #22 <u>Secondary Program Code</u>. Enter the appropriate 10-digit code for the secondary medical (GME) residency program. Required for medical graduates only. Leave blank if not applicable.
- Item #23 Secondary Program Sponsor Code. Enter the six-digit ACGME code of the health-related institution or independent organization that sponsors the secondary program. Leave blank if not applicable.

Data Processing Record Layout

		Beginning <u>Position</u>	Length
Item #1	Record - Always '9' - Numeric	1	1
Item #2	Institution Identifier - FICE – Numeric	2	6
Item #3	Student Identification Number – Alphanumeric	8	9
Item #4	Gender - 'M' or 'F' – Alpha	17	1
Item #5	Unused	18	1
Item #6	Date of Birth - YYYYMMDD - Numeric	19	8
Item #7	Degree Conferred - Left justified – Space filled, alpha	27	8
Item #8	Level of Degree Conferred – Numeric	35	1
Item #9	Major – Numeric	36	8
Item #10	Reporting Period - Always enter '1' - Numeric	44	1
Item #11	Year - YYYY – Numeric	45	4
Item #12	School or College – Numeric	49	6
Item #13	Non-Disclosure – Numeric	55	1
Item #14	Month of Award	56	2
Item #15	Last Name – Alpha	58	20
Item #16	First Name – Alpha	78	10
Item #17	Middle Name Initial – Alpha	88	1
Item #18	Ethnic Origin	89	1
Item #19	Race:		
Item #19A	White – '1' or blank	90	1
Item #19B	Black or African-American – '2' or blank	91	1
Item #19C	Asian – '4' or blank	92	1
Item #19D	American Indian or Alaskan Native – '5' or blank	93	1
Item #19E	International – '6' or blank	94	1
Item #19F	Unknown or Not Reported – '7' or blank	95	1
Item #19G	Native Hawaiian or Other Pacific Islander – '8' or blank	96	1
Item#20	Initial Program Code – Numeric	97	10
Item#21	Initial Program Sponsor Code – Numeric	107	6
Item#22	Secondary Program Code – Numeric	113	10
Item#23	Secondary Program Sponsor Code – Numeric	123	6

Note: See page 9.1 for special codes that can be used when the Medical (GME) Residency Program cannot be reported. Report 999999 for the Program Sponsor Code (Items #21 and #23) when these special codes are used.

Questionable and Error Values

The following values are used in the Coordinating Board's edit program to determine Questionable and Error Values of each data element.

ITEM	NUMBER	QUESTIONABLE VALUE	ERROR VALUE
1.	Record Code	N/A	Any value except '9'
2.	Institution code	N/A	Must match value in header record and be in list of valid FICE codes
3.	Student ID Number	Duplicate entries	Blank, special characters
4.	Gender	N/A	Any value except 'M' or 'F'
5.	Unused	N/A	N/A
6.	Date of Birth	Value less than 16 or greater than 75 years of age	Any non-numerical data; month greater than '12' or less than '01', day greater than '31'
7.	Degree/Certificate	N/A	Must match institution's inventory of approved degree programs
8.	Level of Award	N/A	Must match institution's inventory of approved degree programs
9.	Major	N/A	Must match institution's inventory of approved degree programs
10.	Reporting Period	N/A	Any value except '1'
11.	Year	N/A	Must match value in header record
12.	School or College	N/A	Must be on list of valid FICE codes
13.	Non-Disclosure	N/A	Any value except '2' or '0'
14.	Month of Award	N/A	Any value other than '01' thru '12'

<u>ITEM</u>	NUMBER	QUESTIONABLE VALUE	ERROR VALUE	
15.	Last Name	N/A	Blank, numerical	
16.	First Name	N/A	Blank, numerical	
17.	Middle Name Initial	N/A	Numerical	
18.	Ethnic Origin	N/A	Value other than '1', '2', or '3'	
19A.	White	N/A	Value other than '1' or space or value = '1' and '7'	
19B.	Black/African-Amer	N/A	Value other than '2' or space or value = '2' and '7'	
19C.	Asian	N/A	Value other than '4' or space or value = '4' and '7'	
19D.	Amer Ind/Alask Nat	N/A	Value other than '5' or space or value = '5' and '7'	
19E.	International	N/A	Value other than '6' or space or value = '6' and '7'	
19F.	Unknown/Not Rep	N/A	Value other than '7' or space; value = '7' plus value = '1', '2', '4', '5', '6', or '8'	
19G.	Nat Hawaiian/Pac Is	N/A	Value other than '8' or space or value = '8' and '7'	
20.	Initial Program Code	N/A	Blank if Item #8 = '5' and Item #10 = 'DO' or 'MBBS' or 'MD' or 'MDPHD'	
21.	Initial Program Sponsor Code	N/A	Not numeric if Item #20 is numeric	
22.	Secondary Program Code	N/A	Blank if Item #8 = '5' and Item #10 = 'DO' or 'MBBS' or 'MD' or 'MDPHD'	
23.	Secondary Program Sponsor Code	N/A	Not numeric if Item #22 is numeric	

DISCREPANCY: The number of records received in each submission is compared to the number in the trailer record (control total). The difference is shown on the edit report as a discrepancy.

Summary of Degrees Conferred Data

Error records are not included in the summary counts. There will be a report for each college/school and one summed for the health science center.

HEADCOUNT: The headcount is a summation of non-duplicative CBM009 records.

TOTAL DEGREES: The total number of degrees is the summation of all CBM009 records. The degrees are summed by gender, age, non-disclosure, ethnic origin, and degree level.

AGE: The age distribution is calculated by subtracting the date of birth from September 1 of the fiscal year in which the data were collected.

CBM011 Facilities Room Inventory Report

This manual supersedes the Texas Higher Education Coordinating Board (THECB) 2005 Facilities Inventory Procedures Manual. The THECB implemented the coding structure outlined in this manual on November 1, 2008. The changes implemented in this manual are auditable effective November 1, 2009. All certified inventory reports prior to November 1, 2009 will be audited under the 2005 Facility Inventory Manual. Compatibility and reporting procedures in the 2005 manual have mostly been retained. The primary purpose of this manual is to provide a uniform physical facilities coding system that prevails between higher education institutions in Texas and across the nation for data included in a building and room inventory. It provides a current and common framework for terms and definitions around which to compile data systems for physical facilities. The majority of the data codes are based on definitions and standards established by the National Center for Education Statistics, *Postsecondary Education Facilities Inventory and Classification Manual*, U. S. Department of Education, NCES 92-165, 2006, but some data codes are unique to Texas higher education institutions. The guidelines established by this manual may only be part of an institution's total facilities and capital asset inventory.

Sections 61.0572 and 61.058 of the Texas Education Code define THECB duties and its essential responsibilities to Texas higher education institutions. Basically, the THECB must assist institutions in efficient use of its construction funds and the orderly development of physical plants to accommodate projected college student enrollments.

This report includes distinctions for all types of space within a building and its intended design function. Space Use Codes and Functional Category Codes are found in Appendices F and G, respectively. See Appendix I for a Glossary of Facilities Terms. Visit http://www.txhighereddata.org/ReportingManuals.cfm to view the appendices.

Basis for Classification

Information to code rooms according to architectural features can best be obtained by a visual inspection of each room but may also be obtained from as-built drawings. The evaluation of a room's Space Use Code and Functional Category Code should be based on the judgment of a departmental representative, facility planning, or physical plant personnel who are familiar with the coding structure in this manual. A room's Space Use Code and Functional Category Code can change between inventories or audit dates. A room's Space Use Code does not change until its basic design function has changed. Space Use Code 060 can be used temporarily to reflect non-assigned space while it is undergoing a conversion by remodeling.

Rooms to be Included

Space Use Codes for cubicle space are regarded as Office Facilities (300) that can be assigned to academic, administrative, or service functions of an institution. Each defined workspace can be considered a room. Operations independent of an institution's mission are to be reported under Functional Category Codes 91 and 92. The Appendices to this manual include Space Use Codes for circulation areas, building service, mechanical, and structural areas, which are classified as non-assigned space.

Rooms Not to be Included

Residential rooms in a facility with Building Type Codes 6 or 7 (Residence/Single and Residence/Family) need not be reported except for rooms used for non-residential purposes. Residential rooms in a facility with Building Type Code 2 (Academic/Residence) need not be reported except for rooms within the building that are used for non-residential purposes. Space within a leased facility that is not used by the institution need not be reported. Covered play areas and covered walkways are not considered rooms.

Addition of Rooms

The addition of rooms should be reported on an on-going basis.

CIP Code and Functional Category Limitations

The CIP code is a required field within a room record that may be prorated up to three times, based on percent of use with different CIP codes, precisely to identify space being used by a particular discipline, department, or function. A six-digit CIP code corresponds to a single instructional program and its first two digits correspond to a group of instructional programs. If an exact CIP code cannot be determined, assign the most accurate code available.

Academic CIP codes should not be used with Institutional Support Functional Category Codes (60 series). These two areas are fundamentally different. Space for academic administration is Functional Category Code Academic Administration (46) and it must be combined with an academic CIP, as in the case of the space devoted to department heads.

Descriptive information on NCES CIP codes can be obtained from the following NCES web address: http://nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2002165. The Coordinating Board has an index of the current and deleted NCES CIP codes on its web site at http://www.txhighereddata.org/Interactive/CIP/. A list of codes unique to Texas higher education institutions is in Appendix C of this manual.

Basis for Room Measurement

Room area is measured to the nearest square foot in accordance with parameters established by the facilities audit protocol.

Space Use Codes

Primary Space Use/Design Use: Each room has one best Space Use Code based on its exclusive or predominant design/use. Primary activity areas (Space Use Codes) always end with "0". For a room used as an office (Space Use Code 310) and a research/non-class laboratory (Space Use Code 250), a single determination for primary activity should be made. It is recommended that primary be evaluated in terms of time, the human activity that focuses on use, rather than space. Space Use Codes change when a room's predominant use or physical characteristics have been changed and/or remodeled.

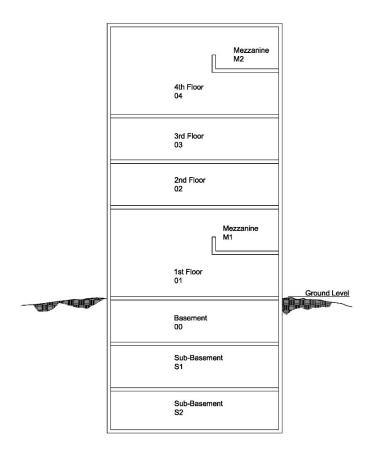
Service Codes: Determine whether the existence of a particular room, with its specific design/function and use, is dependent upon or justified by another room (usually nearby) and its specific use. If a significant degree of dependency exists, an appropriate service code should be used. Support or service space is identified by Space Use Codes ending with "5".

Proration of Use

Up to three Functional Category Codes may be assigned to a single room: primary, secondary, and remaining. Where a room serves several purposes or uses, it may be reported based on time spent on each activity. Overall, the total percent of use/proration for primary, secondary, and remaining use must always total 100 percent. Only a room's function (Functional Category Code) and program area (CIP Code) may be prorated since its space use (Space Use Code) cannot be prorated.

Floor (optional)

Floor numbers are two characters in length. Zero fill the first position of the Floor field for floors less than 10 (01, 02, etc.). A basement should be coded as '00'. Sub-basements should be coded with an 'S' in the first position and the sub-basement number in the second position (S1, S2, etc.). Mezzanines should be coded with an 'M' in the first position and the mezzanine number in the second position (M1, M2, etc.). See illustration.



Instructions for Facilities Room Inventory Report

Item #1	Record Code. Always enter 'R'.		
Item #2	Institution Code. Enter the FICE code of the institution. See Appendix A.		
Item #3	Report Year. Enter all four digits of the calendar year in which the inventory occurs.		
BUILDING IDENTIFICATION Each room is uniquely identified as a separate record by a combination of building, floor, and room number. Each room within a building should have a unique alpha or numeric code to identify the room. The building identification must be the same as the building identification used in the CBM005 and the CBM014 reports.			
Item #4	Building Number. Enter the assigned building number.		
Item #5	Room Number. Enter the assigned room number.		
Item #6	<u>Primary CIP Code</u> . Enter the primary classification of an instructional program (CIP) code associated with this room. Use the first six digits of the codes listed in Appendix C.		
Item #7	Omitted.		
Item #8	<u>Space Use Code</u> . Enter the space use code based on the room's exclusive or predominant design or use. See Appendix F.		
Item #9	<u>Primary Functional Category Code</u> . Enter the primary functional category code. See Appendix G.		
Item #10	Primary CIP Percent. Enter the percentage of the primary CIP code reported in Item #6.		
Item #11	Room Area. See Glossary of Facilities Terms (Appendix I).		
Item #12 Item #13 Item #14 Item #15 Item #16	Omitted. Omitted. Omitted. Omitted. Omitted. Omitted.		

- Item #17 <u>Student Station Capacity</u>. This is based on the number of occupants the room is designed to accommodate; only required of certain space uses.
- Item #18 Secondary CIP Code. Enter the secondary CIP code associated with this room. Use the first six digits of the codes listed in Appendix C.
- Item #19 Omitted.

Item #20	<u>Secondary Functional Category Code</u> . Enter the secondary functional category code. See Appendix G.
Item #21	<u>Secondary CIP Percent</u> . Enter the percentage of the secondary CIP code reported in Item #18.
Item #22	Remaining CIP Code. Enter the remaining CIP code associated with this room. Use the first six digits of the codes listed in Appendix C.
Item #23	Omitted.
Item #24	Remaining Functional Category Code. Enter the remaining functional category code. See Appendix G.
Item #25	Remaining CIP Percent. Enter the percentage of the remaining CIP code reported in Item #22.
Item #26	Record Identification. Always enter '11'.
Item #27	Floor. Optional. Floor number (01, 02, 03, etc.)

Data Processing Record Layout

		Beginning <u>Position</u>	<u>Length</u>
Item #1	Record Code – Always 'R'	1	1
Item #2	Institution Code – FICE – Numeric	2	6
Item #3	Report Year – Numeric	8	4
Item #4	Building Number – Alphanumeric	12	6
Item #5	Room Number – Alphanumeric	18	16
Item #6	Primary CIP Code – Numeric	34	6
Item #7	Omitted	40	2
Item #8	Space Use Code – Alphanumeric	42	3
Item #9	Primary Functional Category Code – Numeric	45	2
Item #10	Primary CIP Percent – Numeric	47	3
Item #11	Room Area	50	8
Item #12-16	Omitted	58	12
Item #17	Student Station Capacity – Numeric	70	4
Item #18	Secondary CIP Code – Numeric	74	6
Item #19	Omitted	80	2
Item #20	Secondary Functional Category Code – Numeric	82	2
Item #21	Secondary CIP Percent – Numeric	84	3
Item #22	Remaining CIP Code – Numeric	87	6
Item #23	Omitted	93	2
Item #24	Remaining Functional Category Code – Numeric	95	2
Item #25	Remaining CIP Percent – Numeric	97	3
Item #26	Record Identification – Always '11'	100	2
Item #27	Floor	102	2

Questionable and Error Values

The following values are used in the Coordinating Board's edit program to determine Questionable and Error Values of each data element.

ITEM NUMBER		QUESTIONABLE VALUE	ERROR VALUE
1.	Record Code	N/A	Any value except 'R'
2.	Institution Code	N/A	Must match value on header record and be on the list of valid FICE codes
3.	Report Year	N/A	Must match value in header record
4.	Building Number	N/A	Must match CBM014
5.	Room Number	N/A	Special characters
6.	Primary CIP Code	N/A	Must be on list of valid CIP codes; CIP not = 000000 if Item #8 = 110 or 115
7.	Omitted		110 or 110
8.	Space Use Code	N/A	Value less than 040 or greater than 970; value not = M10, U10, WWW, XXX, YYY, ZZZ, W01-W07, X01- X04, Y01-Y04 when Item #9 = 02-07
9.	Primary Functional Cat Code	N/A	Value less than 02 or greater than 92; value not = 02-07 when Item #8 = M10, U10, WWW, XXX, YYY, ZZZ, W01-W07, X01- X04, Y01-Y04; blank if Item #6 filled
10.	Primary CIP Percent	N/A	Not numeric if Item #6 filled
11.	Room Area	N/A	Not numeric if Item #6 filled
12. 13. 14. 15. 16.	Omitted Omitted Omitted Omitted Omitted		

ITEM NUMBER		QUESTIONABLE VALUE	ERROR VALUE
17.	Student Station Capacity	N/A	Value of 0000 if Item #8 = 110, 210, 220, 350, 410, 430, 610, 680
18.	Secondary CIP Code	N/A	Must be on list of valid CIP codes; CIP not = 000000 if Item #8 = 110 or 115
19.	Omitted		110 or 110
20.	Secondary Functional Cat Code	N/A	Value less than 02 or greater than 92; value not = 02-07 when Item #8 = M10, U10, WWW, XXX, YYY, ZZZ, W01-W07, X01- X04, Y01-Y04; blank if Item #18 filled
21.	Secondary CIP Percent	N/A	Not numeric if Item #18 filled
22.	Remaining CIP Code	N/A	Must be on list of valid CIP codes; CIP not = 000000 if Item #8 = 110 or 115
23.	Omitted		110 01 110
24.	Remaining Functional Cat Code	N/A	Value less than 02 or greater than 92; value not = 02-07 when Item #8 = M10, U10, WWW, XXX, YYY, ZZZ, W01-W07, X01- X04, Y01-Y04; blank if Item #22 filled
25.	Remaining CIP Percent	N/A	Not numeric if Item #22 filled
26.	Record Identification	N/A	Any value except '11'
27.	Floor (optional)	N/A	N/A

Space Excluded From E&G Space Calculation

When determining the amount of assignable Educational and General Space (E&G) square footage of a building, the following Building Types, CIP, Space Use Codes, and Functional Category Codes are excluded.

Building Condition 7	Mothballed facility currently excluded from routine operation and maintenance expense
Building Type 6 or 7	Residence, Single and Resident, Family
Building Type 8 or 9	Non-institutional Agency Buildings and Rental Property
Building Type R	Renovations that cause the entire building to be temporarily out of service
CIP 720000 – 739999	Intercollegiate Athletics and Support Facilities (food, health, housing, parking, retail, and childcare services)
CIP 817500	Alumni Relations
CIP 999999	Unknown use by External Agencies with Functional Category Code 92
Space Use Code 523	Indoor Athletic Facilities Spectator Seating
Space Use Code 630 - 635	Food Facility and Food Facility Service
Space Use Code 660 - 665	Merchandising and Merchandising Service
Space Use Code 670 – 675	Recreation (non-athletic/PE) and Recreation Service
Space Use Code 750 – 755	Central Food Store and Central Food Store Service
Space Use Code 810 – 895	These Space Use Codes include Health Care Facilities (unless with Functional Category Codes 11, 12, 15, 21, or 22)
Space Use Code 910 – 970	Residential Facilities
Space Use Code 050 – 070	Inactive areas permanently or temporarily incapable of use
Space Use Code M10, U10, and W10	Men's, Unisex, and Women's public restrooms
Space Use Code WWW, XXX, YYY, and ZZZ	Circulation, Building Service, Mechanical, or Structural Areas (non-assignable space)
Functional Category Codes 02 – 07	Unclassified or non-assignable space necessary for the general operation of a building (custodial, mechanical, mothballed, public restrooms, shell space, circulation area)
Functional Category Codes 31 – 35	Public Service
Functional Category Code 42	Museums and Galleries
Functional Category Code 52	Social and Cultural Development outside the degree curriculum

Functional Category Codes 55 – 57 Student Service (Student Auxiliary Service, Intercollegiate Athletics (except with CIP Student

Health/Medical Services) (740000 – 745000)

Functional Category Codes 65 – 66 Faculty and Staff Auxiliary Services and Alumni Records

Functional Category Code 91 Independent Operations/Institutional

Functional Category Code 92 Independent Operations/External Agencies (Use CIP

999999 for unknown use)

CBM014 Facilities Building Inventory Report

This manual supersedes the Texas Higher Education Coordinating Board (THECB) 2005 Facilities Inventory Procedures Manual. The THECB implemented the coding structure outlined in this manual on November 1, 2008. The changes implemented in this manual are auditable effective November 1, 2009. All certified inventory reports prior to November 1, 2009 will be audited under the 2005 Facility Inventory Manual. Compatibility and reporting procedures in the 2005 manual have mostly been retained. The primary purpose of this manual is to provide a uniform physical facilities coding system that prevails between higher education institutions in Texas and across the nation for data included in a building and room inventory. It provides a current and common framework for terms and definitions around which to compile data systems for physical facilities. The majority of the data codes are based on definitions and standards established by the National Center for Education Statistics, *Postsecondary Education Facilities Inventory and Classification Manual*, U. S. Department of Education, NCES 92-165, 2006, but some data codes are unique to Texas higher education institutions. The guidelines established by this manual may only be part of an institution's total facilities and capital asset inventory.

Sections 61.0572 and 61.058 of the Texas Education Code define THECB duties and its essential responsibilities to Texas higher education institutions. Basically, the THECB must assist institutions in efficient use of its construction funds and the orderly development of physical plants to accommodate projected college student enrollments.

This report includes facilities under the jurisdiction or control of the institution's governing board, regardless of location and encompasses different types of structures, including marine/research vessels; aquarium structures; animal quarters; and trailers on wheels that are not mobile. If a building is not owned by the institution or is shared with other tenants, include only the portion of the building leased or controlled by the institution and it's pro rata share of gross, assignable area and non-assignable area.

The report includes minor structures or temporary facilities that meet all of the following criteria:

- the structure is attached to a foundation,
- the structure is roofed,
- the structure is serviced by a utility (exclusive of lighting), and
- the structure is a source of maintenance and repair activities.

Refer to Appendix H for building data file codes and definitions, and Appendix I for a Glossary of Facilities Terms located at http://www.txhighereddata.org/ReportingManuals.cfm.

Addition of Buildings

The addition of buildings should be reported on an on-going basis.

Building Demolition

A building must be on the inventory with the appropriate Building Condition and Functional Category Codes until demolition is completed; at which time the building and room records may be deleted.

Exclusions

Do not include buildings intended as investment properties, which are used only for revenue generation and not for institutional purposes. Additionally, exclude hospitals not owned by the institution (except for any space in the hospital leased or controlled by the institution), public schools not owned by the institution, but used for practice teaching, and federal contract research centers identified by the Federal Office of Management and Budget (OMB).

Basis for Building Measurement

Compute gross area using an accurate and verifiable means to the nearest whole square foot.

NOTES:

Building Type code 2 (Academic/Residence) is a mixed-use facility and only nonresidential rooms should be included in the facilities inventory room file.

Building Type codes 6 and 7 (Residence/Single and Residence/Family) do not require residential rooms to be included in the facilities inventory room file. The building's assignable space will automatically be calculated at 60 percent.

Building Type codes 8 and 9 (Non-institutional Agency Buildings and Rental Property) are not required to be included in the facilities inventory room file that serves non-institutional functions.

Item #17

Item #18

Instructions for Facilities Building Inventory Report

Item #1	Record Code. Always enter 'B'.
Item #2	Institution Code. Enter the FICE Code of the institution. See Appendix A.
Item #3	Report Year. Enter all four digits of the calendar year in which the inventory occurs.
Each buildin identification	DENTIFICATION Ig should be assigned a unique alpha or numeric code to identify its record. The building in used to identify a room in this report must be the same as the building identification CBM005, Building and Room Report.
Item #4	Building Number. Enter the assigned building number.
Item #5	Building Name. Enter the assigned name of the building.
Item #6	<u>Condition Code</u> . Enter the condition code based on the physical status of the building at the time of the report. See Appendix H.
Item #7	Ownership Code. Enter the ownership code that represents the agency with which the ownership of the building resides. See Appendix H.
Item #8	<u>Location Code</u> . Enter the location code that represents the physical location of the building in relation to the main campus. See Appendix H.
Item #9	<u>Type Code</u> . Enter the type code that represents the purpose-function category that best describes its primary use. See Appendix H.
Item #10	Omitted.
Item #11	<u>Initial Occupancy Date</u> . Enter the four-digit calendar year of the initial occupancy of the building by the building's original owner, whether the institution owns it or not.
Item #12	Number of Floors. Enter the number of floors in the building, including basements, penthouse, half-basements, mezzanines, and assignable attic space. Example: 9 floors = 09.
Item #13	<u>Gross Area</u> . Enter the sum of the floor areas within the exterior walls of the building for all stories or areas that house floor surfaces. Round to the nearest whole square foot, right justified, leading zeros.
Item #14 Item #15 Item #16	Omitted. Omitted. Omitted. Omitted.

<u>Zip Code</u>. Enter the five-digit zip code of the building's **physical** address.

Record Identification. Always enter '14'.

Data Processing Record Layout

		Beginning Position	<u>Length</u>
Item #1	Record Code – Always 'B'	1	1
Item #2	Institution Code – FICE – Numeric	2	6
Item #3	Report Year – Numeric	8	4
Item #4	Building Number – Alphanumeric	12	6
Item #5	Building Name – Alphanumeric	18	50
Item #6	Condition Code – Numeric	68	1
Item #7	Ownership Code – Numeric	69	1
Item #8	Location Code – Numeric	70	1
Item #9	Type Code – Numeric	71	1
Item #10	Omitted	72	1
Item #11	Initial Occupancy Date – Numeric	73	4
Item #12	Number of Floors – Numeric	77	2
Item #13	Gross Area – Numeric	79	7
Item #14	Omitted	86	10
Item #15	Omitted	96	4
Item #16	Omitted	100	6
Item #17	Record Identification – Always '14'	106	2
Item #18	Zip Code	108	5

Questionable and Error Values

The following values are used in the Coordinating Board's edit program to determine Questionable and Error Values of each data element.

ITEM NUMBER		QUESTIONABLE VALUE	ERROR VALUE
1.	Record Code	N/A	Any value except 'B'
2.	Institution Code	N/A	Must match value on header record and be on the list of valid FICE codes
3.	Report Year	N/A	Must match value in header record
4.	Building Number	N/A	Special characters
5.	Building Name	N/A	Blank
6.	Condition Code	N/A	Any value except 1 thru 7
7.	Ownership Code	N/A	Any value except 1 thru 8
8.	Location Code	N/A	Any value except 1 thru 3
9.	Type Code	N/A	Any value except 1 thru 9, H, or R
10.	Omitted		
11.	Initial Occupancy Date	N/A	Non-numeric; value less than 1840 or greater than current year
12.	Number of Floors	Value greater than 25	Non-numeric; value less than 00
13.	Gross Area	N/A	Value less than 0000000
14. 15. 16.	Omitted Omitted Omitted		
17.	Record Identification	N/A	Any value except '14'
18.	Zip Code	N/A	Not on zip code file

CBM00N Student Number Change Report

The Texas Education Code, Section 61.0595, sets an undergraduate funding limit for universities and health-related institutions equal to length of degree plus 30 or 45 semester credit hours (SCH). The limit applies to students who first enroll in an institution of higher education in the 1999 fall semester and later. The 45 SCH limit affects those students who initially enrolled in an institution of higher education from the fall 1999 semester to the summer 2006 semester. The 30 SCH limit affects those students who enrolled in the fall 2006 semester and later. The academic semester credit hours attempted at community, technical, and state colleges affect this limit.

In order for the Coordinating Board to maintain a database indicating the number of hours an eligible undergraduate student has accumulated toward the limit, student identifying numbers (social security numbers), birth dates, and gender must be as accurate as possible. These changes can be submitted through the electronic data transfer system using the format identified in this report.

This report can be submitted at any time. The date that the CB applies the change will be maintained in the database. Records in error will not be added to the database. This report will not be certified.

HRI Student Number Change Report (CBM00N)

Instructions for Student Number Change Report

Item #1 Record Code. Always enter 'N'.

Item #2 Institution Code. Enter FICE Code of the institution (see Appendix A).

NOTE: All three items: student number, birth date, and gender will be used to uniquely identify a student. All three items of the prior number must match to a record in the database before the current number will be used as a replacement.

Item #3 <u>Current Student Identification Number</u>. Enter the current Social Security Number of the student. This should not be an assigned identification number except in infrequent occasions.

Item #4 <u>Current Date of Birth</u>. Enter all four digits of the year and the month and day of birth of the student in format YYYYMMDD.

YYYY = Year MM = Month DD = Day

Item #5 Current Gender. Enter the gender of the student.

M = Male F = Female

Item #6 Prior Student Identification Number. Enter the prior identifying number of the student. If the student identifier did not change, it will be the same as the current student identifier.

Item #7 Prior Date of Birth. Enter all four digits of the year and the month and day of birth of the student in format YYYYMMDD. If the birthday did not change, enter the current date of birth to uniquely identify to which student the change applies.

YYYY = Year MM = Month DD = Day

Item #8 Prior Gender. Enter the gender of the student. If the gender of the student did not change, enter the current gender to uniquely identify to which student the change applies.

M = Male F = Female

Item #9 Last Name. Enter up to 20 characters of the student's current last name.

Item #10 First Name. Enter the first 10 digits of the student's first name.

Item #11 Middle Initial. Enter the initial of the student's middle name.

HRI Student Number Change Report (CBM00N)

Data Processing Record Layout

		Beginning <u>Position</u>	Length
Item #1	Record Code - Always 'N'	1	1
Item #2	Institution Code - FICE – Numeric	2	6
Item #3	Current Student Identification Number – Numeric	8	9
Item #4	Current Date of Birth - YYYYMMDD - Numeric	17	8
Item #5	Current Gender - 'M' or 'F'	25	1
Item #6	Prior Student Identification Number – Numeric	26	9
Item #7	Prior Date of Birth - YYYYMMDD - Numeric	35	8
Item #8	Prior Gender - 'M' or 'F'	43	1
Item #9	Last Name – Alpha	44	20
Item #10	First Name – Alpha	64	10
Item #11	Middle Name Initial – Alpha or blank	74	1

CBM00R Residents/Fellows Report

Public health-related institutions and certain private independent institutions and organizations report medical/dental residents and postdoctoral/research fellows to the Coordinating Board for purposes of reporting to state officials and state funding. The records for all components of the health-related institution will be submitted as one report under the FICE code of the health science center. The categories of data collected are as follows:

- Residents
 - Medical/Osteopathic Medical (GME)
 - Podiatry (GME)
 - Dental
 - Pharmacy
- Postdoctoral/Research Fellows
 - Biomedical Science
 - Allied Health
 - Public Health
 - Nursing

The majority of data collection relates to Medical, Osteopathic Medical, and Podiatry (GME) Residents. These data are used for verification purposes, input for determining Health-Related Institutions' Graduate Medical Education (GME) and Infrastructure formula funding, and for allocation of GME funds trusteed to the Coordinating Board.

The terms Graduate Medical Education and Residency are interchangeable and describe the final stage of formal education a physician must complete prior to receiving state licensure, entering independent practice, and obtaining board certification in a medical specialty area. Residency training is a three- to seven-year process of focused education and training offered by nationally-accredited programs, typically in large hospital settings. Residency programs are accredited nationally by the Accreditation Council for Graduate Medical Education (ACGME) for Doctor of Medicine (MD) and Doctor of Osteopathic Medicine (DO) degrees, and by the Council on Podiatric Medical Education (CPME) for Doctor of Podiatric Medicine (DPM).

The term Postdoctoral/Research Fellow refers to individuals who have earned a doctoral degree and are continuing their training or research at a health-related institution.

These data are used to support health-related institutions' formula calculations in the following areas:

For GME funding purposes:

- GME Resident counts Used as input into the Graduate Medical Education formulas for the health-related institutions' appropriation requests. The appropriations related to this request are detailed as follows:
 - Formula Funding Graduate Medical Education Appropriations for state health-related institutions
 - o **Trusteed Funding Graduate Medical Education** Appropriations for

Coordinating Board trusteed programs

- Graduate Medical Education for Baylor College of Medicine
- Graduate Medical Education for Independent Residency Programs
- Family Practice Residency Program

For Infrastructure funding purposes:

- **GME Resident and Postdoctoral/Research Fellows counts** – Used as input into the health-related institutions' Space Model. The output of the Space Model is used as input for calculating the Infrastructure Formula for the Infrastructure appropriations request. These counts include only the state public health-related institutions. The appropriations related to this request are bill pattern appropriations labeled as Infrastructure – E & G Space Support.

The reporting of data is dependent upon each institution/organization and the programs it offers. Appendix J provides a table of allowable reporting categories for data submissions for each institution/organization. These reporting categories are used to track the programs offered by each institution and mirror allowable data entry categories used for the Instruction and Operations formula.

Data will be submitted electronically in the prescribed format described in this manual.

Timing Considerations for Reporting Data

All institutions/organizations must report headcount and related information on residents as of September 1 of each year. Each institution/independent organization must have its data show an error-free status by October 15 of each even-numbered year in order to have its count included in the formula funding calculations. Failure to achieve an error-free status could result in loss of formula funding appropriations.

Resident/Postdoctoral/Research Fellows Qualifications

The following qualifications apply to all GME Residents and postdoctoral/research fellows reported:

- All required data fields must be submitted in order for a resident/postdoctoral/research fellow to be counted for formula funding. Do not include residents/fellows with Doctor of Chiropractic (DC) or Doctor of Optometry (OD) degrees.
- A given Medical/Dental or Postdoctoral Specialty (Advanced Dentistry) student that is enrolled and reported on the HRI CBM001 Student Report with classification A-D or M should not be reported on the CBM00R. That individual will be counted on the CBM001 report. Reporting a Medical/Dental or Postdoctoral Specialty (Advanced Dentistry) student on both will result in an error

on the CBM00R edit report.

- A given resident/postdoctoral/research fellow can only be claimed and reported by one institution/organization for a given year. No duplicate reporting will be allowed. Any duplication in reporting is the responsibility of each institution/organization to resolve. The data collection system will consider the first reporting of a resident/postdoctoral/research fellow as the authorized entry. Any subsequent reporting of the same person by another institution/organization will be flagged as an error. If the first reporting is in error, it is the responsibility of the first institution/organization reporting that person to remove it from its list so another institution/organization may report that person.
- For Medical, Osteopathic Medical, and Podiatry (GME) residents, only MDs, DOs, and DPMs that are training in residency programs affiliated with either the Accreditation Council for Graduate Medical Education (ACGME) for MDs and DOs or the Council on Podiatric Medical Education (CPME) for DPMs will be accepted.
- Only postdoctoral/research fellows that have earned a PhD, DVM, DPT, AUD, DRPH, DNP, DMP, OTD, MDPHD, DOPHD, or PsyD will be accepted.
- Only certain degrees are eligible to be counted in a given category. If an
 ineligible degree is reported for a category, it will be rejected as an error on the
 edit report. The following table of Reporting Categories outlines the required
 degree selection for each category.

Residents

- Medical (GME) MD, DO, MDPHD, MBBS, or MC
- Podiatry (GME) DPM
- Dental BDS, DDS, DMD, or DDSPHD
- Pharmacy PHARMD

Postdoctoral/Research Fellows

- Biomedical Science PHD, MDPHD, DVM, DMP, MD, DO, or PSYD
- Allied Health PHD, DPT, AUD, MD, or DO
- Public Health PHD, MDPHD, DOPHD, DRPH, MD, DO,
- Nursing PHD, DNP, or MD
- The maximum number of years that a resident/postdoctoral/research fellow can be reported is seven. Residents/postdoctoral/research fellows whose total of "Prior Cumulative Residency/Research Years," Item #16, plus "Years Completed in Current Residency/Research Program," Item #15, exceeds seven years will be rejected.
- Residents or postdoctoral/research fellows whose school of graduation appears
 on the Coordinating Board's list of "Institutions Whose Degrees are Illegal to Use
 in Texas" will not be considered in the counts used for formula funding purposes
 and will be rejected as an error on the edit report. This list can be viewed on the

Coordinating Board's website at https://www.highered.texas.gov/institutional-resources-programs/private-postsecondary-institutions/resources/.

Institution/Organization Point of Contact

Each health-related institution or other independent organization will designate a specific person to be the primary contact for handling all communication regarding this data with the Texas Higher Education Coordinating Board. The person assigned to be the primary contact needs to be of a level and position that can effectively deal with the respective units of your institution/organization to compile the data required and be responsible for answering any questions in its regard.

It is the responsibility of the institution/organization to provide revised information to the Coordinating Board whenever a change is made in the point of contact. The Coordinating Board is not responsible for missed data submission deadlines due to use of point of contact information that is no longer current or has not been updated.

The following point of contact information is required:

- Name and Title
- Department
- Institution/Organization Name
- Mailing Address
- Email Address
- Telephone Number

Send the required contact information to Tanya Trevino in the Educational Data Center of the Texas Higher Education Coordinating Board at Tanya.Trevino@highered.texas.gov.

Contact Jennifer Gonzales, Senior Director in the Division of Funding and Resource Planning, with general questions and concerns at Jennifer.Gonzales@highered.texas.gov.

Instructions for Residents/Fellows Report

Item #1	Record Code. Always enter 'R'.						
Item #2	<u>Institution Code</u> . Enter the six-digit FICE code of the health-related institution or independent organization. See Appendix A.						
Item #3	<u>Individual Identification Number</u> . Enter the social security number of the resident or fellow.						
Item #4	Reporting Category. Enter the appropriate code for the type of program.						
	 GME Residents Dental Residents Pharmacy Residents Biomedical Science Postdoctoral/Research Fellows Allied Health Postdoctoral/Research Fellows Public Health Postdoctoral/Research Fellows Nursing Postdoctoral/Research Fellows 						
Item #5	Gender. Enter the gender of the resident or fellow.						
	M = Male F = Female						
Item #6	Unused						
Item #7	<u>First Name</u> . Enter the first name of the resident or fellow, left justified.						
Item #8	Middle Initial. Enter the middle initial of the resident or fellow.						
Item #9	<u>Last Name</u> . Enter the last name of the resident or fellow, left justified.						
Item #10	<u>Degree</u> . Enter the degree of the resident or fellow, left justified.						
	AUD Doctor of Audiology BDS Bachelor of Dental Science DDS Doctor of Dental Surgery DDSPHD Doctor of Dental Surgery/Terminal Doctoral Degree DMD Doctor of Dental Medicine DMP Doctor of Medical Physics DNP Doctor of Nursing Practice DO Doctor of Osteopathy DPM Doctor of Podiatric Medicine DPT Doctor of Physical Therapy DRPH Doctor of Public Health DVM Doctor of Veterinary Medicine MBBS Bachelor of Medicine/Bachelor of Surgery						

MC Master's in Counseling

MD Medical Doctor

MDPHD Medical Doctor/Terminal Doctoral Degree

OTD Doctor of Occupational Therapy

PHARMD Pharmacy Doctorate
PHD Terminal Doctoral Degree
PSYD Doctor of Psychology

Item #11 Unused.

Item #12 <u>Type of License</u>. Enter the code for the type of license held. Codes are unique to each type of degree; left justify. Not required for DRPH, PHD, PSYD, or DMP degrees.

If degree is AUD, then report:

LAU Texas Department of Licensing and Regulation

If degree is BDS, DDS, DMD, or DDSPHD, then report:

LD Texas State Board of Dental Examiners licensed Dentist

NL No License

OOS Out-of-State License

If degree is DNP, then report:

LRN Texas Board of Nursing licensed Registered Nurse

If degree is DPM, then report:

DLR Texas Department of Licensing and Regulations

If degree is DO, MBBS, MC, MD, MDPHD, or DOPHD then report:

TML Texas Medical Board fully-licensed Doctor

BP1 Texas Medical Board Basic Permit 1

BP2 Texas Medical Board Basic Permit 2

BP3 Medical Board Basic Permit 3

BP4 Medical Board Basic Permit 4

BP5 Medical Board Permit 5

TP1 Texas Board of Medical Examiners Temporary Permit 1

TP2 Texas Board of Medical Examiners Temporary Permit 2

IP Institutional Permit

MDN No License – MD only

If degree is DPT or OTD, then report:

LPT Texas Executive Council of Physical Therapy & Occupational Therapy Examiners licensed Physical Therapist

If degree is DVM, then report:

LV Texas State Board of Veterinary Medical Examiners licensed Veterinarian

NL No License

If degree is PHARMD, then report:

LP Texas State Board of Pharmacy licensed Pharmacist

NL No License (due to testing delays)

Item #13 Program Code. Enter the appropriate 10-digit code for the medical (GME) residency program. See Appendix K. Required for medical (GME) residents only. Leave blank if not applicable.

Note: In July of each year, the ACGME provides us a data file of all of the approved medical residency programs for Texas institutions. This data file is Appendix K. The THECB uses that data file to validate the data reported by the institutions. Since the ACGME data provides a snapshot in early July, any residency programs approved in July or August will have to be communicated to the THECB to add them to our database and allow the institution to report complete and accurate residency counts. Given this process, institutions are encouraged to seek ACGME approval of their programs as early as possible so that the number of new programs approved in July and August is kept to a minimum. **Should you encounter a medical (GME) resident that is in an approved ACGME or AOA program that is not on the program code listing, please contact the Coordinating Board and request that it be added.**

Sponsoring Institution as shown in Appendix K - In the great majority of cases, the sponsoring institution for a given medical (GME) residency is one of the ten health-related institutions that report their residents for those programs they sponsor. In a few cases, a hospital is shown by ACGME as the program sponsor. In those situations it will be necessary for the reporting institution to contact the THECB and let us know that your institution will be claiming that program for the purposes of reporting residents. **This process will need to be done annually, since data are run with a new program listing every year. Due to the changing nature of residency programs, the THECB cannot rely on last year's affiliations.**

Item #14 Residency/Research Program Length. Enter the code that corresponds with the total number of years for the current program.

Note: This field is not reported for Medical, Osteopathic Medical, and Podiatry (GME) Residents since the program length for Medical (GME) Residents is obtained from the ACGME and CPME (see Appendix K). Enter zero for Medical, Osteopathic Medical, and Podiatry (GME) Residents.

1	One year	5	Five years
2	Two years	6	Six years
3	Three years	7	Seven years
4	Four years		•

NOTE: The following note applies to Items #15 and #16. The sum of Items #15 and #16 cannot exceed 6. The Coordinating Board will add one year to the total for the current year. The record will be flagged as an error if the sum of Items #15 and #16 plus 1 is greater than 7. Item #15 plus 1 cannot exceed the program length in Item #14.

Item #15 Years Completed in Current Residency/Research Program. Enter the cumulative number of years completed for the **current** program at the **current** institution. If the current year is the first year in the currently reported program (regardless of program level) at your institution for this resident (Item #13), enter 0.

0	No years	4	Four years
1	One year	5	Five years
2	Two years	6	Six years
3	Three years		•

Item #16 Prior Cumulative Residency/Research Years. Enter the code that corresponds with the cumulative number of residency years at any institution, including the current institution, in all programs that the resident/fellow had completed **prior** to admission to the current resident/research program.

0	No prior years	4	Four years
1	One year	5	Five years
2	Two years	6	Six years
3	Three years		-

- Item #17 <u>Medical School of Graduation</u>. Enter the 5-digit code of the medical school from which the resident graduated, leading zeros. Required for medical residents only; leave blank if not applicable. See Appendix L.
- Item #18 <u>Date of Medical School Graduation</u>. Enter the 4-digit year and 2-digit month in which the resident graduated from medical school. **Required for medical (GME)** residents only; leave blank if not applicable.

YYYYMM

- Item #19 Non-disclosure. Enter a '2' to indicate that the individual resident or fellow has notified the institution/organization of his/her refusal to have "directory information" disclosed; else zero fill.
- Item #20 Reporting Period. Always enter '5' for annual report.
- Item #21 Year of Report. Enter the 4-digit academic year the report covers using an 'as of'

date of September 1.

YYYY

Example: For 2018-2019 academic year (as of September 1, 2018) enter '2018'.

Item #22 <u>License/Permit Number or Institutional Permit Number</u>. Enter the license/permit number or an institutional permit number, left-justified. Not required for DRPH, DMP, PHD or PSYD degrees. Leave blank if not applicable.

If BDS, DDS, DMD, DDSPHD, DVM and no license, or MDN, leave blank.

- Item #23 <u>State of License</u>. Enter the 2-letter U. S. Postal Service abbreviation for the state from which the license was issued.
- Item #24 <u>Ethnic Origin</u>. Enter the code indicating whether the student is of Hispanic or Latino origin or not.
 - 1 Hispanic or Latino origin
 - 2 Not Hispanic or Latino origin
 - 3 Not answered

Item #25 Race. Select one or more codes indicating the race of the student.

Item #25A 1 White Item #25B 2 Black or African-American Item #25C Asian Item #25D American Indian or Alaskan Native Item #25E 6 International Item #25F 7 Unknown or Not Reported Item #25G Native Hawaiian or Other Pacific Islander

Definitions:

- Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- American Indian or Alaskan Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
- Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African-American: A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White: A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

- International denotes a person who is not a citizen or permanent resident of the United States and who is in this country on a temporary basis and does not have the right to remain indefinitely.
- Unknown or Not Reported: The unknown classification should only be used if the student has not selected a racial designation.

Data Processing Record Layout and Field Requirements

												
					R = Required N/A = Not Collected from			lected from		O = Op		
						Resid	dents		Post	doctoral/Re	esearch Fe	llows
					Medical	Podiatry	Dental	Pharmacy	Biomed	Allied	Public	Nursing
Item		Field	Beginning		Wedicai	Podiatry	Dentai	ГПаппасу	Sci	Health	Health	Nuising
Number	Field Name	Туре	Position	Length	00	00	05	10	15	20	25	30
1	Record Code - Always 'R'	Alpha	1	1	R	R	R	R	R	R	R	R
2	Insitution Code	Numeric	2	6	R	R	R	R	R	R	R	R
3	Individual ID Number	Alphanumeric	8	9	R	R	R	R	R	R	R	R
4	Reporting Category	Numeric	17	2	R	R	R	R	R	R	R	R
5	Gender	Alpha	19	1	R	R	R	R	R	R	R	R
6	Unused		20	1								
7	First Name	Alpha	21	10	R	R	R	R	R	R	R	R
8	Middle Initial	Alpha	31	1	R	R	R	R	R	R	R	R
9	Last Name	Alpha	32	20	R	R	R	R	R	R	R	R
10	Degree	Alpha	52	6	R	R	R	R	R	R	R	R
11	Unused		58	5								
12	Type of License	Alphanumeric	63	3	R	R	R	R	0	N/A	N/A	R
13	Program Code	Numeric	66	10	R	R	N/A	N/A	N/A	N/A	N/A	N/A
14	Program Length	Numeric	76	1	N/A	N/A	R	R	R	R	R	R
15	Yrs Comp In Current Program	Numeric	77	1	R	R	R	R	R	R	R	R
16	Prior Cumulative Years	Numeric	78	1	R	R	R	R	R	R	R	R
17	Medical School of Graduation	Numeric	79	5	R	R	N/A	N/A	N/A	N/A	N/A	N/A
18	Date of Medical School Grad	Numeric	84	6	R	R	N/A	N/A	N/A	N/A	N/A	N/A
19	Non-disclosure	Numeric	90	1	R	R	R	R	R	R	R	R
20	Reporting Period - Always '5'	Numeric	91	1	R	R	R	R	R	R	R	R
21	Year of Report	Numeric	92	4	R	R	R	R	R	R	R	R
22	License/Permit Number	Alphanumeric	96	12	R	R	R	R	N/A	N/A	N/A	R
23	State of License	Alpha	108	2	R	R	R	R	N/A	N/A	N/A	R

Data Processing Record Layout and Field Requirements (cont.)

					R:	= Required	N/A =	 Not Collect 	ed from Ins	titution	O = Option	onal
						Resid	dents		Postdoctoral/Research Fellows			llows
					Medical	Podiatry	Dental	Pharmacy	Biomed	Allied	Public	Nursing
Item		Field	Beginning		Medical	Fodialiy	Dentai	Filalillacy	Sci	Health	Health	Nursing
Number	Field Name	Туре	Position	Length	00	00	05	10	15	20	25	30
24	Ethnia Origin	Numaria	110	4	В	l R	В	Гр	R	В	В	
24	Ethnic Origin	Numeric	110	1	R	K	R	R	K	R	R	R
25	Race:											
25A	White	Numeric	111	1	R	R	R	R	R	R	R	R
25B	Black/African American	Numeric	112	1	R	R	R	R	R	R	R	R
25C	Asian	Numeric	113	1	R	R	R	R	R	R	R	R
25D	American Indian/Alask. Nat.	Numeric	114	1	R	R	R	R	R	R	R	R
25E	International	Numeric	115	1	R	R	R	R	R	R	R	R
25G	Unknown/Not Reported	Numeric	116	1	R	R	R	R	R	R	R	R
25G	Native Hawaiian/Other Pac. Is.	Numeric	117	1	R	R	R	R	R	R	R	R
		Eligible Degree for Giv	en Category:		MD	DPM	DDS	PharmD	PhD	PhD	PhD	PhD

Englishe Begree for Civen Gategory.

MD	DPM	DDS	PharmD	PhD	PhD	PhD	PhD
DO		DMD		DVM	DPT	DrPH	DNP
MDPhD		DDSPHD		DMP	AuD	MDPhD	MD
MBBS		BDS		MDPhD	MD	DOPhD	
MC				MD	DO	MD	
				PsyD		DO	

Please refer to the above table for rquired vs. optional reporting requirements, depending on the Reporting Category involved, as well as eligible degrees

Questionable and Error Values

The following values are used in the Coordinating Board's edit program to determine Questionable and Error Values of each element.

ITEN	<u>M NUMBER</u>	QUESTIONABLE VALUE	ERROR VALUE		
1.	Record Code	N/A	Any value except 'R'		
2.	Institution Code	N/A	Must match value on header record and be on the list of valid FICE codes		
3.	Individual ID Number	Alpha characters	Blank or special characters; if on CBM001 with classification A – D or M and CBM00R		
4.	Reporting Category	N/A	Blank or special characters; not 00 if Item #10 = DO, DPM, MBBS, MC, MD, or MDPHD; not 05 if Item #10 = BDS, DDS, DDSPHD, or DMD; not 10 if Item #10 = PHARMD; not 15 if Item #10 = DMP, DVM, MD, MDPHD, DO, PHD, or PSYD not 20 if Item #10 = AUD, DPT, MD, DO, or PHD; not 25 if Item #10 = DRPH, MD, MDPHD, DOPHD, DO, or PHD; not 30 if Item #10 = DNP, MD, or PHD; not 15, 20, 25, or 30 if Item #12 = MDN		
5.	Gender	N/A	Any value except 'M' or 'F'		
6.	Unused	N/A	N/A		
7.	First Name	N/A	Blank or numerical		
8.	Middle Initial	N/A	N/A		
9.	Last Name	N/A	Blank or numerical		
10.	Degree	N/A	Blank or any value not on list of approved degrees; not DO, DPM, MBBS, MC, MD, or MDPHD when Item #4 = 00; not BDS, DDS, DDSPHD, or DMD		

ITEM NUMBER	QUESTIONABLE VALUE	ERROR VALUE
		when Item #4 = 05; not PHARMD when Item #4 = 10; not DMP, DVM, MD, MDPHD, DO, PHD, or PSYD when Item #4 = 15; not AUD, DPT, MD, DO, or PHD when Item #4 = 20; not DRPH, MD, MDPHD, DOPHD, DO, or PHD when Item #4 = 25; not DNP, MD, or PHD when Item #4 = 30
11. Unused	N/A	N/A
12. Type of License	N/A	Value other than LAU if Item #10 = AUD; value other than LD, NL, or OOS if Item #10 = BDS, DDS, DDSPHD, or DMD; value other than LRN if Item #10 is = DNP; value other than DLR if Item #10 is = DPM; value other than TML, BP1-BP5, TP1, TP2, or IP if Item #10 = DO, MBBS, MC, MD, or MDPHD; value other than MDN if item #10 = MD and Item #4 = 15, 20, 25, or 30; value other than LPT if Item #10 = DPT; value other than LV or NL if Item #10 = DVM; value other than LP or NL if Item #10 = PHARMD; not blank if Item #10 = DRPH, DMP, or PHD
13. Program Code	N/A	Not on program file; blank if Item #4 = '00'
14. Program Length	N/A	Any value other than '1'-'7'; not 0 if Item #4 = '00'

ITE	M NUMBER	QUESTIONABLE VALUE	ERROR VALUE
15.	Years Completed Current Program	N/A	Any value other than '0'-'6'; sum of Item #15 and #16 + 1 > 7; sum of Item #15 + 1 > Item #14
16.	Prior Cum Years	N/A	Blank or any value other than '0'- '6'; sum of Item #15 and #16 + 1 > 7; if value of '0' and prior training required = 'y'; value < sum of previous years
17.	Med Sch of Graduation	N/A	Not on medical school list; blank if Item #4 = '00'
18.	Date of Med Sch Grad	N/A	Month < 01 or > 12; month not > 08 if year = Item #21; blank if Item #17 filled in
19.	Non-disclosure	N/A	Any value except '0' or '2'
20.	Reporting Period	N/A	Any value except '5'
21.	Year of Report	N/A	Must match value on header record
22.	License/Permit Number	N/A	Blank unless Item #10 is DMP, DRPH, PHD, or <mark>PSYD</mark> ; blank unless Item #12 is NL or MDN and Item #10 is BDS, DDS, DDSPHD, DMD, DVM, or MD
23.	State of License	N/A	Blank unless Item #10 is DMP, DRPH, PHD; blank unless Item #12 is NL and Item #10 is BDS, DDS, DDSPHD, DMD, or DVM
24.	Ethnic Origin	N/A	Value other than '1', '2', or '3'
25A	. White	N/A	Value other than '1' or space or value = '1' and '7'
25B	. Black/African-Amer	N/A	Value other than '2' or space or value = '2' and '7'
25C	. Asian	N/A	Value other than '4' or space or value = '4' and '7'

<u>ITEM</u>	<u>NUMBER</u>	QUESTIONABLE VALUE	ERROR VALUE
25D.	Amer Ind/Alask Nat	N/A	Value other than '5' or space or value = '5' and '7'
25E.	International	N/A	Value other than '6' or space or value = '6' and '7'
25F.	Unknown/Not Rep	N/A	Value other than '7' or space; value = '7' plus value = '1', '2', '4', '5', '6',' or '8'
25G.	Nat Hawaiian/Pac Is	N/A	Value other than '8' or space or value = '8' and '7'

DISCREPANCY: The number of records received in each submission is compared to the number in the trailer record (control total). The difference is shown on the edit report as a discrepancy.

Use of ACGME Program Information

The medical and osteopathic (GME) resident data that is provided by the institution is validated against the program data provided to the THECB by the ACGME. This validation process is necessary in order to ensure that the CBM00R is accurate. If an edit that is based upon ACGME data fails, it is because the reported data does not agree with the ACGME data. Compare your entered data with Appendix K to determine the problem.

ACGME Program Prerequisites

The THECB is not involved with making any determinations in regard to qualifications necessary to meet ACGME prerequisites for a medical (GME) residency program. It is the responsibility of each institution to evaluate an applicant's qualifications to determine if they meet the prerequisites, if any, for a medical (GME) residency program. Once that determination has been made, and you know the total number of prior cumulative years of medical (GME) residency, you have the necessary information to report that item for a resident. Please note that if an ACGME residency program has a prerequisite for a given medical (GME) residency program, Item #16, Prior Cumulative Years, must equal or exceed the prerequisite in order to pass the edit.

Prerequisite Year

We have noted a couple of medical (GME) residency programs where the prerequisite year is under the oversight of the management responsible for the related medical (GME) residency program. This has been confusing in that it might appear that the prerequisite year is a year of the program vs. being a prerequisite. In these particular cases, the reporting institution did not have an ACGME program available to report residents that were in the prerequisite year.

In order for the CBM00R to be an automated process that performs edit checks on your data submissions, the following guidance was provided for reporting in fall 2018:

- The program length for this type of program will be considered to be the "Accredited Program Length" as posted on the ACGME program web site and listed in Appendix K.
- The number of prerequisite years will be considered to be the "Number of Prior or Additional Years Required" as posted on the ACGME program web site and listed in Appendix K.
- For CBM00R reporting process and GME formula funding purposes, the THECB is requiring that any prerequisite requirement be completed in order to report a resident in a medical (GME) residency program.

Residents from Foreign Countries

This past reporting cycle we have had some medical (GME) residents that were from foreign countries that failed the edit process due to the lack of a Social Security number. Please be advised that in order to receive GME formula funding, it is necessary that we require a Social Security number of the residents that are reported.

We would recommend that to minimize this situation each institution review the information that they provide prospective residents to ensure that these prospects are advised at the earliest possible time that they will need a Social Security number. They need to understand that the application process can be slow and that they need to apply for a number without delay.

International Physicians Entering Residency Programs

We have identified two situations that involve international physicians entering into a residency program:

- Starting Over In the case of an international physician starting over in the United States, those physicians should be reported just like a U.S. physician medical graduate. As long as the physician has an SSN, there are no unusual reporting issues.
- Direct Entry into a Residency Program In the case of an international physician admitted directly into a residency program, the following reporting guidance is provided:
 - Entry in Year 1 of the residency program Presuming that the international physician meets prerequisites for the residency program, the institution should report an equal or greater number of years than the prerequisite in Item #16, Prior Cumulative Residency/Research Years.
 - Entry in a year other than Year 1 of the residency program The institution should report the same as the Entry in Year 1 of the residency program to include any other prior residency/research years plus reporting the appropriate number of years for Item #15, Years Completed in Current Residency/Research Program, assuming the resident is continuing in the same type of program that was being taken in a foreign residency program.
 - The prior years reported will count against the total seven year limit for GME residency funding.

Reporting Examples

The following examples are provided to explain Items #15 and #16.

Example 1 – Medical (GME) Resident:

Resident A has completed three years of residency training in two previous programs prior to the current program Resident A is undertaking at the BCM. Resident A has been admitted to the Medical Genetics program, Code 1304821012, a 4 year program for the current year. Due to the resident's prior experience, the resident has been admitted into the fourth year of the Medical Genetics program.

Based upon the facts, the following graphical example is provided.

Year Level of Current Program	Yr 1	Yr 2	Yr 3	Yr 4
Medical Genetics Program	Completed Elsewhere	Completed Elsewhere	Completed Elsewhere	$>\!\!<$
				Current Yr.

For purposes of determining how to code Item #15, Years Completed in Current Residency/Research Program, the resident has not completed any years of the program at the current institution, so the value to enter for Item #15 is "0".

For purposes of determining how to code Item #16, Prior Cumulative Residency/Research Years, the resident has completed three years of prior residency. Use the value of 3. (These years of residency training could have been in any program at some other institution or the BCM, it doesn't matter. It doesn't matter whether or not a Resident completed all years of those two prior programs or not. The key data item sought is the fact that the Resident did complete three prior residency years before joining the current program.)

	Item #15 Yrs.		Item #16						Total	
	Completed in	F	Prior Total				CB Adds 1		Years for	
	Current		Years		Total Prior		for Current		Edit	Edit Status Relative to
	Program		Previous		Years		Year		Evaluation	Over 7 Yrs.
Example 1 - Resident A	0	+	3	=	3	+	1	=	4	Resident Accepted

Example 2 – Medical (GME) Resident:

Resident B is admitted to the same program at BCM as shown in Example 1. Resident B is in year level 3 of the Medical Genetics program having completed years one and two of this program at BCM. The number of residency years for Resident B in prior programs was 3 years.

Year Level of Current Program

Yr 1

Yr 2

Yr 3

Yr 4

Medical Genetics Program

Completed at BCM

Current Yr.

For purposes of determining how to code Item #15, Years Completed in Current Residency/Research Program, the resident has completed 2 years of the program, so the value to enter for Item # 15 is "2".

For purposes of determining how to code Item #16, Prior Cumulative Residency/Research Years, the resident has completed three years of prior residency. Use the value of "3".

	Item #15 Yrs.		Item #16						Total	
	Completed in		Prior Total				CB Adds 1		Years for	
	Current		Years		Total Prior		for Current		Edit	Edit Status Relative to
	Program		Previous		Years		Year		Evaluation	Over 7 Yrs.
										<u> </u>
Example 2 - Resident B	2	+	3	=	5	+	1	=	6	Resident Accepted

Example 3 – Medical (GME) Resident:

Resident C is admitted to the same program at BCM as shown in Example 1. Resident C is in year level 3 of the Medical Genetics program having completed years one and two of this program at BCM. The number of residency years for Resident C in prior programs was 5 years.

Year Level of Current Program

Yr 1

Medical Genetics Program

Yr 1

Completed at BCM

Current Yr.

Current Yr.

For purposes of determining how to code Item #15, Years Completed in Current Residency/Research Program, the resident has completed 2 years of the program, so the value to enter for Item #15 is "2".

For purposes of determining how to code Item #16, Prior Cumulative Residency/Research Years, the resident has completed five years of prior residency. Use the value of "5".

	Item #15 Yrs.	Item #16						Total	
	Completed in	Prior Tota	I			CB Adds 1		Years for	
	Current	Years		Total Prior		for Current		Edit	Edit Status Relative to Over 7
	Program	Previous		Years		Year		Evaluation	Yrs.
Example 3 - Resident C	2	+ 5	=	7	+	1	=	8	Resident Rejected - Over 7 Yrs.

Example 4 – Postdoctoral/Research Fellow:

A Postdoctoral/Research Fellow is being reported. If a fellow is working in a program that does not have an assigned length, we require Item # 14 to be 1. Every year is considered a new program, with a one year length. This fellow had worked in this unassigned length program for the prior three years.

-	Item # 14 Program Length	Item #15 Yrs. Completed in Current Program		Item #16 Prior Total Years Previous		Total Prior Years		CB Adds 1 for Current Year		Total Years for Edit Evaluation	Edit Status
Example 4 - PostDoc/Fellow D											
Edit for Total Years	N/A	0	+	3	=	3	+	1	=		Fellow Accepted 4 < 7
Edit for Total Years over Program Length (sum of Item #15 + 1 > Item #14)											
	1	0	+	N/A		N/A		1	=	1	Total 1 = #14 - Ok

If the program does not have an assigned length, then Item # 15, Years Completed in Current Residency/Research Program, must be "0". If it has a value greater than "0", the fellow will be rejected by the edit check.

In the next year when this resident is reported, they would need to increment Item # 16, Prior Cumulative Residency/Research Years, because every year is considered a new program in this situation