

Bulletin

Health Data Standards and Systems

Issue 71: 5 August 2004

Attention: Health Information Managers - For Action
VAED/ESIS/VEMD Submission Officers - For Action
VAED/ESIS/VEMD Software Suppliers - For Action
Emergency Department Directors – For Action

Issue 71 of the Health Data Standards & Systems (HDSS) Bulletin has been published in electronic format only. It has been posted onto our website at <http://www.health.vic.gov.au/hdss/bulletin/71-050804.pdf> and can be viewed as a downloadable file. To view the subject index for every edition of the bulletin, please refer to: <http://www.health.vic.gov.au/hdss/bulletin/index.htm>

Bulletin 71 provides information regarding:

- Hospital Code Table Update
- AIMS Information
- Reciprocal Health Care Agreement
- ESIS replacement pages
- VEMD Editor
- VEMD User Manual, Ninth Edition, 1 July 2004

Please download the document from our web site. If you do not have Internet access, please contact the HDSS Help Desk to obtain a hard copy of this Bulletin. It is essential that this document be distributed to relevant staff in your organisation.

Yours faithfully,

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ACTING MANAGER, HEALTH DATA STANDARDS AND SYSTEMS
METROPOLITAN HEALTH AND AGED CARE SERVICES DIVISION

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Global Update

71.1 Hospital Code Table Updates (VAED, VEMD, ESIS)

An updated version of the Hospital Code Table file, including the details below, has been posted onto the HDSS Website: <http://hdss.health.vic.gov.au/reffiles/index.htm>

The Excel file contains multiple worksheets that categorise public, private and non-Victorian hospitals, in both alphabetical and numerical order.

New Victorian Hospital

Name	VAED Code	Effective Date
Casey Gardens Day Hospital	8510	21 July 2004

71.2 AIMS Information

Revisions to AIMS data collections for 2004-05

The document outlining changes for AIMS data collections in 2004-05 has been published in electronic format on the AIMS website <http://health.vic.gov.au/aims/man2005>. It is essential that all relevant staff in your organisation are aware of the reporting changes for 2004-05.

Development of the revised AIMS on-line entry system for 2004-05 data collection is progressing. Agencies are requested to collect data for completion of the returns. An email will be sent out to all nominated AIMS contacts advising when the system will be ready for data entry.

AIMS 2003-04 End of Financial Year

To ensure the smooth completion of the 2003-04 reporting year, agencies must ensure that all data, including the month of June, are complete and accurate before the returns are closed for the year. All data should be submitted and verified by 17 September 2004.

Hospitals can view data submitted on the AIMS on-line entry system using the Hospital Activity (YTD) reports available under the Hospital Reporting folder. Where an error is detected, then a correction should be submitted. Please remember that all data submission is reflected on the Hospital Activity reports the following day.

Please do not submit 2004-05 data in the AIMS 2003-04 forms

71.3 Reciprocal Health Care Agreement

Please note that there is now a Reciprocal Health Care Agreement between Australia and Norway, which. This has been effective from 1 March 2004.

This information will be reflected in the 1 July 2004 VAED and VEMD Manuals and 1 July 2004 ESIS replacement page.

Negotiations are also underway with several other countries. HDSS will notify you of the commencement of new agreements as we become aware of them.

Elective Surgery Information System (ESIS)

71.4 Specifications for ESIS for 1 July 2004

Please find attached replacement pages to the current ESIS Manual for the following:

- Medicare Eligibility Status-Eligible Person; page 2-8
- Locality; page 3-34
- Postcode; page 3-44
- Sex; page 3-78
- Edit related to Sex; page 7-18
- Edit related to Locality/Postcode; page 7-20

Medicare Eligibility Status-Eligible Person

Definition

The patient's eligibility for Medicare as specified under the *Commonwealth Health Insurance Act 1973*. Persons eligible for Medicare include:

- A person who resides in Australia and whose stay in Australia is not subject to any limitation as to time imposed by law.
- Persons visiting Australia who are ordinarily resident in Finland, Italy, Malta, the Netherlands, New Zealand, the Republic of Ireland, Sweden, the United Kingdom or Norway as they are covered by reciprocal health care agreements (RHCA). However, persons from Malta and Italy are covered for six months only.
- A person or a class of persons declared eligible by the Commonwealth Minister of Health and Aged Care.

Guide for Use

This category does not include a foreign diplomat or family (except where eligibility is expressly granted to such persons by the terms of a reciprocal health care agreement).

An asylum seeker who has a valid temporary entry visa and is an applicant for a protection visa and has either work rights or a spouse, parent or child who is a permanent Australian resident, is eligible to apply for a Medicare card and is therefore an eligible person once they have their Medicare card.

It should be noted that some cases where the patient is an 'eligible person' they personally, or a third party, could be liable for the payment of charges for hospital services received; for example;

- Prisoners
- Patients with Defence Force personnel entitlements
- Compensable patients
- Department of Veterans' Affairs beneficiaries
- Nursing Home Type patients

Newborn babies take the eligibility status of the mother.

Categories of Eligibility

A person eligible to receive Medicare benefits will be one of the following:

- Australian Resident
- Eligible Overseas Representative
- Person declared eligible by the Minister
- From a country with which Australia has a Reciprocal Health Care Agreement.

Australian Resident

A person who resides in Australia and fulfils one of the following criteria:

- Is an Australian Citizen
- Holds an entry point permit not being a temporary entry permit
- Holds a return endorsement or resident return visa
- Has been granted refugee status
- Is the holder of a valid temporary entry permit with an application for permanent residency, and has a spouse, parent or child who is the holder of a permanent entry permit, or has authorisation to work.

Patients in this category will hold a *green* Medicare card or (if legally eligible and entitled to all health services with no restrictions) an Interim *blue* Medicare card (also entitled to all health services with no restrictions).

Australians lose entitlements to Medicare if they have been living out of the country for five or more years (as do others with permanent Visas for Australia). To become re-entitled to Medicare, they need to prove that they have returned to Australia to live (for example lease papers, employment statements).

Eligible Overseas Representatives

A member of diplomatic or consular staff or a member of their family, of a diplomatic mission of a country with which Australia has a Reciprocal Health Care Agreement (RHCA) except New Zealand.

Eligible overseas representatives have full Medicare eligibility and are not limited to immediately necessary medical treatment. Such persons are issued with a *green* Medicare care endorsed 'Visitor RHCA'.

Persons Declared Eligible by the Minister

The Commonwealth Minister for Health and Aged Care also has a discretionary power to make persons eligible for Medicare. Such persons are eligible for, and generally will hold, a Medicare card.

Reciprocal Health Care Agreement (RHCA)

Agreements negotiated by Australian authorities with other countries which enables visitors to Australia, who are ordinarily *resident* in a country with which Australia has a RHCA, to access *immediately necessary* treatment of *ill health arising during the stay and which requires attention before the patient returns home: pre-arranged and elective treatment is not covered*. This agreement provides for admitted patient care, but only as a public patient, for such medical treatment as is clinically necessary for the diagnosis, alleviation or care of the condition requiring attention, on terms no less favourable than would apply to an Australian resident.

A RHCA patient may hold *yellow-green* RHCA Medicare Card (a lighter version of the green card). Not all persons entitled to care under a RHCA will hold a RHCA card.

The RHCA countries at June 2004 are:

- Finland
- Italy (Note 1)
- Malta (Note 1)
- Netherlands
- New Zealand (Note 2)
- Republic of Ireland
- Sweden
- United Kingdom (Note 3)
- Norway

Note:

1. Persons from Italy and Malta are limited to the first six months of their visits only except where a continuing course of treatment starts before and extends over the six-month limit.
2. New Zealand diplomats and their families are not included in the Australian/New Zealand RHCA and are therefore not eligible persons.
For New Zealand residents, Medicare cover for private medical treatment was removed from September 1999. Medicare cards are no longer issued to New Zealand residents.
3. United Kingdom incorporates residents of England, Scotland, Wales, Northern Ireland, Isle of Man and the Channel Islands

Students holding student visas from a country with which Australia has a RHCA are not eligible but should register with the Overseas Student Health Cover administered by Medibank Private.

Hospitals who are having difficulty in determining the eligibility for overseas residents should ring Medicare on 132011 (Medicare hotline) for advice between 8.30 am-5.00 pm, Monday to Friday while the patient is still in hospital.

Backdating Medicare Eligibility

In the past there has been some queries regarding the backdating of Medicare eligibility. The Health Insurance Commission (HIC) has provided the following answers for your information.

Question: Does the backdating of Medicare eligibility occur?

Answer: Yes, infrequently.

Question: What evidence should the patient present to the hospital to show that they have been given backdated eligibility?

Answer: A letter from HIC, on HIC letterhead.

Question: Is the hospital obliged to return the money paid by the patient?

Answer: Yes. Hospitals should refund the money, and change the Account Class for the episode.

Question: Should the hospital check this information with HIC prior to a refund?

Answer: No. HIC would not release this information due to Privacy legislation.

Locality

Specification

Definition	Geographic location (suburb/town/locality for Australian residents, country overseas residents) of usual residence of the person (not postal address).		
Datatype	Alpha/numeric	Form	Code
Field size	Thirty	Layout	AAAAAAAAAAAAAAAAAAAAAAAAA AAAAAAAAA Left justified
Reported for	All Waiting List episodes without a <i>Postcode</i> of 1000 or 9988. If Postcode is 1000 or 9988, Locality remains blank.		
Recorded when	The patient is first registered on the Waiting List.		
Code set	Refer to the Postcode/Locality/ reference file available from: http://www.hdss.health.vic.gov.au/reffiles/index.htm		
Reporting guide	Australia Post website listing of postcodes and localities is available from: www.auspost.com.au The DHS file excludes non-residential postcodes listed in the Australia Post file. Common variations of locality spellings, as used in Melway references and the Australian Bureau of Statistics National Locality Index (Cat. No. 1252), are included in the DHS file. Where the Postcode is 8888 (overseas), report the country the patient lives in, in Locality. The four-digit country code must be one that corresponds with a code listed against 8888 (overseas) codes in the Postcode/Locality/reference file. The reporting organisation may collect the patient's postal address for its own purposes. However, for submission to ESIS, the Locality field must represent the patient's residential address.		
Edits	S122 Postcode/Locality Combination Invalid		
Related items	Section 3: <i>Postcode</i> .		

Administration

Purpose	To enable calculation (with Postcode field) of the patient's appropriate Statistical Local Area (SLA) which enables:		
	<ul style="list-style-type: none">• Analysis of service utilisation and need for services.• Identification of patients living outside Victoria for purposes of cross-border funding.• Identification of patients living outside Australia for the Reciprocal Health Care Agreement (RHCA).		
Principal data users	DHS, AIHW.		
Collection start	July 1997	Version	1 (Effective 01.07.97)
			2 (Effective 01.07.99)
			3 (Effective 01.07.04)
Definition source	DHS	Code set source	ABS National Locality Index (Cat. No. 1252) (DHS modified)
			Australian Standard Classification of Countries for Social Statistics

Postcode

Specification

Definition Postcode of the locality in which the patient usually *resides* (not postal address).

Datatype Numeric **Form** Code

Field size Four **Layout** NNNN

Reported for All Waiting List episodes.

Recorded when The patient is first registered on the Waiting List.

Code set Refer to the Postcode/ Locality reference file available from:

<http://www.hdss.health.vic.gov.au/reffiles/index.htm>

Other codes for use in this field:

Code	Descriptor
1000	No fixed abode
8888	Overseas (Report the four digit country code in the locality field)
9988	Unknown address

Reporting guide [The Australia Post listing of postcodes and localities is available from:](#)

www.auspost.com.au

From the Australia Post list, non-residential postcodes are excluded and common variations of locality spellings, as used in Melway references and the Australian Bureau of Statistics National Locality Index (Cat. No. 1252), are included.

The reporting organisation may collect the patient's postal address for its own purposes. However, for submission to ESIS, the Postcode must represent the patient's residential address. Non-residential postcodes (such as mail delivery centres) will be rejected.

Edits S122 Postcode/Locality Combination Invalid

Related items Section 3: *Locality*.

Administration

<i>Purpose</i>	To enable calculation (with Locality field) of the patient's appropriate Statistical Local Area (SLA) which enables:		
	<ul style="list-style-type: none">• Analyses of service utilisation and need for services.• Identification of patients living outside Victoria for purposes of cross-border funding.• Identification of patients living outside Australia for the Reciprocal Health Care Agreement (RHCA).		
<i>Principal data users</i>	Multiple internal and external users.		
<i>Collection start</i>	July 1997	<i>Version</i>	1 (Effective 01.07.97)
			2 (Effective 01.07.04)
<i>Definition source</i>	DHS	<i>Code set source</i>	Australia Post (DHS modified)

Sex

Specification

Definition	Sex is the biological distinction between male and female. Where there is an inconsistency between anatomical and chromosomal characteristics, sex is based on anatomical characteristics.		
Datatype	Alpha/numeric	Form	Code
Field size	One	Layout	N
Reported for	All Waiting List episodes.		
Recorded when	The patient is first registered on the Waiting List.		
Code set	Code Descriptor		
	1	Male	
	2	Female	
	3	Indeterminate	
	4	Intersex	
Reporting guide	<p>Sex should be inferred or accepted as reported by the respondent, as at the time of registration. That is, it is usually unnecessary and may be inappropriate or even offensive to ask a person their sex. Sex may be inferred from other cues such as observation, relationship to respondent, or first name.</p> <p>A person's sex may change during their lifetime as a result of procedures known alternatively as Sex change, Gender reassignment, Transsexual surgery, Transgender reassignment or Sexual reassignment. Throughout this process, which may be over a considerable period of time, sex could be recorded as either Male or Female.</p>		

The term 'intersex' refers to a person, who, because of a genetic condition was born with reproductive organs or sex chromosomes that are not exclusively male or female and who identifies as being neither male nor female. *Excludes:* transgender, transsexual and chromosomally indeterminate individuals who identify with a particular sex (male or female).

Code 3 *Indeterminate* should be used for infants with ambiguous genitalia, where the biological sex, even following genetic testing, cannot be determined. Code 3 can only be assigned for infants aged less than 90 days.

Codes 3 *Indeterminate* and 4 *Intersex* should not generally be used on data collection forms completed by the respondent. They should only be used if the person or respondent volunteers that the person is intersex or where it otherwise becomes clear during the collection process that the individual is neither male nor female

Edits S091 Sex code Invalid
S093 Unusual Sex Code Reported

Related items Nil

Administration

Purpose To enable analyses of service utilisation, need for services and epidemiological studies.

Principal data users Multiple internal and external data users.

Collection start July 1997 **Version** 2 (Effective 01.07.99)
3 (Effective 01.07.04)

Definition source Australian Bureau of Statistics **Code set source** NHDD (DHS modified)

S091 Sex Code Invalid

Effect REJECTION

Problem A *Sex* code has not been reported or the code specified does not exist in the *Sex* codeset.

Remedy Correct or allocate the *Sex* code and resubmit.

Refer: Section 3 – Data Definitions: *Sex*.

S093 Unusual Sex Code Reported

Effect NOTIFIABLE

Problem This record's *Sex* code is 3 *Indeterminate* or 4 *Intersex*. Although these codes are allowed, they are exceedingly rare, and the patients record should be checked to verify that the appropriate *Sex* code has been allocated.

Remedy If *Sex* Code is incorrect, correct and resubmit.

If *Sex* Code is correct, notify HDSS via ESIS.ESIS@dhs.vic.gov.au

Refer: Section 3 – Data Definitions: *Date of Birth* and *Sex*.

S111 Waiting Number Invalid

Effect REJECTION

Problem The *Waiting Number* is blank or is not between 001 and 999.

Remedy Correct the *Waiting Number* and resubmit.

Refer: Section 3 – Data Definitions: *Waiting Number*.

S122 Postcode/Locality Combination Invalid

Effect NOTIFIABLE

Problem This record contains an error in either: *Locality*, *Postcode* or both.
The error may be:

- *Locality* is blank but the *Postcode* is not a default code; or
- *Postcode* is 1000 or 9988 but the *Locality* is not blank; or
- *Locality* specified in the record does not match the *Postcode* in the Postcode Locality file; or
- *Postcode* is 8888 but *Locality* is not a four-digit country code specified in the Postcode Locality file; or
- The *Postcode/Locality* combination does not exist in the Postcode Locality file.

Remedy Check the *Locality* and *Postcode*, correct whichever is incorrect and resubmit.

Ensure that your software supplier regularly updates Postcodes and Localities from the Postcode Locality file from the HDSS web site. The DHS Postcode Locality file is updated regularly. Verify that you are using the most recent edition.

If you encounter a newly created Postcode/Locality that does not exist in the Postcode Locality file, please notify DHS via

ESIS.ESIS@dhs.vic.gov.au so that the file can be updated.

Refer: Section 2 – Concept and Derived Definitions: *Statistical Local Area*.

Section 3 – Data Definitions: *Locality* and *Postcode*.

Victorian Emergency Minimum Dataset (VEMD)

71.5 VEMD Editor

Submission officers and software vendors are advised that a new release (1.0.2) of the MS Access VEMD Editor is now available for download from:

<http://www.health.vic.gov.au/hdss/vemd/index.htm>

The new release addresses:

- Some issues in relation to exporting to excel (late-binding implemented).
- Microsoft Data Access Components compatibility issues.
- Minor User form issues.
- Date Of Birth Conversion function altered.
- Reference tables (they are refreshed before each release to accommodate changes to postcode locality and hospital codes).

The new release has been tested on a variety of systems but it is still be possible that it may not run without problems on some system configurations. Feedback received to date has been very useful, and we would like to encourage more as the system continues to evolve. Many thanks to those who have contributed their ideas to date.

71.6 VEMD User Manual, Ninth Edition, 1 July 2004

The hardcopy of the VEMD User Manual has been distributed to VEMD submitting hospitals and relevant software suppliers.

Limited numbers are still available from HDSS so if you are yet to receive a copy or would like to obtain a further copy please contact HDSS.

HDSS Bulletin by Dataset

This table lists the most recent HDSS Bulletins, and identifies the dataset to which they relate. All previous Bulletins are on the website at:

<http://www.health.vic.gov.au/hdss/bulletin/bulindex.htm>

If you are unable to access the website, please contact the HDSS HelpDesk to request any previously released HDSS Bulletins.

HDSS Bulletin No:	Date released:	Dataset:			
		VAED / PRS/2	VEMD	ESIS	Other info
Bulletin 71	04 August 2004	✓	✓	✓	✓
Bulletin 70	02 August 2004	✓			
Bulletin 69	09 July 2004	✓	✓		✓
Bulletin 68	16 June 2004	✓	✓		✓
Bulletin 67	28 May 2004	✓	✓		
Bulletin 66	30 April 2004	✓	✓	✓	✓
Bulletin 65	08 April 2004	✓	✓	✓	✓
Bulletin 64	25 February 2004	✓	✓	✓	✓
Bulletin 63	26 November 2003	✓			✓
Bulletin 62	10 October 2003	✓	✓	✓	✓
Bulletin 61	16 September 2003	✓	✓	✓	✓
Bulletin 60	26 August 2003	✓	✓		✓
Bulletin 59	05 August 2003	✓	✓		✓
Bulletin 58	22 July 2003	✓			✓
Bulletin 57	01 July 2003	✓	✓	✓	✓
Bulletin 56	11 June 2003	✓	✓	✓	✓
Bulletin 55	29 May 2003	✓	✓	✓	✓
Bulletin 54	07 April 2003	✓	✓	✓	✓
Bulletin 53	19 February 2003	✓	✓		
Bulletin 52	20 January 2003	✓	✓		
Bulletin 51	20 December 2002	✓			✓
Bulletin 50	11 November 2002	✓	✓	✓	✓
Bulletin 49	17 October 2002	✓		✓	✓
Bulletin 48	04 October 2002	✓	✓	✓	✓
Bulletin 47	12 September 2002	✓	✓	✓	✓
Bulletin 46	23 August 2002	✓		✓	
Bulletin 45	13 August 2002	✓	✓	✓	
Bulletin 44	06 August 2002	✓	✓	✓	✓
Bulletin 43	19 July 2002	✓		✓	
Bulletin 42	12 July 2002	✓	✓	✓	✓
Bulletin 41	04 July 2002	✓	✓		✓
Bulletin 40	28 June 2002	✓			
Bulletin 39	26 June 2002	✓			✓
Bulletin 38	21 June 2002	✓	✓	✓	✓
Bulletin 37	28 May 2002	✓	✓	✓	✓
Bulletin 36	22 May 2002	✓			

