

Section 6: Request Reports

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Introduction

Hospitals contributing to PRS/2 can request a range of reports ('Request Reports') from Allegiance Systems. The selection of reports is limited because in-house hospital systems are generally set up to meet the reporting needs of their users.

Request Reports are ordered by including instructions in the Header Record, and do not incur a charge. Each report has an identifier; some reports also require or allow a parameter (for example, a date range or a code value). When ordering a report, insert characters to indicate the report code(s) and the parameters.

Up to five different reports may be ordered at any one time. Where one report is needed in differing sequences or formats, only one run of that report can be requested at the one time. The order in which reports are requested is unimportant.

The format for the entire Request Report segment of the Header Record is up to five (5) sets of fourteen (14) characters.

The format for ordering each Request Report is:

- 2 characters containing the report identifier (Report Code)
- 12 characters containing the parameter required for that report.

To order reports in the Header Record, the character positions and contents required are as follows:

Character Position	Contents
29-30	Report Code for first request
31-42	Report parameter for first request
43-44	Report Code for second request
45-56	Report parameter for second request
57-58	Report Code for third request
59-70	Report parameter for third request
71-72	Report Code for fourth request
73-84	Report parameter for fourth request
85-86	Report Code for fifth request
87-98	Report parameter for fifth request

Request Reports that can be ordered:

Diagnosis Outstanding Report

Lists all episodes with a separation date within the specified date range, for which no diagnosis record (X2/Y2) is held on PRS/2, so missing X2/Y2 can be transmitted.

DRGs for Review

Lists episodes grouping to a range of problem DRGs so that they can be reviewed and, where appropriate, X2/Y2s or E2s corrected and re-transmitted.

Census Report

Lists all episodes where the patient was in hospital on the specified Census Date *according to data held on PRS/2*, for comparison with the in-house census, to help identify the cause of discrepancies.

Sub-Acute Outstanding Report

Lists all episodes with Care Type 2, 6, 7, 8 or 9 within the specified date range, for which no Sub-acute Record (S2) is held on PRS/2, so missing S2 records can be transmitted.

Hospital in the Home Report

Lists all episodes where the patient had Hospital in the Home (HITH) days *according to data held on PRS/2*, for comparison with in-house lists, to help identify episodes causing discrepancies.

Diagnoses Outstanding Report

Report Code **01**

Purpose

To identify episodes remaining without diagnoses (and therefore without DRGs) in PRS/2 so that outstanding Diagnosis Records (X2/Y2s) can be transmitted. It is possible that the in-house system has diagnoses for *all* separations but PRS/2 is missing some X2/Y2s (records that have been rejected and not re-transmitted). Order this report if the Discharges and Outstanding Diagnoses part of the Control Report shows there are diagnoses outstanding but you cannot identify which records they are. Code records (if necessary) and transmit missing X2/Y2 records.

Report contents

Brief details of all episodes with a separation date, within the specified date range, for which no X2/Y2 is held in PRS/2 (because none has been sent or, if sent, it has been rejected).

Period covered

Can cover any period in the *current* PRS/2 file (that is, until the file has been closed on 21 September). For example, at 31 August 2000, the report could cover any period from 1 July 1999 to 31 August 2000; at 31 October 2000, the report could cover only 1 July 2000 to 31 October 2000.

Report parameters

MMCCYYMMCCYY

Requires a low MMCCYY and then a high MMCCYY to indicate the desired range of separation dates.

The first MMCCYY is the *first* day of the first month in the period and the second MMCCYY is the *last* day of the last month in the period.

Thus, if the report is required from: 01/09/2000 to 31/05/2001 transmit the input parameter: 092000052001

Including the report code (01), the full fourteen characters would read: 01092000052001

Report sequence

Ascending Patient Identifier; within Patient Identifier, ascending Separation Date.

Fields reported

PERIOD OF REPORT [in the title]

SEPARATION DATE

PATIENT IDENTIFIER

SEX (1 Male, 2 Female, 3 Indeterminate)

DATE OF BIRTH

UNIQUE KEY

NUMBER OF OUTSTANDING DIAGNOSES FOR PERIOD

DRGs for Review

Report Code **02**

Purpose

By listing selected nil value/problem DRGs, the hospital can review diagnosis and procedure coding (accuracy, completeness, sequencing) and accuracy of sex and date of birth, in cases grouping to these Error DRGs. Where corrections can legitimately be made, re-transmit the records so these cases can be re-grouped

Report contents

Brief details of all episodes, with a separation date, within the reporting range, grouping to problem DRGs:

- 901Z *Extensive O.R. Procedure Unrelated to Principal Diagnosis*
- 902Z *Non-Extensive O.R. Procedure Unrelated to Principal Diagnosis*
- 903Z *Prostatic O.R. Procedure Unrelated to Principal Diagnosis*
- 963Z *Neonatal Diagnosis Not Consistent W Age/Weight*

Period covered

Can cover any period in the *current* PRS/2 file (that is, until the file has been closed on 21 September). For example, at 31 August 2000, the report could cover any period from 1 July 1999 to 31 August 2000; at 31 October 2000, the report could cover only 1 July 2000 to 31 October 2000.

Report parameters

MMCCYYMMCCYY

Requires a low MMCCYY and then a high MMCCYY to indicate the desired reporting period.

The first MMCCYY is the *first* day of the first month in the period and the second MMCCYY is the *last* day of the last month in the period.

Thus, if the report is required from: 01/09/2000 to 31/05/2001, transmit the input parameter: 092000052001

Including the report code (02), the full fourteen characters would read: 02092000052001

Report sequence

Ascending DRG code; within DRG, the order is governed by:

- first diagnosis code
- first operation (procedure) code
- Patient Identifier
- Separation Date

Fields reported

PERIOD OF REPORT [in the title]

DRG code [in the title]

PATIENT IDENTIFIER

SEPARATION DATE

SEX

DATE OF BIRTH

DIAGNOSES CODES

OPERATION CODES

UNIQUE KEY

TOTAL OF THESE DRGS FOR THE PERIOD

Census Report

Report Code **03**

Purpose

To help identify the cause of discrepancies found when reconciling PRS/2 with in-house figures. The report should be compared with the in-house census for the specified date, to identify any patient who is missing in, or incorrectly recorded by PRS/2. Transmit, as appropriate, deletions or Episode Record(s) with correct admission and/or separation details.

Report contents

Brief details of all episodes with an admission date less than or equal to the Census Date, and either no separation date or a separation date greater than the Census Date.

Period covered

Can cover any date in the *current* PRS/2 file (that is, until the file has been closed on 21 September). For example, at 31 August 2000, the report could cover any date from 1 July 1999 to 31 August 2000; at 31 October 2000, the report could cover only a date from 1 July 2000 to 31 October 2000.

Report parameters

DDMMCCYY

Requires the date of the census (Census Date).

Thus, if the report is required for: 7 November 2000 transmit the input parameter:
07112000 ----[last four characters blank]

Including the report code (03), the full fourteen characters would read: 0307112000----
[last four characters blank]

Report sequence

Ascending Admission Date; within Admission Date, ascending Patient Identifier.

Fields reported

PERIOD OF THE REPORT (that is, Date of the Census) [in the title]

CURRENT FILE DATE [in the footnote]

UNIQUE KEY

PATIENT IDENTIFIER

ADMISSION DATE

SEX (1 Male, 2 Female, 3 Indeterminate)

DATE OF BIRTH

ADMIT STATUS (Account Class on Admission)

SEP'N STATUS (Account Class on Separation)

SEP'N DATE (Separation Date)

NUMBER OF INPATIENTS SELECTED FOR THE DATE (PRS/2's tally of patients remaining in at that date.)

Sub-Acute Outstanding Report

Report Code **04**

Purpose

To identify episodes with Care Type 2, 6, 7, 8 or 9 remaining without a Sub-Acute Record (S2) in PRS/2, so that outstanding S2 records can be transmitted. It is possible that the in-house system contains S2s for all separations, but PRS/2 is missing some (records that have been rejected and not re-transmitted). Order this report if the Sub-Acute Separations and Outstanding Sub-Acute Records for the Period section of the Control Report shows there are S2 records outstanding but you cannot identify which records they are. Transmit the missing S2 records or (if the Care Type was wrong) correct and re-transmit the E2.

Report contents

Brief details of all episodes with Care Type 2, 6, 7, 8 or 9 with a separation date within the specified date range, for which no S2 is held in PRS/2 (because none has been sent or, if sent, has been rejected).

Period covered

Can cover any period in the *current* PRS/2 file (that is, until the file has been closed on 21 September). For example, at 31 August 2000, the report could cover any date from 1 July 1999 to 31 August 2000; at 31 October 2000, the report could cover only a date from 1 July 2000 to 31 October 2000.

Report parameters

MMCCYYMMCCYY

Requires a low MMCCYY then a high MMCCYY to indicate the desired range of separation dates.

The first MMCCYY is the *first* day of the first month in the period and the second MMCCYY is the last day of the *last* month in the period, or the current file to date.

Thus, if the report is required for: 01/09/2000 to 31/05/2001 transmit the input parameter: 092000052001

Including the report code (04), the full fourteen characters would read: 04092000052001

Report sequence

Ascending Patient Identifier; within Patient Identifier, ascending Separation Date.

Fields reported

PERIOD OF REPORT (in the title)

PATIENT IDENTIFIER

SEPARATION DATE

SEX (1 Male, 2 Female, 3 Indeterminate)

DATE OF BIRTH

CARE TYPE

UNIQUE KEY

NUMBER OF RECORDS WITH CARE TYPE 2, 6, 7, 8 OR 9 IN THE PERIOD

NUMBER OF OUTSTANDING SUB-ACUTE RECORDS FOR THE PERIOD

PERCENTAGE OF SUB-ACUTE RECORDS COMPLETED

Hospital in the Home Report

Report Code **05**

Purpose

To identify episodes which have a component of the care being delivered under the Hospital in the Home (HITH) program. Order this report to compare HITH separations and days in the control report with in-house lists, and to identify any records causing discrepancies.

Having corrected Accommodation Types and re-transmitted the E2s, also investigate the cause of the problem. This will either be poor data flow (the information is not being captured) or flawed software (contact your supplier).

Report contents

Brief details of all episodes with and without a separation date, within the specified date range, for which HITH care has been delivered for all or part of the episode.

Period covered

Can cover any period in the *current* PRS/2 file (that is, until the file has been closed on 21 September). For example, at 31 August 2000, the report could cover any date from 1 July 1999 to 31 August 2000; at 31 October 2000, the report could cover only a date from 1 July 2000 to 31 October 2000.

Report parameters

MMCCYYMMCCYY

Requires a low MMCCYY then a high MMCCYY to indicate the desired range of separation dates.

The first MMCCYY is the *first* day of the first month in the period and the second MMCCYY is the last day of the *last* month in the period, or the current file to date.

Thus, if the report is required for: 01/09/2000 to 31/05/2001, transmit the input parameter: 092000052001

Including the report code (05), the full fourteen characters would read: 05092000052001

Report sequence

Ascending Patient Identifier; within Patient Identifier, ascending by Separation Date.

Patients remaining in listed after those with Separation Date, in ascending Admission Date order.

Total episodes containing HITH days (separations and not separated) are totalled for the period.

Fields reported

PERIOD OF REPORT (in the title)

PATIENT IDENTIFIER

SEPARATION DATE

ADMISSION DATE

TOTAL HITH DAYS IN EPISODE

TOTAL LOS OF EPISODE

UNIQUE KEY

NUMBER OF EPISODES CONTAINING HITH (INCL. NOT SEPS) FOR THE PERIOD