

Bulletin

Health Data Standards and Systems

Issue 101 – 28 June 2006

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

This edition of the Health Data Standards and Systems (HDSS) Bulletin has been published in electronic format only. It has been posted on our website at:

<http://www.health.vic.gov.au/hdss/bulletin/101-280606.pdf> and can be viewed as a downloadable file.

This bulletin provides information regarding:

- Update of postcode/locality file
- Update of hospital code table
- DHS circular update
- Australian Government circular update
- Modification of the ICD-10-AM fourth edition library file
- Release of the ICD-10-AM fifth edition library file
- Modification of the ICD-10-AM fifth edition library file

Please download the document from our website. 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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Global update

101.1 Postcode file update

As a result of feedback, the country description has been added to the Postcode/Locality reference file where the postcode is 8888 *Overseas*.

An updated version of the Postcode/Locality reference file is available on the HDSS Website:

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

101.2 Hospital code table update

Address amendment

As a result of feedback, the suburb of Delmont Private Hospital (campus code 8090) has been amended in the hospital code table to Glen Iris to reflect its correct address.

Transfer of Registration

Hospital	Previous registration	New registration	Effective date
Freemasons Hospital	Freemasons Hospital	Epworth Foundation	1 May 2006

Hospital name change

Old name	New name	VAED code	Effective date
Freemasons Hospital	Epworth Freemasons	6470 (no change)	27 April 2006

An updated version of the Hospital code table file, including the details above is available on the HDSS Website:

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

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

101.3 DHS circular update

The following circular has been released, and can be found at: <http://www.health.vic.gov.au/hospitalcirculars/>

Hospital Circular 08/2006

Subject: Public hospital fees - changes

101.4 Australian Government circular update

The following circulars have been released:

- PHI 29/06** 2006 Biennial Health Conference by the Department of Health and Ageing, and general information on hospitals and day hospital facilities
- PHI 30/06** Consultation forums - private health insurance reforms
- PHI 32/06** Private Health Industry regarding Hospital Casemix Protocol (HCP) and Private Hospital Data Bureau (PHDB) - changes for private hospitals and day hospital facilities from 1 July 2006
- PHI 34/06** Amending private health insurance regulation discussion paper
- PHI 35/06** Payment of benefits for products on the Prostheses list
- PHI 36/06** Private patients' hospital charter
- PHI 37/06** Closure and name changes of private hospital facilities
- PHI 38/06** Approval of outreach services
- PHI 39/06** Increasing the powers of the private health insurance ombudsman

Private Health Insurance circulars can be found at:

<http://www.health.gov.au/internet/wcms/Publishing.nsf/Content/health-privatehealth-providers-circulars.htm>

To subscribe to the circulars, email your subscription details to Private Health Insurance Branch at privatehealth@health.gov.au

Victorian Admitted Episodes Dataset (VAED)

101.5 Release of the ICD-10-AM fifth edition library file

The ICD-10-AM fifth edition library file for 2006-07 was released on 9 June 2006. The file contains all ICD-10-AM fifth edition diagnosis, morphology and procedure codes, together with appropriate edits, mappings and code descriptions.

The Excel files and documentation are available for downloading at:
<http://www.health.vic.gov.au/hdss/reffiles/2006-07/vaed/libfil06.htm>

Software suppliers and hospitals are advised to download the new version of the ICD-10-AM library file. Any updates to the file during 2006-07 will be published in the HDSS Bulletin.

The Excel file has been zipped and password protected using the same password as last year. If you do not have, or have forgotten the password, please contact the PRS/2 help desk.

Our licence agreement only permits DHS to release our ICD-10-AM Library File within Victoria to hospitals and software vendors. The Victorian Library file is a modification of the National ICD-10-AM ASCII files, which are produced by the National Centre for Classification in Health (NCCH). If you are not authorised to receive the Victorian library file you may contact the NCCH on (02) 9351 9461 or email at ncchadmin@fhs.usyd.edu.au.

101.6 Modification of the ICD-10-AM fifth edition library file

Since its release on 9 June 2006, the following procedures codes have been modified to allow the reporting of these breast procedures performed on men:

ICD-10-AM Code	Block No	Code Description	Change	Specification
			Sex (Column J)	
4555600	1755	Mastopexy	6 4	Warn if male or indeterminate
9072200	1755	Suture of laceration of breast	6 4	Warn if male or indeterminate

Please ensure that this modification is made to the 2006-07 library file. Alternatively the updated library file is available for downloading at:

<http://www.health.vic.gov.au/hdss/reffiles/2006-07/vaed/libfil06.htm>

101.7 Modification of the ICD-10-AM fourth edition library file

The following procedures codes have been modified to allow the reporting of these breast procedures performed on men:

ICD-10-AM Code	Block No	Code Description	Change	Specification
			Sex (Column J)	
3156300	1755	Surgical eversion of inverted nipple	6 4	Warn if male or indeterminate
4555600	1755	Mastopexy	6 4	Warn if male or indeterminate
9072200	1755	Suture of laceration of breast	6 4	Warn if male or indeterminate

Please ensure that this modification is made to the 2005-06 library file. Alternatively the updated library file is available for downloading at:

<http://www.health.vic.gov.au/hdss/reffiles/2005-06/vaed/libfil05.htm>

101.8 Revised edits for 1 July 2006

The following edits have been revised as a result of the changes introduced in the new version of the ICD-10-AM Library file.

363 External Cause/Place Code Mismatch

Effect

REJECTION

Problem

The X3/Y3 Diagnosis Record has an External Cause code (V0+ V00-Y89) but does not have a Place of Occurrence code (Y92) or, has a Place of Occurrence code but does not have an External Cause code (V0+ V00-Y89).

[On Library File: column N, ADD, code 6 or 8, without a code P, or code P without a code 6 or 8]

Remedy

Check Diagnosis Codes, amend as appropriate and re-transmit the X3/Y3.

364 External Cause/Activity Code Mismatch

Effect

REJECTION

Problem

The X3/Y3 Diagnosis Record has an External Cause code (V0+ V00-Y34) but does not have an Activity code (U50-U73) or, has an Activity code but does not have an External Cause code (V0+ V00-Y34).

[On Library File: column N, ADD, code 8, without a code A, or code A without a code 8]

Remedy

Check Diagnosis Codes, amend as appropriate and re-transmit the X3/Y3.

~~560 Prefix = P, Unusual Code Combination (Deleted)~~

Effect

Warning

Problem

~~The X3/Y3 Diagnosis Record contains diagnosis code/s prefixed with P-Primary Diagnosis, however this combination is unusual.~~

~~[On Library File: column M, PREF, code 8, 10 or 11]~~

Remedy

~~Check Diagnosis and Prefix codes, amend as appropriate and re-transmit the X3/Y3.~~

- ~~• If you consider a prefix edit unjustified, notify the Victorian ICD Coding Committee via the HDSS Help Desk, for possible future revision of the Library File.~~

~~Refer to:~~

- ~~• Section 3: *Diagnosis Codes*.~~

562 Prefix = C, Unusual Code Combination

Effect Warning

Problem The X3/Y3 Diagnosis Record contains diagnosis code/s prefixed with C *Complication*, however this combination is unusual.

[On Library File: column M, PREF, code 7, 9, ~~10 or 13~~]

Remedy Check Diagnosis and Prefix codes, amend as appropriate and re-transmit the X3/Y3.

- If you consider a prefix edit unjustified, notify the Victorian ICD Coding Committee via the HDSS Help Desk, for possible future revision of the Library File.

Refer to:

- Section 3: *Diagnosis Codes*.

564 Prefix = A, Unusual Code Combination

Effect Warning

Problem The X3/Y3 Diagnosis Record contains diagnosis code/s prefixed with A *Associated Diagnosis*, however this combination is unusual.

[On Library File: column M, PREF, code 6, 9 or ~~12~~]

Remedy Check Diagnosis and Prefix codes, amend as appropriate and re-transmit the X3/Y3.

- If you consider a prefix edit unjustified, notify the Victorian ICD Coding Committee via the HDSS Help Desk, for possible future revision of the Library File.

Refer to:

- Section 3: *Diagnosis Codes*.

601 Sequencing Error

Effect REJECTION

Problem The X3/Y3 Diagnosis Record has an Activity Code (U50-U73) that is not immediately preceded by a Place of Occurrence code, or a Place of Occurrence code (Y92) that is not immediately preceded by an External Cause Code (~~V01~~ V00 Y89).

[On Library File: column N, ADD, code A must be immediately preceded by code P, and code P which must be immediately preceded by code 6 or 8]

Remedy Check Diagnosis Codes, amend as appropriate and re-transmit the X3/Y3.

- Refer to the *Victorian Additions to the Australian Coding Standards*.

101.9 Errata to *Specification for revisions to PRS/2 and the VAED for 1 July 2006*

At the time the Specifications were released, the new Account Class MF *Ineligible: Asylum Seeker* had not been introduced. The Business Rules edit tables below incorporate both the changes made for the introduction of the MF Account Class and the *Specification for Revisions*.

The *Account Class, Acc Type, Care Type and Medicare Suffix* edit table produced in the Specifications document did not include Care Type E in combination with Account Class MF. Care Type E has also been valid for Account Class MA but was missing from the table. Only the portion of the table relating to Account Classes MA and MF has been reproduced here.

The *Care Type: Interim Care Program (F and E)* edit table below incorporates the changes made for the introduction of Account Class MF and the *Specification for Revisions* document.

Account Class, Acc Type, Care Type and Medicare Suffix

Account Class	Accom Type	Care Type	Medicare Suffix
MA	1 2 3	E, 2, 6, 7, K, 8, 9, 5E, 5K, 5G, 5S, 5A	name, C-U
MA	1 2 3 6 8 B M S	4, U	name, C-U
MA	4 C	4	name, C-U
MA	6 8 M S	2, 6, 7, K, 8, 9, 5K, 5G, 5S, 5A	name, C-U
MA	7	4	name, C-U
MF	1 2 3	E, 2, 6, 7, K, 8, 9, 5E, 5K, 5G, 5S, 5A	N-E
MF	1 2 3 6 8 B M S	4, U	N-E
MF	4 C	4	N-E
MF	6 8 M S	2, 6, 7, K, 8, 9, 5K, 5G, 5S, 5A	N-E
MF	7	4	N-E

Care Type: Interim Care Program (F and E)

If Care Type is F *Interim Care Program – Nursing Home Type* or E *Interim Care Program* then the following fields must contain the codes shown below. Only fields that cannot contain the full code set are listed. Note that the only differences between the two Care Types are in *Account Class* and *Account Class on Separation*.

Field	Valid codes
E23 Episode Record	
Admission Type	S, C, L, O, X
Admission Source	S, T, B, N, A, H
Account Class	
If Care Type F	MN, M5, TN, VN, V5
If Care Type E	MP, MA, MF, TA, VX
Accommodation Type	1, 2, 3
Qualification Status	X
Separation Referral	P, M, L, B, U, C, S, D, G, I, A, K, T, R, X or spaces
Account Class on Separation *	
If Care Type F	MN, M5, TN, VN, V5
If Care Type E	MP, MA, MF, TA, VX
Criterion for Admission	O
Intended Duration of Stay	2
Mental Health Legal Status *	9
Funding Arrangement	1 or space
Contract Type	2, 3, 4, 5, 7 or space
X23 Diagnosis Record	
Principal Diagnosis Code *	Z75.11 <i>Person awaiting admission to residential aged care service</i> Z75.12 <i>Person awaiting admission to psychiatric facility/unit</i>
Admission Weight	Spaces
Duration of Stay in ICU	Spaces
Duration of MV	Spaces
Duration of Stay in CCU	Spaces
Reason for Critical Care Transfer	Spaces
Duration of NIV	
S23 Sub-Acute Record *	
Barthel Index Score on Admission *	Range 000 to 100
Barthel Index Score on Separation *	Range 000 to 100
Functional Assessment Date on Admission	DDMMCCYY
Functional Assessment Date on Separation	DDMMCCYY or spaces
Clinical Sub-Program *	Spaces
Onset Date *	Spaces
Admission/Re-admission to Rehabilitation *	Spaces
RUG ADL on Admission *	Spaces
RUG ADL on Separation *	Spaces

* Field is not checked Edit 454 *Incompat Fields for Interim Care*, as this field is checked by other general edits relating to field, not just in relation to Interim Care.

Edits relating to Functional Assessment Dates

For edits 620 and 621, the reference to the edit tables in Section 4 have been removed as they have been found to be misleading. Additional Problem description has been included to clarify the edits.

620 Adm Barthel/Functional Assessment Date / Care Type mismatch (New)

Effect REJECTION

Problem The E3 Episode Record and S3 Sub-Acute Record have an invalid combination of Care Type, Barthel Index Score on Admission and Functional Assessment Date on Admission. If the Care Type is F, E, 2, 6, 7, 9 or K, a Barthel Index Score on Admission and a Functional Assessment Date on Admission must be present. For other Care Types, these fields must be spaces. This edit will trigger on the S3 record only.

Remedy Check Care Type (E3), Functional Assessment Date on Admission (S3) and Barthel Index Score on Admission (S3), amend as appropriate and re-transmit the E3 and/or S3.

Refer to:

- Section 3: *Barthel Index Score on Admission and Functional Assessment Date on Admission.*
- ~~Section 4: Business Rules (tabular) Care Type: Designated and Non-Designated Rehabilitation Programs (2, 6, 7 and K), and Care Type: Interim Care Program (F and E)~~

621 Sep Barthel/Functional Assessment Date / Care Type mismatch (New)

Effect REJECTION

Problem The E3 Episode Record and S3 Sub-Acute Record have an invalid combination of Care Type, Barthel Index Score on Separation and Functional Assessment Date on Separation. If the Care Type is F, E, 2, 6, 7, 9 or K, a Barthel Index Score on Separation and a Functional Assessment Date on Separation must be present unless the Separation Mode is D Death in which case the Functional Assessment Date on Separation may be spaces. For other Care Types, these fields must be spaces. This edit will trigger on the S3 record only.

Remedy Check Care Type (E3), Functional Assessment Date on Separation (S3), Barthel Index Score on Separation (S3) and Separation Mode (E3), amend as appropriate and re-transmit the E3 and/or S3.

Refer to:

- Section 3: *Barthel Index Score on Separation and Functional Assessment Date on Separation.*
- ~~Section 4: Business Rules (tabular) Care Type: Designated and Non-Designated Rehabilitation Programs (2, 6, 7 and K), and Care Type: Interim Care Program (F and E)~~

101.10 Public/Private Elective Surgery Initiative

PRS/2 has now been updated to receive episodes treated under the Public/Private Elective Surgery Initiative (PPESI). Private hospitals participating in this Initiative can now commence reporting these episodes according to the reporting instructions advised in Bulletin 100 issued on 30 May 2006. The edit table below was inadvertently omitted from Bulletin 100.

Contracting: Funding Arrangement and Contract Fields

Valid combinations for public and private hospitals and day procedure centres.

Edits are not applied until Separation Date is present. If Funding Arrangement code is as shown in the first column, the various Contract fields must contain codes as shown in the Code column.

Funding Arrangement	Contract fields	Code
Space – <i>None</i>	Contract Type	Space
	Contract Role	Space
	Contract/Spoke Identifier	Space
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space
	Contract Leave Days Total	Space
1 Contract with Contract Type 1	Contract Type	1
	Contract Role	B
	Contract/Spoke Identifier	Valid External Purchaser Agency code: 0100-0900. For reporting the location of lithotripsy services provided by St Vincent's Hospital only, codes: 0910, 0920, 0930, 0940, 0950, 0960, 0970, 0980, 0990.
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space
	Contract Leave Days Total	Space
1 Contract with Contract Types 2, 3, 4, 5	Contract Type	2, 3, 4, 5
	Contract Role	A, B
	Contract/Spoke Identifier	Valid Campus code
	Contract Leave Days MTD	Value or space*
	Contract Leave Days YTD	Value or space*
	Contract Leave Days Total	Value or space*
1 Contract with Contract Type 6	Contract Type	6
	Contract Role	A
	Contract/Spoke Identifier	Valid Campus code
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space
	Contract Leave Days Total	Space
1 Contract with Contract Type 7	Contract Type	7
	Contract Role	A
	Contract/Spoke Identifier	Valid External Purchaser Agency code: 0050, 0070.
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space
	Contract Leave Days Total	Space
2 Hub/spoke	Contract Type	Space
	Contract Role	Space
	Contract/Spoke Identifier	Valid Campus code
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space

Funding Arrangement	Contract fields	Code
	Contract Leave Days Total	Space
3 Healthstreams	Contract Type	Space
	Contract Role	Space
	Contract/Spoke Identifier	Space
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space
	Contract Leave Days Total	Space
4 Coordinated Care Trial	Contract Type	Space
	Contract Role	Space
	Contract/Spoke Identifier	Space
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space
	Contract Leave Days Total	Space
5 Rural Patients Initiative	Contract Type	Space
	Contract Role	Space
	Contract/Spoke Identifier	Space
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space
	Contract Leave Days Total	Space
6 Elective Surgery Access Service	Contract Type	Space
	Contract Role	Space
	Contract/Spoke Identifier	Space
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space
	Contract Leave Days Total	Space
7 Private Hospital elective surgery initiative	Contract Type	Space
	Contract Role	Space
	Contract/Spoke Identifier	Space
	Contract Leave Days MTD	Space
	Contract Leave Days YTD	Space
	Contract Leave Days Total	Space

* Can be space: if contract leave is *same day*, no Leave Day is counted.

101.11 Reporting of Leave

Following analysis of VAED data, the procedure for reporting leave for transferred patients requires clarification.

If a patient is admitted to Hospital A and is transferred to Hospital B for treatment with the intention of returning to Hospital A within seven days, Leave With Permission days or Contract Leave days (if treated under a contract arrangement) must be reported by Hospital A for the duration of stay in Hospital B. Patients **should not** be separated and transferred to Hospital B if the intention is for the patient to return to Hospital A within seven days.

If the patient does not return to Hospital A within seven days, then the Separation Date should be reported as the date that the patient was transferred to Hospital B. The Separation Date from Hospital A **is not** the same as the Separation Date from Hospital B.

If the patient is admitted at Hospital B for a same-day stay, leave should be recorded in the medical record but **not** reported to the VAED.

For 2006-07 data, HDSS will perform periodic analysis of data and request that hospitals amend and resubmit, or explain any anomalies.

Elective Surgery Information System (ESIS)

101.12 Public/Private Elective Surgery Initiative

In addition to the advice regarding the PPESI provided in HDSS Bulletin 100, (<http://www.health.vic.gov.au/hdss/bulletin/100-300506.pdf>) HDSS advises that Edit S303 *Insurance Declaration Invalid* has been relaxed for episodes with a reason for Removal of S and a PPESI campus code in the Destination field. For these episodes ESIS will accept either null (blank) or any valid Insurance Declaration code.

101.13 Errata to *Specifications for Revisions to ESIS for 1 July 2006*

The following edit was described incorrectly on page 11 of the Specifications document. The edit description for S295 should read as follows:

S295 ~~Removal Date~~ Date Of Admission Not Equal To Scheduled Admission Date.

101.14 ESIS submission file naming convention

Sites and vendors are reminded that the sequence number (characters 15, 16 and 17 in the zip file name) should cycle back to 001 for the first submission named with a July Extract End Date.

For example: Final submission containing a 2005-2006 Extract End Date, for submitting organisation '5000' (Test hospital) might be named 5000_06_06_25_056.zip. If the next submission had an extract end date of 9 July 2006, it would be named 5000_06_07_09_001.zip

Contact Details

The Health Data Standards and Systems (HDSS) Unit of the Metropolitan and Aged Care Services Division has responsibility for maintaining data standards for four Victorian health data collections:

- Victorian Admitted Episodes Dataset (VAED)
- Victorian Emergency Minimum Dataset (VEMD)
- Elective Surgery Information System (ESIS)
- Agency Information Management System (AIMS)

The HDSS Bulletin, produced on an ad hoc basis, provides:

- Answers to common questions recently directed to the HDSS Helpdesk;
- Communication regarding the implementation of revisions to data collection specifications, including notification of amendments to specified data collection reference tables;
- Feedback on selected data quality studies undertaken; and
- Information on upcoming events.

HDSS Website: <http://www.health.vic.gov.au/hdss>

HDSS Help Desk:

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Email: VAED

PRS2.Help-Desk@dhs.vic.gov.au

VEMD

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ESIS

ESIS.ESIS@dhs.vic.gov.au

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