

Bulletin

Health Data Standards and Systems

Issue 114 – 13 April 2007

Attention: Health Information Managers – For Action
VAED/ESIS/VEMD/VINAH Submission Officers – For Action
VAED/ESIS/VEMD/VINAH 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/114-130407.pdf> and can be viewed as a downloadable file.

This bulletin provides information regarding:

- Hospital Code Table Updates
- DHS and Australian Government circulars
- Specifications for Revisions to VAED, VEMD and ESIS for 1 July 2007 now final
- Release of Preferred Language and Country of Birth/Residence for 1 July 2007
- VAED: Printing of codes on VWA Statements
- VAED: Edit 553 Bug fix
- VAED: Correct usage of Criterion for Admission Codes B, C and E
- VINAH: 2006-07 Manual updates
- VINAH: Client Service Event – Aggregation rules

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

114.1 Hospital Code Table Updates

An updated version of the Supplementary Code Lists, including the details below, has been posted onto the HDSS Website:

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

Transition Care Approval

The following hospitals have been granted approval for Transition Care services.

Name	Campus code	Effective date
Bendigo Health Care Group – Anne Caudle Centre	1022	21 March 2007
Ballarat Health Service – Queen Elizabeth Centre	2070	TBC

114.2 DHS circular update

The following circulars have been released, and can be found at:

<http://www.health.vic.gov.au/hospitalcirculars/>

Hospital Circular 04/2007

Subject:

1. Public Hospital Charges – Changes, Nursing Home Type Patients (NHTP)

Hospital Circular 05/2007

Subject:

1. Highly Specialised Drugs Program

Hospital Circular 06/2007

Subject:

1. Commonwealth Government 2007-08 Aged Care Approvals Round – Public Sector Endorsement Process

114.3 Australian Government circular update

The following circulars have been released:

PHI 14/07	Review of neo-natal facilities – New South Wales (NSW)
PHI 15/07	Changes to the Default Benefit Table
PHI 16/07	Overseas Visitors Health Cover Transitional Arrangements
PHI 17/07	Approval of Outreach Services
PHI 18/07	Private Health Insurance Consumer Information Website
PHI 19/07	General hospital information
PHI 20/07	Commencement of the Private Health Insurance Act 2007
PHI 21/07	Private Health Insurance – Funeral Benefits

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

114.4 VAED, VEMD and ESIS Specifications for Revisions 1 July 2007 – Final

Specifications for Revisions to the VAED, VEMD and ESIS data sets are now final. No revisions have been made since the documents were released as 'draft'.

A revised version of the VINAH specifications with additional information, as noted in the draft VINAH specifications, will be released shortly.

114.5 Preferred Language and Country of Birth/Residence codesets for 1 July 2007

The Preferred Language and Country of Birth/Residence codesets for 1 July 2007 are now available on our website:

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

The spreadsheets include mappings for 2007-08 to 2006-07 codesets.

Note that Country of Residence codes are reported in the Locality field where the Postcode is 8888 *Overseas*.

Victorian Admitted Episodes Dataset (VAED)

114.6 Diagnosis and Procedure Codes on VWA DRG Statements

Previously, the number of diagnosis and procedure codes that printed on a VWA DRG Statement was limited to 6 and 3 respectively. As VWA re-group episodes and may therefore calculate a different DRG for complicated cases, the limit has been removed effective 26 March 2007. Statements will now print all diagnosis and procedure codes for an episode.

114.7 Edit 553 Type E Crit for Adm, LOS <4 hrs – Bug fix

It has recently come to our attention that Edit 553 has allowed admissions between 3 and 4 hours to be erroneously accepted on the VAED. The problem resolved on 12 April 2007. Consequently, there are a number of episodes on the VAED that do not qualify for admission. Details will be sent to the hospitals concerned so that deletions can be sent to remove these episodes. Please refer also to *114.6 Use of Criterion for Admission B, C and E* for information on the correct usage of these codes.

114.8 Use of Criterion for Admission codes B, C and E

Following some analysis of 2006-07 data, there seem to be some misconceptions of the correct use of Criterion for Admission codes B, C and E.

The Day Only Procedures Manual, Schedule 3 (produced by the Commonwealth Department of Health and Aged Care) contains a complete list of MBS item numbers that are classed as Type B and C.

<http://www.comlaw.gov.au/ComLaw/Legislation/LegislativeInstrument1.nsf/all/search/BFAB0DB9B5F18813CA25714F00181B92>

A list of all the MBS codes and their descriptors, and a searchable database, can be found at: <http://www.health.gov.au/internet/wcms/publishing.nsf/Content/Medicare-Benefits-Schedule-MBS-1>

When determining which Criterion for Admission code to use, be aware that there is a hierarchy of codes. The hierarchy is the order in which the codes appear in Section 3 of the VAED manual. If the procedure is on the Type B list, use code B. If not, you should move down the list of codes to find the first code that applies in each case. For example, B comes before C so if a patient undergoes both a Type B and Type C procedure you would use code B, even though they may both apply.

B Day Only Bands 1A, 1B, 2, 3 and 4

Criterion for Admission code B is applied to admissions for a limited set of procedures. Type B procedures can, and must, be admitted and reported to the VAED, regardless of whether the patient is public or private.

Some MBS numbers are always Band 1A and they are listed in the Day Only Procedures Manual. All other Type B numbers are listed under *Non-Band Specific Type B Day Procedures*.

The type of anaesthetic administered and the time in theatre determines at which band the item is classified. However, VAED is not concerned with the actual Band.

If the MBS item number is not listed under *Band 1* or *Non-Band Specific Type B Day Procedures* then it is not a Type B procedure and cannot be reported to the VAED using Criterion for Admission B. The only exception occurs where a general anaesthetic or an anaesthetic delivered intravenously was administered. In this case the episode must be coded with the appropriate anaesthetic code and can be reported to the VAED using Criterion for Admission B.

C Type C Professional Attention Procedures

Type C procedures are defined as procedures that do not warrant admission under accepted medical practice, and are therefore not usually reported to the VAED. The only exceptions are when there are extenuating circumstances where the treating doctor believes the patient requires admission. Documented justification of the admission for Type C procedures on clinical grounds must be included in the medical record. The need for a Type C procedure to be performed under general anaesthetic justifies admission.

The complete list of Type C MBS item numbers is printed in the Day Only Procedures Manual. Patients receiving any treatment other than a procedure which maps to an MBS item number on the Type C list cannot be reported using Criterion for Admission code C.

Non Type B and C Procedures

Where a procedure has an MBS number, but is not listed on either the Type B or C lists, the procedure is considered, by default, to be Type A procedure. Type A procedures are considered to require overnight admission according to the Commonwealth list, although in practice, there are a number of Type A procedures that are regularly performed on a Day only basis. Where a Type A procedure is performed the patient must be admitted, regardless of the duration of stay and whether an anaesthetic was performed.

E Extended Medical Treatment

There seems to be a common misconception that any patient present in the hospital for more than four hours can be reported to the VAED. This is not the case. The patient must be receiving 'continuous active management' for at least four hours, which at a *minimum* involves at least half hourly observations of vital or neurological signs. Even then, the decision to admit must be made by the treating doctor, and the reasons for this decision documented in the patient's record.

Patients attending a pre-admission clinic do not qualify for admission under this or any other code. Patients waiting for test results, or who receive treatment and are left to rest without receiving half hourly observations of vital or neurological signs, etc, are not to be reported to the VAED.

ACHI-MBS Mapping and Auditing

In order to determine whether a procedure is a Type B or C you will need to map the ACHI code to an MBS number. In most cases, removing the last two digits of the ACHI code will map to an MBS number, however the MBS code title should be checked to ensure that

additional variables are not present. Additionally, Volume 4, Appendix A of the NCCH Coding Book contains a mapping table.

Audits of medical records may be conducted for the purpose of ensuring that treatment of patients in an admitted patient setting is warranted, particularly for patients admitted under Criterion for Admission codes C and E.

Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH - MDS)

114.9 2006-07 Manual Updates

Appendices for the VINAH Manual have now been released, and Section 9 and the Provider Helper Code Table have been re-released.

The website now contains the following sections of the VINAH Manual 2006-07, the URL is: <http://www.health.vic.gov.au/hdss/vinah/2006-07/index.htm>

- Section 2: *Concept Definitions and Derived Item Definitions*
- Section 3: *Data Definitions*
- Section 4: *Business Rules*
- Section 5: *Generation and Transmission*
- Section 9: *Supplementary Code Lists* (Amended)
- Provider Helper Code Table (Amended)
- Appendix A: *Sample HL7 Messages* (New)
- Appendix B: *SACS KPI Summary* (New)

Other sections of the manual will be added as they become available.

114.10 Client Service Event: Aggregation rules

It has come to our attention that the aggregation rules for a Client Service Event, as listed in the VINAH Manual, Section 2 *Concept Definitions and Derived Item Definitions*, is (and always has been) incomplete. In the 2006-007 VINAH Manual the following change should be made to the Guide for Use:

For reporting purposes, multiple clinician contacts that take place on the same day are to be aggregated into a client service event where the following data elements would be the same:

- *Client Service Event Client Present Status;*
- *Client Service Event Program;*
- *Client Service Event Delivery Setting;*
- *Client Service Event Delivery Mode;*
- *Client Service Event Provider; and,*
- *Client Service Event Session Type.*

This change will also be reflected in subsequent versions of the *Specifications for revision to the VINAH MDS for 1 July 2007*.

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 five Victorian health data collections:

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

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>

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