



Central Distributor SID: Description of Data Elements

This section describes how HCUP data elements are coded, restrictions on their use, their uniform values, and State-specific coding practices.



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ADATE - Admission date

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General Notes

Admission date (ADATE) is assigned a valid nonmissing date, with the following exceptions:

- If an admission date is supplied by the data source, but one or more of the components of the admission date (year, month, day) is
 - Blank or a documented missing value, then ADATE = missing (.).
 - - or -
 - Nonnumeric or out of range (year NE 00-99, month NE 1-12, day NE 1-31), then ADATE = invalid (.A).
- If the admission day is inconsistent with the month (e.g., February 30), then ADATE = invalid (.A).
- If the data source does not provide the admission date, then beginning in the 1998 data, ADATE is not present on the HCUP files. In the 1988-1997 data, ADATE is retained on the HCUP files and is set to unavailable from source (.B).
- If the admission date is after the discharge date (ELOS03 beginning in the 1998 data and ED011 in the 1988-1997 data), then ADATE is set to inconsistent (.C).

To ensure the confidentiality of patients on the HCUP Central Distributor files, full dates are not released. Beginning in the 1998 data, ADATE is replaced by admission month (AMONTH) and admission year (AYEAR). In databases before 1998, the day portion of the date stored in ADATE is overwritten with "01" during the creation of the Distributor files. The month and year portion of the date remains unchanged. HCUP data elements that are calculated from ADATE are computed before ADATE is masked.

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Uniform Values

Variable	Description	Value	Value Description
ADATE	Admission date	YYMMDD	Date of admission

	.	Missing
	.A	Invalid
	.B	Unavailable from source (coded in 1988-1997 data only)
	.C	Inconsistent: beginning with 1998 data, ELOS03; in 1988-1997 data, ED011

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State Specific Notes

Colorado

Beginning in 1997, Colorado provided the admission date (ADATE) with a four-digit year. In prior years, only a two-digit year was available.

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ADAYWK - Admission day of week

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General Notes

Admission day of the week (ADAYWK) is calculated from the admission date (ADATE). If ADAYWK cannot be calculated (ADATE is missing or invalid), then:

- ADAYWK is set to the supplied admission day of the week, if available.
- ADAYWK is missing (.) if the supplied admission day of week is missing.
- If ADAYWK is out of range (ADAYWK NE 1-7) or nonnumeric, it is set to invalid (.A).
- In the 1988-1997 HCUP files, if the data source does not provide the admission date or admission day of week, then ADAYWK is set to unavailable from source (.B).

Beginning in the 1998 HCUP files, the data element ADAYWK is replaced by admission weekend (AWEKEND).

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Uniform Values

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Variable	Description	Value	Value Description
ADAYWK	Admission day of week	1	Sunday
		2	Monday
		3	Tuesday
		4	Wednesday
		5	Thursday
		6	Friday
		7	Saturday
		.	Missing
		.A	Invalid
		.B	Unavailable from source (coded 1988-1997 data only)

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State Specific Notes

None

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ADRG - All Patient Refined DRG

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General Notes

All Patient Refined DRGs (APR-DRGs) are a DRG refinement developed by 3M Health Information Services to improve upon the Refined DRGs developed at Yale University. They were enhanced by incorporating additional pediatric DRG modifications, recognizing the impact of multiple Complications and Comorbidities (CCs), and refined CC definitions. The APR-DRGs eliminated the HCFA DRG splits for CCs and death, and all but two of the age splits and replaced them with complexity subclasses.

Except for newborn DRGs, each patient is assigned to a complexity subclass (HCUP data element ADRGSEV). Assignment to a complexity subclass is based, in part, on the complexity of a patient's secondary diagnoses, interactions among secondary diagnoses, age, principle diagnosis, and the presence of certain nonoperating room procedures.

APR-DRG codes are supplied by the data source. During HCUP processing, source values are maintained as reported. The two-digit APR MDC code is stored in the data element AMDC. The three-digit APR DRG code is stored in the data element ADRG. The one-digit complexity subclass is stored in ADRGSEV. The one-digit risk of mortality class is stored in ADRGRiskMortality beginning in the 1998 data and ADRGRMS in the earlier years.

Note to analysts: this data element may not be uniformly coded across states because it is assigned by the data source. Please refer to the state-specific notes below about the version of software used for a particular state.

For more information see "All Patient Refined Diagnosis Related Groups (APR-DRGs)," published by 3M Health Information Services.

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Uniform Values

Variable	Description	Value	Value Description
ADRG	All Patient Refined DRG	nnn	APR-DRG
		. or 0	Missing
		.A	Invalid

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State Specific Notes

Kentucky

Source documentation does not include which version of the APR-DRG grouper was used.

Maine

For Maine only, the ADRG and AMDC data elements contain the 3M All Patient DRG and MDC rather than the 3M All Patient Refined DRG and MDC. Source documentation indicates that the current version of the All Patient DRG (ADRG) is applied to the data.

Massachusetts

Beginning in 2009, Massachusetts provides the Version 26.1 grouper to assign ADRG.

Beginning in October 2008, Massachusetts no longer provided the Version 20 grouper to assign ADRG.

Beginning in October 2006, Massachusetts used the Version 20 grouper to assign ADRG. From October 1999 through September 2006, Massachusetts used Version 15. Prior to that, Massachusetts used the Version 12 grouper to assign ADRG. Beginning in 2009, Massachusetts provides the Version 26.1 grouper to assign ADRG.

Michigan

Michigan provides the All Patient Refined DRG.

Utah

Prior to April 1998, ADRG is assigned using Version 12.0. Starting in April 1998, Utah uses Version 15.0. Source documentation indicates that there is a significant difference between version 12.0 and version 15.0.

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ADRGRiskMortality - All Patient Refined Risk of Mortality Subclass

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General Notes

The All Patient Refined Risk of Mortality Class (ADRGRiskMortality) reports the likelihood of dying as determined by the APR system. APR Risk of Mortality Class is supplied by the data source. During HCUP processing, the codes are assigned to the HCUP data element ADRGRMS as reported, without modification.

For more information see "All Patient Refined Diagnosis Related Groups (APR-DRGs)," published by 3M Health Information Services.

In HCUP databases before 1998, this data element is called ADRGRMS.

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Uniform Values

Variable	Description	Value	Value Description
ADRGRiskMortality	All Patient Refined Risk of Mortality Subclass	1	Minor likelihood of dying
		2	Moderate likelihood of dying
		3	Major likelihood of dying
		4	Extreme likelihood of dying
		.	Missing
		.A	Invalid

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State Specific Notes

Massachusetts

Beginning in 2009, Massachusetts provides the Version 26.1 grouper to assign ADRGRISKMORTALITY.

Beginning in October 2008, Massachusetts no longer provided the Version 20 grouper to assign ADRGRISKMORTALITY.

Beginning in October 2006, Massachusetts used the Version 20 grouper to assign ADRGRISKMORTALITY.

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ADRGSEV - All Patient Refined DRG Complexity Subclass

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General Notes

The All Patient Refined DRG Complexity Subclass (ADRGSEV) reports the complexity subclass for the All Patient Refined DRGs (APR-DRGs). This is an indicator of the extent of physiologic decompensation or organ system loss of function. With the exception of newborn patients, each APR-DRG is subdivided into four complexity subclasses. Newborn DRGs have a complexity code of zero (0). Assignment to a complexity subclass is based, in part, on the complexity of a patient's secondary diagnoses, interactions among secondary diagnoses, age, principal diagnosis, and the presence of certain nonoperating room procedures.

APR-DRG complexity subclass codes are supplied by the data source. During HCUP processing, the codes are assigned as reported, without modification.

For more information see "All Patient Refined Diagnosis Related Groups (APR-DRGs)," published by 3M Health Information Services.

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Uniform Values

Variable	Description	Value	Value Description
ADRGSEV	All Patient Refined DRG Complexity Subclass	0	Newborn DRGs
		1	Minor loss of function (includes cases with no comorbidity or complications)
		2	Moderate loss of function

		3	Major loss of function
		4	Extreme loss of function
		.	Missing
		.A	Invalid

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State Specific Notes

Massachusetts

Beginning in 2009, Massachusetts provides the Version 26.1 grouper to assign ADRGSEV.

Beginning in October 2008, Massachusetts no longer provided the Version 20 grouper to assign ADRGSEV.

Beginning in October 2006, Massachusetts used the Version 20 grouper to assign ADRGSEV.

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AGE - Age in years at admission

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General Notes

Age in years (AGE) is calculated from the birth date (DOB) and the admission date (ADATE) in the HCUP State databases with the few exceptions listed below. Ages over 89 are aggregated into a single category of 90 years or older in the HCUP nationwide databases starting in data year 2012.

Exceptions for assigning AGE:

- AGE is set to the supplied age if the age cannot be calculated (ADATE and/or DOB is missing or invalid). Note: If the supplied age is the age at discharge instead of the age at admission, then the supplied age is NOT used.
- AGE is missing (.) if the age cannot be calculated and the supplied age is missing.
- AGE is invalid (.A) if
 - it is out of range (AGE NE 0-124) or
 - the age cannot be calculated and the supplied age is nonnumeric.

An invalid calculated AGE is not replaced by the supplied age.

- If the data source does not provide the necessary dates to calculate age or the reported age at admission, then beginning in the 1998 data, AGE is not present on the HCUP files. In the 1988-1997 data, AGE is retained on the HCUP files and is set to unavailable from source (.B).
- AGE is set to inconsistent (.C) if one of the HCUP edit checks is triggered. The age edit checks

vary by year.

- Beginning in the 1998 data, AGE is less than 0 (EAGE02), is greater than 124 (EAGE03), is inconsistent with neonatal diagnoses (EAGE04), or is inconsistent with maternal diagnoses/procedures (EAGE05).
- In the 1988-1997 data, AGE is inconsistent with AGEDAY (ED021), neonatal diagnoses (ED3nn), maternal diagnoses (ED4nn), or maternal procedures (ED5nn).

When processing the 1996 HCUP data, no adjustment was made for the leap year when age was calculated from date of birth and admission date. This caused infants admitted on the day before their first birthday to have AGE=1 instead of AGE.

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Uniform Values

Variable	Description	Value	Value Description
AGE	Age in years at admission	0-124	Age in years
		.	Missing
		.A	Invalid
		.B	Unavailable from source (coded in 1988-1997 data only)
		.C	Inconsistent: beginning with 1998 data, EAGE02, EAGE03, EAGE04, EAGE05; in 1988-1997 data, ED021, ED3nn, ED4nnn, ED5nn

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State Specific Notes

Arizona

The reported age was not used when AGE could not be calculated because Arizona supplied age at discharge.

Beginning with 2005, source AGE is no longer supplied.

Arkansas

Only the calculated age could be used to assign AGE because Arkansas did not supply age in years.

California

In all years, California assigned the date of birth to admission date when the admission date was not reported and the discharge had a principal diagnosis indicating a newborn (defined as DX1 equal to V3x.0x). This caused the calculated age to be 0 days.

Prior to 1995, California reported ages at discharge. Only the calculated age was used to assign

AGE.

Beginning in 1995, California reported ages at admission. When AGE could not be calculated from dates, the reported age was assigned.

California

Central Distributor only - because of confidentiality restrictions, age in years (AGE) is suppressed or offset by a few years on some records.

Colorado

Beginning in data year 2014, the reported age was used to assign AGE. Age could not be calculated because the date of birth (DOB) provided by Colorado does not include the day of birth. Only birth month and year are provided. The day of birth was set to 15 for all records.

Beginning with 1998, the Colorado supplied age at admission was used to assign AGE when the age could not be calculated.

From 1994-1997, Colorado supplied age at admission. For consistency with earlier years of the SASD, however, only the calculated age was used to assign the HCUP variable AGE.

From 1988-1993, Colorado did not supply age at admission. Only the calculated age could be used to assign the HCUP variable age.

Florida

Beginning in 2004, Florida provides DOB and ADATE for all discharges.

In 1997, patient age could not be calculated from dates since Florida did not report admission or birth dates. During HCUP processing, the reported age was used to assign AGE. From 1998 to 2001, Florida supplied admission date and date of birth for patients less than 11 years old. For patients over 10 years old, the reported age in years was used to assign AGE. Beginning in 2002, Florida reported age for all discharges, but did not provide admission date and date of birth.

Iowa

AGE may differ by one year from the actual age. When only the year of birth is available, Iowa assigns the day and month of birth to '01', which may cause the age calculated from birth date to be one year less than the actual age.

Maryland

Beginning in 2013, the supplied age in years is used when the data element cannot be calculated.

Massachusetts

Prior to October 1998, ages greater than 100 years should be interpreted with caution. Age is calculated using the birth and admission date, but only a two-digit year for date of birth (DOB) was provided by the data source. An additional indicator variable provided by the data source, the "Century Birth date," indicates whether the age of the patient was greater or less than 100 years. HCUP experience has shown that this indicator was often not set when it should have been. Thus, if

the century indicator specified 1800 or the birth date occurred after the admit date, the century for the date of birth was set to 1800. If the birth date is erroneously after the admit date, this rule causes the age in years (AGE) to be incorrectly greater than 100. If the age does not agree with neonatal or maternal diagnoses and/or procedures, the age is set to inconsistent (.C).

Beginning in October 1998, Massachusetts provides a four-digit birth year. The birth century indicator and the admission date are not used to modify the date of birth.

Michigan

Prior to 2001, age could not be calculated because Michigan did not report admission and birth dates. Beginning with the 2001 data, Michigan provided complete dates and AGE could be calculated.

Nevada

For discharges less than 90 years old, if the age could not be calculated from dates, then the reported age was used to assign AGE. For discharges that are 90 or older, only the calculated age could be used to assign AGE because Nevada sets age in years to 90 for all discharges age 90 and above.

New Jersey

Beginning in 2009 AGE was provided. In 2008, Age was calculated during the HCUP processing.

Prior to 1994, New Jersey reports age as a two-digit code with a maximum of 99 and provides a birth century indicator. Beginning in 1994, New Jersey provides a four-digit birth year. If age could not be calculated (ADATE or DOB missing or invalid) then age was assigned as follows:

Year of Data	HCUP processing of AGE
1988-1991	If DOB is greater than ADATE, assign AGE as the reported age plus 100. Otherwise, assign AGE as the reported two-digit age.
1992-1993	If DOB is greater than ADATE, assign AGE as the reported age plus 100. Otherwise, assign AGE as the reported two-digit age and add 100 if the birth century flag indicates that the patient is age 100 or older.
Beginning 1994	Assign AGE as the reported age, if the reported AGE was in the range of 1-124 years. Otherwise, assign AGE as invalid (.A).

New York

Beginning with the 2008 data, the HCUP data element AGE is missing (.) for AIDS/HIV patients. New York identifies AIDS/HIV records by ICD-9-CM diagnosis code, DRG, or MS-DRG:

- An admitting, principal or any secondary diagnosis of "042", "043", "044", "7958", "27910", "27919", "2793", "1363", "79571", "07951", "07952", "07953", "V017" or "V08".
- A DRG of 488 through 490 (prior to October 2007) or MS-DRG of 700 through 716 (beginning in October 2007).

Please note that the admitting diagnosis is not retained in the HCUP databases prior to 2012.

In the 1988-1997 HCUP New York databases, AGE could not be calculated because New York did not report full admission and birth dates. During HCUP processing, only the reported age in years could be used to assign AGE.

Oregon

Oregon reports age at discharge. During HCUP processing, reported age was not used when patient age (AGE) could not be calculated from dates. Beginning in 2007, reported age was used if the calculated age was missing.

Utah

Prior to 2004, the reported age was not used when AGE could not be calculated because Utah supplied age at discharge. Beginning in 2004, Utah supplied the age at admission which was used during HCUP processing.

Washington

Availability of Reported Age

During HCUP processing of 1988-1992 discharges, the reported age was not used when AGE could not be calculated because Washington reported age at discharge. The appropriate edit check for consistency of reported and calculated ages could not be performed.

Beginning with 1993 discharges, Washington reported age at time of admission, consistent with the HCUP definition of AGE. Therefore, if the patient's age could not be calculated from dates, the reported age was assigned to AGE.

Ages Greater Than 99 Years

For 1988-1992 discharges, due to the coding of date of birth, no patient ages are greater than 99 years. Only a two-digit year for date of birth (DOB) was provided by the data source.

- If DOB is greater than admission date (ADATE), the birth century was assigned as 18 (e.g., if ADATE = 01/02/88 and DOB = 01/03/88, then the birth year was set to 1888 and the calculated age was 99).
- If DOB is less than or equal to ADATE, the birth century was assigned as 19 (e.g., if ADATE = 01/02/88 and DOB = 01/01/88, then the birth year was set to 1988 and the calculated age in years was 0).

For 1993-1996 discharges, the birth century was assigned as 1800 if the reported age was at least 100 or the reported date of birth was after the admission date. Birth century was assigned as 1900 for all other record. The age range is not truncated at 99.

In 1997, the reported age was no longer used to indicate ages over 100. This is consistent with the coding of AGE in other states. The coding of AGE in 1997 is the same as specified for 1988-1992.

Beginning in 1998, Washington provided a four-digit birth year with the century. If the reported date of birth was greater than the admission date, then the original date of birth remains unchanged and the age at admission (AGE and AGEDAY) was set to inconsistent (.C).

Wisconsin

Beginning in 2005, Wisconsin no longer codes ages greater than 96 to 96. Prior to 2005, an error during HCUP processing of 1989-1992 discharges caused age in years (AGE) and date of birth (DOB) to be set to missing (.) for all patients born in the year 1900. Beginning with 1993 discharges, AGE and DOB were processed correctly.

From 1989-1994, only the calculated age could be used to assign AGE because Wisconsin did not supply age in years. The appropriate edit check for consistency of reported and calculated ages could not be performed.

For 1995 discharges, the source supplied an age in years which was used if the age could not be calculated from date of birth and admission date.

Beginning in 1996, only the calculated age could be used to assign AGE because Wisconsin had truncated ages over 96 years to age 96.

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AGEDAY - Age in days (when AGE is less than 1 year)

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General Notes

Age in days (AGEDAY) is reported for patients less than 1 year old. AGEDAY is calculated from date of birth (DOB) and the admission date (ADATE) with the following exceptions:

- AGEDAY is set to the supplied age in days if the age cannot be calculated (ADATE and/or DOB is missing or invalid).
- AGEDAY is missing (.) if the age cannot be calculated and the reported age in days is missing.
- AGEDAY is missing (.) if the calculated age in years is out of range (AGE NE 0-124).
- AGEDAY is invalid (.A) if the age in days cannot be calculated and the supplied age in days is nonnumeric. An invalid calculated AGEDAY is not replaced by the reported age in days.
- If the data source does not provide the necessary dates to calculate age in days or the reported age in days, then beginning in the 1998 data, AGEDAY is not present on the HCUP files. In the 1988-1997 data, AGEDAY is retained on the HCUP files and is set to unavailable from source (.B).
- AGEDAY is set to inconsistent (.C) if one of the HCUP edit checks is triggered. The age edit checks vary by year.
 - Beginning in the 1998 data, AGEDAY is inconsistent with neonatal diagnoses (EAGE04), or is inconsistent with maternal diagnoses/procedures (EAGE05).
 - In the 1998-1997 data, AGEDAY is inconsistent with AGE (ED021), neonatal diagnoses (ED3nn), maternal diagnoses (ED4nn), or maternal procedures (ED5nn).

When processing the 1996 HCUP inpatient data, no adjustment was made for the leap year when age was calculated from date of birth and admission date. This caused infants admitted on the day before their first birthday to have AGE=1 and AGEDAY = missing (.), instead of AGE=0 and AGEDAY=364.

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Uniform Values

Variable	Description	Value	Value Description
AGEDAY	Age in days (when AGE is less than 1 year)	0-364	Days
		.	Missing
		.A	Invalid
		.B	Unavailable from source (coded in 1988-1997 data only)
		.C	Inconsistent: beginning with 1998 data, EAGE04, EAGE05; in 1988-1997 data, ED021, ED3nn, ED4nnn, ED5nn

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State Specific Notes

Arizona

Only the calculated age could be used to assign AGEDAY because Arizona did not supply age in days.

Arkansas

Only the calculated age in days could be used to assign AGEDAY because Arkansas did not supply this information.

California

California assigned the date of birth to admission date when the admission date was not reported and the discharge had a principal diagnosis indicating a newborn (defined as DX1 equal to V3x.0x). This caused the calculated age to be 0 days.

California

Central Distributor only - because of confidentiality restrictions, age in days (AGEDAY) is suppressed on some records.

Colorado

Beginning in data year 2014, Colorado no longer supplies age in days. Age in days could not be calculated because the date of birth (DOB) provided by Colorado does not include the day of birth. Only birth month and year are provided. The day of birth was set to 15 for all records.

Hawaii

Beginning in 2000, the reported age in days was used when the age in days could not be calculated from dates. Prior to 2000, only the calculated age could be used to assign AGEDAY. From 1996-1998, Hawaii did not supply age in days. In 1998-1999, Hawaii reported age in days, but the coding

was not consistent with the HCUP standard coding.

Beginning in 1998, Hawaii provided the date of birth (DOB) with a four-digit year. In prior years, only a two-digit year was available.

Iowa

AGEDAY may be incorrectly set to invalid (.A) on newborn records. When only the year of birth is available, Iowa codes the day and month of birth to '01'. This causes the calculated age in days to be negative, and therefore set to invalid (.A).

Only the calculated age could be used to assign AGEDAY. Prior to 1998, Iowa supplied age in days, but the coding is inconsistent with HCUP standards.

Beginning in 2008, we use supplied fields when we cannot calculate from dates.

Kentucky

Prior to 2008, only the calculated age in days could be used to assign AGEDAY because Kentucky did not supply this information. Beginning 2008, age in days was used to assign AGEDAY.

Maryland

Beginning in 2013, the supplied age in days is used when the data element cannot be calculated.

Michigan

Prior to 2001, AGEDAY could not be calculated because Michigan did not report admission and birth dates. Beginning with the 2001 data, Michigan provided complete dates and AGEDAY could be calculated.

Nebraska

Only the calculated age in days could be used to assign AGEDAY because Nebraska did not supply this information.

Nevada

Only the calculated age in days was used to assign AGEDAY.

New Jersey

Beginning in 2009, New Jersey supplied age in months.

In 2008, only the calculated age was used to assign AGEDAY because New Jersey did not supply age in days.

Beginning in 2001, the reported Age in Days was used when AGEDAY could not be calculated. Prior to 2001, only the calculated age could be used to assign AGEDAY because New Jersey did not supply age in days.

New York

Beginning with the 2008 data, the HCUP data element AGEDAY is missing (.) for AIDS/HIV patients. New York identifies AIDS/HIV records by ICD-9-CM diagnosis code, DRG, or MS-DRG:

- An admitting, principal or any secondary diagnosis of "042", "043", "044", "7958", "27910", "27919", "2793", "1363", "79571", "07951", "07952", "07953", "V017" or "V08".
- A DRG of 488 through 490 (prior to October 2007) or MS-DRG of 700 through 716 (beginning in October 2007).

Please note that the admitting diagnosis is not retained in the HCUP databases prior to 2012.

In the 1988-1997 HCUP New York databases, the data source provided admission year and month, but did not provide the day. A day of "01" was imputed for all records. The imputed date was not used to calculate other data elements or to perform edit checks. Beginning in 1998, the complete admission date was provided by the data source.

North Carolina

Only the calculated age in days could be used to assign AGEDAY because North Carolina did not supply this information.

Oregon

During HCUP processing, only the calculated age in days could be used to assign AGEDAY because:

- Oregon did not report age in days in the data prior to 1998 and
- Oregon reported age in days at discharge beginning in the 1998 data.

Beginning in 2007, reported age in days was used if the calculated age in days was missing.

Utah

Only the calculated age could be used to assign AGEDAY because Utah did not supply age in days.

Vermont

Only the calculated age in days could be used to assign AGEDAY because Vermont did not supply this information.

Washington

For 2010, Washington supplied age in days, but it was calculated using discharge date instead of admission date. LOS can be used to adjust the age accordingly.

West Virginia

Only the calculated age in days could be used to assign AGEDAY because West Virginia did not supply this information.

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AGEGROUP - Patient age, grouped

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General Notes

The patient age at admission is grouped as specified by the data source. Coding is state-specific.

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Uniform Values

Variable	Description	Value	Value Description
AGEGROUP	Patient age, grouped	nn	State specific coding - See the "State Specific Notes" section for details

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State Specific Notes

Hawaii

The values of AGEGROUP are defined as follows:

AGEGROUP	Patient Age at Admission
1	0-4 years
2	5-9 years
3	10-14 years
4	15-19 years
5	20-24 years
6	25-29 years
7	30-34 years
8	35-39 years
9	40-44 years
10	45-49 years

11	50-54 years
12	55-59 years
13	60-64 years
14	65-69 years
15	70-74 years
16	75-79 years
17	80-84 years
18	85-89 years
19	90 years or older

Maine

Beginning 2006 the values of AGEGROUP are defined as follows:

AGEGROUP	Patient Age at Admission
0	Missing/Invalid
1	0-4 years
2	5-9 years
3	10-14 years
4	15-19 years
5	20-24 years
6	25-29 years
7	30-34 years
8	35-39 years
9	40-44 years
10	45-49 years
11	50-54 years
12	55-59 years
13	60-64 years
14	65-69 years
15	70-74 years
16	75-79 years
17	80-84 years
18	85+ years

South Carolina

The values of AGEGROUP are defined as follows:

AGEGROUP	Patient Age at Admission
0	0-364 days
1	1-4 years
2	5-9 years
3	10-14 years
4	15-19 years
5	20-24 years

6	25-29 years
7	30-34 years
8	35-39 years
9	40-44 years
10	45-49 years
11	50-54 years
12	55-59 years
13	60-64 years
14	65-69 years
15	70-74 years
16	75-79 years
17	80-84 years
18	85 years or more

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AGEMONTH - Age in months (when AGE is less than 11 years)

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General Notes

Age in months (AGEMONTH) is reported for patients less than 11 years of age. AGEMONTH is calculated from date of birth (DOB) and the admission date (ADATE) with the following exceptions:

- AGEMONTH is set to the supplied age in months if the age cannot be calculated (ADATE and/or DOB is missing or invalid).
- AGEMONTH is missing (.) if the age cannot be calculated and the reported age in months is missing.
- AGEMONTH is missing (.) if the calculated age in years is out of range (AGE NE 0-124).
- AGEMONTH is invalid (.A) if the age in months cannot be calculated and the supplied age in months is nonnumeric. An invalid calculated AGEMONTH is not replaced by the reported age in months.
- AGEMONTH is set to inconsistent (.C) if AGEMONTH is inconsistent with neonatal diagnoses (EAGE04), or is inconsistent with maternal diagnoses/procedures (EAGE05).

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Uniform Values

Variable	Description	Value	Value Description
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AGEMONTH	Age in months (when AGE is less than 11 years)	0-131	Months
		.	Missing
		.A	Invalid
		.C	Inconsistent: beginning with 1998 data, EAGE04, EAGE05

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State Specific Notes

Colorado

Beginning in data year 2014, the reported age in months was used to assign AGEMONTH. Age in months could not be calculated because the date of birth (DOB) provided by Colorado does not include the day of birth. Only birth month and year are provided. The day of birth was set to 15 for all records.

Michigan

Prior to 2001, AGEMONTH could not be calculated because Michigan did not report admission and birth dates. Beginning with the 2001 data, Michigan provided complete dates and AGEMONTH could be calculated.

Nebraska

Only the calculated age in months could be used to assign AGEMONTH because Nebraska did not supply this information.

Nevada

Only the calculated age in months could be used to assign AGEMONTH because Nevada did not supply this information.

South Dakota

Only the calculated age in months could be used to assign AGEMONTH because South Dakota did not supply this information.

Vermont

Only the calculated age in months could be used to assign AGEMONTH because Vermont did not supply this information.

Washington

For 2010, Washington supplied age in months, but it was calculated using discharge date instead of admission date. LOS can be used to adjust the age accordingly.

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AHAID - AHA hospital identifier

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

There are up to three different types of hospital identifiers included in the HCUP databases.

- The data source's own number scheme for identifying hospitals and facilities (DSHOSPID),
- The hospital identifier used by the American Hospital Association (AHAID and IDNUMBER), and
- A unique HCUP hospital identifier (HOSPID).

The hospital entity as defined by the data source may differ from the hospital entity as defined by the American Hospital Association (AHA). For example, the data source treats two separate facilities as two hospitals, while the AHA treats the two facilities as a single hospital, or vice versa. For consistency across states, HCUP defines hospitals in accordance with the AHA Annual Survey Database (Health Forum, LLC © 2007). During HCUP data processing, the data source's identification of the hospital is reconciled with the identification of the hospital in the AHA Annual Survey Database. For detailed information about this linking process, see the special report on HCUP Hospital Identifiers.

The hospital identifier (AHAID) contains the 7-digit hospital identifier used on the AHA Annual Survey Database. These files contain information about hospital characteristics and are available for purchase through the AHA.

AHAID is missing for some hospitals because an AHA hospital identifier cannot be determined. Hospitals may not be registered with the AHA or the source-provided information cannot be linked to the AHA.

The data element AHAID is available in the Hospital file.

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Uniform Values

Variable	Description	Value	Value Description
AHAID	AHA hospital identifier	7(n)	AHA hospital identifier with a leading 6
		Blank	Missing

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State Specific Notes

None

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AHOUR - Admission hour

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

Admission hour (AHOUR) is coded in military time (e.g., 2:45 p.m. is represented as 1445). Invalid times are set to invalid (.A). No other edit checks are performed on this data element during HCUP processing.

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Uniform Values

Variable	Description	Value	Value Description
AHOUR	Admission hour	HHMM	Admission hour
		.	Missing
		.A	Invalid

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State Specific Notes

Florida

Beginning in 2010, Florida provided Inpatient Admission Time. This field was used to code AHOUR.

From 2006-2009, Florida provided HCUP with Emergency Department Hour of Arrival. This data element was used to code AHOUR. Beginning in 2010, Emergency Department Hour of Arrival is now kept in the data element EDHOUR.

Nebraska

Prior to 2004, Nebraska provided the hour of admission, but not the minutes. During HCUP data processing, the minutes were imputed to be "00".

New York

New York source values are 00-23 and 99. During HCUP processing, minutes are set to 00 and the source value 99 is set to missing.

Vermont

Vermont source values are 00-23. During HCUP processing, minutes are set to 00 and any other values are set to missing.

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AMDC - All Patient Refined MDC

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

All Patient Refined MDC (AMDC) reports the MDC as determined by the APR system. The AMDC is supplied by the data source. During HCUP processing, the codes are assigned to the HCUP data element AMDC as reported, without modification.

For more information see "All Patient Refined Diagnosis Related Groups (APR-DRGs)," published by 3M Health Information Services.

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Uniform Values

Variable	Description	Value	Value Description
AMDC	All Patient Refined MDC	nn	APR MDC value
		. or 0	Missing
		.A	Invalid

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State Specific Notes

Maine

For Maine only, the ADRG and AMDC data elements contain the 3M All Patient DRG and MDC rather than the 3M All Patient Refined DRG and MDC. Source documentation indicates that the current version of the All Patient DRG (ADRG) is applied to the data.

Massachusetts

Beginning in 2009, Massachusetts provides the Version 26.1 grouper to assign AMDC.

Beginning in October 2008, Massachusetts no longer provided the Version 20 grouper to assign AMDC.

Beginning in October 2006, Massachusetts used the Version 20 grouper to assign AMDC.

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AMONTH - Admission month

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

Admission month (AMONTH) is derived from either the month of the admission date or the supplied admission month. A valid nonmissing month is assigned to AMONTH even if the admission year or day is invalid or missing. Therefore, it is possible to have a valid AMONTH when the admission date is invalid or missing.

If AMONTH is nonnumeric or out of range (month NE 1-12), then AMONTH is invalid (.A).

If the data source does not provide the admission month, then beginning in the 1998 data, AMONTH is not present on the HCUP files. In the 1988-1997 data, AMONTH is retained on the HCUP files and is set to unavailable from source (.B).

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Uniform Values

Variable	Description	Value	Value Description
AMONTH	Admission month	1-12	Admit month
		.	Missing
		.A	Invalid
		.B	Unavailable from source (coded in 1988-1997 data only)

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State Specific Notes

California

Central Distributor only - because of confidentiality restrictions, admission month (AMONTH) is suppressed on some records.

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ANESTH - Method of anesthesia

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

Method of Anesthesia (ANESTH) is reported by the data source and recoded into HCUP uniform values.

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Uniform Values

Variable	Description	Value	Value Description
ANESTH	Method of anesthesia	0	No anesthesia
		10	Local anesthesia
		20	General anesthesia
		30	Regional anesthesia

		40	Other anesthesia
		.	Missing
		.A	Invalid

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State Specific Notes

New York

New York reports the type of anesthesia administered on the patient during the stay. If during the stay, anesthesia is administered more than once, the level of anesthesia is reported in the following hierarchical order: General, Regional, Other, and Local.

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APGAR1 - One-minute APGAR score

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

The Apgar score was designed to quickly evaluate a newborn's physical condition after delivery. The Apgar test is usually given to a baby twice: once at 1 minute after birth, and again at 5 minutes after birth. Five factors are used to evaluate the baby's condition and each factor is scored on a scale of 0 to 2:

- **A**ctivity and muscle tone
- **P**ulse (heart rate)
- **G**rimace response (medically known as "reflex irritability")
- **A**ppearance (skin coloration)
- **R**espiration (breathing rate and effort)

A value of 0 indicates death; the highest possible score is 10.

Apgar scores are retained as reported by the data source for records that indicate a hospital birth. A hospital birth is defined as any diagnosis in the range of V3000 to V3901 with the last two digits of "00" or "01" and the patient is not transferred from another acute care hospital or health care facility. Values outside the range of 0 to 10 are set to invalid (.A). The Apgar score is set to missing (.) on non-birth records.

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Uniform Values

Variable	Description	Value	Value Description
APGAR1	One-minute APGAR score	0-10	APGAR score
		.	Missing
		.A	Invalid

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State Specific Notes

None

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APGAR5 - Five-minute APGAR score

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

The Apgar score was designed to quickly evaluate a newborn's physical condition after delivery. The Apgar test is usually given to a baby twice: once at 1 minute after birth, and again at 5 minutes after birth. Five factors are used to evaluate the baby's condition and each factor is scored on a scale of 0 to 2:

- **A**ctivity and muscle tone
- **P**ulse (heart rate)
- **G**rimace response (medically known as "reflex irritability")
- **A**ppearance (skin coloration)
- **R**espiration (breathing rate and effort)

A value of 0 indicates death; the highest possible score is 10.

Apgar scores are retained as reported by the data source for records that indicate a hospital birth. A hospital birth is defined as any diagnosis in the range of V3000 to V3901 with the last two digits of "00" or "01" and the patient is not transferred from another acute care hospital or health care facility. Values outside the range of 0 to 10 are set to invalid (.A). The Apgar score is set to missing (.) on non-birth records.

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Uniform Values

Variable	Description	Value	Value Description
APGAR5	Five-minute APGAR score	0-10	APGAR score
		.	Missing
		.A	Invalid

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State Specific Notes

New Jersey

APGAR5 was discontinued in 2008

New Jersey supplies one character field, APGAR, that contains the five-minute APGAR score (APGAR5).

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ASCHEd - Scheduled versus unscheduled admission

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

The indicator of a scheduled admission (ASCHEd) is reported by the data source and recoded into the HCUP uniform values.

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Uniform Values

Variable	Description	Value	Value Description
ASCHEd	Scheduled versus unscheduled admission	0	Unscheduled admission
		1	Scheduled admission

	.	Missing
	.A	Invalid

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State Specific Notes

California

Beginning in 1997, ASCHED is available. California defines a "Scheduled Admit" as scheduled at least 24 hours before admission. The source category "Infant, less than 24 hours old" is included in the uniform category "Unscheduled Admit" (ASCHED = 0).

New York

According to the New York documentation, ASCHED will no longer be available by SPARCS starting 9/30/2007. This data element is filled with blanks so this data element will not be available on the HCUP files starting in 2008.

New York defined a "Scheduled" admission as one which was arranged through the hospital at least 24 hours before the admission.

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ASOURCE - Admission source, uniform coding

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

The Uniform Billing UB-04 Specifications changed coding specifications for Source of Admission to Point of Origin for Admission or Visit. While this change was scheduled to start as of October 1, 2007, the change-over date was not universally followed. During HCUP processing, coding was examined by hospital and information was stored in ASOURCEUB92/ASOURCE_X and PointOfOriginUB04/PointOfOrigin_X as most appropriate. Sometimes there was not a succinct change from one coding scheme to another. Original source values are retained in ASOURCE_X and PointOfOrigin_X if there is any question about the coding. Regardless of which variables are reported, the best source for identifying admissions through the emergency department (ED) is the HCUP data element HCUP_ED which looks across admission source, point of origin, and ED charges to identify ED admissions.

Three HCUP data elements contain information on the source of admission:

- ASOURCEUB92 (available beginning in 2002 data) indicates the source of admission and uses

the same coding as the source of admission data element on the UB-92 claim form.

ASOURCEUB92 has more detailed categories for routine admissions and transfers from other health facilities than the HCUP data element ASOURCE. Some states do not provide enough detail in the coding of the source of admission to accurately code ASOURCEUB92. For these states, the data element ASOURCEUB92 is not available.

- ASOURCE (available for all data years) indicates the source of the admission (emergency department; transfer from a hospital; routine, birth and other; etc.) recoded into HCUP uniform values. Routine, birth, and other (ASOURCE=5) include referrals from physicians, clinics, and HMOs. Transfer from a hospital may include transfers within the same hospital as well as transfers between hospitals. If the data source does not provide the admission source, then beginning in the 1998 data, ASOURCE is not present on the HCUP files. In the 1988-1997 data, ASOURCE is retained on the HCUP files and is set to unavailable from source (.B).
- ASOURCE_X (available beginning in 1998 data) retains the source of admission as provided by the data source. The original values have not been recoded into uniform HCUP values and are source-specific. ASOURCE_X is available for all states that provide HCUP with information on admission source.

If the state includes enough detail in the coding of the source of admission to accurately code ASOURCEUB92, then the HCUP data element ASOURCE is coded from ASOURCEUB92 as specified below. Otherwise, ASOURCE is coded from ASOURCE_X and specifications are listed under State Specific Notes.

Coding of ASOURCEUB92 into ASOURCE			
ASOURCEUB92		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from an acute care hospital	2	Another hospital
A	Transfer from a rural primary care hospital		
D	Transfer from one distinct unit of the hospital to another distinct unit of the same hospital resulting in a separate claim to the payer		
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
B	Transfer From Another Home Health Agency		
C	Readmission to Same Home Health Agency		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Outpatient or Clinic		
3	HMO		
1	Normal delivery (if ATYPE = 4)		
2	Premature delivery (if ATYPE = 4)		
3	Sick baby (if ATYPE = 4)		
4	Extramural birth (if ATYPE = 4)		
Blank	Unknown, Missing, Invalid	.	Missing

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Uniform Values

Variable	Description	Value	Value Description
ASOURCE	Admission source, uniform coding	1	Emergency department
		2	Another hospital
		3	Another health facility including long term care
		4	Court/Law enforcement
		5	Routine, birth, and other
		.	Missing
		.A	Invalid
		.B	Unavailable from source (coded in 1988-1997 data only)

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State Specific Notes

Arizona

Arizona			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO/AHCCCS health plan referral		
1	Normal delivery (if ATYPE=4)		
2	Premature delivery (if ATYPE=4)		
3	Sick baby (if ATYPE=4)		
4	Extramural birth (if ATYPE=4)		
9, Blank	Information not available, Missing	.	Missing
Any values not documented by the data source		.A	Invalid

California

California

ASOURCE_X		ASOURCE	
Value	Description	Value	Description
nm1, where n = 1-9 and where m = 1-3	Route was this hospital's emergency room	1	Emergency department
512	Acute inpatient care (this hospital)	2	Another hospital
522	Acute inpatient care (another hospital)		
2m2, where m = 1-3	Residential care facility	3	Other health facility including long-term care
3m2, where m = 1-3	Ambulatory surgery		
4m2, where m = 1-3	Skilled Nursing/Intermediate care		
532	Acute inpatient hospital care (not a hospital)		
6m2, where m = 1-3	Other inpatient hospital care	4	Court/Law enforcement
8m2, where m = 1-3	Prison/jail		
1m2, where m = 1-3	Home		
7m2, where m = 1-3	Newborn		
9m2, where m = 1-3	Other	5	Routine including births and other sources
000			
(blank)		.	Missing
(other)		.A	Invalid
<p>The <u>first digit</u> of ASOURCE_X describes the site from which the patient originated (e.g., home (1), residential care facility (2), ambulatory surgery (3), skilled nursing/intermediate care (4), acute inpatient hospital care (5), other inpatient hospital care (6), newborn (7), prison/jail (8), other (9).</p> <p>The <u>second digit</u> of ASOURCE_X describes the license of site from which the patient originated (e.g., this hospital (1), another hospital (2), not a hospital (3).</p> <p>The <u>third digit</u> describes the route by which the patient was admitted (e.g., this hospital=s emergency room (1), not this hospital=s emergency room (2). Source value 2 includes patients seen in the emergency room of another hospital and patients not seen in any emergency room.</p>			

Newborns

In all years, California assigned all records containing a principal diagnosis code of "newborn, born in hospital" (defined as DX1 equal to V3x.0x) to an admission source of newborn, regardless of the admission source reported by the hospital. These discharges are included under the uniform category routine, birth, and other (ASOURCE = 5).

Home Health Service

Prior to 1995, the categories coded under routine, birth, and other (ASOURCE = 5) included an admission source of "Home Health Service."

Beginning in 1995, home health service is not reported by California as a separate category. No documentation is available from the source to indicate whether home health service is reported under another source category.

Court/Law Enforcement

Prior to 1995, the source documentation supplied by California does not indicate which source categories are used for "Court/Law Enforcement" (ASOURCE=4).

Beginning in 1995, the source reported a separate category for admissions from "Prison/Jail." These discharges are included under the uniform category "Court/Law Enforcement" (ASOURCE = 4).

Ambulatory Surgery

Beginning in 1995, the source reports a separate category for admissions from ambulatory surgery. These discharges are included under the uniform category "Other Facility, Including Long Term Care" (ASOURCE = 3).

Colorado

Colorado			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
Beginning in 2002 HCUP data, ASOURCE is coded from ASOURCEUB92 instead of ASOURCE_X. The table below specifies how ASOURCE was coded from ASOURCE_X prior to 2002.			
7	Emergency room	1	Emergency department
4	Transfer from a hospital	2	Another hospital
A	Transfer from a rural hospital		
5	Transfer from SNF	3	Other health facility including long-term care
6	Transfer from another facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal delivery (if ATYPE=4)		
2	Premature delivery (if ATYPE=4)		
3	Sick baby (if ATYPE=4)		
4	Extramural birth (if ATYPE=4)		
9, 0, Blank	Unknown, Missing	.	Missing
Any values not documented by the data source		.A	Invalid

Florida

Florida	
(Prior to 2002)	

ASOURCE_X		ASOURCE	
Value	Description	Value	Description
07	Emergency room	1	Emergency department
04	Transfer from hospital	2	Another hospital
05	Transfer from skilled nursing facility	3	Other health facility including long-term care
06	Transfer from another health care facility		
08	Court/Law enforcement	4	Court/Law enforcement
01	Physician referral	5	Routine including births and other sources
02	Clinic referral		
03	HMO referral		
10	Normal delivery (if ATYPE=4)		
11	Premature delivery (if ATYPE=4)		
12	Sick baby (if ATYPE=4)		
13	Extramural birth (if ATYPE=4)		
09, 14, Blank	Other/Unknown, Other/Unknown (if ATYPE=4), Missing	.	Missing
Any values not documented by the data source		.A	Invalid

Hawaii

Hawaii			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
A	Transfer from a rural hospital primary care facility		
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal delivery (if ATYPE=4)		
2	Premature delivery (if ATYPE=4)		
3	Sick baby (if ATYPE=4)		
4	Extramural birth (if ATYPE=4)		
9, Blank	Unknown, Missing	.	Missing
Any values not documented by the data source		.A	Invalid
Prior to 2002, admission source information was provided in two fields; one for newborns and one for all other patients. ASOURCE_X was assigned as follows:			

- If a newborn record (ATYPE=4) then ASOURCE_X = the newborn admission source, Else ASOURCE_X = the admission source for non-newborns.

Iowa

Iowa			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal birth (if ATYPE=4)		
2	Premature birth (if ATYPE=4)		
3	Sick baby (if ATYPE=4)	.	Missing
4	Extramural birth (if ATYPE=4)		
9, Blank	Unknown, Missing	.	Missing
Any values not documented by the data source		.A	Invalid

Kentucky

Kentucky			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
07	Emergency room	1	Emergency department
04	Transfer from hospital	2	Another hospital
A	Transfer from critical care hospital		
05	Transfer from SNF	3	Other health facility including long-term care
06	Transfer from another health care facility		
08	Court/Law enforcement	4	Court/Law enforcement
01	Physician referral	5	Routine including births and other sources
02	Clinic referral		
03	HMO referral		
11	Normal delivery		
12	Premature delivery		

13	Sick baby		
14	Extramural birth		
09, 19, Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid

Maine

Maine			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from a hospital	2	Another hospital
A	Transfer from a critical access hospital		
5	Transfer from SNF	3	Other health facility including long-term care
6	Transfer from another facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal newborn (if ATYPE = 4)		
2	Premature delivery (if ATYPE = 4)		
3	Sick baby (if ATYPE = 4)		
4	Extramural birth (if ATYPE = 4)		
0, 9, Blank	Missing	.	Missing
Any other values not documented by the data source		.A	Invalid

Maryland

Many values are eliminated in 2006. Maryland's source values for admission source do not include a value for "Emergency Department" any longer.

Maryland			
(Beginning in 2006)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
20	Trans from on-site acute care unit to on-site rehabilitation unit (beginning 7/05)	2	Another hospital
24	Trans from on-site acute care unit to chronic care (beginning 7/05)		
26	Trans from on-site acute care to on-site psychiatric unit (beginning 7/05)		

40	Admit from another acute general hospital to miems-designated facility or area-wide trauma center (beginning 7/05)		
41	Admit from another acute care hospital inpatient service for any reason (beginning 7/05)		
21	Transferred from on-site rehabilitation unit to acute care unit (beginning 7/05)	3	Other health facility including long-term care
22	Transferred from on-site rehabilitation unit to chronic unit (beginning 7/05)		
23	Transferred from chronic unit to on-site rehabilitation unit (beginning 7/05)		
25	Transferred from on-site chronic unit to acute care unit (beginning 7/05)		
27	Transferred from on-site psychiatric unit to acute care unit (beginning 7/05)		
28	Transferred from on-site sub-acute unit to acute care unit (beginning 7/05)		
42	Admit from physical rehab. Hospital or unit of another acute care hospital (beginning 7/05)		
43	Admit from private psych. Hospital or unit of another acute care hospital (beginning 7/05)		
44	Admit from chronic hospital (beginning 7/05)		
45	Admit from other facility at which subacute services were provided (beginning 7/05)		
46	Admit within 72 hours from off-site ambulatory/outpatient surgery unit or other outpatient setting at another hospital or healthcare facility (beginning 7/05)		
47	Admit from supervised/congregate house (crisis bed, group home, assisted living, board and care, halfway house) (beginning 7/05)		
48	Admit from state psychiatric hospital (beginning 7/13)		
49	Admitted from residential treatment center (beginning 7/13)		
50	Admitted from Long Term Care facility (beginning 7/13)		
51	Admitted from a Skilled Nursing Facility		
61	Admit from a nursing home (beginning 7/05)		
--		4	Court/Law enforcement
29	Admitted within 72 hours from on-site ambulatory/outpatient surgery unit in which ambulatory surgery is performed	5	Routine including births and other sources
30	Newborn (Patient born in hospital) (beginning 7/05)		
60	Admit from home (home includes physician office or any noninstitutional source) (beginning 7/05)		
99, Blank	Source of admission is missing or unknown	.	Missing
Any values not documented by the data source		.A	Invalid
There is not enough detail in the coding of ASOURCE_X to code the HCUP variable ASOURCE92. ASOURCE is coded directly from ASOURCE_X.			

Maryland

Maryland			
(Prior to 2006)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
05	Admitted from home and the flag provided by MD indicates the record was admitted from the emergency room (ASOURCE_X is "05" and IER_FLAG is "1")	1	Emergency department
99, Blank	Information on source of admission is missing but the flag provided by MD indicates the record was admitted from the emergency room (ASOURCE_X is missing and IER_FLAG is "1")		
01	Transferred from another hospital to a specialty center (Valid through 6/05)	2	Another hospital
02	Transferred from another hospital for any other reason (Valid through 6/05)		
20	Trans from on-site acute care unit to on-site rehabilitation unit (beginning 7/05)		
24	Trans from on-site acute care unit to chronic care (beginning 7/05)		
26	Trans from acute care to on-site psychiatric unit (beginning 7/05)		
41	Admit from another acute care hospital inpatient service for any reason (beginning 7/05)		
40	Admit from another acute general hospital to miems-designated facility (beginning 7/05)	3	Other health facility including long-term care
03	Transferred from a nursing home (Valid through 6/05)		
04	Transferred from any other institution (Valid through 6/05)		
06	Transferred from Lithotripsy facility (Valid through 6/05)		
07	Transferred from on-site ambulatory outpatient surgery unit (Valid through 6/05)		
08	Transferred from off-site ambulatory outpatient surgery unit (Valid through 6/05)		
12	Admitted from on-site sub-acute facility (Valid through 6/05)		
13	Admitted from other sub-acute facility (Valid through 6/05)		
00	Transferred from on-site acute care unit to rehabilitation unit (Valid through 6/05)		
11	Transferred from on-site acute care unit to psych unit (Valid through 6/05)		
21	Transferred from on-site rehabilitation unit to acute care unit (beginning 7/05)		
22	Transferred from on-site rehabilitation unit to chronic unit (beginning 7/05)		
23	Transferred from chronic unit to on-site rehabilitation unit (beginning 7/05)		

25	Transferred from on-site chronic unit to acute care unit (beginning 7/05)		
27	Transferred from on-site psychiatric unit to acute care unit (beginning 7/05)		
28	Transferred from on-site sub-acute unit to acute care unit (beginning 7/05)		
42	Admit from rehab. Hospital or unit of another acute care hospital (beginning 7/05)		
43	Admit from private psych. Hospital or unit of another acute care hospital (beginning 7/05)		
44	Admit from chronic hospital (beginning 7/05)		
45	Admit from other facility at which subacute services were provided (beginning 7/05)		
46	Admit within 72 hours from off-site amb. surg. / care of another facility (beginning 7/05)		
47	Admit from any other health institution (domiciliary, mental, halfway) (beginning 7/05)		
61	Admit from a nursing home (beginning 7/05)		
--		4	Court/Law enforcement
05	Admitted from home (when the emergency flag provided by MD does not indicate the record was admitted from the emergency room IER_FLAG does not equal 1) (Valid through 6/05)	5	Routine including births and other sources
10	Newborn (Valid through 6/05)		
30	Newborn (Patient born in hospital) (beginning 7/05)		
60	Admit from home, physician's office, noninstitutional source (beginning 7/05)		
09, 99, Blank	Source of admission is missing or the flag provided by MD does not indicate the record was admitted from the emergency room (IER_FLAG not "1")	.	Missing
Any values not documented by the data source		.A	Invalid
There is not enough detail in the coding of ASOURCE_X to code the HCUP variable ASOURCE92. ASOURCE is coded directly from ASOURCE_X.			

Massachusetts

Massachusetts			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Outside hospital emergency room	1	Emergency department
R	Within hospital emergency room (beginning in October 1999)		
4	Transfer from an acute hospital	2	Another hospital
5	Transfer from a skilled nursing home	3	Other health facility including long-term care
6	Transfer from Intermediate Care Facility		
T	Transfer from outside ambulatory surgery		
X	Observation		
Y	Within hospital ambulatory surgery		

9	Other (to include level 4 nursing facility) (coded to "Other health facility" beginning in 2002)		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Within hospital clinic referral		
3	HMO referral		
9	Other (to include level 4 nursing facility) (coded to "Routine" prior to 2002)		
L	Outside hospital clinic referral		
M	Walk-in / Self Referral		
A	Normal delivery (if ATYPE = 4)		
B	Premature delivery (if ATYPE = 4)		
C	Sick baby (if ATYPE = 4)		
W	Extramural birth (if ATYPE = 4)		
D	Extramural birth (if ATYPE = 4)		
-, 0, Z, Blank	Information not available, Missing	.	Missing
Any values not documented by the data source		.A	Invalid

Michigan

Michigan			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from a hospital	2	Another hospital
A	Transfer from a rural primary care hospital		
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transferred from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic/outpatient referral		
3	HMO referral		
N	Newborn at this facility		
0	Missing, invalid or unrecorded	.	Missing
9	Information not available		
Any values not documented by the data source		.A	Invalid

Nebraska

Nebraska

(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
A	Transfer from critical access hospital		
6	Transfer from another health care facility other than an acute care facility		
B	Transfer from another home health agency	3	Other health facility including long-term care
C	Readmission to same home health agency		
1	Physician referral		
2	Clinic referral	5	Routine including births and other sources
3	HMO referral		
1	Normal delivery (if ATYPE=4)		
2	Premature (if ATYPE=4)		
3	Sick baby (if ATYPE=4)		
4	Extramural birth (if ATYPE=4)		
9, Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid

New Jersey

New Jersey			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from an acute care hospital	2	Another hospital
A	Transfer from a rural primary care hospital		
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Outpatient or Clinic		
3	HMO		
1	Normal birth (if ATYPE=4)		
2	Premature delivery (if ATYPE=4)		
3	Sick baby (if ATYPE=4)		
4	Extramural birth (if ATYPE=4)		
9, Blank	Unknown, Missing	0	Missing
Any values not documented by the data			

source	.A	Invalid
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In 1995-1996, the admission source, "Transfer from a Rural Primary Care Hospital" was erroneously recoded to the HCUP uniform category "Other Facility, Including Long Term Care" (ASOURCE = 3). Beginning in 1997, the admission source "Transfer from a Rural Primary Care Hospital" was correctly recoded to the HCUP uniform category "Another Hospital" (ASOURCE = 2). This source value was not available from New Jersey prior to 1995.

New York

Admitted from Outpatient Department

- For 1988-1992, the source category "Admitted From Outpatient Department" was recoded to the HCUP uniform category "Routine, Birth and Other" (ASOURCE = 5).
- For 1993, New York recoded "Admitted From Outpatient Department" into the source category "Emergency Room" and during HCUP processing, it was assigned to the HCUP category "Emergency Department" (ASOURCE = 1).
- Beginning in 1994, New York does not report "Admitted from Outpatient Department."

Transfer from a Rural Primary Care Hospital

- Beginning in 1995, New York reported the admission source, "Transfer from a Rural Primary Care Hospital." This was recoded to the HCUP uniform category "Another Hospital" (ASOURCE = 2).

Other Source

- For 1988-1992, the source category "Other Source" was recoded to the HCUP uniform category "Routine, Birth and Other" (ASOURCE = 5).
- For 1993, New York recoded "Other Source" into the source category "Information Not Available" and during HCUP processing, it was assigned to the HCUP category "Missing" (ASOURCE = .).
- Beginning in 1994, New York does not report "Other Source."

New York			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
A	Transfer from a rural primary care hospital		
5	Transfer from SNF	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal delivery (if ATYPE=4)		
2	Premature delivery (if ATYPE=4)		
3	Sick baby (if ATYPE=4)		

4	Extramural birth (if ATYPE=4)		
9, Blank	Unknown, Missing	0	Missing
Any values not documented by the data source		.A	Invalid

North Carolina

North Carolina			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal delivery (if ATYPE=4)		
2	Premature delivery (if ATYPE=4)		
3	Sick baby (if ATYPE=4)		
4	Extramural birth (if ATYPE=4)		
9, 0, 1, N, U, Y; 9,0,5,6,7; Blank	Documented by source as unknown values; Documented by source as unknown values (if ATYPE = 4)	.	Missing
Any values not documented by the data source		.A	Invalid

Oregon

Oregon			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
07	Emergency room	1	Emergency department
04	Transfer from hospital	2	Another hospital
05	Transfer from SNF	3	Other health facility including long-term care
06	Transfer from another health care facility		
08	Court/Law enforcement	4	Court/Law enforcement
01	Physician referral		
02	Clinic referral		
03	HMO referral		

00	Home Health (discontinued in 1999)	5	Routine including births and other sources
11	Normal delivery		
12	Premature delivery		
13	Sick baby		
14	Extramural birth		
21	Admissions office (discontinued in 1998)		
22	Newborn (discontinued in 1998)		
09, 19, Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid

Rhode Island

Beginning in 2006, Rhode Island changed their coding of ASOURCE. The UB-92 values were collapsed into 5 categories that mirror HCUP standard values, resulting in a direct recode from ASOURCE_X to ASOURCE.

Rhode Island			
(Beginning in 2006)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
1	Emergency room	1	Emergency department
2	Other hospital	2	Another hospital
3	Other facility	3	Other health facility including long-term care
4	Law enforcement	4	Court/Law enforcement
5	Routine birth	5	Routine including births and other sources
0, Blank	Other, Missing	.	Missing
Any values not documented by the data source		.A	Invalid
There is not enough detail in the coding of ASOURCE_X to code the HCUP variable ASOURCEUB92.			

Rhode Island			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
Z	Emergency room from nursing home		
4	Transfer from hospital	2	Another hospital
5	Transfer from SNF		Other health facility including long-

6	Transfer from another health facility	3	term care
8	Court/law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinical Referral		
3	HMO Referral		
A	Normal birth (if ATYPE=4)		
B	Premature birth (if ATYPE=4)		
C	Sick baby (if ATYPE=4)		
D	Extramural birth (if ATYPE=4)		
E	Newborn (if ATYPE=4)		
F	Stillborn (if ATYPE=4)		
9, Blank	Information not available	.	Missing
Any values not documented by the data source		.A	Invalid

South Carolina

Prior to 2002, South Carolina did not provide enough detail in the coding of ASOURCE_X to code the HCUP variable ASOURCEUB92.

South Carolina			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
A	Transfer from a rural primary care hospital		
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal delivery (if ATYPE=4)		
2	Premature delivery (if ATYPE=4)		
3	Sick baby (if ATYPE=4)		
4	Extramural birth (if ATYPE=4)		
0, 9, Blank	Information not available, Missing	.	Missing
Any values not documented by the data source		.A	Invalid

Utah

Utah			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician Referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal newborn (if ATYPE=4) (This is not available in the SASD)		
2	Premature delivery (if ATYPE=4) (This is not available in the SASD)		
3	Sick baby (if ATYPE=4) (This is not available in the SASD)		
4	Extramural birth (if ATYPE=4) (This is not available in the SASD)		
0	Newborn		
9, Blank	Unknown, Missing	.	Missing
Any values not documented by the data source		.A	Invalid
<p>SID and SEDD: Admission source information was provided in two fields; one for newborns and one for all other patients. ASOURCE_X was assigned as follows:</p> <p style="padding-left: 40px;">If a newborn record (ATYPE=4) then ASOURCE_X = the newborn admission source,</p> <p style="padding-left: 40px;">Else ASOURCE_X = the admission source for non-newborns.</p> <p>SASD: Only the non-newborn admission source was provided.</p>			

Vermont

Vermont			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
A	Transfer from critical access hospital		
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		

8	Court/Law enforcement	4	Court/Law enforcement
1	Physician Referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal newborn (if ATYPE=4)		
2	Premature delivery (if ATYPE=4)		
3	Sick baby (if ATYPE=4)	5	Routine including births and other sources
4	Extramural birth (if ATYPE=4)		
9, Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid

Washington

Washington			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from a hospital	2	Another hospital
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
9	Other		
1	Normal delivery (if ATYPE=4)		
2	Premature delivery (if ATYPE=4)	5	Routine including births and other sources
3	Sick baby (if ATYPE=4)		
4	Extramural birth (if ATYPE=4)		
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid

West Virginia

West Virginia			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
	Transfer from a skilled nursing		

5	facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal delivery (if ATYPE=4)		
2	Premature birth (if ATYPE=4)		
3	Sick baby (if ATYPE=4)		
4	Extramural birth (if ATYPE=4)		
9, Blank	Unknown, Missing	.	Missing
Any values not documented by the data source		.A	Invalid

Wisconsin

Wisconsin			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
7	Emergency room	1	Emergency department
4	Transfer from hospital	2	Another hospital
5	Transfer from a skilled nursing facility	3	Other health facility including long-term care
6	Transfer from another health care facility		
8	Court/Law enforcement	4	Court/Law enforcement
1	Physician referral	5	Routine including births and other sources
2	Clinic referral		
3	HMO referral		
1	Normal newborn (if ATYPE = 4)		
2	Premature newborn (if ATYPE = 4)		
3	Sick baby (if ATYPE = 4)		
4	Extramural birth (if ATYPE = 4)		
9, Blank	Unknown, Missing	.	Missing
Any values not documented by the data source		.A	Invalid

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ASOURCEUB92 - Admission source, (UB-92 standard coding)

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General Notes

Three HCUP data elements contain information on the source of admission:

- ASOURCEUB92 (available beginning in 2002 for HCUP data in general, and in 2003 for the NIS) indicates the source of admission and uses the same coding as the source of admission data element on the UB-92 claim form. ASOURCEUB92 has more detailed categories for routine admissions and transfers from other health facilities than the HCUP data element ASOURCE. Some states do not provide enough detail in the coding of the source of admission to accurately code ASOURCEUB92. For these states, the data element ASOURCEUB92 is not available.
- ASOURCE (available for all data years) indicates the source of the admission (emergency department; transfer from a hospital; routine, birth and other; etc.) recoded into HCUP uniform values. Routine, birth, and other (ASOURCE=5) include referrals from physicians, clinics, and HMOs. Transfer from a hospital may include transfers within the same hospital as well as transfers between hospitals. If the data source does not provide the admission source, then beginning in the 1998 data, ASOURCE is not present on the HCUP files. In the 1988-1997 data, ASOURCE is retained on the HCUP files and is set to unavailable from source (.B).
- ASOURCE_X (available beginning in 1998 data) retains the source of admission as provided by the data source. The original values have not been recoded into uniform HCUP values and are source-specific. ASOURCE_X is available for all states that provide HCUP with information on admission source.

The Uniform Billing UB-04 Specifications changed Source of Admission to Point of Origin for Admission or Visit. While this change was scheduled to start as of October 1, 2007, the change-over date was not universally followed. To accommodate the new information two data elements were added to the HCUP databases - PointOfOriginUB04, for uniformly coded values, and PointOfOrigin_X, for values as received from source. During HCUP processing of the 2007 calendar year data, coding was examined by hospital and information was stored in ASOURCEUB92/ASOURCE_X and PointOfOriginUB04/PointOfOrigin_X as most appropriate. Sometimes there was not a succinct change from one coding scheme to another. Original source values are retained in ASOURCE_X and PointOfOrigin_X if there are any question about the coding.

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Uniform Values

Variable	Description	Value	Value Description
ASOURCEUB92	Admission source, (UB-92 standard coding)	1	If non-newborn admissions (ATYPE NE 4) Physician referral
		2	If non-newborn admissions (ATYPE NE 4) Clinic referral
		3	If non-newborn admissions (ATYPE NE 4) HMO referral
		4	If non-newborn admissions (ATYPE NE 4) Transfer from a hospital

	5	If non-newborn admissions (ATYPE NE 4) Transfer from a skilled nursing facility
	6	If non-newborn admissions (ATYPE NE 4) Transfer from another health facility
	7	If non-newborn admissions (ATYPE NE 4) Emergency room
	8	If non-newborn admissions (ATYPE NE 4) Court/Law enforcement
	A	If non-newborn admissions (ATYPE NE 4) Transfer from a Critical Access hospital
	B	If non-newborn admissions (ATYPE NE 4) Transfer From Another Home Health Agency
	C	If non-newborn admissions (ATYPE NE 4) Readmission to Same Home Health Agency
	D	If non-newborn admissions (ATYPE NE 4) Transfer from one distinct unit of the hospital to another distinct unit of the same hospital resulting in a separate claim to the payer
	E	If non-newborn admissions (ATYPE NE 4) Transfer from Ambulatory Surgery Center
	F	If non-newborn admissions (ATYPE NE 4) Transfer from Hospice and under Hospice plan
	Blank	If non-newborn admissions (ATYPE NE 4) Missing/Invalid
	1	If newborn admissions (ATYPE = 4) Normal newborn
	2	If newborn admissions (ATYPE = 4) Premature delivery
	3	If newborn admissions (ATYPE = 4) Sick baby
	4	If newborn admissions (ATYPE = 4) Extramural birth
	Blank	If newborn admissions (ATYPE = 4) Missing/Invalid

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State Specific Notes

Arizona

Arizona			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO/AHCCCS health plan referral	3	HMO referral

4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
--		A	Transfer from a Critical Access hospital
D	Transfer/Separate Claim (beginning 2007)	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Blank	Information not available, Missing	Blank	Missing or Invalid
Newborn Admissions (TYPE = 4) (Valid prior to October 2007)			
1, N	Normal delivery	1	Normal newborn
2, P	Premature delivery	2	Premature delivery
3, S	Sick baby	3	Sick baby
4, E	Extramural birth	4	Extramural birth
9, Blank	Information not available, Missing	Blank	Missing or Invalid
Newborn Admissions (TYPE = 4) (Valid July to December 2002)			
A	Normal delivery	1	Normal newborn
E	Other Newborn		
B	Premature delivery	2	Premature delivery
C	Sick baby	3	Sick baby
D	Extramural birth	4	Extramural birth
9, Blank	Information not available, Missing	Blank	Missing or Invalid
Newborn Admissions (TYPE = 4) (Valid through June 2002)			
1	Normal delivery	1	Normal newborn
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank	Information not available, Missing	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Arkansas

Arkansas			
(Valid Prior to 2010)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
	Physician referral		

1		1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO Referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a SNF	5	Transfer from a skilled nursing facility
6	Transfer from another Health Care Facility	6	Transfer from another health care facility
7	Emergency Room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
--		A	Transfer from a Critical Access hospital
D	Inpatient transfers within the same facility	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Any undocumented values	Information not available	Blank	Missing or Invalid
Newborn Admissions (TYPE = 4)			
1	Normal Delivery	1	Normal newborn
2	Premature Delivery	2	Premature delivery
3	Sick Baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Any undocumented values	Information not available	Blank	Missing or Invalid
ASOURCE is coded from ASOURCEUB92.			

Colorado

Colorado			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from Critical Access	A	Transfer from a Critical Access

	Hospital		hospital
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer (beginning in 2006)
9, 0, B, C, E, F, Blank, Any undocumented values	Missing or undocumented value	.	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal newborn	1	Normal newborn
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, 0, Blank, Any undocumented values	Missing or undocumented value	.	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Florida

Florida			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1, 01	Physician referral	1	Physician referral
2, 02	Clinic referral	2	Clinic referral
3, 03	HMO referral	3	HMO referral
4, 04	Transfer from a hospital	4	Transfer from a hospital
5, 05	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6, 06	Transfer from another health care facility	6	Transfer from another health care facility
7, 07	Emergency room	7	Emergency room
8, 08	Court/Law enforcement	8	Court/Law enforcement
--		A	Transfer from a Critical Access hospital
--		B	Transfer from another home health agency
--		C	Readmission to same home health agency
--		D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer

--		E	Transfer from Ambulatory Surgery Center
--		F	Transfer from Hospice and under Hospice plan
09, Blank, Any undocumented values	Information Not Available, Missing	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
10	Normal delivery	1	Normal newborn
11	Premature delivery	2	Premature delivery
12	Sick baby	3	Sick baby
13	Extramural birth	4	Extramural birth
14, Blank, Any undocumented values	Other/Unknown (if ATYPE=4), Missing	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Hawaii

Hawaii			
(Valid from 2002 - 2007)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
A	Transfer from a rural hospital primary care facility		
5	Transfer from a skilled nursing facility (SNF)	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
--		A	Transfer from a Critical Access hospital
D	Transfer from Hospital Inpatient in the Same Facility resulting in a separate claim to the payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Blank, Any undocumented values	Information not available, missing, invalid	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal delivery	1	Normal newborn
2	Premature delivery	2	Premature delivery

3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank, Any undocumented values	Information not available, missing, invalid	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92. There is no separate ASOURCE variable for newborns in 2002.			

Iowa

Iowa			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a Critical Access hospital	A	Transfer from a Critical Access hospital
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Blank	Information not available	Blank	Missing or Invalid
Other	Any other values		
Newborn Admission (TYPE = 4)			
1	Normal birth	1	Normal newborn
2	Premature birth	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, 0, Other	Information not available	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Kentucky

Kentucky			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description

Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from SNF	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a critical access hospital	A	Transfer from a Critical Access hospital
D	Tsfr from hosp IP in same fac - sep clm to payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Blank	Unknown, Missing	.	Missing or Invalid
Newborn Admission (TYPE = 4)			
11	Normal delivery	1	Normal newborn
12	Premature delivery	2	Premature delivery
13	Sick baby	3	Sick baby
14	Extramural birth	4	Extramural birth
09, 19, Blank	Missing	.	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Massachusetts

Massachusetts			
(Valid beginning in 2012)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Within hospital clinic referral	2	Clinic referral
L	Outside hospital clinic referral		
3	HMO referral	3	HMO referral
4	Transfer from an acute hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing home	5	Transfer from a skilled nursing facility
6	Transfer from Intermediate Care Facility	6	Transfer from another health care facility
X	Observation		

9	Other (to include level 4 nursing facility)		
7	Outside hospital emergency room	7	Emergency room
R	Within hospital emergency room		
M	Walk-in/Self referral		
8	Court/Law enforcement	8	Court/Law enforcement
--		A	Transfer from a Critical Access hospital
		B	Transfer from another Home Health Agency
		C	Readmissions to same Home Health Agency
		D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
T	Transfer from outside ambulatory surgery	E	Transfer from Ambulatory Surgery Center
Y	Transfer from within hospital ambulatory surgery		
		F	Transfer from Hospice and under Hospice plan
-, 0, Z, Blank	Information not available, missing	Blank	Missing or Invalid
Newborn Admissions (TYPE = 4)			
A	Normal delivery	1	Normal newborn
B	Premature delivery	2	Premature delivery
C	Sick baby	3	Sick baby
D, W	Extramural birth	4	Extramural birth
-, 0, Z, Blank	Information not available, Missing	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Massachusetts			
(Valid 2002 - 2011)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Within hospital clinic referral	2	Clinic referral
L	Outside hospital clinic referral		
3	HMO referral	3	HMO referral
4	Transfer from an acute hospital	4	Transfer from a hospital

5	Transfer from a skilled nursing home	5	Transfer from a skilled nursing facility
6	Transfer from Intermediate Care Facility	6	Transfer from another health care facility
T	Transfer from outside ambulatory surgery		
Y	Transfer from hospital surgery		
X	Observation		
9	Other (to include level 4 nursing facility)		
7	Outside hospital emergency room	7	Emergency room
R	Within hospital emergency room		
M	Walk-in/Self referral		
8	Court/Law enforcement	8	Court/Law enforcement
--		A	Transfer from a Critical Access hospital
		B	Transfer from another Home Health Agency
		C	Readmissions to same Home Health Agency
		D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
		E	Transfer from Ambulatory Surgery Center
		F	Transfer from Hospice and under Hospice plan
-. 0, Z, Blank	Information not available, missing	Blank	Missing or Invalid
Newborn Admissions (TYPE = 4)			
A	Normal delivery	1	Normal newborn
B	Premature delivery	2	Premature delivery
C	Sick baby	3	Sick baby
D, W	Extramural birth	4	Extramural birth
-, 0, Z, Blank	Information not available, Missing	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Michigan

Michigan			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Non-health care facility - valid beginning 2007, Physician referral	1	Physician referral

	- valid through 2006		
2	Clinic/outpatient referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a rural primary care hospital	A	Transfer from a Critical Access hospital
D	Transfer from one distinct unit of the hospital to another distinct unit of the same hospital	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
E	Transfer from ambulatory surgery center	E	Transfer from ambulatory surgery center
F	Transfer from hospice	F	Transfer from Hospice and under Hospice plan
0	Missing, invalid or unrecorded	Blank	Missing or Invalid
9	Information not available		
Newborn Admission (TYPE = 4)			
N	Normal newborn	1	Normal newborn
--	Premature delivery	2	Premature delivery
--	Sick baby	3	Sick baby
--	Extramural birth	4	Extramural birth
--	Missing or unknown	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Mississippi

Mississippi			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Non-Health Care Facility	1	Physician referral
2	Clinic	2	Clinic referral
		3	HMO referral
4	Transfer from a hospital (Different Facility)	4	Transfer from a hospital
5	Transfer from a SNF/ICF	5	Transfer from a skilled nursing facility
6	Transfer from another Health Care Facility	6	Transfer from another health facility
7	Emergency Room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
		A	Transfer from a Critical Access hospital

B	Transfer from another Home Health Agency	B	Transfer from another Home Health Agency
C	Readmission to same Home Health Agency	C	Readmission to same Home Health Agency
D	Transfer from one Distinct Unit of the hospital to another Distinct Unit of the same hospital resulting in a separate claim to the payer	D	Transfer from one distinct unit of the hospital to another distinct unit of the same hospital resulting in a separate claim to the payer
E	Transfer from Ambulatory Surgery Center	E	Transfer from Ambulatory Surgery Center
F	Transfer from Hospice and is under a Hospice Plan of Care or enrolled in a Hospice Program	F	Transfer from Hospice and under Hospice plan
9	Information not available	Blank	Missing or Invalid
NULL, other			
Newborn Admissions (TYPE = 4)			
1	Normal Delivery	1	Normal newborn
2	Premature Delivery	2	Premature delivery
3	Sick Baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, blank	Unknown, Missing	Blank	Missing or Invalid
other			

Nebraska

Nebraska			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
B	Transfer from another home health agency		
C	Readmission to same home health agency		
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a critical access hospital	A	Transfer from a Critical Access hospital

D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
0, 9, Blank	Missing	.	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal delivery	1	Normal newborn
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
0, 9, Blank	Missing	.	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Nevada

Nevada			
(Valid 2008-2012)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic Referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a Critical Access Hospital	A	Transfer from a Critical Access hospital
D	If non-newborn admissions (ATYPE NE 4) Transfer from one distinct unit of the hospital to another distinct unit of the same hospital resulting in a separate claim to the payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer (beginning in 2006)
Blank, 9, any undocumented values	Unknown, Missing	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal delivery	1	Normal newborn

2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
Blank, 99, 9, any undocumented values;	Unknown, missing	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

This applies to ASOURCEUB92

Nevada			
(Valid Prior to 2008)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic Referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a Critical Access Hospital	A	Transfer from a Critical Access hospital
		D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer (beginning in 2006)
Blank, 9, any undocumented values	Unknown, Missing	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
11	Normal delivery	1	Normal newborn
12	Premature delivery	2	Premature delivery
13	Sick baby	3	Sick baby
14	Extramural birth	4	Extramural birth
Blank, 99, any undocumented values;	Unknown, missing	Blank	Missing or Invalid

ASOURCE is coded directly from ASOURCEUB92.

New Jersey

This data element was discontinued starting in 2013

New Jersey			
(Valid 2002-2012)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Outpatient of Clinic	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from an acute care hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a rural primary care hospital	A	Transfer from a Critical Access hospital
D	Inpatient transfers within the same facility	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Blank	Unknown, Missing	.	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal delivery (if ATYPE = 4)	1	Normal newborn
2	Premature delivery (if ATYPE = 4)	2	Premature delivery
3	Sick baby (if ATYPE = 4)	3	Sick baby
4	Extramural birth (if ATYPE =4)	4	Extramural birth
		.	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

New Mexico

New Mexico			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral

2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a SNF	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a Critical Access hospital	A	Transfer from a Critical Access hospital
B	Transfer from another Home Health Agency	B	Transfer from another home health agency
C	Readmission to same Home Health Agency	C	Readmission to the same home health agency
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
E	Transfer from Ambulatory Surgery Center	E	Transfer from ambulatory surgery center
F	Transfer from Hospice and is under a Hospice Plan of Care or enrolled in a Hospice Program	F	Transfer from hospice and is under a hospice plan of care or enrolled in a hospice program
9	Information not available	blank	Missing or Invalid
blank			
other			
Newborn Admission (TYPE = 4)			
1	Normal delivery	1	Normal newborn
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9	Not Available	blank	Missing or Invalid
blank			
other			
ASOURCE is coded from ASOURCEUB92.			

New York

New York			
(Valid 2002 - 2012)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from hospital	4	Transfer from a hospital

5	Transfer from SNF	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from critical access hospital	A	Transfer from a Critical Access hospital
D	Transfer From Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer (Effective 4/1/2006)	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Blank, Any undocumented values	Missing	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal delivery (if ATYPE = 4)	1	Normal newborn
2	Premature delivery (if ATYPE = 4)	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank, Any undocumented values	Missing	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

North Carolina

North Carolina			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
0	Trans from psych substance_abuse or reha		
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a Critical Access hospital	A	Transfer from a Critical Access hospital
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim

	Separate Claim to the Payer		to the Payer
Blank, 9, 0, I, N, U, Y	Missing, unknown	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal delivery	1	Normal newborn
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
Blank, 0, 5, 6, 7, 9	Missing, unknown	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Oregon

Oregon			
(Valid 2002-2007)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
01	Physician referral	1	Physician referral
02	Clinic referral	2	Clinic referral
03	HMO referral	3	HMO referral
04	Transfer from a hospital	4	Transfer from a hospital
05	Transfer from a SNF	5	Transfer from a skilled nursing facility
06	Transfer from another health care facility	6	Transfer from another health care facility
07	Emergency room	7	Emergency room
08	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a Critical Access hospital	A	Transfer from a Critical Access hospital
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
09, 19, Blank	Information not available	Blank	Missing or Invalid
Any values not documented by the data source	Invalid		
Newborn Admission (TYPE = 4)			
11	Normal delivery	1	Normal newborn
12	Premature delivery	2	Premature delivery
13	Sick baby	3	Sick baby
14	Extramural birth	4	Extramural birth

09, 19, Blank	Information not available	Blank	Missing or Invalid
Any values not documented by the data source	Invalid		
ASOURCE is coded directly from ASOURCEUB92.			

Rhode Island

Rhode Island			
(Beginning in 2006)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a SNF	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
Z	Emergency room from nursing home		
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer to a Critical Access hospital	A	Transfer from a Critical Access hospital
9, Blank, Any undocumented values	Information not available	Blank	Missing or Invalid
Newborn Admissions (TYPE = 4)			
1	Normal delivery	1	Normal newborn
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank, Any undocumented values	Information not available	Blank	Missing or Invalid
Any values not documented by the data source	Invalid		
ASOURCE is coded directly from ASOURCEUB92.			

Rhode Island			
(2002-2005)			
ASOURCE_X		ASOURCEUB92	

Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a SNF	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
Z	Emergency room from nursing home		
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer to a Critical Access hospital	A	Transfer from a Critical Access hospital
9, Blank, Any undocumented values	Information not available	Blank	Missing or Invalid
Newborn Admissions (TYPE = 4)			
A, E	Normal birth, Newborn	1	Normal newborn
B	Premature birth	2	Premature delivery
C	Sick baby	3	Sick baby
D	Extramural birth	4	Extramural birth
F, 9, Blank, Any undocumented values	Stillborn, information not available	Blank	Missing or Invalid
Any values not documented by the data source	Invalid		
ASOURCE is coded directly from ASOURCEUB92.			

South Dakota

South Dakota			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement

A	Transfer from a Critical Access hospital (beginning in 2005)	A	Transfer from a Critical Access hospital
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Blank, any undocumented values	Missing, Information not available	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal birth	1	Normal newborn
2	Premature birth	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank, any undocumented values	Missing, Information not available	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Utah

Utah			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a Critical Access hospital	A	Transfer from a Critical Access hospital
B	Transfer from another HHA	B	Transfer from another home health agency
C	Readmission to same HHA	C	Readmission to the same home health agency
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
E	Transfer from ambulatory surgery center	E	Transfer from Ambulatory Surgery Center

F	Transfer from hospice and is under a hospice plan of care or enrolled in a hospice program	F	Transfer from Hospice and under Hospice plan
0, 9, Blank, any undocumented values	Information not available, missing	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
1, 5	Normal delivery, Born inside this hospital (starting Q4 07)	1	Normal newborn
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4, 6	Extramural birth, Born outside this hospital (starting Q4 07)	4	Extramural birth
0, 9, Blank, any undocumented values	Invalid, Missing	.	Missing or Invalid
<p>SID/SEDD: Admission source information was provided in two fields: one for newborns and one for all other patients. ASOURCE_X was assigned as follows:</p> <p>If a new born record (ATYPE=4) then ASOURCE_X = the newborn admission source.</p> <p>Else ASOURCE_X = the admission source for non-newborns</p>			
SASD: Admission source is provided in one field for all patients.			

Vermont

Vermont			
(Valid 2002 - 2007)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a SNF	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a critical access hospital	A	Transfer from a Critical Access hospital
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer

9, Blank, Any undocumented values	Information not available, Missing	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal delivery	1	Normal newborn
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank, Any undocumented values	Information not available	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Washington

Washington			
(Valid 2002 - 2007)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a SNF	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from CAH (added in 2005)	A	Transfer from a Critical Access hospital
D	Transfer within hospital - New Claim (Added 2005)	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
--		A	Transfer from a Critical Access hospital
9, Blank	Other/Missing	.	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal delivery	1	Normal newborn
5	Multiple birth (discontinued in 1995)		
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank	Other/Missing	.	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

West Virginia

West Virginia			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital
5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a Critical Access hospital	A	Transfer from a Critical Access hospital
D	Inpatient transfers within the same facility	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Blank	Unknown, Missing	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
1	Normal birth	1	Normal newborn
2	Premature birth	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank	Unknown, Missing	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Wisconsin

Wisconsin			
(Beginning in 2002)			
ASOURCE_X		ASOURCEUB92	
Value	Description	Value	Description
Non-newborn admissions (ATYPE NE 4)			
1	Physician referral	1	Physician referral
2	Clinic referral	2	Clinic referral
3	HMO referral	3	HMO referral
4	Transfer from a hospital	4	Transfer from a hospital

5	Transfer from a skilled nursing facility	5	Transfer from a skilled nursing facility
6	Transfer from another health care facility	6	Transfer from another health care facility
B	Transfer from Another Home Health Agency (through 2006)		
C	Readmission to Same Home Health Agency		
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
A	Transfer from a Critical Access Hospital	A	Transfer from a Critical Access Hospital
B	Transfer from Another Home Health Agency (Beginning 2007)	B	Transfer from Another Home Health Agency
D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer	D	Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer
9, Blank	Unknown, missing	.	Missing or Invalid
Newborn Admissions (TYPE = 4)			
1	Normal newborn	1	Normal newborn
2	Premature delivery	2	Premature delivery
3	Sick baby	3	Sick baby
4	Extramural birth	4	Extramural birth
--		.	Missing or Invalid
<p>ASOURCE is coded directly from ASOURCEUB92.</p> <p>Beginning in 2006, admission source information was provided in two fields: one for newborns and one for all other patients. ASOURCE_X was assigned as follows: If a new born record (ATYPE=4) then ASOURCE_X = the newborn admission source. Else ASOURCE_X = the admission source for non-newborns.</p>			

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ASOURCE_X - Admission source, as received from source

Documentation Sections:

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General Notes

Three HCUP data elements contain information on the source of admission:

- ASOURCEUB92 (available beginning in 2002 data) indicates the source of admission and uses the same coding as the source of admission data element on the UB-92 claim form. ASOURCEUB92 has more detailed categories for routine admissions and transfers from other health facilities than the HCUP data element ASOURCE. Some states do not provide enough detail in the coding of the source of admission to accurately code ASOURCEUB92. For these states, the data element ASOURCEUB92 is not available.
- ASOURCE (available for all data years) indicates the source of the admission (emergency department; transfer from a hospital; routine, birth and other; etc.) recoded into HCUP uniform values. Routine, birth, and other (ASOURCE=5) include referrals from physicians, clinics, and HMOs. Transfer from a hospital may include transfers within the same hospital as well as transfers between hospitals. If the data source does not provide the admission source, then beginning in the 1998 data, ASOURCE is not present on the HCUP files. In the 1988-1997 data, ASOURCE is retained on the HCUP files and is set to unavailable from source (.B).
- ASOURCE_X (available beginning in 1998 data) retains the source of admission as provided by the data source. The original values have not been recoded into uniform HCUP values and are source-specific. ASOURCE_X is available for all states that provide HCUP with information on admission source.

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Uniform Values

Variable	Description	Value	Value Description
ASOURCE_X	Admission source, as received from source	n(a)	State specific coding - See the "State Specific Notes" section for details

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State Specific Notes

Information on State specific coding for this data element is available under the "State Specific Notes" section for the data element ASOURCE or ASOURCEUB92.

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ATYPE - Admission type

Documentation Sections:

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[State Specific Notes](#)

General Notes

ATYPE indicates the type of admission (emergency, urgent, elective, etc.). Newborn admission types

ATYPE indicates the type of admission (emergency, urgent, elective, etc.). Newborn admission types are separated only if that information is available from the data source. No edit check comparing the admission type to diagnosis or procedure codes is performed.

Because it is infrequently available from data sources, the admission type of delivery (ATYPE=5) is discontinued beginning in the 1998 data. If available, deliveries are recoded under urgent (ATYPE=2).

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Uniform Values

Variable	Description	Value	Value Description
ATYPE	Admission type	1	Emergency
		2	Urgent
		3	Elective
		4	Newborn
		5	Delivery (coded in 1988-1997 data only)
		5	Trauma Center (beginning in 2003)
		6	Other
		.	Missing
		.A	Invalid
		.B	Unavailable from source (coded in 1988-1997 data only)

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State Specific Notes

Arizona

Arizona provides a source value "5" for admissions from "observation" status. During HCUP processing through 2002, the source category Observation was recoded to the HCUP category "Other" (ATYPE = 6). Beginning with 2003, the source category Observation was recoded to the HCUP category "Urgent" (ATYPE = 2).

Arizona does not separately classify deliveries. The source documentation supplied by Arizona does not indicate which source categories were used for deliveries.

Beginning in 2007, Arizona no longer provides a source value for "observation" status.

Arkansas

Arkansas does not separately classify deliveries. The source documentation supplied by Arkansas does not indicate which source categories were used for deliveries.

Colorado

Beginning in 2003, Colorado reports an admission type of "Trauma Center".

In 1995, Colorado began collecting admission type, but it was optional for hospitals to report this data to the hospital association.

Colorado does not separately classify deliveries. The source documentation supplied by Colorado does not indicate which source categories were used for deliveries. Beginning with 1998 data, the HCUP variable for admission type does not include a value for deliveries (ATYPE = 5).

Florida

Florida does not separately classify deliveries. According to the documentation available from the source, most normal deliveries are categorized as urgent (ATYPE = 2), and most cesarean births and some normal deliveries are included under elective (ATYPE = 3).

Hawaii

Hawaii does not separately classify deliveries nor do they have a separate category for "Other." The source documentation available for Hawaii does not describe which admission type(s) were used for these categories.

Iowa

Iowa does not separately classify deliveries. No documentation was available describing which admission type(s) were used for deliveries.

Kentucky

Kentucky does not separately classify deliveries. The source documentation supplied by Kentucky does not indicate which source categories were used for deliveries.

Maine

Maine does not separately classify deliveries. The source documentation available for Maine does not describe which admission type(s) were used for deliveries.

Maryland

IATYPE		ATYPE	
Value	Description	Value	Description
3	Emergency	1	Emergency
4	Urgent	2	Urgent
1	Delivery		
5	Scheduled	3	Elective
2	Newborn	4	Newborn
		5	Trauma Center

6	Other	6	Other
0	Chronic		
7	Psychiatric		
8	Rehab		
9	Not available/Unknown	.	Missing
Missing			
Any other values that are not documented		.A	Invalid

Beginning in 2006, MD source data includes admission type, 0 = Chronic. It is recoded to ATYPE = 6 (Other).

During HCUP processing of 1993 data, the source category "Rehabilitation" was erroneously recoded to the HCUP category "Invalid" (ATYPE = .A) instead of "Other" (ATYPE = 6). During HCUP processing for other years, the source category Rehabilitation was correctly recoded to the HCUP category "Other" (ATYPE=6).

Beginning in 1997, the source reported a separate category for "Psychiatric" admissions. These discharges are included under the uniform category "Other" (ATYPE = 6).

Beginning in 1998, an admission type of "Delivery" was recoded to "Urgent" (ATYPE = 2).

Massachusetts

Massachusetts does not separately classify deliveries. The source documentation supplied by Massachusetts does not indicate which source categories are used for deliveries.

Nebraska

The source value for Trauma Center (value 5) was recoded to Other (ATYPE=6) in 2002. Beginning in 2003, this source value was recoded to Trauma Center (ATYPE=5) for inpatient and outpatient data.

Nebraska does not separately classify deliveries. The source documentation supplied by Nebraska does not indicate which source categories were used for deliveries.

Nevada

Nevada reported a separate category for the following types of admissions:

- Beginning with 2003 data:
 - Trauma was included under the uniform category "Trauma" (ATYPE = 5)
 - Semi-Urgent was included under the uniform category "Urgent" (ATYPE = 2)
- IN the 2002 data:
 - Trauma was included under the uniform category "Emergency" (ATYPE = 1)
 - Semi-Urgent was included under the uniform category "Urgent" (ATYPE = 2)

Nevada does not separately classify deliveries. The source documentation supplied by Nevada does not indicate which source categories were used for deliveries.

New Jersey

New Jersey does not separately classify deliveries. No documentation was available describing which admission type(s) were used for deliveries.

New York

New York does not separately classify deliveries. No documentation was available describing which admission type(s) were used for deliveries.

North Carolina

North Carolina does not separately classify deliveries. The source documentation supplied by North Carolina does not indicate which source categories were used by deliveries.

Oregon

Oregon does not separately classify deliveries. No documentation was available about which admission type(s) were used for deliveries.

Oregon reports admission from "home health." During HCUP processing, this value is set to admission type "other."

Beginning with 2003, the Oregon codes an admission type of trauma center.

Rhode Island

Rhode Island reported a separate category for "Court committal" admissions. These discharges were included under the uniform category "Other" (ATYPE=6). Rhode Island does not separately classify deliveries. The source documentation supplied by Rhode Island does not include which source categories were used for deliveries.

South Carolina

South Carolina does not separately classify deliveries. No documentation was available describing which admission type(s) were used for deliveries.

South Dakota

South Dakota does not separately classify deliveries. The source documentation supplied by South Dakota does not indicate which source categories were used for deliveries.

Utah

Utah does not separately classify deliveries nor do they have a separate category for "Other". The source documentation available for Utah does not describe which admission type(s) were used for these categories.

Vermont

Vermont does not necessarily classify deliveries. The source documentation supplied by Vermont does not indicate which source categories were used for deliveries.

Washington

Washington does not separately classify deliveries. No documentation was available about which admission type(s) were used for deliveries.

For 2003-2004, the source value for Trauma Center (value 5) was recoded to Other (ATYPE=6). Beginning with 2005, this source value was recoded to Trauma Center (ATYPE=5).

West Virginia

West Virginia does not separately classify deliveries. The source documentation supplied by West Virginia does not indicate which source categories were used for deliveries.

Wisconsin

Wisconsin does not separately classify deliveries. No documentation was available describing which admission type(s) were used for deliveries.

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AWEEKEND - Admission day is on a weekend

Documentation Sections:

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General Notes

An indicator of whether the admission day is on the weekend (AWEEKEND) is calculated from the admission date (ADATE). If AWEEKEND cannot be calculated (ADATE is missing or invalid), then

- AWEEKEND is missing (.) if ADATE is missing (.) or
- AWEEKEND is invalid (.A) if ADATE is invalid (.A).

Beginning in the 1998 HCUP files, the data element ADAYWK is replaced by admission weekend (AWEEKEND).

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Uniform Values

Variable	Description	Value	Value Description
AWEEKEND	Admission day is on a weekend	0	Admitted Monday-Friday
		1	Admitted Saturday-Sunday
		.	Missing
		.A	Invalid

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State Specific Notes

Florida

Beginning in 1997, the reported admission day of week was used to assign AWEEKEND. In 1997, Florida did not provide admission date.

Beginning in 1998, admission date was provided only for those discharges less than 11 years old.

Beginning in 2004 admission date was provided for all discharges.

From data year 1998 to 2000, there may be an error in AWEEKEND. The data source in Florida has reported that during this time period, the reported value was sometimes incorrect. The data source could not specify the magnitude of the problem.

Maryland

During HCUP processing, AWEEKEND was assigned using the reported admission day of week if the day could not be calculated from admission date.

Michigan

Prior to 2001, the reported admission day of week was used to assign AWEEKEND. Michigan did not provide admission date. Beginning in 2001, Michigan provided admission date.

New York

The assignment of AWEEKEND varies by year in New York:

- Beginning in 2000 data, AWEEKEND is assigned from the reported admission day of the week if the admission date is missing.
- In the 1998-1999 data purchased from NTIS, AWEEKEND was calculated from the admission date. Because New York masked the admission and discharge dates on AIDS/HIV* records, AWEEKEND was missing (.) on these discharges. An updated version of the 1998-1999 data is available through the HCUP Central Distributor with AWEEKEND coded on the New York AIDS/HIV* records. In the 1998-1999 data purchased from HCUP Central Distributor, AWEEKEND in New York was calculated from the reported admission day of week.

*Beginning with 2005, New York identifies AIDS/HIV records by ICD-9-CM diagnosis code or DRG:

- An admitting, principal, or secondary diagnosis of "042" "043" "044" "7958" "27910", "27919", "2793", "1363", "79571", "07951", "07952", "07953", "V017" or "V08".
- A DRG of 488 through 490 or 700 through 716.

*From 2001 - 2004 data, New York identifies AIDS/HIV records by ICD-9-CM diagnosis code or DRG:

- An admitting, principal, or secondary diagnosis of "042" "043" "044" "7958" "27910", "27919", "2793", "1363", "79571", "07951", "07952", "07953" or "V08".
- A DRG of 488 "HIV with Extensive Operating Room Procedure", 489 "HIV with Major related condition", or 490 "HIV with or without Other Related Condition".

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AYEAR - Admission year

Documentation Sections:

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[State Specific Notes](#)

General Notes

Admission year (AYEAR) is derived from the admission date (ADATE). If ADATE is missing, then AYEAR is missing (.). If ADATE is invalid, then AYEAR is invalid (.A).

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Uniform Values

Variable	Description	Value	Value Description
AYEAR	Admission year	yyyy	Admission year
		.	Missing
		.A	Invalid

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State Specific Notes

New York

In the 1998-2000 data, admission year (AYEAR) is missing (.) on AIDS/HIV discharges. New York identifies AIDS/HIV records by ICD-9-CM diagnosis code or DRG:

- An admitting, principal, or secondary diagnosis of "042" "043" "044" "7958" "27910", "27919", "2793", "1363", "79571", "07951", "07952", "07953" or "V08".
- A DRG of 488 "HIV with Extensive Operating Room Procedure", 489 "HIV with Major related condition", or 490 "HIV with or without Other Related Condition".

Please note that the admitting diagnosis is not retained in the HCUP databases.

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BILLTYPE - Type of bill, UB-92 coding

Documentation Sections:

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[State Specific Notes](#)

General Notes

Bill type is retained as provided by the data source. We expect that the information is coded according to UB-92 regulations, but no edit checks are performed on this data element during HCUP processing. The first digit indicates type of facility, the second digit indicates bill classification, and the third digit indicates frequency. Examples of bill types typically seen in the HCUP data are listed below. Refer to a UB-92 manual for the complete list of values.

Sample Values for Bill Type	
111	Hospital - Inpatient (Including Medicare Part A) - Admit Through Discharge Claims
121	Hospital - Inpatient (Medicare Part B Only) - Admit Through Discharge Claims
131	Hospital - Outpatient - Admit Through Discharge Claims
831	Special Facility - Ambulatory Surgery Center - Admit Through Discharge Claims
851	Special Facility - Critical Access Hospital - Admit Through Discharge Claims

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Uniform Values

Variable	Description	Value	Value Description
BILLTYPE	Type of bill, UB-92 coding	Aaa	UB-92 bill type code
		Blank	Missing

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State Specific Notes

New Jersey

Beginning in 2006, Bill Type is not included in the SID file.

Beginning in 2005, the definition of AS records was based on the UB-92 bill type - the first two digits must be "13" (BillType = 13x) to indicate hospital outpatient services. Inpatient records must have the first two digits of "11" or "12" (BillType = 11x or BillType = 12x) to indicate hospital inpatient services.

Prior to 2005, the definition of ambulatory surgery records supplied by New Jersey was: Same-day stay (LOS = 0), Non-zero charges to operating room or same-day surgery, and Discharged to home (DISP = 1).

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BLOOD - Pints of blood furnished to the patient

Documentation Sections:

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[Uniform Values](#)

[State Specific Notes](#)

General Notes

Pints of blood furnished to the patient (BLOOD) are retained as provided by the data source. Nonnumeric source data are set to invalid (.A). No edit checks are performed on this data element during HCUP processing.

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Uniform Values

Variable	Description	Value	Value Description
BLOOD	Pints of blood furnished to the patient	0-999.99	Pints of blood furnished
		.	Missing
		.A	Invalid

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State Specific Notes

New York

New York reports the total number of pints of whole blood or units of packed red cells furnished to the patient, whether or not replaced.

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BMONTH - Birth month

Documentation Sections:

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[State Specific Notes](#)

General Notes

Birth month (BMONTH) is derived from the date of birth (DOB). If DOB is missing, then BMONTH is missing (.). If DOB is invalid, then BMONTH is invalid (.A).

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Uniform Values

Variable	Description	Value	Value Description
BMONTH	Birth month	1-12	Birth month
		.	Missing
		.A	Invalid

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State Specific Notes

New York

In the 1998-2000 data, birth month (BMONTH) is missing (.) on AIDS/HIV discharges. New York

identifies AIDS/HIV records by ICD-9-CM diagnosis code or DRG:

- An admitting, principal, or secondary diagnosis of "042" "043" "044" "7958" "27910", "27919", "2793", "1363", "79571", "07951", "07952", "07953" or "V08".
- A DRG of 488 "HIV with Extensive Operating Room Procedure", 489 "HIV with Major related condition", or 490 "HIV with or without Other Related Condition".

Please note that the admitting diagnosis is not retained in the HCUP databases.

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BODYSYSTEMn - Body system n

Documentation Sections:

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[State Specific Notes](#)

General Notes

The Chronic Condition Indicator provides an easy way for users to categorize ICD-9-CM diagnosis codes into one of two categories: chronic or not chronic. In addition, the tool groups all diagnoses into body systems so that users can create indicators listing which specific body systems are affected by a chronic condition. The body system indicator is based upon the chapters of the ICD-9-CM codebook. More information on the [Chronic Condition Indicators](#) is available under Tools & Software on the HCUP-US website.

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Uniform Values

Variable	Description	Value	Value Description
BODYSYSTEMn	Body system n		

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State Specific Notes

None

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BWT - Birth weight in grams

Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

Birth weight (BWT) is coded in grams. No edit check comparing the birth weight to the diagnosis or procedure codes is performed.

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Uniform Values

Variable	Description	Value	Value Description
BWT	Birth weight in grams	228-9143	Grams
		.	Missing
		.A	Invalid: Beginning with 1998 data, range check of 0.5 lbs (228 grams) to 20 lbs (9143 grams) was applied to the source data

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State Specific Notes

Colorado

In 1993, Colorado began collecting birth weight of newborns, but it was optional for hospitals to report this data to the hospital association.

Kentucky

Beginning in 2008, birthweight was available and used on the inpatient files.

Beginning in 2007, birthweight was 100% missing on Kentucky inpatient and outpatient files and thus was not retained on HCUP files

Kentucky hospitals provide the birth weight of the newborns in either pounds/ounces or grams. During HCUP processing birth weights coded in pounds/ounces are converted into grams.

Maryland

For 1990-1992, birth weight was reported by Maryland but was not processed as an HCUP variable. Beginning with 1993 discharges, birth weight is available in the HCUP Maryland data.

Massachusetts

Because of the timing of HCUP data processing for the 1999 NIS, the Massachusetts source file provided to HCUP was an interim file for the construction of the 1999 SID and NIS that included records that had failed edit checks. The percent of failed records is very small, ranging from 0.0% to 1.5% (with a mean of 0.4%) for most hospitals. A handful of hospitals had a large percent of failed records. Failed records have one or more of the following errors:

- Invalid diagnosis code *
- Invalid procedure code *
- Invalid or missing birth weight
- Invalid claim certificate number **
- Invalid or inconsistent UB-92 revenue code
- Invalid medical record or person number
- Invalid type of payer *
- Inconsistent primary and secondary payer
- Invalid physician identifier
- Invalid patient or employer ZIP Code. **

* These errors would have been handled during HCUP data processing.

** These data elements are not included in the HCUP data files.

New Jersey

New Jersey documentation indicates that birth weight is reported for children under 29 days old. New Jersey restricts the values of birth weight to the range 100-9000 grams.

New York

New York restricts the values of birth weight. Values less than 100 grams are set to 100; values greater than 9000 grams are set to 9000 grams.

Beginning with the 2008 data, the HCUP data element BWT is missing (.) for AIDS/HIV patients. New York identifies AIDS/HIV records by ICD-9-CM diagnosis code, DRG, or MS-DRG:

- An admitting, principal or any secondary diagnosis of "042", "043", "044", "7958", "27910", "27919", "2793", "1363", "79571", "07951", "07952", "07953", "V017" or "V08".
- A DRG of 488 through 490 (prior to October 2007) or MS-DRG of 700 through 716 (beginning in October 2007).

Please note that the admitting diagnosis is not retained in the HCUP databases prior to 2012.

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Documentation Sections:

[General Notes](#)

[Uniform Values](#)

[State Specific Notes](#)

General Notes

Birth year (BYEAR) is derived from the date of birth (DOB). If DOB is missing, then BYEAR is missing (.). If DOB is invalid, then BYEAR is invalid (.A).

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Uniform Values

Variable	Description	Value	Value Description
BYEAR	Birth year	yyyy	Birth year
		.	Missing
		.A	Invalid

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State Specific Notes

New York

In the 1998-2000 data, birth year (BYEAR) is missing (.) on AIDS/HIV discharges. New York identifies AIDS/HIV records by ICD-9-CM diagnosis code or DRG:

- An admitting, principal, or secondary diagnosis of "042" "043" "044" "7958" "27910", "27919", "2793", "1363", "79571", "07951", "07952", "07953" or "V08".
- A DRG of 488 "HIV with Extensive Operating Room Procedure", 489 "HIV with Major related condition", or 490 "HIV with or without Other Related Condition".

Please note that the admitting diagnosis is not retained in the HCUP databases.

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None

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