

STAR 2000™



STAR PATIENT CARE REFERENCE GUIDE Medical Record Worksheets Volume

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MEDICAL RECORD TABLE BUILD CHECKLIST

The following is a list of the tables and parameters used within the Medical Record package (Chart Management, Abstracting, and DRG Assignment). The following checklist can be used to assign responsibility for building the tables and parameters, as well as recording those tables that have been completed.

Instructions for Using the Checklist

Begin building your tables starting with the Level 0 tables since the higher level tables rely on the lower level tables already being built. The tables are listed in alphabetical order.

Write the person who is responsible for building each table in the **Person Responsible** column.

Write the date the table is due in the **Due Date** column and the date the table is completed in the **Complete Date** column.

LEVEL DEFINITIONS

- 0 Table does not require any other table to be built before this table can be built.
- 1 Table requires Level 0 table(s) to be built before this table can be built.
- 2 Table requires table(s) from another area or department to be built before this table can be built.

OWNER DEFINITIONS

The owner is the module function that normally has primary use of the table. Many tables are used for multiple functions.

- AB Tables used primarily within the Abstracting function
- CD Tables used primarily within the Chart Deficiency function
- CT Tables used primarily within the Chart Tracking function
- DG Tables used primarily within the DRG function
- HC Tables used primarily within the HCPCS function
- TX Tables used primarily within the Transcription Interface function

FOOTNOTE DEFINITIONS

- * This table contains data that is used on the Service Item Master (SIM). The table values must be furnished to the department responsible for building the SIM (usually the Patient Care Department).
- ** This table is owned by a different area or department (for example, Patient Care or O/P Scheduling), but the table is also used by Medical Records.
- *** This table is provided by McKesson.

M/R TABLE BUILD CHECKLIST

LEVEL/ OWNER	TABLE NAME	PERSON RESPONSIBLE	DUE DATE	COMPLETE DATE
0/AB	Abstract Overflow Codes			
0/AB	Abstractor/Coder			
0/AB	Anesthesia Codes			
0/AB	APGAR Codes for Newborn			
0/AB	ASA-PS Class			
0/AB	Birth Resuscitation Methods			
0/AB	Birth Status			
0/AB	Birth Types			
0/AB	Blood Groups*			
0/AB	Case Category Codes			
0/CT	Chart Cancel Request Reason			
0/CT	Chart Color Codes			
1/CD, TX	Chart Deficiencies			
0/CD	Chart Deficiency Status Codes			
0/CD, CT	Chart Deficiency Types			
0/CT, CD	Chart Location Codes			
0/CD	Chart Physician Activity			
0/CT	Chart Request Reason Codes			
0/AB	Condition of Legal Status			
0/AB	Death Classifications			
0/AB	Delivery Methods			
0/AB	Delivery Person Status			
0/AB	Delivery Place Change Reasons			
0/AB	Delivery Place Types			
1/DG	Detail Revenue Center*			
0/AB	Diagnosis Types			
/AB	Discharge Status/ Disposition**	Patient Care		

LEVEL/ OWNER	TABLE NAME	PERSON RESPONSIBLE	DUE DATE	COMPLETE DATE
/DG	DRG Grouper Codes***			
2/DG	DRG Payors			
0/AB	Drug Classification			
0/AB	DSM® Pointer			
0/AB	ECT Type			
0/AB	Education Level - Patient			
0/AB	Electrode Position			
0/AB	Examination of Hips			
0/AB	Feeding Types			
0/AB	Financial Support			
0/AB	Follow Up Care			
0/AB	Funeral Homes (GUI)			
0/HC	HCPCS Modifiers			
2/HC	HCPCS Payors			
2/HC	HCPCS Procedure Pointer			
0/DG	ICD-9-CM Diagnosis Pointer			
0/DG	ICD-9-CM Procedure Pointer			
0/AB	Incident Codes			
0/AB	Labour Onset Method			
0/AB	Legal Status Category			
0/AB	Legal Status Changes			
1/AB	Legal Status Definition			
0/AB	Legal Status External Review By			
/DG	Major Diagnostic Categories***			
0/DG	Major Revenue Centers			
0/AB	Maternal Anesthetic			
0/AB	Mental Category			
0/AB	Mental Health Admission Method			

LEVEL/ OWNER	TABLE NAME	PERSON RESPONSIBLE	DUE DATE	COMPLETE DATE
0/AB	Mental Health Employment Status			
0/AB	Mental Health Referral Source			
0/AB	Mental Health Referred To			
0/AB	M/R Special Study			
0/AB	New Jersey/New York Z Codes			
0/AB	Newborn Indicators			
0/AB	Pre-Admit Codes			
0/AB	Presence of Jaundice			
0/AB	Presentation of Fetus			
0/AB	Previous Psychiatric Admission Type			
0/AB	Procedure Room Type (GUI)			
0/AB	Re-Admission Codes			
0/AB	Reason for Referral			
0/CT	Resource Department Code**	Scheduling		
0/CT	Resource Master**	Scheduling		
0/AB	Rubella Status			
0/AB	Social Service Codes			
0/AB	Special Factors			
0/AB	Specialty Units*			
0/AB	Substances Taken Type			
0/AB	Therapy Departments			
0/AB	Tissue Codes			
0/AB	Transcription Report Types			
0/AB	Triage Codes			
0/AB, CD	Unsigned Report Reason (Attestation & Transcription)			

MAINTENANCE & PARAMETERS CHECKLIST

LEVEL/ OWNER	TABLE NAME	PERSON RESPONSIBLE	DUE DATE	COMPLETE DATE
2/DG	DRG Rate Table Generation			
2/DG	Concurrent Monitoring			
2/AB, DG	M/R Abstract & DRG Census Criteria			
0/AB, CT, CD	Abstracting Facility Options			
0/HC	HCPCS Revenue Code Assign			
0/AB, DG	M/R Abstracting Form Flows (GUI)			
2/DG, TX	Assign Physician Electronic Signature Parameters			
0/DG, TX	Electronic Signature Parameters			
0/TX	Report Query Parameters			
2/CT, CD	Chart Management Patient Type Parameters			
1/CT,CD	Chart Management Parameters			
2/CT	Borrower Maintenance			

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ABSTRACT OVERFLOW CODES

	CODE (1-AN-R)	DESCRIPTION (15-AN-R)
1	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
3	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
5	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
6	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
7	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
8	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
9	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
10	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

ABSTRACTOR / CODER

This table is used by the GUI M/R Abstract and for attestations/diagnosis summary worksheets. It is used to identify an employee as an abstractor and/or a coder, which displays on the Abstractor/Coder Audit Form in GUI and prints on the attestation/diagnosis summary worksheet.

1 EMP NUMBER

[illegible]

2 EMP NAME

[illegible]

3 ABSTRACTOR (Y/N)

4 CODER (Y/N)

ANESTHESIA CODES

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

APGAR CODES FOR NEWBORN

NOTE: APGAR codes should not contain alphabetic characters if the APGAR information is to be used by TRENDSTAR®. TRENDSTAR accepts only numeric codes.

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

ASA-PS CLASS

	CODE (3-AN-R)	DESCRIPTION (19-AN-R)
1	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
3	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
5	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
6	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
7	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
8	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
9	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
10	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

BIRTH RESUSCITATION METHODS

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 ____	_____
2 ____	_____
3 ____	_____
4 ____	_____
5 ____	_____
6 ____	_____
7 ____	_____
8 ____	_____
9 ____	_____
10 ____	_____

BIRTH STATUS

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

BIRTH TYPES

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

BLOOD GROUPS

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

CASE CATEGORY CODES

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

CHART CANCEL REQUEST REASON

This table is used to establish reasons that a physician or department is canceling a chart request. The code is used in the Borrower Maintenance function in Chart Tracking, as well as in the various tracking functions.

CODE (4-AN-R)	DESCRIPTION (19-AN-R)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

CHART COLOR CODE

This table is used to establish color codes that are used in Chart Deficiency. The purpose of the color code is to give you the ability to quickly assign colors to a deficiency that correspond to color-coded clips or tags that may have been placed in the record as a signal to a physician or department that there is a deficiency in the record that they are responsible to complete. You may set up as many color codes as necessary.

NOTE: Only the first 6 characters of the description display while adding deficiencies in the Add/Edit Deficiencies function. Only the first 13 characters of the description print on the Deficiency Slip.

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

CHART DEFICIENCIES

NOTE: The Chart Deficiency Status table is used by this table and must be built first. If one of these tables is shared, the other must be shared. If one table is split, the other must be split.

This table establishes deficiency codes that are used to indicate what must be completed on a medical record. For each deficiency code, there are several associated files that determine how a deficiency will age and if it can be assigned multiple times, and whether it is considered a billing delay, major deficiency or a signature only. Refer to the *STAR Patient Care Reference Guide, Tables Volume* for detailed information on how these fields affect Chart Management and how they should be completed.

1 CODE (4-AN-R)

--	--	--	--

2 SHORT DESCRIPTION (10-AN-R)

--	--	--	--	--	--	--	--	--	--

3 LONG DESCRIPTION (20-AN-R)

4 ASSIGN DATE (Admit, Disch or Current)

--	--	--	--	--	--

5 BILL
DELAY
(Y/N)

--

6 MAJOR
DEF
(Y/N)

--

7 SIG
ONLY
(Y/N)

--

8 MULTI
(Y/N)

--

9 ACTIVITY
DATE
(Y/N)

--

10 REP
TYPE*
(4-AN)

--	--	--	--

11 AUTO
ASSIGN*

--

12 REPORT
RECVD*

--

13 DUE DATE
UPDATE
(N, R, D)

--

14 COMP ON
ELECT SIGN*

--

15 DICT
DATE/
TIME*

--	--	--	--	--	--

16 AUTO
DEF SLIP
(Y/N)

--

*for Transcription Interface only

19 STATUS CODE, DESCRIPTION and DAYS (enter up to nine codes from the Chart Deficiency Status table and effective days for each status)

STATUS CODE
(2-N-R)

1		
2		
3		
4		
5		

DESCRIPTION

DAYS
(3-N-R)

**STATUS CODE
(2-N-R)**

6		
7		
8		
9		

DESCRIPTION

**DAYS
(3-N-R)**

CHART DEFICIENCY STATUS CODE

NOTE: This table is used by the Chart Deficiencies table and must be built first. If one of these tables is shared, the other must be shared. If one table is split, the other must be split.

This table establishes deficiency statuses used in the Chart Deficiencies table and in System Parameters. Deficiency statuses are the various stages a chart goes through prior to final completion. Examples of deficiency statuses are Incomplete, Warning, Delinquent, and Suspended. You may enter up to nine Chart Deficiency Status codes. You must have a final status code of 99 with a description of COMPLETE. The codes should be set up in hierarchical order.

CODE (4-N-R)	DESCRIPTION (19-AN-R)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

CHART DEFICIENCY TYPES

This table is used to further identify what action is required for a deficiency to be completed. The *Stop Def Ind* field is the deficiency indicator used to indicate whether a chart with this deficiency type stops the deficiency aging process. It is a Yes/No response (enter Y or N). The *Print on Def Notice* field is a Yes/No response (enter Y or N).

NOTE: Only the first 15 characters of the description display while adding deficiencies in the Add/Edit Deficiencies function. Only the first 8 characters of the description print on the Deficiency Slip.

CODE (3-AN-R)	DESCRIPTION (19-AN-R)	STOP DEF IND	PRINT ON DEF NOTICE
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>

CHART LOCATION CODES

NOTE: This table must be built before borrowers are entered in Borrower Maintenance.

This table is used to identify a code and description for all possible locations of a chart. The *Stop Def Ind* field is the deficiency indicator used to indicate whether a chart checked out to this location stops the deficiency aging process. The *Stop Def Ind*, *Home Location*, and *Allow Incomp* fields are Yes/No responses (enter Y or N).

CODE (4-AN-R)	DESCRIPTION (10-AN-R)	STOP DEF IND	HOME LOCATION	ALLOW INCOMP
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

CHART PHYSICIAN ACTIVITY

This table is used to establish reasons that a physician or department is unable or unavailable to complete their medical records. The codes are used in the Physician Activity Tracker function in Chart Deficiency. The *Stop Aging Indicator* field is a Yes/No response (enter Y or N).

CODE (4-AN-R)	DESCRIPTION (19-AN-R)	STOP AGING
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
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<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>

CHART REQUEST REASON CODE

NOTE: This table must be built before borrowers are entered in Borrower Maintenance.

This table is used to establish reasons that a physician or department is requesting charts for checkout. The code is used in the Borrower Maintenance function in Chart Tracking, as well as in the various tracking functions. Enter **H** for High, **M** for Medium, or **L** for Low in the *Priority* field to associate a priority with this request reason. (The priority is used only in GUI Chart Management.)

CODE (4-AN-R)	DESCRIPTION (19-AN-R)	PRI (H,M,L)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

CONDITION OF LEGAL STATUS

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

[illegible]

DELIVERY METHODS

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

DELIVERY PERSON STATUS

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

DELIVERY PLACE CHANGE REASON

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

DELIVERY PLACE TYPES

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

This table is used in Budgeting for Concurrent Monitoring Reports.

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STAR Patient Care Reference Guide - Medical Record Worksheets Volume
Release 17.0
Proprietary to McKesson - Subject to Confidentiality Agreement

October 2011

DIAGNOSIS TYPES

CODE (1-AN-R)	DESCRIPTION (16-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

DRG GROUPE CODES

When the Grouper tape is loaded at your facility each year, this table is automatically updated with the most recent CMS Grouper version.

DRG PAYORS

1 DRG PAYOR CODE (1-AN-R)

2 PAYOR DESCRIPTION (19-AN-R)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3 FINANCIAL CLASSES (This field accesses the Financial Class table.)

4 MEDICARE PAYOR (Y/N)

5 CHAMPUS PAYOR (Y/N)

6 DIAGNOSIS TYPE? (Y/N)

7 ATTESTATION PARMS

(This field must be edited on the DRG Payors subscreen. When you access the field, the subscreen is displayed.)

8 BUDGETS

(This field is automatically updated when the DRG Payor Code is attached in Budget Maintenance.)

DRG Payors Subscreen

This table is available when you access the Attestation Parms field on the DRG Payors table.

1 DRG PAYOR CODE (1-AN-R)

2 PAYOR DESCRIPTION (19-AN-R)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3 PRINT CERT? (Y/N)

☐

4 SIGNATURE LINE (1-A-R)

☐

5 PRINT DATE LINE? (Y/N)

☐

6 FORM NAME (30-AN-O)

7 CERT STATEMENT (Y/N)

☐

STATEMENT

DRUG CLASSIFICATION

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

DSM POINTER

This table is used during the admission, outpatient disposition, and patient revision process to enter a psychiatric diagnosis for a patient.

1 CODE (6-AN-R)

--	--	--	--	--	--

2 DESCRIPTION (33-AN-R)

[illegible]

3 AXIS (3-A-R)

--	--	--

4 ICD-9-CM (6-AN-O)

--	--	--	--	--	--

5 ICD-10-CA (7-AN-O)

--	--	--	--	--	--	--

ECT TYPE

This table is used to define the different types of electroconvulsive therapy (ECT) treatments that can be given to a patient.

1 CODE (1-AN-R)

--

2 DESCRIPTION (19-AN-R)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3 ICD -9-CM (19-AN-R)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

EDUCATION LEVEL - PATIENT

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 ____	_____
2 ____	_____
3 ____	_____
4 ____	_____
5 ____	_____
6 ____	_____
7 ____	_____
8 ____	_____
9 ____	_____
10 ____	_____

ELECTRODE POSITION

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

Chapter 3 - M/R TABLE WORKSHEETS: PART 2

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EXAMINATION OF HIPS

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

FEEDING TYPES

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

FINANCIAL SUPPORT

This table is used only if collecting mental health data.

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

FOLLOW UP CARE

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

FUNERAL HOMES (GUI)

	CODE (4-AN-R)	DESCRIPTION (25-AN-R)
1	<div></div>	<div></div>
2	<div></div>	<div></div>
3	<div></div>	<div></div>
4	<div></div>	<div></div>
5	<div></div>	<div></div>
6	<div></div>	<div></div>
7	<div></div>	<div></div>
8	<div></div>	<div></div>
9	<div></div>	<div></div>
10	<div></div>	<div></div>

HCPCS MODIFIERS

1 CODE (2-AN-R)

--	--

2 DESCRIPTION (25-AN-R)

3 DEPARTMENTS (TABLE LOOKUP-O)

4 PRIORITY (3-N-O)

Enter a priority from 1 to 100.

--	--	--

5 PRO FEE (1-A-O)

P for professional fee, **N** for non-professional fee, or **B** for both.

11

HCPCS PAYORS

NOTE: This table only needs to be built for one Medicare Payor. Effective January 2008, the ASC groups defined in this table are no longer used to calculate reimbursement. The STAR GUI Abstracting interface with the 3M encoder product has been enhanced to call the 3M Medicare ASC Grouper to code/group Ambulatory Surgical Center records. STAR then captures and stores in the GUI abstract an expected total reimbursement for the ASC payment from 3M. The 3M ASC payment is also displayed in character-based Abstract Inquiry.

1 HCPCS PAYORS CODE (1-AN-R)

--

2 PAYOR DESCRIPTION (19-AN-R)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3 FINANCIAL CLASSES (Enter Financial Class Codes separated by ",".)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4 MEDICARE PAYOR (1-A-R)

--

5 GROUP 00 REIMB AMT (8-N-R) 6 GROUP 01 REIMB AMT (8-N-R)

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

7 GROUP 02 REIMB AMT (8-N-R) 8 GROUP 03 REIMB AMT (8-N-R)

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

9 GROUP 04 REIMB AMT (8-N-R) 10 GROUP 05 REIMB AMT (8-N-R)

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

11 GROUP 06 REIMB AMT (8-N-R) 12 GROUP 07 REIMB AMT (8-N-R)

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

13 GROUP 08 REIMB AMT (8-N-R) 14 GROUP 09 REIMB AMT (8-N-R)

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

ICD DIAGNOSIS POINTER

CODE (10-AN-R)	DESCRIPTION (33-AN-R)	ICD-9-CM CODE (5-N-R)																																																												
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ICD PROCEDURE POINTER

CODE (10-AN-R)	DESCRIPTION (33-AN-R)	ICD-9-CM CODE (5-N-R)																																																												
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CODE (1-AN-R)		DESCRIPTION (33-AN-R)
1	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>
2	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>
3	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>
4	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>
5	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>
6	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>
7	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>
8	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>
9	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>
10	<input type="checkbox"/>	<div style="display: flex; border-bottom: 1px solid black;"> </div> <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> </div>

LABOUR ONSET METHOD

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

	CODE (2-AN-R)	DESCRIPTION (33-AN-R)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

LEGAL STATUS CHANGES

CODE (1-AN-R)		DESCRIPTION (33-AN-R)																									
1	<input type="checkbox"/>																										
2	<input type="checkbox"/>																										
3	<input type="checkbox"/>																										
4	<input type="checkbox"/>																										
5	<input type="checkbox"/>																										
6	<input type="checkbox"/>																										
7	<input type="checkbox"/>																										
8	<input type="checkbox"/>																										
9	<input type="checkbox"/>																										
10	<input type="checkbox"/>																										

LEGAL STATUS DEFINITION

This table is used to indicate the patient's current legal status classification, along with the expiration date of the classification and an indication of how many times a patient can be assigned a particular definition within a single visit.

1 CODE (2-AN-R)

--	--

2 DESCRIPTION (19-AN-R)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

3 LENGTH (4-N-O)

--	--	--	--

4 CATEGORY (19-AN-R)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

5 MAXIMUM/VISIT (2-N-O)

--	--

LEGAL STATUS EXTERNAL REVIEW BY

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

MAJOR DIAGNOSTIC CATEGORIES

This table is built by McKesson. No user modifications are necessary.

MAJOR REVENUE CENTERS

This table is used in Budgeting for Concurrent Monitoring Reports.

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

MATERNAL ANESTHETIC

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

MENTAL CATEGORY

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

MENTAL HEALTH ADMISSION METHOD

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

MENTAL HEALTH EMPLOYMENT STATUS

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

MENTAL HEALTH REFERRAL SOURCE

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

MENTAL HEALTH REFERRED TO

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

M/R SPECIAL STUDIES

1 CODE (4-N-R)

--	--	--	--

2 DESCRIPTION (15-AN-R)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(3) STUDY TYPE* (1-A-R) (B)asic Option, (P)roject Type, (O)ther

--

3 (4) EFF FROM (DATE)

--	--	--	--	--	--

4 (5) EFF THRU (DATE)

--	--	--	--	--	--

7 (8) QUESTIONS/STATEMENTS (SPECIAL FORMAT)

(You can enter up to 15 questions/statements for each special study.)

1 QUESTION (70-AN-O)

2 REQUIRED (1-A-O)

--

3 FIELD* (2-AN-O)

--	--

4 FORMAT (1-A-O)

--

5 VALUE FORMAT (1-A-C)

--

6 LENGTH* (1-N-C)

--

**This field is for Canadian facilities only.*

	CODE (2-AN-R)	DESCRIPTION (33-AN-R)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

NEWBORN INDICATORS

CODE (1-AN-R)		DESCRIPTION (33-AN-R)																									
1	<input type="checkbox"/>																										
2	<input type="checkbox"/>																										
3	<input type="checkbox"/>																										
4	<input type="checkbox"/>																										
5	<input type="checkbox"/>																										
6	<input type="checkbox"/>																										
7	<input type="checkbox"/>																										
8	<input type="checkbox"/>																										
9	<input type="checkbox"/>																										
10	<input type="checkbox"/>																										

PRE-ADMIT CODES

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 ____	_____
2 ____	_____
3 ____	_____
4 ____	_____
5 ____	_____
6 ____	_____
7 ____	_____
8 ____	_____
9 ____	_____
10 ____	_____

PRESENCE OF JAUNDICE

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

PRESENTATION OF FETUS

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 ____	_____
2 ____	_____
3 ____	_____
4 ____	_____
5 ____	_____
6 ____	_____
7 ____	_____
8 ____	_____
9 ____	_____
10 ____	_____

PREVIOUS PSYCHIATRIC ADMISSION TYPE

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

PROCEDURE ROOM TYPE (GUI)

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

RE-ADMISSION CODES

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 ____	_____
2 ____	_____
3 ____	_____
4 ____	_____
5 ____	_____
6 ____	_____
7 ____	_____
8 ____	_____
9 ____	_____
10 ____	_____

REASON FOR REFERRAL

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

(as related to M/R Borrower Maintenance)

[illegible]

(as related to M/R Borrower Maintenance)

[illegible]

RUBELLA STATUS

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

SOCIAL SERVICE CODES

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 ____	_____
2 ____	_____
3 ____	_____
4 ____	_____
5 ____	_____
6 ____	_____
7 ____	_____
8 ____	_____
9 ____	_____
10 ____	_____

SPECIAL FACTORS

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

SPECIALTY UNITS

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

SUBSTANCE TAKEN TYPE

CODE (1-AN-R)	DESCRIPTION (19-AN-R)
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

	CODE (3-AN-R)	DESCRIPTION (19-AN-R)	CIHI BYTE #* (3-N-O)
1	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
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4	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
5	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
6	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
7	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
8	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
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October 2011

TISSUE CODES

CODE (1-AN-R)		DESCRIPTION (33-AN-R)																									
1	<input type="checkbox"/>																										
2	<input type="checkbox"/>																										
3	<input type="checkbox"/>																										
4	<input type="checkbox"/>																										
5	<input type="checkbox"/>																										
6	<input type="checkbox"/>																										
7	<input type="checkbox"/>																										
8	<input type="checkbox"/>																										
9	<input type="checkbox"/>																										
10	<input type="checkbox"/>																										

TRANSCRIPTION REPORT TYPES

	CODE (7-AN-R)	DESCRIPTION (16-AN-R)																							
1	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																
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9	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																
10	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																

TRIAGE CODES

CODE (2-AN-R)	DESCRIPTION (19-AN-R)
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

(Attestation & Transcription)

[illegible]

Chapter 4 - M/R PARAMETER WORKSHEETS

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DRG RATE TABLE GENERATION

You may need to consult your financial department, your fiscal intermediary, and/or the *Federal Register* to obtain these figures.

DRG Payor	
Table No	
Table Description	
Effective From	
Effective Thru	
CMS Grouper Version	
Fiscal Year Begin	
Payment Method	Fully Prospective (F), Hold Harmless (H), or Sole Community (S)

Operating

A value of 0.00 is acceptable.

FULLY PROSPECTIVE OR HOLD HARMLESS

HOSPITAL SPECIFIC PORTION	
Base Year Cost	
Case Mix Index	
Update Factor	
% of Total	
FEDERAL PORTIONS	
*MSA Wage Index	
COLA	
REGIONAL	
*% of Fed.	
*Labor	
*Non-Labor	
NATIONAL	
% of Fed.	
Labor	
Non-Labor	

COST FACTORS	
*Operating RCC	
Educational Adj.	
Disproportionate Share Adj.	
*Blended PPS Rate	

SOLE COMMUNITY

HOSPITAL SPECIFIC PORTION	
Base Year Cost	
Case Mix Index	
Update Factor	
% of Total	
FEDERAL PORTIONS	
*MSA Wage Index	
COLA	
NATIONAL	
% of Fed.	
Labor	
Non-Labor	
COST FACTORS	
*Operating RCC	
Educational Adj.	
Disproportionate Share Adj.	
Outlier Factor	
Incremental Amount	
*Blended PPS Rate	

Capital

FULLY PROSPECTIVE OR SOLE COMMUNITY

*Standard Federal Rate	
*Fed. % of Capital	
*Hosp % of Cap	
*Hosp Spec Rate	
Large Urban Add-On	
Capital DSH Adj.	
Capital IME Adj.	
*Capital RCC	
*Geographic Adj. Factor	
COLA (Alaska,Hawaii)	
*Hospital Adj Rate	

HOLD HARMLESS

*Standard Fed Rate	
Large Urban Add-on	
*Capital RCC	
Capital DSH Adj.	
Capital IME Adj.	
*Geographic Adj Factor	
COLA (Alaska,Hawaii)	
*Hosp Ratio of New Cap	
*Remaining Old Cap	
*Capital Discount	
*Medicare Discharges	
*1st Yr Transition Payment	
*Hold Harmless Rate	

* The value entered in this field must not be 0.00.

CONCURRENT MONITORING

Refer to the *STAR Patient Care Reference Guide, Medical Record Abstracting Module* for more information.

STANDARDS BASIS	
Average/Budget	
# Months for Average	
CONCURRENT MONITORING REPORT EXCEPTIONS	
Days within Stdlos	
% of Reimbursement	

M/R ABSTRACT & DRG CENSUS CRITERIA

Refer to the *STAR Patient Care Reference Guide, Medical Record Abstracting Module* for more information.

NOTE: The Inclusion Criteria fields work together. An account must meet **all** of the defined inclusion criteria to be automatically included in the census and have a census code assigned.

ABSTRACT PARAMETERS AND CONTROLS	
Abstract Code (6-C)	
Abstract Name (25-C)	
Retention Days (0 - 9999 Days)	
Audit History (Y/N)	
DRG Required (Y/N)	
DRG Complete (0 - 999 Days)	
Abstract Auto Complete (0 - 999 Days)	
Print HCPCS (Y/N)	
[Auto] Resequence (Y/N)	
E-Code Message (Y/N)	
Complete Before Discharge (Y/N)	
Default Bill Type (Special Format)	
Rev Codes/ View Chrgs (Tbl Lkp)	
Adm to Prin Diag Default (Y/N)	
Product Code (Tbl Lkp)	
* Calc OP DRG	
2nd Product (Tbl Lkp)	
APRDRG Payor-Product	
GUI Abstract Form Flow (Tbl Lkp)	
** POA Required	
Save Chg HCPCS in HIM Rev Codes	
INCLUSION CRITERIA	
Patient Types (Tbl Lkp)	
Services (Tbl Lkp)	
Financial Class (Tbl Lkp)	
Stations (Tbl Lkp)	

NOTE: If you do not have the STAR / 3M Interface, leave the Product Code, 2nd Product, and APRDRG Payor-Product fields blank.

Enter a Default Bill Type only if you use 3M's APCfinder and you do not want to send the default bill type of 13X.

* **Calc OP DRG** – For each Outpatient M/R Abstract & DRG Census Criteria, the facility should decide if a DRG needs to be calculated for outpatient abstracts using the STAR MS-DRG Grouper. If so, set the Calc OP DRG parameter to **Yes**. If no, the field may either be left blank or set to No.

Considerations for setting the parameter to Yes:

- Enter **Yes** if your Patient Accounting Department requires a DRG for dropping bills for accounts using this MR Abstract & DRG Census.
- Enter **No** or leave blank if your Patient Accounting Department does not require a DRG for Bill Drop.

Another consideration:

- Some facilities require outpatient DRGs for reporting purposes.

** **POA Required** – This field is used to pass a POA exempt or required flag to the 3M encoder interface if 3M is used for Medicare DRG grouping. There is a certain inpatient population that CMS does not require POA reporting (for example, Rehab). Review the patient types, financial classes, nursing stations associated with each M/R Abstract & DRG Census criteria and determine if POA is exempt or required.

Considerations for Parameter Setup:

- 1) Determine if your facility has a population that is Exempt from POA reporting AND if that population's MEDICARE DRG grouping is handled by 3M via the STAR/3M encoder interface.
- 2) For that population only, update the new POA Required flag via M/R Abstract and DRG Census Criteria with the appropriate values.
 - Enter **No** if EXEMPT from POA Reporting.
 - Enter **Yes** or leave blank if POA reporting is required.

NOTE: Customers using the 3M Interface for processing Inpatient Psychiatric Facilities (IPF) or Long Term Care Hospitals (LTCH) groupers are advised to use this parameter.

ABSTRACTING FACILITY OPTIONS

Facility	
Procedure Time Default (Time Format-O)	
Unit Number Sort:	
Sort First	
Sort Second	
Sort Third	
Sort Fourth	
Sort Fifth	
Sort Sixth	
Sort Seventh	
Sort Eighth	
Sort Ninth	
Sort Tenth	
Abstract Summary Form (S [spooler] or D [default printer for CRT])	
DRG Attestation Form (S [spooler] or D [default printer for CRT])	
PBE Edit Categories (asterisk (*) for All categories or hyphen (-) to select from PBE Edit Category table)	
Edit PA Charges	
FCR360 Days	

Facility	
Procedure Time Default (Time Format-O)	
Unit Number Sort:	
Sort First	
Sort Second	
Sort Third	
Sort Fourth	
Sort Fifth	
Sort Sixth	
Sort Seventh	
Sort Eighth	
Sort Ninth	
Sort Tenth	

Abstract Summary Form (S [spooler] or D [default printer for CRT])	
DRG Attestation Form (S [spooler] or D [default printer for CRT])	
PBE Edit Categories (asterisk (*) for All categories or hyphen (-) to select from PBE Edit Category table)	
Edit PA Charges	
FCR360 Days	

Facility	
Procedure Time Default (Time Format-O)	
Unit Number Sort:	
Sort First	
Sort Second	
Sort Third	
Sort Fourth	
Sort Fifth	
Sort Sixth	
Sort Seventh	
Sort Eighth	
Sort Ninth	
Sort Tenth	
Abstract Summary Form (S [spooler] or D [default printer for CRT])	
DRG Attestation Form (S [spooler] or D [default printer for CRT])	
PBE Edit Categories (asterisk (*) for All categories or hyphen (-) to select from PBE Edit Category table)	
Edit PA Charges	
FCR360 Days	

Facility	
Procedure Time Default (Time Format-O)	
Unit Number Sort:	
Sort First	
Sort Second	

Sort Third	
Sort Fourth	
Sort Fifth	
Sort Sixth	
Sort Seventh	
Sort Eighth	
Sort Ninth	
Sort Tenth	
Abstract Summary Form (S [spooler] or D [default printer for CRT])	
DRG Attestation Form (S [spooler] or D [default printer for CRT])	
PBE Edit Categories (asterisk (*) for All categories or hyphen (-) to select from PBE Edit Category table)	
Edit PA Charges	
FCR360 Days	

Facility	
Procedure Time Default (Time Format-O)	
Unit Number Sort:	
Sort First	
Sort Second	
Sort Third	
Sort Fourth	
Sort Fifth	
Sort Sixth	
Sort Seventh	
Sort Eighth	
Sort Ninth	
Sort Tenth	
Abstract Summary Form (S [spooler] or D [default printer for CRT])	
DRG Attestation Form (S [spooler] or D [default printer for CRT])	
PBE Edit Categories (asterisk (*) for All categories or hyphen (-) to select from PBE Edit Category table)	
Edit PA Charges	

FCR360 Days	
-------------	--

HCPCS REVENUE CODE ASSIGN

Revenue Code (33-AN-R)	
Starting Code (5-N-R)	
Ending Code (5-N-R)	

Revenue Code (33-AN-R)	
Starting Code (5-N-R)	
Ending Code (5-N-R)	

Revenue Code (33-AN-R)	
Starting Code (5-N-R)	
Ending Code (5-N-R)	

Revenue Code (33-AN-R)	
Starting Code (5-N-R)	
Ending Code (5-N-R)	

Revenue Code (33-AN-R)	
Starting Code (5-N-R)	
Ending Code (5-N-R)	

Revenue Code (33-AN-R)	
Starting Code (5-N-R)	
Ending Code (5-N-R)	

M/R ABSTRACTING FORM FLOWS (GUI)

NOTE: You must build Abstracting Form Flows in order for the GUI M/R Abstracting product to function correctly.

[illegible]

(Attestation & Transcription)

NOTE: The Physician Message Type table has to be built prior to assigning any reports to a physician for transcription purposes.

[illegible]

*Enter codes separated by commas.

ELECTRONIC SIGNATURE PARAMETERS

(Attestation & Transcription)

Electronic Signature (Y/N)	
Transcription Index Retention (4-N-R)	
Transcription Interface Live Date	
Transcription Product (30-AN-R)	
Electronic Authentication Report (Y/N)	

REPORT QUERY PARAMETERS

(Transcription Only)

Number of Report Query Lines	
Report Query Lines Names	
Default Date Range (Days)	
Account Number Required (Y/N)*	

*Must be No if using SoftMed[®] Interface.

CHART MANAGEMENT PATIENT TYPE PARAMETERS

The patient type parameters are used to determine which patient type will be included automatically in Chart Tracking and Chart Deficiency. For each patient type set up in STAR Patient Care, determine if it will be included in either or both.

Patient Type		
Tracking Indicator		(Yes/No)
Deficiency Indicator		(Yes/No)
Charts Req Analysis Purge Days		(0-999 days)
Home Location (GUI)		(enter code from Chart Location table)
Print Outguide		(Yes/No)

Patient Type		
Tracking Indicator		(Yes/No)
Deficiency Indicator		(Yes/No)
Charts Req Analysis Purge Days		(0-999 days)
Home Location (GUI)		(enter code from Chart Location table)
Print Outguide		(Yes/No)

Patient Type		
Tracking Indicator		(Yes/No)
Deficiency Indicator		(Yes/No)
Charts Req Analysis Purge Days		(0-999 days)
Home Location (GUI)		(enter code from Chart Location table)
Print Outguide		(Yes/No)

CHART MANAGEMENT PARAMETERS

The Chart Management Parameters control various items that affect either or both the Chart Tracking and Chart Deficiency functions. Refer to the *STAR Patient Care Reference Guide, Chart Management Module* for detailed information on how these fields affect Chart Management and how they should be completed.

Tracking Purge Days (0-999 days)	
Deficiency Purge Days (0-999 days)	
Tracking/Deficiency Link (Yes/No)	
Request Cancel Days (0-999 days)	
Unit # Barcode Ind (Yes/No)	
Episode Barcode Ind (Admission [A], Discharge [D], None [N])	
Due Date Calculation (Overall) (Assign Date [A], Due Date [D], or Patient D/C Date [P] <i>plus</i> # of days [])	
Def Slip per Physician (Yes/No)	
Def Slip Print Options <i>go to subscreen for entry</i>	
Display Comp Def (GUI) (Yes/No)	
Delete Deficiency (GUI) (Yes/No)	
Volume Home Location (enter code from Chart Location code table)	
Chart Selection (GUI) (Chart [C], Volume [V], or Account [A])	
Unit Number Sort <i>go to subscreen for entry</i>	
Current Disch Rpt Sort (Patient Type [P], Service [S], Nurse Station [N]; Inpatients only [I], Outpatients only [O], Both [B])	
Def Notice Print Opt <i>go to subscreen for entry</i>	
Chart Status Codes/Days <i>go to subscreen for entry</i> (enter up to nine codes from the Chart Deficiency Status code table and effective days)	
Physician Activity Purge Days (0-999 days)	

Chart Def Audit Retain (0-999 days)	
Email Subject (48-C-O)	
Email Confidentiality (up to 17 lines)	

Def Slip Print Options

Deficiency (Yes/No)	
Deficiency Type (Yes/No)	
Bill Delay Flag (Yes/No)	
Deficiency Status (Yes/No)	
Assign Date (Yes/No)	
Due Date (Yes/No)	
Color (Yes/No)	
Comments (Yes/No)	

Unit Number Sort

Sort First	
Sort Second	
Sort Third	
Sort Fourth	
Sort Fifth	
Sort Sixth	
Sort Seventh	
Sort Eighth	
Sort Ninth	
Sort Tenth	

Def Notice Print Options

Unit Number (Yes/No)	
Patient Name (Yes/No)	
Account Number (Yes/No)	
Admission Date (Yes/No)	
Discharge Date (Yes/No)	
Patient Type (Yes/No)	
Chart Location (Yes/No)	
Borrower (Yes/No)	
Total Charges (Yes/No)	
Deficiency (Yes/No)	
Deficiency Type (Yes/No)	
Due Date (Yes/No)	
Deficiency Status (Yes/No)	
Signature Only (Yes/No)	
Bill Delay (Yes/No)	

Chart Status Codes/Days

CODE (2-N-R)	DESCRIPTION (19-AN-R)	DAYS (3-N-R)

MEDICAL RECORDS PHYSICIAN PARAMETERS

Physician/NSCG Name	
Chart Deficiency Method (1-A-R) E for email, F for fax, or P for print	
Fax # (12-NC-C)	
Email Address (255-C-C)	

Physician/NSCG Name	
Chart Deficiency Method (1-A-R) E for email, F for fax, or P for print	
Fax # (12-NC-C)	
Email Address (255-C-C)	

Physician/NSCG Name	
Chart Deficiency Method (1-A-R) E for email, F for fax, or P for print	
Fax # (12-NC-C)	
Email Address (255-C-C)	

Physician/NSCG Name	
Chart Deficiency Method (1-A-R) E for email, F for fax, or P for print	
Fax # (12-NC-C)	
Email Address (255-C-C)	

Physician/NSCG Name	
Chart Deficiency Method (1-A-R) E for email, F for fax, or P for print	
Fax # (12-NC-C)	
Email Address (255-C-C)	

Physician/NSCG Name	
Chart Deficiency Method (1-A-R) E for email, F for fax, or P for print	
Fax # (12-NC-C)	
Email Address (255-C-C)	

Physician/NSCG Name	
Chart Deficiency Method (1-A-R) E for email, F for fax, or P for print	
Fax # (12-NC-C)	
Email Address (255-C-C)	

Physician/NSCG Name	
Chart Deficiency Method (1-A-R) E for email, F for fax, or P for print	
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BORROWER MAINTENANCE

Refer to the *STAR Patient Care Reference Guide, Chart Management Module* for more information.

■ R e a d e r C o m m e n t F o r m ■

We value your suggestions for improving our documentation. Please use this form to evaluate the *Medical Record Worksheets Volume* of the *STAR Patient Care Reference Guide* for Release 17.0.

Topic	Poor	Fair	Good	Excellent
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Accuracy of information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completeness of information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clarity of information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amount of overview information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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