Rhode Island Department of Health

**Hospital Discharge Data**

**Specifications for Public Use Data File**

4/22/2011

Revised 6/20/2019

Calendar Year 2015

Calendar Year 2016

Calendar Year 2017

Calendar Year 2018

Data from three Rhode Island specialty hospitals, Bradley, Butler, and Rehabilitation are included in the public use data files from fiscal year 1999 and forward.

CD compact disc

Format: DOS, ASCII , 650 MB not compressed

Record length: 801

# August 12, 2010 moa (month of admission) & mod (month of discharge) variables were added back to all public use data files.

April 22, 2011 Adding POA1-POA25 and ECODEPOA indicators edit p33 for DX1-DX25 and Ecodub92 Variable at the end of the schema and Present on Admission added to the end of the layout, pages 15 & 16.

October 25, 2017 Created 2015 cy files with dx1-dx25 at the bottom of the file, has icd-9 and icd-10 included. Use mod to separate Jan-Sept 2015 (icd-9) and Oct-Dec 2015 (icd-10 going forward). For dxs and pxs made them 7 characters each instead of 5 (dxs) and 4 (pxs). CDC recommends keeping icd-9 and icd-10 separate when running reports,

**Rhode Island Department of Health**

# Center for Health Data & Analysis

**The following variable was revised from the Fiscal Year 1989 specifications:**

**SEX** Converted from letters (M F) to numbers (1 2)

Sex remains an alpha-numeric variable

Male (M) = "1"

Female (F) = "2"

**The following variables were created from the raw data:**

**TOWN** 1. Derived from census tract supplied by hospital

2. Some of the census tracts have the abbreviated state name in the first 2 characters (RI999,CT999,NY999). These are grouped into unknown categories for Rhode Island, Connecticut, Massachusetts and all other states combined.

3. If census tract is missing, zip code may be used to derive town. Only Rhode Island zip codes completely contained within one town can be used in this manner.

**AGE** Age at admission, computed by subtracting birth date from adm.date

**PREOPDAY** Computed by subtracting admission date from the principal procedure date. All procedure codes are valid.

**LOS** Computed by subtracting the admission date from the discharge date

**Birthweight Specification:**

**BWGHT** The weight in ounces at birth

Left justification with spaces [alpha-numeric]

ie. '8\_\_' not '\_\_8'

'88\_' not '\_88'

Discontinued use beginning Fiscal Year 1999

**B\_WT** The weight in **grams** at birth

Beginning Fiscal Year 1999; Added to end of file

**Additional Variables Added in 1999:**

**DX8 to DX11:**  Additional Diagnostic Codes

**ECODUB92:**  External Cause of Injury supplied by the Hospital

**B\_WT:** Birth weight in grams

**Additional Variables Added in 2004**:

**PAY\_UB92:** Expected Source of Payment (detailed)

This expected source of payment variables separates Medicare Fee for

Service from Medicare Managed Care.

Additional Variables Added in 2005:

New variables are added to the end of the file. Hopefully, this causes the least disruption to your existing programs and enables you to compare data across years.

|  |  |
| --- | --- |
| PT\_STATE | Patient’s State of Residence |
| DIAG\_ADM | Admitting Diagnosis/Patient State Reason for Visit |
| ANCILAR | Ancillaries Subtotal Charges |
| CAMPUS | Geographic Location of Hospital Campus |
| ER\_FEE | Emergency Room Professional Fees |
| ER\_CHRG | Emergency Room Charges |
| ER\_MODE | Mode of Arrival |
| OBS\_CHRG | Observation Room Charges |
| OBS\_HOUR | Observation Hours |
| PSYCCHRG | Behavioral Health Charges |
| NICU\_DAY | NICU Length of Stay |
| DX12 | 11th Additional Dx |
| DX13 | 12th Additional Dx |
| DX14 | 13th Additional Dx |
| DX15 | 14th Additional Dx |
| DX16 | 15th Additional Dx |
| DX17 | 16th Additional Dx |
| DX18 | 17th Additional Dx |
| DX19 | 18th Additional Dx |
| DX20 | 19th Additional Dx |
| DX21 | 20th Additional Dx |
| DX22 | 21st Additional Dx |
| DX23 | 22nd Additional Dx |
| DX24 | 23rd Additional Dx |
| DX25 | 24th Additional Dx |
| PX11 | 10th Additional Proc. Added in 1999 fy |
| PX12 | 11th Additional Proc. |
| PX13 | 12th Additional Proc. |
| PX14 | 13th Additional Proc. |
| PX15 | 14th Additional Proc. |
| PX16 | 15th Additional Proc. |
| PX17 | 16th Additional Proc. |
| PX18 | 17th Additional Proc. |
| PX19 | 18th Additional Proc. |
| PX20 | 19th Additional Proc. |
| PX21 | 20th Additional Proc. |
| PX22 | 21st Additional Proc. |
| PX23 | 22nd Additional Proc. |
| PX24 | 23rd Additional Proc. |
| PX25 | 24th Additional Proc. |

Beginning January 1, 2007, the following variables were removed from all public use data files which were added back per your request:

ZIP Zip Code of Residence

TOWN Town of Residence

ATTPHY No longer is hospital-specific codes; Now is RI state license number

SURGEON No longer is hospital-specific codes; Now is RI state license number A\_WKDAY Admission Day of Week

D\_WKDAY Discharge Day of Week

\*Added back in per customer.

As of August 12, 2010, the following variables were added back to all public use data files:

MOA Month of Admission

MOD Month of Discharge

Beginning January 1, 2010, the following variables were added to all public use data files:

|  |  |  |
| --- | --- | --- |
| POA1 | Was the ICD-10-CM DX1 Present on Admission? | |
| POA2 | Was the ICD-10-CM Additional DX2 Present on Admission? |
| POA3 | Was the ICD-10-CM Additional DX3 Present on Admission? |
| POA4 | Was the ICD-10-CM Additional DX4 Present on Admission? |
| POA5 | Was the ICD-10-CM Additional DX5 Present on Admission? |
| POA6 | Was the ICD-10-CM Additional DX6 Present on Admission? |
| POA7 | Was the ICD-10-CM Additional DX7 Present on Admission? |
| POA8 | Was the ICD-10-CM Additional DX8 Present on Admission? |
| POA9 | Was the ICD-10-CM Additional DX9 Present on Admission? |
| POA10 | Was the ICD-10-CM Additional DX10 Present on Admission? |
| POA11 | Was the ICD-10-CM Additional DX11 Present on Admission? |
| POA12 | Was the ICD-10-CM Additional DX12 Present on Admission? |
| POA13 | Was the ICD-10-CM Additional DX13 Present on Admission? |
| POA14 | Was the ICD-10-CM Additional DX14 Present on Admission? |
| POA15 | Was the ICD-10-CM Additional DX15 Present on Admission? |
| POA16 | Was the ICD-10-CM Additional DX16 Present on Admission? |
| POA17 | Was the ICD-10-CM Additional DX17 Present on Admission? |
| POA18 | Was the ICD-10-CM Additional DX18 Present on Admission? |
| POA19 | Was the ICD-10-CM Additional DX19 Present on Admission? |
| POA20 | Was the ICD-10-CM Additional DX20 Present on Admission? |
| POA21 | Was the ICD-10-CM Additional DX21 Present on Admission? |
| POA22 | Was the ICD-10-CM Additional DX22 Present on Admission? |
| POA23 | Was the ICD-10-CM Additional DX23 Present on Admission? |
| POA24 | Was the ICD-10-CM Additional DX24 Present on Admission? |
| POA25 | Was the ICD-10-CM Additional DX25 Present on Admission? |

ECODEPOA Was the ICD-10-CM Additioal ECODE Present on Admission?

AGE 1-3 Age . = Missing/Unknown

90 and older are grouped

SEX 4 Sex 1 = Male

2 = Female

blank = Missing/Unknown

RACEETHN 5 Race/ethnicity 1 = White, not Hispanic

2 = Black, not Hispanic

3 = Asian, not Hispanic

4 = American Indian, not Hispanic

5 = Native Hawaiian, not Hispanic

6 = Other, not Hispanic

7 = Hispanic, all races

9 = Unknown Race/ethnicity

blank = Missing/Unknown

FILLER1 6-10

FILLER2 11-12

PROVIDER 13-16 Provider 7201 = Newport

7202 = St. Joseph Health Services of RI

7203 = Memorial

7204 = Miriam

7205 = Rhode Island Hospital

7206 = Roger Williams

7209 = South County

7210 = Kent County

7211 = Westerly

7212 = Rehab of RI

7213 = Landmark Medical Center

7214 = Women and Infants

7215 = Bradley

7216 = Butler

MOA 17-18 Month of Admission 01 = January

02 = February

Month of Admission (Continued) 03 = March

04 = April

05 = May

06 = June

07 = July

08 = August

09 = September

10 = October

11 = November

12 = December

. = Missing/Unknown

YOA 19-20 Year of Admission Last two digits

MOD 21-22 Month of Discharge 01 = January

02 = February

03 = March

04 = April

05 = May

06 = June

07 = July

08 = August

09 = September

10 = October

11 = November

12 = December

. = Missing/Unknown

YOD 23-24 Year of Discharge Last two digits

ADMTYPE 25 Type of Admission 1 = Emergency

2 = Urgent

3 = Electric

4 = Newborn

5 = Court Committal (before 1/1/2005)

5 = Trauma (as of 1/1/2005)

9 = Information Not Available

blank = Information Not Available

ASOURCE 26 Source of Admission 1 = Physician Referral

2 = Clinic Referral

3 = HMO Referral

4 = Trans-Hospital

5 = Trans-Nurse Facility

6 = Trans-Health Care

7 = Emergency Room

8 = Court/Law Enforcement

9 = Information Not Available

blank = Information Not Available

Z = Emergency Room/Nursing Home

A = Transfer from critical access hospital

[ADMTYPE must equal 4

for rest of ASOURCE codes] A = Normal Birth

B = Premature birth

C = Sick baby

D= Extramural Birth

E = New born

F = Still Born

U = Normal Birth

V = Premature birth

W = Sick baby

X = Extramural Birth

S = Born in hospital

T = Born out of hospital

FILLER3 27-33

PX1 34-40 Principal Procedure ICD-10-CM

PX2 41-47 1st Additional Proc. ICD-10-CM

PX3 48-54 2nd Additional Proc. ICD-10-CM

PX4 55-61 3rd Additional Proc. ICD-10-CM

PX5 62-68 4th Additional Proc. ICD-10-CM

PX6 69-75 5th Additional Proc. ICD-10-CM

PX7 76-82 6th Additional Proc. ICD-10-CM

PX8 83-89 7th Additional Proc. ICD-10-CM

PX9 90-96 8th Additional Proc. ICD-10-CM

PX10 97-103 9th Additional Proc. ICD-10-CM

PREOPDAY 104-110 Preoperative Days (pro.date1 - adm.date)

Length of Stay . = Missing/Unknown or No Procedure

Performed

LOS 111-117 Length of Stay Days (disc.date - adm.date)

FILLER4 118-124

SERVICE 126-127 Service 02 = Pediatrics

10 = Medicine

22 = Cardiology

38 = Psychiatry

40 = Surgery

48 = Ophthalmology

50 = ENT

54 = Oral Surgery

58 = Orthopedics

62 = Urology

70 = Gynecology

75 = Abortion

76 = OB – Not Delivered

77 = OB – Delivered

80 = Newborn

98 = Rehabilitation

ICU 128-133 ICU Length of Stay Days

CCU 134-139 CCU Length of Stay Days

DISPUB92 140-141 Disposition 01 = Discharged to home or self care

(routine discharge)

02 = Discharged/transferred to another

short-term general hospital

03 = Discharged/transferred to a skilled nursing facility (SNF)

04 = Discharged/transferred to an

intermediate care facility (ICF)

05 = Discharged/transferred to another

type of institution

06 = Discharged/transferred to home

under care of organized home health service organization

07 = Left against medical advice

08 = Discharged home with IV care

PH = butler’s in-house partial program already coded

09 = Partial Hospitalization (through 1/1/2005)

09 = Admitted as an Inpatient to This Hospital (For use only on Medicare outpatient claims.) (Beginning 1/1/2005)

20 = Expired

30 = Still patient

40 = Expired at home

41 = Expired in a medical facility

42 = Expired, place unknown

43 = *Discharged/Transferred to a Federal Health Care Facility*

*50 =* Discharged/Transferred Home with Hospice Care

*51 =* Discharged/Transferred to a Medical Facility with Hospice Care

*61 =* Discharged/Transferred to Hospital-Based Medicare Approved Swing Bed

*62 =* Discharged/Transferred to an inpatient rehabilitation facility include rehabilitation distinct part units of a hospital

*63 =* Discharged/Transferred to a Medicare Certified Long Term Care Hospital (LTCH)

*64 =* Discharged/Transferred to a Nursing Facility Certified Under Medicaid But Not Certified Under Medicare

*65 =* Discharged/Transferred to a Psychiatric Hospital or Psychiatric Distinct Part Unit of a Hospital

*66 =* Discharged/Transferred to a Critical Access Hospital (CAH) (beginning in 2005)

*70 =* Discharged/Transferred to another type of institution not defined elsewhere (Effective: 10/1/07)

81 = disc home/planned readmit

82 = disc short term gh/pl readmit

83 = disc snf cert/pl readmit

84 = disc custod care/pl readmit

85 = disc cancer ctr/pl readmit

86 = disc home-care/pl readmit

87 = disc court/law enf/pl readmit

88 = disc fed hlth care/pl readmit

89 = disc hosp swing bed/pl readmit

90 = disc irf/planned readmit

91 = disc ltc hosp/pl readmit

92 = disc snf not cert/pl readmit

93 = disc psych hosp/pl readmit

94 = disc cah/pl readmit

95 = disc otr inst-not def/pl readmit

99 = Discharged alive, destination unknown

00, ‘.A ‘, Invalid Blank or . = Missing

PAYER 142 Expected Source

of Payment 0 = Medicare

1 = Medicaid

4 = Worker's Compensation

5 = Blue Cross

6 = Commercial insurance

7 = Self pay

8 = Other

B = Champus

D = United Healthcare

E = Coordinated Health Partners Inc

G = RIte Care

H = Neighborhood Health Plan of RI

X = Insurance error

Y = Missing

Z = Unknown

DRG 143-145 DRG HCFA DRG's numeric, right justified

**\*\*\* Charge variables alpha-numeric, with leading zeros. Whole dollar amounts**

**Definitions of Charge categories can be found in the Coding Guide at: www.health.ri.gov**

TRANDB 146-155 Total Room and Board Charges

RANDBG 156-163 General Room and Board Charges

RANDBS 164-171 Special Room and Board Charges

ORR 172-179 OR and RR Charges

ANES 180-187 Anesthesiology Charges

SEQ 188-195 Supply and Equipment Charges

LAB 196-203 Laboratory Charges

DTEST 204-211 Diagnostic Test Charges

THER 212-219 Therapy Charges

BLOOD 220-227 Blood Charges

PHAR 228-235 Pharmacy Charges

OTHER 236-243 Other Ancillary Charges

PATCON 244-251 Patient Convenience Charges

BWGHT 252-254 Birthweight Ounces (Variable not used beginning

FY 1999; See B\_WT at the end of

the. This variable will be blank for FY

1999 and later.

FILLER6 255-256 filler

TOTAL 257-266 Total Patient Charges [alpha-numeric]

TOT 267-274 Total Patient Charges [numeric]

FILLER6a 275-299 filler

B\_WT 300-302 Birthweight Grams

PAY\_UB92 303-304 Expected Source of 1 = Medicare

Payment (detailed) 2 = Medicare Managed Care

3 = Medicaid Fee for Service

4 = RIte Care

5 = Out-of-state Medicaid Managed Care

6 = Blue Cross

7 = Blue Chip

8 = United Healthcare

9 = Commercial insurance (Other than

listed)

10 = Champus

11 = Worker’s Compensation

12 = Other

13 = Self pay

14 = Free care (not really valid code)

15 = NHP Comm (added for 7/1/13)

97 = Spec

98 = Missing

99 = Error

|  |  |  |  |
| --- | --- | --- | --- |
| PT\_STATE | 305-306 | Patient’s State of Residence | State Abbreviation  XX = Unknown/No address given  FC = Not Applicable (Patient’s principal  residence is outside the US) |
| DIAG\_ADM | 307-313 | Admitting Diagnosis | ICD-10-CM |
| ANCILAR | 326-333 | Ancillaries Subtotal Charges |  |
| CAMPUS | 334 | Geographic Location of Hospital Campus | 0 = Hospital Has Only One Premise  1 = St. Joseph Health Services of Rhode  Island – Our Lady of Fatima  Hospital  2 = St. Joseph Health Services of Rhode  Island – St. Joseph Hospital for  Specialty Care  3 = Rhode Island Hospital – Adult  4 = Rhode Island Hospital - Hasbro |
| ER\_FEE | 335-342 | Emergency Room Professional Fees |  |
| ER\_CHRG | 343-350 | Emergency Room Charges |  |
| ER\_MODE | 351 | Mode of Arrival | 0 = Not Applicable  1 = Rescue Service/Ambulance  2 = Helicopter  3 = Law Enforcement or Social Services  Agency (Other than rescue  service/ambulance, e.g. Police, DYCF)  4 = Personal or Public Transportation, e.g.  Walk-In, Private Vehicle, Bus  5 = Other  9 = Information Not Available |
| OBS\_CHRG | 352-359 | Observation Room Charges |  |
| OBS\_HOUR | 360-365 | Observation Hours | Hours |
| PSYCHHRG | 368-375 | Behavioral Health Charges |  |
| NICU\_DAY | 376-381 | NICU Length of Stay | Days |
| PX11 | 384-390 | 10th Additional Proc. | ICD-10-CM |
| PX12 | 391-397 | 11th Additional Proc. | ICD-10-CM |
| PX13 | 398-404 | 12th Additional Proc. | ICD-10-CM |
| PX14 | 405-411 | 13th Additional Proc. | ICD-10-CM |
| PX15 | 412-418 | 14th Additional Proc. | ICD-10-CM |
| PX16 | 419-425 | 15th Additional Proc. | ICD-10-CM |
| PX17 | 426-432 | 16th Additional Proc. | ICD-10-CM |
| PX18 | 433-439 | 17th Additional Proc. | ICD-10-CM |
| PX19 | 440-446 | 18th Additional Proc. | ICD-10-CM |
| PX20 | 447-453 | 19th Additional Proc. | ICD-10-CM |
| PX21 | 454-460 | 20th Additional Proc. | ICD-10-CM |
| PX22 | 461-467 | 21st Additional Proc. | ICD-10-CM |
| PX23 | 468-474 | 22nd Additional Proc. | ICD-10-CM |
| PX24 | 475-481 | 23rd Additional Proc. | ICD-10-CM |
| PX25 | 482-488 | 24th Additional Proc. | ICD-10-CM |
| FILLER7 | 514-572 |  |  |
| RACE | 573 | Race | 1 = White  2 = Black  3 = Asian  4 = American Indian  5 = Hispanic  6 = Other  9 = Unknown Race  blank = Missing/Unknown |
| ETHNIC | 574 | Ethnicity | 1 = yes hispanic  2 = not hispanic  3 = not reported  9 = not reported |
| POA1  POA2  POA3  POA4  POA5  POA6  POA7  POA8  POA9  POA10  POA11  POA12  POA13  POA14  POA15  POA16  POA17  POA18  POA19  POA20  POA21  POA22  POA23  POA24  POA25  ECODEPOA | 575  576  577  578  579  580  581  582  583  584  585  586  587  588  589  590  591  592  593  594  595  596  597  598  599  600 | DX1 Present on Admission  DX2 Present on Admission  DX3 Present on Admission  DX4 Present on Admission  DX5 Present on Admission  DX6 Present on Admission  DX7 Present on Admission  DX8 Present on Admission  DX9 Present on Admission  DX10 Present on Admission  DX11 Present on Admission  DX12 Present on Admission  DX13 Present on Admission  DX14 Present on Admission  DX15 Present on Admission  DX16 Present on Admission  DX17 Present on Admission  DX18 Present on Admission  DX19 Present on Admission  DX20 Present on Admission  DX21 Present on Admission  DX22 Present on Admission  DX23 Present on Admission  DX24 Present on Admission  DX25 Present on Admission  ECODE Present on Admission | 'Y' = 'Y.Yes,poa'  'N' = 'N.Not poa'  'U' = 'U.Unk cond'  'W' = 'W.clin undet'  'E','1' = 'E.exempt'  'Y' = 'Y.Yes,poa'  'N' = 'N.Not poa'  'U' = 'U.Unk cond'  'W' = 'W.clin undet'  'E','1' = 'E.exempt' |
|  |  |
|  |  |

DX1 601-607 Principal Diagnosis ICD-10-CM

DX2 608-614 1st Additional Dx ICD-10-CM

DX3 615-621 2nd Additional Dx ICD-10-CM

DX4 622-628 3rd Additional Dx ICD-10-CM

DX5 629-635 4th Additional Dx ICD-10-CM

DX6 636-642 5th Additional Dx ICD-10-CM

DX7 643-649 6th Additional Dx ICD-10-CM

DX8 650-656 7th Additional Dx ICD-10-CM

DX9 657-663 8th Additional Dx ICD-10-CM

DX10 664-670 9th Additional Dx ICD-10-CM

DX11 671-677 10th Additional Dx ICD-10-CM

|  |  |  |  |
| --- | --- | --- | --- |
| DX12 | 678-684 | 11th Additional Dx | ICD-10-CM |
| DX13 | 685-691 | 12th Additional Dx | ICD-10-CM |
| DX14 | 692-698 | 13th Additional Dx | ICD-10-CM |
| DX15 | 699-705 | 14th Additional Dx | ICD-10-CM |
| DX16 | 706-712 | 15th Additional Dx | ICD-10-CM |
| DX17 | 713-719 | 16th Additional Dx | ICD-10-CM |
| DX18 | 720-726 | 17th Additional Dx | ICD-10-CM |
| DX19 | 727-733 | 18th Additional Dx | ICD-10-CM |
| DX20 | 734-740 | 19th Additional Dx | ICD-10-CM |
| DX21 | 741-747 | 20th Additional Dx | ICD-10-CM |
| DX22 | 748-754 | 21st Additional Dx | ICD-10-CM |
| DX23 | 755-761 | 22nd Additional Dx | ICD-10-CM |
| DX24 | 762-768 | 23rd Additional Dx | ICD-10-CM |
| DX25 | 769-775 | 24th Additional Dx | ICD-10-CM |
|  |  |
|  |  |  |  |

ECODUB92 776-782 External Cause of Injury ICD-10-CM

Supplied by Hospital

|  |  |
| --- | --- |
| FILLER 783-784 End of file |  |