

Description of Data Elements
Kids' Inpatient Database (KID)
Core File
2003
Volume 1 - Data Elements
Beginning with letters A-L

This document contains cumulative descriptions of data elements across all years of HCUP data from 1988 to the current data year. Some notes will not apply directly to the 2003 KID.

Not all data elements in the KID Core file are uniformly coded across states. Please check the "State Specific Notes" section for each data element before analysis.

In addition, not all data elements in the KID are available from every state. Run frequencies by state to identify if a data element is unavailable in one or more states.

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AGE - Age in years at admission

General Notes

Age in years (AGE) is calculated from the birth date (DOB) and the admission date (ADATE) with the following exceptions:

- 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.

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

State Specific Notes

Arizona

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

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.

Colorado

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.

Connecticut

Patient age could not be calculated from dates since Connecticut did not report full dates of birth. During HCUP processing, only the reported age could be used to assign AGE.

Florida

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

Georgia

Patient age could not be calculated from dates because Georgia did not supply date of birth. During HCUP processing, only the reported age could be used to assign AGE.

Hawaii

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. To compensate for the two-digit birth year, the birth century was assigned as 1800 if the reported date of birth was after the admission date. Birth century was assigned as 1900 for all other records.

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.

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.

New Jersey

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:

<u>Year of Data</u>	<u>HCUP processing of AGE</u>
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

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.

Beginning with the 1998 data, New York provided complete dates and AGE could be calculated.

Oregon

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

South Carolina

The calculation of AGE differs across years.

Beginning in 2000

South Carolina reported a four-digit year for date of birth (DOB). No adjustments to birth century were made during HCUP processing.

From 1996 to 1999

Only a two-digit year for date (DOB) was provided by the data source.

- If DOB > 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 <= 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).

Using only the admission date to determine births in the 1800s causes no patient ages to be greater than 99 years.

In 1993 and 1995

South Carolina reported a two-digit year for date of birth (DOB). During HCUP processing, 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 records.

In 1994

South Carolina reported a four-digit year for date of birth (DOB). No adjustments to birth century were made during HCUP processing.

Tennessee

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

Utah

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

Virginia

Patient age could not be calculated from dates since Virginia did not report date of birth. During HCUP processing, only the reported age could be used to assign AGE.

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

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.

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

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.

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

State Specific Notes

Arizona

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

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.

Georgia

During HCUP processing, only the reported age in days could be used to assign AGEDAY because Georgia does not supply patient date of birth.

Prior to 2001, AGEDAY is coded differently in Georgia than in the other HCUP states. Georgia supplied age in days using a mix of days (for patients up to one month old) and 30-day intervals for (patients older than one month):

- Patients age less than 1 month old is coded in days from 0 to 30 (i.e., 0, 1, 2, 3 etc.).
- Patients age between 1 month and 1 year old is coded in 30-day intervals (i.e., 30, 60, 90, 120, etc.)

The maximum value for AGEDAY is 330.

Beginning with the 2001 data, Georgia no longer supplied 30-day intervals for age in days but instead reports a calculated age in days ranging from 0-365.

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 did not supply age in days. Beginning in 1998, Iowa supplied age in days, but the coding was inconsistent with HCUP standards.

Kentucky

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

New Jersey

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

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

Beginning with the 1998 data, New York provided complete dates and AGEDAY could be calculated.

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.

Tennessee

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

Utah

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

Virginia

Age in days could not be calculated from dates since Virginia did not report the date of birth. During HCUP processing, only the reported age in days could be used to assign AGEDAY.

Washington

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

West Virginia

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

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

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).

Uniform Values

Variable	Description	Value	Value Description
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

State Specific Notes

Georgia

During HCUP processing, only the reported age in months could be used to assign AGEMONTH because Georgia does not supply date of birth.

Prior to 2001, the reported age in months is available only through 2 years of age. AGEMONTH is missing (.) for patients over 2 years old.

Beginning with the 2001 data, Georgia reported age in months through 11 years of age (0-132 months).

Missouri

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

AMONTH - Admission month

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).

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)

State Specific Notes

None

ASOURCE - Admission source, uniform coding

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.

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		

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		
2	Outpatient or Clinic		
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

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)

State Specific Notes

California

California			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
nn1	Route was this hospital's emergency room	1	Emergency department
51n, where n = 0 or 2	Acute inpatient care (this hospital)	2	Another hospital
52n, where n = 0 or 2	Acute inpatient care (another hospital)		
2mn, where m = 0-3, n = 0 or 2	Residential care facility	3	Other health facility including long-term care
3mn, where m = 0-3, n = 0 or 2	Ambulatory surgery		
4mn, where m = 0-3, n = 0 or 2	Skilled Nursing/Intermediate care		
5mn, where m = 0 or 3, n = 0 or 2	Acute inpatient hospital care (not a hospital)		
6mn, where m = 0-3, n = 0 or 2	Other inpatient hospital care		
8mn, where m = 0-3, n = 0 or 2	Prison/jail	4	Court/Law enforcement
1mn, where m = 0-3, n = 0 or 2	Home	5	Routine including births and other sources
7mn, where m = 0-3, n = 0 or 2	Newborn		
9mn, where m = 0-3, n = 0 or 2	Other		
000, Blank	Missing	.	Missing

Any values not documented by the data source	.A	Invalid
<p>The <u>first digit</u> of ASOURCE_X describes the <u>site</u> 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 <u>license</u> 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 <u>route</u> 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).

Connecticut

Connecticut			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
2	Emergency department	1	Emergency department
4	Another hospital	2	Another hospital
3	Outpatient department	3	Other health facility including long-term care
5	SNF/ICF		
--	--	4	Court/Law enforcement
1	Routine from home	5	Routine including births and other sources
6	Newborn		
8	Same day care		
Blank	Missing	.	Missing
7	Still born (beginning in 2003)		
Any values not documented by the data source		.A	Invalid

Maryland

Maryland			
(Prior to 2002)			
ASOURCE_X		ASOURCE	
Value	Description	Value	Description
05	Admitted from home (when the emergency flag provided by MD indicates the record was admitted from the emergency room IER_FLAG=1)	1	Emergency department
09, 99, Blank	Missing (when the emergency flag provided by MD indicates the record was admitted from the emergency room IER_FLAG=1)		

00	Transferred from on-site acute care unit to rehabilitation unit	2	Another hospital
01	Transferred from another hospital to a specialty center		
02	Transferred from another hospital for any other reason		
11	Transfer from on-site acute care unit to psych unit (Beginning in 2000)	3	Other health facility including long-term care
03	Transferred from a nursing home		
04	Transferred from any other institution		
06	Transferred from Lithotripsy facility		
07	Transferred from on-site ambulatory outpatient surgery unit		
08	Transferred from off-site ambulatory outpatient surgery unit		
12	Admitted from on-site sub-acute facility	4	Court/Law enforcement
13	Admitted from other sub-acute facility		
--			
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)	5	Routine including births and other sources
10	Newborn		
09, 99, Blank	Missing (when the emergency flag provided by MD does not indicate the record was admitted from the emergency room IER_FLAG does not equal 1)	.	Missing
Any values not documented by the data source		.A	Invalid

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

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 KID) 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.

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
		.	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
		.	If newborn admissions (ATYPE = 4) Missing/Invalid

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
9, Blank	Information not available, Missing	Blank	Missing or Invalid
Newborn Admissions (TYPE = 4) (Valid beginning in 2003)			
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.			

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 a rural hospital	A	Transfer from a Critical Access hospital
9, 0, 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	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
09, Blank, Any undocumented values	Other/Unknown, 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.			

Georgia

Georgia			
(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 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
0, 9, Blank, undocumented values	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
0, 9, Blank, undocumented values	Missing	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Hawaii

Hawaii			
(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
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
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.			

Illinois

Illinois			
(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 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 rural hospital	A	Transfer from a Critical Access hospital
9, Blank, Any undocumented values	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
9, Blank, Any undocumented values	Missing, Unknown	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

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
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.			

Indiana

Indiana			
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
9, Any undocumented values	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
9, Any undocumented values	Not available	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Kansas

Kansas			
(Valid beginning in 2003)			
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
Any undocumented values		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	Unknown, Missing	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
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			
(Beginning in 2002)			
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		
R	Within hospital emergency room	7	Emergency room
M	Walk-in/Self referral		
8	Court/Law enforcement	8	Court/Law enforcement
--		A	Transfer from a Critical Access hospital
-, 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.			

Minnesota

Minnesota			
(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 SNF	5	Transfer from a skilled nursing facility
6	Transfer from Another 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

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

Missouri

Missouri			
(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
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.			

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
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.			

New Hampshire

New Hampshire			
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 other health care facility	6	Transfer from another health care facility
7	Transfer from ER	7	Emergency room
8	Transfer from Legal	8	Court/Law enforcement
--		A	Transfer from a Critical Access hospital
9, Any documented values	Not available, Missing	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	Already born on arrival	4	Extramural birth
9, Any undocumented values	Not available, Missing	Blank	Missing or Invalid

New Jersey

New Jersey			
(Beginning in 2002)			
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
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.

Nevada

Nevada			
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
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 York

New York			
(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 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
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	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank	Missing	.	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
7	Emergency room	7	Emergency room
8	Court/Law enforcement	8	Court/Law enforcement
--		A	Transfer from a Critical Access hospital
Blank, 9, 0, 1, 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.			

Ohio

Ohio			
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	8	Court/Law enforcement
		A	Transfer from a Critical Access hospital
9, Blank, any undocumented values	Missing, unknown	Blank	Missing or Invalid
Newborn Admission (TYPE = 4)			
A	Normal newborn	1	Normal newborn
B	Premature delivery	2	Premature delivery
C	Sick baby	3	Sick baby
D	Extramural birth	4	Extramural birth
9, Blank, any undocumented values	Missing, unknown	Blank	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Oregon

Oregon			
(Beginning in 2002)			
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
09, 19, Blank	Information not available		Missing or Invalid
Any values not documented by the data source	Invalid	Blank	
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 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 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 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 Carolina

South Carolina			
(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
0, 9, Blank	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
0, 9, Blank	Information not available, Missing	Blank	Missing or 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
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.			

Tennessee

Tennessee			
(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 an Acute Care Facility	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
9, Blank	Unknown, blank	.	Missing or Invalid
Newborn Admissions (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	.	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Texas

Texas			
(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
0	Transfer from a psychiatric, substance abuse, or rehab hospital	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
9, Blank	Missing	Blank	Missing or Invalid
"*" and any values not documented by the data source	Invalid		
Newborn Admission (TYPE = 4)			
--	--	1	Normal newborn
--	--	2	Premature delivery
--	--	3	Sick baby
--	--	4	Extramural birth
9, Blank	Missing	Blank	Missing or Invalid

"*" and any values not documented by the data source	Invalid		
<p>The Admission Source (ASOURCE_X) is always blank for newborns (ATYPE=4) in the source data file. For 2002 processing, ASOURCEUB92 will remain missing for newborns and ASOURCE will be set to "Routine" in the after2 macro using the following code: If ASOURCE_X=" " and ATYPE = 4 then ASOURCE = 5. For all other values, ASOURCE is coded from ASOURCEUB92.</p>			

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
0, 9, Blank, any undocumented values	Information not available, 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, any undocumented values	Invalid, Missing	.	Missing or Invalid
<p>SID: 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. Else ASOURCE_X = the admission source for non-newborns</p> <p>SASD: Admission source is provided in one field for all patients.</p>			

Virginia

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 hospital	4	Transfer from 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
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	3	Sick baby
4	Extramural birth	4	Extramural birth
9, Blank	Unknown, Missing	.	Missing or Invalid
ASOURCE is coded directly from ASOURCEUB92.			

Vermont

Vermont			
(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 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
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			
(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 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
9, Blank	Other/Missing	.	Missing or Invalid
Newborn Admission (TYPE = 4)			

1	Normal delivery	1	Normal newborn
5	Multiple birth		
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
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
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
--		A	Transfer from a Critical Access hospital
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
ASOURCE is coded directly from ASOURCEUB92.			

ASOURCE_X - Admission source, as received from source

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.

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

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.

ATYPE - Admission type

General Notes

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).

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)

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.

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).

Connecticut

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

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).

Georgia

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

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.

Illinois

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

Iowa

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

Indiana

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

Kansas

Kansas does not separately classify deliveries. The source documentation available for Kansas does not indicate which code was 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.

Maryland

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.

Minnesota

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

Missouri

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

Nebraska

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

New Hampshire

New Hampshire does not separately classify deliveries. The source documentation supplied by New Hampshire 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.

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 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.

Ohio

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

- Admission for Pending Medicaid recipient
- Medicaid recipient not reviewed
- Transferred to another hospital
- Rehabilitation Court committal.

These admissions were included under the uniform category "Other" (ATYPE = 6).

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

Tennessee

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

Texas

Texas does not separately classify deliveries. The source documentation supplied by Texas 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.

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.

AWEEKEND - Admission day is on a weekend

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).

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

State Specific Notes

Connecticut

Beginning in 2000, Connecticut provides the necessary information to code AWEEKEND.

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.

From data year 1998 to 2000, there may be an error in A WEEKEND. 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.

New York

The assignment of A WEEKEND varies by year in New York:

Beginning in 2000 data, A WEEKEND is assigned from the reported admission day of the week if the admission date is missing.

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

*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.

BWT - Birth weight in grams

General Notes

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

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

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.

Indiana

Indiana provides the birth weight for newborn and neonates. Neonates are defined as children less than 29 days old.

Kentucky

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.

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.

DIED - Died during hospitalization

General Notes

Died during hospitalization (DIED) is coded from disposition of patient. The HCUP data element for disposition of the patient varies across years of data.

Beginning in the 1998 data, the HCUP data element DISPUiform is used to code DIED.

- If DISPUiform indicates that a patient was discharged alive (values 1-7), then DIED is coded as 0.
- If DISPUiform indicates that a patient died in the hospital (value 20), then DIED is coded as 1.
- If DISPUiform is missing (.) or invalid (.A), then DIED is also missing (.) or invalid (.A).

When DISP_X indicates that a patient died outside of the hospital (value = 40-42), then the disposition is coded as missing (DISPUiform = . and DIED = .).

From 1988-1997 data, the HCUP data element DISP is used to code DIED.

- If DISP indicates that a patient was discharged alive (values 1-7), then DIED is coded as 0.
- If DISP indicates that a patient died in or out of the hospital (value 20), then DIED is coded as 1.
- If DISP is missing (.), invalid (.A), or unavailable from the source (.B), then DIED is also missing (.), invalid (.A), or unavailable from the source (.B).

When noted, patients that died outside of the hospital are included in the same category as patients that died in the hospital (DISP = 20), so for these patients DIED is coded as 1.

In the 1998-2000 HCUP data files, missing values of DIED were erroneously set to invalid (.A).

Uniform Values			
Variable	Description	Value	Value Description
DIED	Died during hospitalization	0	Did not die
		1	Died
		.	Missing
		.A	Invalid
		.B	Unavailable from source (coded in 1988-1997 data only)

State Specific Notes

New Jersey

In 1994, New Jersey reported that Englewood Hospital and Medical Center (DSHOSPID = 00450) incorrectly reported transfers to other hospitals as deaths.

DISCWT – Weight to discharges in the universe

General Notes

DISCWT is the discharge-level weight on the KID Core file. To produce national estimates, use DISCWT to weight discharges in the Core file to the discharges from all community hospitals located in the U.S.

- In the 2003 KID, DISCWT should be used to create all national estimates, including total charge.
- In the 2000 KID, there are two discharge-level weights (DISCWT and DISCWTcharge). DISCWT should be used to create national estimates for all analyses except those that involve total charge. DISCWTcharge should be used to create national estimates of total charge.
- In the 1997 KID, the discharge weight was named DISCWT_U.

For detailed information about the development and use of discharge and hospital weights, see the year-specific report on the Design of the HCUP Kids' Inpatient Database.

Uniform Values

Variable	Description	Value	Value Description
DISCWT	Weight to discharges in the universe	nn.nnnn	Weight to discharges in the universe

State Specific Notes

None

DISPUB92 - Disposition of patient, UB92 coding

General Notes

DISPUB92 indicates the disposition of the patient at discharge and uses the same coding as the patient status data element on the UB-92 claim form.

DISPUB92 has more detailed categories for transfers and Home Health Care than the HCUP data element DISPUUniform. Some states do not provide enough detail in the coding of the discharge status to accurately code DISPUB92. For these states, the data element DISPUB92 is not available. DISPUUniform is available for all states. DISP_X retains the disposition of patient as provided by the data source.

Uniform Values

Variable	Description	Value	Value Description
DISPUB92	Disposition of patient, UB92 coding	1	Routine
		2	Short-term hospital
		3	Skilled Nursing Facility (SNF)
		4	Intermediate Care Facility (ICF)
		5	Another type of facility (for inpatient care)
		6	Home Health Care (HHC)
		7	Against medical advice (AMA)
		8	Home IV provider
		9	Admitted as an inpatient to this hospital, beginning in 2001 data. Valid only on outpatient data.
		20	Died in hospital
		40	Died at home
		41	Died in a medical facility
		42	Died, place unknown
		43	Federal health facility, beginning in 2003 data
		50	Hospice – home
		51	Hospice – medical facility

		61	Within this institution to a Medicare-approved swing bed, beginning in 2000 data
		62	Discharge, transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data
		63	Discharge, transferred to a long term care hospital swing bed, beginning in 2001 data
		64	Discharge, transferred to a nursing facility certified by Medicaid, but not certified by Medicare
		71	Another institution for outpatient services, beginning in 2000 data
		72	This institution for outpatient services, beginning in 2000 data
		99	Discharge alive, destination unknown, beginning in 2001 data
		.	Missing
		.A	Invalid

State Specific Notes

Arizona

Arizona			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care (routine)	1	Routine
02	Another short term general hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
06	Home under care of organized home health service organization	6	Home health care
07	Left against medical advice	7	Against medical advice

08	Home under care of a Home IV provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital (beginning in 2001 data). Valid only on outpatient data.
20	Expired	20	Died in the hospital
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
43	Discharged to a federal hospital (valid beginning 10/1/03)	43	Federal health facility
50	Hospice - home (beginning 7/02)	50	Hospice - home
51	Hospice - home (beginning 7/02)	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed (beginning 7/02)	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning 7/02)	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001)
63	Long term care hospital (beginning 7/02)	63	Long term care hospital (beginning in 2001)
--		64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002)
71	Another institution for outpatient services (beginning 7/02)	71	Another institution for outpatient services (beginning in 2000)
72	This institution for outpatient services (beginning 7/02)	72	This institution for outpatient services (beginning in 2000)
Blank, 00	Missing	.	Missing
Any values not documented by the data source		.A	Invalid

DISPUniform is coded directly from DISPUB92. In 2001, records with the disposition "All Other" were recoded to "Missing" (DISPUB92 = .) in the HCUP databases. For all other years, records with the disposition "09" were considered to have a different definition, "Admitted as an inpatient", and were rejected from the HCUP databases.

Colorado

Colorado			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home/Self-Care/Routine	1	Routine
02	Short Term Hospital	2	Short-term hospital
03	SNF	3	Skilled nursing facility
04	Intermediate Care Facility	4	Intermediate care facility
05	Other Facility	5	Another type of facility
06	Home Health Service	6	Home health care
07	Left Against Medical Advice	7	Against medical advice
08	Home IV Service	8	Home IV provider
20	Expired	20	Died in the hospital
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
50	Hospice - Home	50	Hospice - home
51	Hospice - Medical Facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000)
62	Discharged/transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital	62	Discharge, transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data.
63	Discharged/transferred to a long term care hospital	63	Discharge, transferred to a long term care hospital swing bed, beginning in 2001 data.

64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services	71	Another institution for outpatient services (beginning in 2000)
72	This institution for outpatient services	72	This institution for outpatient services (beginning in 2000)
--		99	Discharge alive, destination unknown, beginning in 2001 data.
Blank	Missing	.	Missing
Any other values		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Connecticut

Connecticut			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home	1	Routine
02	Other hospital	2	Short-term hospital
09	Admitted to this hospital (SASD and SEDD prior to 2001).		
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Other facility	5	Another type of facility
06	Home health care	6	Home health care
07	Left AMA	7	Against medical advice
08	Home IV therapy	8	Home IV provider
09	Admitted to this hospital (SASD and SEDD beginning in 2001).	9	Admitted as an inpatient to this hospital (beginning in 2001 data). Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Died at home (beginning in 2002)	40	Died at home

41	Died in other medical facility (beginning in 2002)	41	Died in other medical facility
42	Died, place unknown (beginning in 2002)	42	Died, place unknown
43	Federal Hospital	43	Federal health facility
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2002)	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2002 data)	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data)
63	Long term care hospital (beginning in 2002 data)	63	Long term care hospital (beginning in 2001 data)
--		64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services (beginning in 2002 data)	71	Another institution for outpatient services (beginning in 2000 data)
72	This institution for outpatient services (beginning in 2002 data)	72	This institution for outpatient services (beginning in 2000 data)
--		99	Discharged alive, destination unknown (beginning in 2001 data)
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Florida

Florida			
DISP_X		DISPUB92	
Value	Description	Value	Description
01, 1	Home	1	Routine

02, 2	Short term general hospital	2	Short-term hospital
03, 3	Skilled nursing facility	3	Skilled nursing facility
04, 4	Intermediate care facility	4	Intermediate care facility
05, 5	Another type of institution	5	Another type of facility
06, 6	Home under care of home health care organization	6	Home health care
07, 7	Left against medical advice	7	Against medical advice
08, 8	Home on IV medications	8	Home IV provider
--		9	Admitted as an inpatient to this hospital (beginning in 2001 data). Valid only on outpatient data.
20	Expired	20	Died in the hospital
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
50	Discharged to Hospice - Home	50	Hospice – home
51		51	Discharged to Hospice – Medical Facility
--		61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000 data)
--		62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data).
--		63	Long term care hospital (beginning in 2001 data).
--		64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
--		71	Another institution for outpatient services (added for 2000 data)
--		72	This institution for outpatient services

			(added for 2000 data)
--		99	Discharged alive, destination unknown (beginning in 2001 data).
Blank	Missing		
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Georgia

Georgia			
DISP_X		DISPUB92	
Value	Description	Value	Description
01, 1	Home or self care (routine)	1	Routine
02, 2	Another short-term general hospital	2	Short-term hospital
03, 3	Skilled nursing facility	3	Skilled nursing facility
04, 4	Intermediate care facility	4	Intermediate care facility
05, 5	Another type of institution	5	Another type of facility
10	Mental Health Center		
06, 6	Home health care	6	Home health care
07, 7	Left against medical advice	7	Against medical advice
08, 8	Home under care of Home IV Provider	8	Home IV provider
09, 9	Admitted as an inpatient to his hospital (valid in outpatient databases only).	9	Admitted as an inpatient to this hospital (beginning in 2001 data). (Valid only on outpatient data)
20	Expired	20	Died in the hospital
40	Expired at home	40	Died at home
41	Expired in medical facility	41	Died in other medical facility
42	Expired - place unknown	42	Died, place unknown
50	Hospice - home (Beginning in 2000)	50	Hospice - home
51	Hospice - medical facility (Beginning in 2000)	51	Hospice - medical facility

61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000).	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000).
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2002 data).	62	Discharge, transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data).
63	Long term care hospital (beginning in 2002 data).	63	Discharge, transferred to a long term care hospital swing bed (beginning in 2001 data).
64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data).	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data).
71	Another institution for outpatient services (beginning in 2000).	71	Another institution for outpatient services (beginning in 2000).
72	This institution for outpatient services (beginning in 2000).	72	This institution for outpatient services (beginning in 2000).
--		99	Discharge alive, destination unknown (beginning in 2001 data).
0, 9, 99, Blank	Unknown, Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Hawaii

Hawaii			
DISP_X		DISPUB92	
Value	Description	Value	Description
1	Home or self care (routine)	1	Routine
2	Another short term general hospital	2	short-term hospital
3	Skilled nursing facility	3	Skilled nursing facility

4	Intermediate care facility	4	Intermediate care facility
5	Another type of institution	5	another type of facility
6	Home health service organization	6	Home health care
7	Left against medical advice	7	Against medical advice
8	Home under care of Home IV Provider	8	Home IV provider
9	Admitted as an inpatient to this hospital (beginning in 2003 data)	9	Admitted as an inpatient to this hospital (beginning in 2001 data)
20	Expired	20	Died in the hospital
40	Expired at home (hospice only)	40	Died at home
41	Expired in medical facility	41	Died in other medical facility
42	Expired - place unknown (hospice only)	42	Died, place unknown
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital	62	Discharge, transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data.
63	Long term care hospital	63	Long term care hospital (beginning in 2001 data).
--		64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data).
71	Another institution for outpatient services	71	Another institution for outpatient services (beginning in 2000)
72	This institution for outpatient services	72	This institution for outpatient services (beginning in 2000)
--		99	Discharged alive, destination unknown (beginning in 2001 data).

Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Illinois

Illinois			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Routine	1	Routine
02	Short-term General Hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
06	Home under care of organized home health service	5	Home health care
07	Left against medical advice	7	Against medical advice
08	Home under care of a Home IV drug therapy provider	8	Home under IV provider
20	Expired	20	Died in the hospital
21	Expired		
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
43	Federal Hospital	43	Federal health facility
50	Hospice - Home	50	Hospice - home
51	Hospice - Medical Facility	51	Hospice - medical facility

61	Within this institution to a hospital-based Medicare approved swing bed (added in 2001)	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000)
	Discharged/transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital (added in 2001)	62	Discharged, transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data).
63	Discharged/transferred to a long term care hospital (added in 2001)	63	Discharged, transferred to a long term care hospital swing bed (beginning in 2001 data).
64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services (added in 2001)	71	Another institution for outpatient services (beginning in 2000)
72	This institution for outpatient services (added in 2001)	72	This institution for outpatient services (beginning in 2000)
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid

DISPUniform is coded directly from DISPUB92.

Indiana

Indiana			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care (routine)	1	Routine
02	Another short term general hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility (ICF)	4	Intermediate care facility
05	Another type of institution or referred for outpatient services to another institution	5	Another type of facility
06	Home under care of organized home health services organization	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Home under care of a Home IV provider	8	Home IV provider
09	Admitted as an inpatient to this hospital. Valid on Outpatient data only.	9	Admitted as an inpatient to this hospital. Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Expired at home	40	Died at home
41	Expired in a medical facility	41	Died in other medical facility
42	Expired - place unknown	42	Died, place unknown
--		43	Federal health facility
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Within this institution to hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed
62	Another inpatient rehabilitation facility including rehabilitation distinct part units of a hospital	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital
63	Medicare Certified long term care hospital	63	Long term care hospital

64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare
71	Another institution for outpatient services as specified by the discharge plan of care	71	Another institution for outpatient services
72	This institution for outpatient services as specified by the discharge plan of care	72	This institution for outpatient services
--		99	Discharged alive, destination unknown
00, Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded from DISPUB92.			

Iowa

Iowa			
(Valid beginning in 2001)			
DISP_X		DISPUB92	
Value	Description	Value	Description
1	Home or self-care	1	Routine
2	Another short-term general hospital	2	Short-term hospital
3	Skilled nursing facility (SNF)	3	Skilled nursing facility
4	Intermediate care facility	4	Intermediate care facility
5	Another type of institution for inpatient care or referred for outpatient services to another institution	5	Another type of facility
10	Mental health care - Medicaid only		
12	Medicaid certified substance abuse unit - Medicaid only		
13	Medicaid certified psychiatric unit - Medicaid only		
6	Home under care of home-health service organization	6	Home health care

7	Against medical advice	7	Against medical advice
8	Home under care of a Home IV provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital, beginning in 2001 data. Valid only on outpatient data.
20	Expired	20	Died in the hospital
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
43	Federal Hospital	43	Federal health facility
50	Hospice-Home	50	Hospice - home
51	Hospice-medical facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare-approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data)	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data.
11	Medicaid certified rehabilitation unit - Medicaid only		
63	Long term care hospital (beginning in 2001 data)	63	Long term care hospital, beginning in 2001 data.
64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services as specified by the discharge plan of care	71	Another institution for outpatient services (beginning in 2000)
72	This institution for outpatient services as specified by the discharge plan of care	72	This institution for outpatient services (beginning in 2000)
--		99	Discharged alive, destination unknown, beginning in 2001

			data.
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Kansas

Kansas			
Valid beginning in 2003			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care	1	Routine
02	Another short term general hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
10	Mental health center		
06	Home health service organization	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Home under care of Home IV Provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital (beginning in 2001 data). Valid only on outpatient data.
4	Expired (no autopsy)	20	Died in the hospital
20	Expired	20	Died in the hospital
40	Expired at home	40	Died at home
41	Expired at medical facility	41	Died in other medical facility
42	Expired – place unknown	42	Died, place unknown
43	Federal Hospital	43	Federal health facility
50	Hospice – home	50	Hospice – home
51	Hospice – medical facility	51	Hospice – medical facility

61	Hospital-based swing bed within this institution	61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000 data)
62	Another rehabilitation facility	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data)
63	Long term care hospital	63	Long term care hospital (beginning in 2001 data)
64	Nursing facility certified under Medicaid, but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services	71	Another institution for outpatient services (beginning in 2000 data)
72	This institution for outpatient services	72	This institution for outpatient services (beginning in 2000 data)
--		99	Discharged alive, destination unknown (beginning in 2001 data)
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92			

Kentucky

Kentucky			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Routine (home/self-care)	1	Routine
02	Short-term hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of facility	5	Another type of facility
06	Home health care	6	Home health care
07	Against medical advice	7	Against medical advice
08	Home IV provider	8	Home IV provider

--		9	Admitted as an inpatient to this hospital, beginning in 2001 data. Valid only on outpatient data.
20, 21	Expired	20	Died in the hospital
40	Died at home	40	Died at home
41	Died in other medical facility	41	Died in other medical facility
42	Died, place unknown	42	Died, place unknown
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000 data)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2002 data)	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data).
63	Long term care hospital (beginning in 2002 data)	63	Long term care hospital (beginning in 2001 data).
64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services	71	Another institution for outpatient services (added for 2000 data)
72	This institution for outpatient services	72	This institution for outpatient services (added for 2000 data)
10, 11	No longer covered by Medicaid. Transferred to another category of service (beginning in 2001)	99	Discharged alive, destination unknown (beginning in 2001 data).
10, 11, Blank	No longer covered by Medicaid. Transferred to another category of service (prior to 2001), Missing	.	Missing
Any values not documented by the data source		.A	Invalid

DISPUniform is coded directly from DISPUB92.

Massachusetts

Massachusetts			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home (routine)	1	Routine
14	Rest Home (Beginning in 1998)		
15	Shelter (Beginning in 1999)		
02	Another short-term general hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Further care - Inpatient or OPD	5	Another type of facility
10	Chronic hospital		
11	Mental health facility		
13	Rehab hospital		
14	Rest Home (Prior to 1998)		
06	Home under care of home health agency	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Home for IV drug therapy	8	Home IV provider
--		9	Admitted as an inpatient to this hospital, beginning in 2001 data. Valid only on outpatient data.
20	Expired	20	Died in the hospital
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown

--		43	Federal health facility, beginning in 2003 data.
--		42	Died, place unknown
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
--		61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000)
--		62	Another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data.
--		63	Long term care hospital swing bed, beginning in 2001 data.
--		64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
--		71	Another institution for outpatient services (beginning in 2000)
--		72	This institution for outpatient services (beginning in 2000)
--		99	Discharged alive, destination unknown, beginning in 2001 data.
12	Discharge Other	.	Missing
00, Blank	Missing		
09	Not used (Beginning in 1999)	.A	Invalid
Any values not documented by the data source			

Michigan

Michigan			
DISP_X		DISPUB92	
Value	Description	Value	Description
1	Home or self care	1	Routine
02	Another short-term general hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility

04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
06	Home under care of home health services	6	Home health care
07	Left against medical advice or discontinued care	7	Against medical advice
08	Home under care of home IV provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital, beginning in 2001 data. Valid only on outpatient data.
20	Expired	20	Died in the hospital
--		40	Died at home
41	Expired in a medical facility	41	Died in other medical facility
--		42	Died, place unknown
43	Federal health facility (beginning in 2003)	43	Federal health facility
50	To home to receive Hospice Services from a certified provider	50	Hospice - home
51	To a medical facility to receive Hospice Services	51	Hospice - medical facility
61	Within the institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed
62	To an inpatient rehab facility (IRF) including rehabilitation distinct parts unit of a hospital	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data.
63	To a Medicare certified long term care hospital (LTCH)	63	Long term care hospital, beginning in 2001 data.
64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)

71	To another institution for outpatient services as specified by the discharge plan of care	71	Another institution for outpatient services, beginning in 2000.
72	To this institution for outpatient services as specified by the discharge plan of care	72	This institution for outpatient services, beginning in 2000.
--		99	Discharge alive, destination unknown, beginning in 2001 data.
00, Blank	Missing, invalid or unrecorded	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Minnesota

Minnesota			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care	1	Routine
02	Another short-term hospital for inpatient care	2	Short-term hospital
03	Skilled Nursing Facility (SNF)	3	Skilled nursing facility
04	Intermediate care facility (ICF)	4	Intermediate care facility
05	Another type of institution for inpatient care	5	Another type of facility
10	Mental Health Center		
06	Home under care of organized home health service organization	6	Home health care
07	Left against medical advice or discontinued care	7	Against medical service
08	Home under care of a Home IV provider	8	Home IV provider

09	Admitted to this hospital (valid in outpatient databases only)	9	Admitted as an inpatient to this hospital (beginning in 2001 data). Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Expired at home (valid for hospice claims only)	40	Died at home
41	Expired in a medical facility	41	Died in other medical facility
42	Expired, place unknown	42	Died, place unknown
50	Hospice - home	50	Hospice - home
51	Hospice - Medical Facility	51	Hospice - medical facility
61	Within this institution to hospital-based Medicare approved swing bed	61	Within this institution to hospital-based Medicare approved swing bed (added for 2000 data)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data)
63	Long term care hospital	63	Long term care hospital (beginning in 2001 data)
64	--	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services as specified by the discharge plan of care	71	Another institution for outpatient services (beginning in 2000 data)
72	This institution for outpatient services as specified by the discharge plan of care	72	This institution for outpatient services (beginning in 2000 data)
--	--	99	Discharged alive, destination unknown (beginning in 2001 data)
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Missouri

Missouri			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home/self	1	Routine
02	Another short term general hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
06	Home health care	6	Home health care
07	Against medical advice	7	Against medical advice
08	Home IV Service	8	Home IV provider
09	Admitted as an inpatient to this hospital (valid in SASD/SEDD databases only).	9	Admitted as an inpatient to this hospital (beginning in 2001). Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Expired at home (hospice care)	40	Died at home
41	Expired in medical facility (hospice care)	41	Died in other medical facility
42	Expired - place unknown (hospice care)	42	Died, place unknown
43	To a federal health care facility (beginning in 2003 data)	43	Federal health facility
50	Hospice - Home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000).	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000).
62	Another rehabilitation facility (beginning in 2002 data)	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data).
63	Long term care hospital (beginning in 2002 data)	63	Long term care hospital (beginning in 2001 data).

64	Nursing facility Medicaid certified only (beginning in 2002 data)	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services (beginning in 2000 data).	71	Another institution for outpatient services (beginning in 2000 data).
72	This institution for outpatient services (beginning in 2000 data).	72	This institution for outpatient services (beginning in 2000 data)
--		99	Discharged alive, destination unknown (beginning in 2001 data).
99, Blank	Unknown, Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Nebraska

Nebraska			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Routine or self care (routine discharge)	1	Routine
02	Another short-term general hospital for inpatient care	2	Short-term hospital
03	Skilled nursing facility (SNF) with Medicare certification	3	Skilled nursing facility
04	Intermediate care facility (ICF)	4	Intermediate care facility
05	Another type of institution for inpatient care	5	Another type of facility
06	Home under care of organized home health service organization	6	Home health care
07	Left against medical advice or discontinued care	7	Against medical advice
08	Home under care of a Home IV provider	8	Home IV provider

09	Admitted to this hospital (valid in outpatient databases only)	9	Admitted as an inpatient to this hospital. Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Expired at home	40	Died at home
41	Expired in a medical facility	41	Died in other medical facility
42	Expired, place unknown	42	Died, place unknown
43	Federal Hospital	43	Federal health facility
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	50	Hospice - medical facility
61	Within this institution to hospital-based Medicare approved swing bed	61	Within this institution to hospital-based Medicare approved swing bed
62	Inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital	62	Inpatient rehabilitation facility including rehabilitation distinct part units of a hospital
63	Medicare certified long term	63	Long term care hospital
64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services as specified by the discharge plan of care	71	Another institution for outpatient services
72	To this institution for outpatient services as specified by the discharge plan of care	72	This institution for outpatient services
--	--	99	Discharged alive, destination unknown
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

New Hampshire

New Hampshire			
DISP_X		DISPUB92	
Value	Description	Value	Description
5	Home, self care	1	Routine
1	Other short term hospital	2	Short-term hospital
2	Skilled nursing facility	3	Skilled nursing facility
3	Intermediate care facility	4	Intermediate care facility
4	Structured/assisted living		
11	Transfer to Substance abuse facility	5	Another Type of Institution
12	Transfer to Subs. abuse in acute facility		
13	Transfer to psychiatric facility		
14	Transfer to Psych. in acute facility		
6	Home health service	6	Home health care
7	Against medical advice	7	Against medical advice
16	Patient left before treatment		
--		8	Home IV provider
17	Inpatient in Same Facility (SASD/SEDD only)	9	Admitted as an inpatient to this hospital. Valid only on outpatient data
8	Died	20	Died in the hospital
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
		43	Federal health facility
		50	Hospice - home
		51	Hospice - medical facility
		61	Within this institution to a hospital-based Medicare approved swing bed

9	Transfer to Rehabilitation facility	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital
10	Transfer to Rehab. in acute facility		
--		63	Long term care hospital
--		64	Nursing facility certified under Medicaid but not certified under Medicare
--		71	Another institution for outpatient services
--		72	This institution for outpatient services
15	Redirected to appropriate provider	99	Discharged alive, destination unknown
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded from DISPUB92.			

New Jersey

New Jersey			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care (routine)	1	Routine
02	Another short term general hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
06	Home under care of organized HHA	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Home with IV therapy	8	Home IV provider
--		9	Admitted as an inpatient to this hospital, beginning in 2001 data. Valid only on outpatient data.

20	Expired, no autopsy	20	Died in the hospital
21	Expired, with autopsy		
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
43	Federal Hospital (beginning in 2003 data)	43	Federal health facility
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000 data)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital	62	Discharge, transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data.
63	Long term care hospital	63	Discharge, transferred to a long term care hospital swing bed, beginning in 2001 data.
64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services	71	Another institution for outpatient services (added for 2000 data)
72	This institution for outpatient services	72	This institution for outpatient services (added for 2000 data)
--		99	Discharge alive, destination unknown, beginning in 2001 data.
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

New York

New York			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care (routine)	1	Routine
90	Plan of care completed (Ambulatory Surgery data only)		
91	Pre-admission (Ambulatory Surgery data only)		
02	Another acute general hospital	2	Short-term hospital
09	Admitted as an inpatient to this hospital (Ambulatory surgery data only prior to 2001).		
10	Neonate discharged another hospital for neonatal aftercare for weight gain (Inpatient data only)		
13	Another hospital for tertiary aftercare (Inpatient data only)		
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
12	Intermediate care facility for the mentally retarded		
05	Another type of institution	5	Another type of facility
11	Short-term psychiatric, chronic hospital or long-term specialty hospital providing for psychiatric illnesses		
14	Domiciliary Care Facility (Inpatient data only)		
06	Home under care of organized home health service organization	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Home under care of a Home IV provider (Inpatient data only)	8	Home IV provider

09	Admitted as an inpatient to this hospital (ambulatory surgery data only beginning in 2001).	9	Admitted as an inpatient to this hospital (beginning in 2001 data). Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Expired at home	40	Died at home
41	Expired in a medical facility	41	Died in other medical facility
42	Expired, place unknown	42	Died, place unknown
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Transfer within institution to a Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000 data)
62	Discharged/transferred to another type of institution for inpatient care or referred for rehabilitation services	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data).
63	Discharged/transferred to another type of institution or referred for Long Term Care Services	63	Long term care hospital (beginning in 2001 data)
--		64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Discharged/transferred/referred to another institution for outpatient services as specified by the discharge plan of care	71	Another institution for outpatient services (added for 2000 data)

72	Discharged/transferred/referred to this institution for outpatient services as specified by the discharge plan of care	72	This institution for outpatient services (added for 2000 data)
--		99	Discharged alive, destination unknown (beginning in 2001 data).
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Nevada

Nevada			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Routine - discharge to home or self care	1	Routine
02	Discharged/transferred to another short term general hospital	2	Short-term hospital
03	Discharged/transferred to a skilled nursing facility (SNF)	3	Skilled nursing facility
04	Discharged/transferred to an intermediate care facility (ICF)	4	Intermediate care facility
05	Discharged/transferred to another type of institution	5	Another type of facility
06	Discharged/transferred to a home under care of Organized Home Health Service Organization	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Discharged/transferred to a home under care of a home IV provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital.
20	Expired	20	Died in the hospital
40	Expired at home	40	Died at home

41	Expired in a medical facility	41	Died in other medical facility
42	Expired place unknown	42	Died, place unknown
43	Transferred to a Federal or VA hospital	43	Federal health facility
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Discharged/transferred within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed
62	Discharged/transferred to an inpatient rehabilitation facility (IRF). (Effective retroactive to 1/1/02)	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data)
63	Discharged/transferred to Medicare certified long term care hospital (LTCH). (Effective 5/9/02)	63	Long term care hospital (beginning in 2001 data).
64	Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare (Effective 10/1/22)	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Discharged/transferred/referred to another institution for outpatient services as specified by the discharge plan of care	71	Another institution for outpatient services
72	Discharged/transferred/referred to this institution for outpatient services as specified by the discharge plan of care	72	This institution for outpatient services
99	Unknown	99	Discharged alive, destination unknown *beginning in 2001 data).
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid

DISPUniform is coded directly from DISPUB92.

North Carolina

North Carolina			
DISP_X		DISPUB92	
Value	Description	Value	Description
1	Home or self-care (Routine)	1	Routine
2	Another short term general hospital	2	Short-term hospital
3	Skilled nursing facility	3	Skilled nursing facility
4	Intermediate care facility	4	Intermediate care facility
5	Another type of institution	5	Another type of facility
6	Home under care of home health care organization	6	Home health care
7	Left against medical advice	7	Against medical advice
8	Home under care of Home IV provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital (beginning in 2001 data). Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Died at home	40	Died at home
41	Died in other medical facility	41	Died in other medical facility
42	Died, place unknown	42	Died, place unknown
43	Transferred to a federal hospital	43	Federal health facility
50	Hospice – home	50	Hospice – home
51	Hospice – medical facility	51	Hospice – medical facility

61	Within this institution to Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000 data)
62	Inpatient rehab facility	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data)
63	Certified long term care hospital	63	Long term care hospital (beginning in 2001 data)
--		64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services (discontinued 4/1/03)	71	Another institution for outpatient services (beginning in 2000 data)
72	This institution for outpatient services (discontinued 4/1/03)	72	This institution for outpatient services (beginning in 2000 data)
--		99	Discharged alive, destination unknown (beginning in 2001 data).
9, 10, 50, 51, Blank	Documented by source as unknown values	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Ohio

Ohio			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Alive to home	1	Routine
02	Short Term Care	2	Short-term hospital
03	SNF	3	Skilled nursing facility
04	Intermediate care	4	Intermediate care facility

05	Another institution	5	Another type of facility
10	Medicaid Discharge to Psychiatric		
06	Home health	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Left under Home IV	8	Home IV provider
--		9	Admitted as an inpatient to this hospital.
20	Died	20	Died in the hospital
40	Medicare Hospice Expired at Home	40	Died at home
41	Medicare Hospice Expired at Medical Facility	41	Died in other medical facility
42	Medicare Hospice Claims Only Place Unknown	42	Died, place unknown
43	Federal Hospital	43	Federal health facility (beginning in 2003 data)
50	Hospice - Home	50	Hospice - home
51	Medical Facility	51	Hospice - medical facility
61	Within hospital based approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed.
62	Another rehab facility	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital.
63	Long term care hospital	63	Long term care hospital.
--		64	Nursing facility certified under Medicaid but not certified under Medicare
71	Another institution for outpatient services	71	Another institution for outpatient services
72	This institution for outpatient services	72	This institution for outpatient services
--		99	Discharge alive, destination unknown
00, Blank	Unknown, Missing	.	Missing

Any values not documented by the data source	.A	Invalid
DISPUniform is coded directly from DISPUB92.		

Oregon

Oregon			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Routine discharge (to home of self care)	1	Routine
10	Discharged - no longer covered by Medicaid		
02	Another short term hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
11	Transferred to another category of service		
06	Home health care service	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Discharged home under care of a Home IV Service	8	Home IV provider
--		9	Admitted as an inpatient to this hospital, beginning in 2001 data. Valid only on outpatient data.
20	Expired	20	Died in the hospital
21	Expired - not covered by Medicaid	--	
40	Expired at home	40	Died at home
41	Expired in medical facility	41	Died in other medical facility
42	Expired - place unknown	42	Died, place unknown
43	Federal Hospital	43	Federal health facility
50	Hospice - Home	50	Hospice - home
51	Hospice - Medical Facility	51	Hospice - medical facility

61	Within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed, beginning in 2000
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital.	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data.
63	Long term care hospital	63	Long term care hospital, beginning in 2001 data.
64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services	71	Another institution for outpatient services
72	This institution for outpatient services	72	This institution for outpatient services, added for 2000.
--		99	Discharge alive, destination unknown, beginning in 2001 data.
00, Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Rhode Island

Rhode Island			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care	1	Routine
09	Partial Hospitalization (beginning 2003)		
02	Another short-term general hospital	2	Short-term hospital
03	SNF	3	Skilled nursing facility
04	ICF	4	Intermediate care facility
05	Another institution	5	Another type of facility
06	Home health service	6	Home health care

07	Left against medical advice	7	Against medical advice
08	Home under care of IV provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital. Valid only on outpatient data.
20	Expired	20	Died in the hospital
21	Autopsied		
22	Expired in operating room		
23	Expired post-op		
24	Coroner's Case		
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
--		50	Hospice - home
--		51	Hospice - medical facility
--		61	Within this institution to a hospital-based Medicare approved swing bed
--		62	Another rehabilitation facility including rehabilitation distinct part units of a hospital.
--		63	Long term care hospital.
--		64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
--		71	Another institution for outpatient services
--		72	This institution for outpatient services
--		99	Discharged alive, destination unknown.
00, Blank	Error, Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

South Carolina

South Carolina			
DISP_X		DISPUB92	
Value	Description	Value	Description
1, 01	Home or self care (routine)	1	Routine
2, 02	Another short term general hospital	2	Short-term hospital
9, 09	Prior to 2001 - Admitted as an inpatient to this hospital. (Invalid for the SID, valid for the SASD and SEDD)		
3, 03	Skilled nursing facility	3	Skilled nursing facility
4, 04	Intermediate care facility	4	Intermediate care facility
5, 05	Another type of institution	5	Another type of facility
6, 06	Home under care of home health service organization	6	Home health care
7, 07	Left against medical advice	7	Against medical advice
8, 08	Home under care of Home IV Provider	8	Home IV provider
9, 09	Beginning with 2001 - Admitted as an inpatient to this hospital. (Invalid for the SID, valid for the SASD and SEDD)	9	Admitted as an inpatient to this hospital (beginning with 2001 data). Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Expired at home	40	Died at home
41	Expired in medical facility	41	Died in other medical facility
42	Expired, place unknown	42	Died, place unknown
43	Federal Hospital	43	Federal health facility (beginning in 2003 data)
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Within this institution to Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000 data)

62	Another rehabilitation facility including rehabilitation including distinct part units of a hospital	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data)
63	Long term care hospital	63	Long term care hospital (beginning in 2001 data)
64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services	71	Another institution for outpatient services (added for 2000 data)
72	This institution for outpatient services	72	This institution for outpatient services (added for 2000 data)
99	Discharged alive, destination unknown	99	Discharged alive, destination unknown (beginning in 2001 data)
0, 00, Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid

South Dakota

South Dakota			
DISP_X		DISPUB92	
Value	Description	Value	Description
1	Home or self care	1	Routine
3	Other acute hospital	2	Short-term hospital
4	SNF	3	Skilled nursing facility
5	ICF	4	Intermediate care facility
6	Another type of institution	5	Another type of facility
--			
--			
2	Home health service	6	Home health care

7	Against Medical Advice	7	Against medical advice
--		8	Home IV provider
--		9	Admitted as an inpatient to this hospital.
8	Expired	20	Died in the hospital
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
--		50	Hospice - home
--		51	Hospice - medical facility
--		61	Within this institution to a hospital-based Medicare approved swing bed.
--		62	Another rehabilitation facility including rehabilitation distinct part units of a hospital.
--		63	Long term care hospital
--		64	Nursing facility certified under Medicaid but not certified under Medicare.
--		71	Another institution for outpatient services
--		72	This institution for outpatient services
--		99	Discharged alive, destination unknown
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded from DISPUB92.			

Tennessee

Tennessee			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care (routine)	1	Routine

02	Another short term general hospital	2	Short-term hospital
09	Admitted as an inpatient to this hospital. (Discontinued in 2001).		
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
10	Discharged/transferred to a mental health center		
06	Home under care of organized home health service organization	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Home under care of a Home IV Provider	8	Home IV provider
09	Admitted to this hospital (valid in outpatient databases only). This recode began in data year 2001.	9	Admitted as an inpatient to this hospital (beginning in 2001). Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Died at home (beginning in 2000)	40	Died at home
41	Died in other medical facility (Beginning in 2000)	41	Died in other medical facility
42	Died, place unknown (Beginning in 2000)	42	Died, place unknown
43	Federal hospital	43	Federal health facility
50	Hospice - home (Beginning in 2000)	50	Hospice - home
51	Hospice - medical facility (Beginning in 2000)	51	Hospice - medical facility
61	Hospital-based swing bed within this institution	61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000 data)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data).
63	Long-term care hospital	63	Long-term care hospital (beginning in 2001 data).

64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data).
71	Another institution for outpatient services	71	Another institution for outpatient services (added for 2000 data)
72	This institution for outpatient services	72	This institution for outpatient services (added for 2000 data)
--		99	Discharged alive, destination unknown (beginning in 2001 data).
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Texas

Texas			
DISP_X		DISPUB92	
Value	Description	Value	Description
1	Home or Self-care (routine discharge)	1	Routine
2	Short-term general hospital	2	Short-term hospital
3	Skilled nursing facility	3	Skilled nursing facility
4	Intermediate care facility	4	Intermediate care facility
5	Other inpatient care facility	5	Another type of facility
6	Home health service	6	Home health care
7	Against medical advice	7	Against medical advice
8	Home IV provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital, beginning in 2001 data. Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Expired at home	40	Died at home

41	Expired in other medical facility	41	Died in other medical facility
42	Expired, place unknown	42	Died, place unknown
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed
--		62	Another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data.
--		63	Long term care hospital, beginning in 2001 data.
64	Medicaid-certified nursing facility (in effect October 1, 2002)	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services	71	Another institution for outpatient services
72	This institution for outpatient services	72	This institution for outpatient services
--		99	Discharged alive, destination unknown, beginning in 2001 data.
Blank	Missing	.	Missing
" * " or any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Utah

Utah			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Discharge to home or self care (routine)	1	Routine
02	Another short term hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility

05	Another type of institution	5	Another type of facility
06	Home under care of organized home health service organization	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Discharged to home under care of a home IV provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital (beginning in 2001). Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Expired at home	40	Died at home
41	Expired in a medical facility	41	Died in other medical facility
42	Expired - place unknown	42	Died, place unknown
43	Federal Facility	43	Federal Health Facility
50	Hospice - home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Within institution to hospital-based medicare swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (added in 2000)
62	Another rehab facility including distinct part units in hospital	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data).
63	A long term care hospital	63	Discharge, transferred to a long term care hospital swing bed (beginning in 2001 data).
64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002).
71	Another institution for outpatient (as per plan of care)	71	Another institution for outpatient services (beginning in 2000)

72	To this institution for outpatient services (as per plan of care)	72	This institution for outpatient services (beginning in 2000)
--		99	Discharged alive, destination unknown (beginning in 2001 data).
09, 00, Blank	Unknown, Missing	.	Missing
Any other values		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Virginia

Virginia			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care	1	Routine
02	Another hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
06	Home under care of home health service organization	6	Home health care
07	Against medical advice	7	Against medical advice
08	Home under IV provider	8	Home IV provider
--		9	Admitted as an inpatient to this hospital, beginning in 2001 data. Valid only on outpatient data.
20	Expired	20	Died in the hospital
--		40	Died at home
--		41	Died in other medical facility
43	Federal Hospital	43	Federal health facility
--		42	Died, place unknown
50	Hospice - home (beginning in 2002)	50	Hospice - home
51	Hospice - medical facility (beginning in 2002)	51	Hospice - medical facility

61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2002)	61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000 data)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2002)	62	Discharge, transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital, beginning in 2001 data.
63	Long term care hospital (beginning in 2002)	63	Discharge, transferred to a long term care hospital swing bed, beginning in 2001 data.
--		64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services (beginning in 2002)	71	Another institution for outpatient services (added for 2000 data)
72	This institution for outpatient services (beginning in 2002)	72	This institution for outpatient services (added for 2000 data)
--		99	Discharge alive, destination unknown, beginning in 2001 data.
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Vermont

Vermont			
DISP_X		DISPUB92	
Value	Description	Value	Description
1, 01	Discharged to home or self care (routine charge)	1	Routine
2, 02	Discharged/transferred to another short term general hospital	2	Short-term hospital
3, 03	Discharged/transferred to skilled nursing facility	3	Skilled nursing facility

4, 04	Discharged/transferred to intermediate care facility	4	Intermediate care facility
5, 05	Discharged/transferred to another facility	5	Another type of facility
6, 06	Discharged/transferred to home under home health service organization	6	Home health care
7, 07	Left against medical advice or discontinued care	7	Against medical advice
8, 08	Discharged/transferred to home under care of Home IV provider	8	Home IV provider
9, 09 (Outpatient only)	Admitted as an inpatient to this hospital	9	Admitted as an inpatient to this hospital (beginning in 2001). Valid only on outpatient data.
20	Expired	20	Died in the hospital
--		40	Died at home
41	Hospice patient expired in a medical facility such as a hospital, SNF, ICF, or freestanding hospice	41	Died in other medical facility
--		42	Died, place unknown
43	Discharged or transferred to a Federal Hospital	43	Federal health facility
50	Hospice - Home	50	Hospice - home
51	Hospice - medical facility	51	Hospice - medical facility
61	Discharged/transferred within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (added for 2000).
62	Another rehabilitation facility including rehabilitation	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001).

63	Long term care hospital (beginning in 2001 data)	63	Long term care hospital (beginning in 2001)
64	Discharged/transferred to a nursing facility certified under Medicaid but not Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Discharged/transferred to another institution for outpatient services	71	Another institution for outpatient services (added for 2000)
72	Discharged/transferred to this institution for outpatient services	72	This institution for outpatient services (added for 2000)
--		99	Discharged alive, destination unknown (beginning in 2001).
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Washington

Washington			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care (routine discharge)	1	Routine
02	Short term general hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of institution	5	Another type of facility
06	Home under care of home health service organization	6	Home health care
07	Left against medical advice	7	Against medical advice
08	Home under care of a home IV provider	8	Home IV provider

--		9	Admitted as an inpatient to this hospital (beginning in 2001). Valid only on outpatient data.
20	Expired	20	Died in the hospital
--		40	Died at home
--		41	Died in other medical facility
--		42	Died, place unknown
50	Hospice - Home	50	Hospice - home
51	Hospice - Medical Facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001).
63	Long term care hospital	63	Long term care hospital (beginning in 2001).
64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
--		71	Another institution for outpatient services (beginning in 2000)
72	This institution for outpatient services	72	This institution for outpatient services (beginning in 2000)
--		99	Discharged alive, destination unknown (beginning in 2001).
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

West Virginia

West Virginia			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home/Self-Care/Routine	1	Routine

02	Sort Term Hospital	2	Short-term hospital
03	Skilled Nursing Facility	3	Skilled nursing facility
04	Intermediate Care Facility	4	Intermediate care facility
05	Other facility	5	Another type of facility
06	Home Health Service	6	Home health care
07	Left Against Medical Advice	7	Against medical advice
08	Home IV Service	8	Home IV provider
--		9	Admitted as an inpatient to this hospital (beginning in 2001 data). Valid only on outpatient data.
20	Expired	20	Died in the hospital
40	Expired at home (hospice care)	40	Died at home
41	Expired in medical facility (hospice care)	41	Died in other medical facility
42	Expired - place unknown (hospice care)	42	Died, place unknown
43	Federal Hospital	43	Federal health facility
50	Hospice - Home	50	Hospice - home
51	Hospice - Medical Facility	51	Hospice - medical facility
61	Within this institution to a hospital-based Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000)
62	Another rehabilitation facility including rehabilitation distinct part units of a hospital	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001 data).
63	Long term care hospital	63	Long term care hospital, beginning in 2001 data.
64	Nursing facility certified under Medicaid but not certified under Medicare	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Another institution for outpatient services	71	Another institution for outpatient services
72	This institution for outpatient services	72	This institution for outpatient services (beginning in 2000)

--		99	Discharged alive, destination unknown (beginning in 2001 data).
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

Wisconsin

Wisconsin			
DISP_X		DISPUB92	
Value	Description	Value	Description
01	Home or self care	1	Routine
02	Short-term general hospital	2	Short-term hospital
03	Skilled nursing facility	3	Skilled nursing facility
04	Intermediate care facility	4	Intermediate care facility
05	Another type of facility	5	Another type of facility
06	Home health care	6	Home health care
07	Against medical advice	7	Against medical advice
08	Home intravenous provider	8	Home IV provider
		9	Admitted as an inpatient to this hospital (beginning in 2001). Valid only on outpatient data.
20	Died	20	Died in the hospital
40	Expired at home; use only on Medicare and CHAMPUS claims for hospice care	40	Died at home
41	Expired in a medical facility; use only on Medicare and CHAMPUS claims for hospice care	41	Died in other medical facility
42	Expired – place unknown; use only on Medicare and CHAMPUS claims for hospice care	42	Died, place unknown
43	Federal Hospital	43	Federal health facility
50	Hospice - Home	50	Hospice - home
51	Hospice - Medical facility	51	Hospice - medical facility

61	Medicare approved swing bed	61	Within this institution to a hospital-based Medicare approved swing bed (beginning in 2000).
62	Another rehab facility	62	Another rehabilitation facility including rehabilitation distinct part units of a hospital (beginning in 2001).
63	Long-term care facility	63	Long term care hospital swing bed (beginning in 2001).
64	Medicaid approved nursing facility	64	Nursing facility certified under Medicaid but not certified under Medicare (beginning in 2002 data)
71	Other institution for outpatient services	71	Another institution for outpatient services (beginning in 2000).
72	This institution for outpatient services	72	This institution for outpatient services (beginning in 2000).
		99	Discharged alive, destination unknown (beginning in 2001).
Blank	Missing	.	Missing
Any values not documented by the data source		.A	Invalid
DISPUniform is coded directly from DISPUB92.			

DISPUniform - Disposition of patient, uniform coding

General Notes

DISPUniform indicates the disposition of the patient at discharge (routine, transfer to another hospital, died, etc.). To ensure uniformity of coding across data sources, DISPUniform combines detailed categories in the more general groups. For example,

- Transfers to facilities other than short-term hospitals (skilled nursing facilities, intermediate care facilities, and other type of facilities) are coded as DISPUniform = 5.
- Transfers to Home Health Care (including IV providers and Hospice home care) are coded as DISPUniform = 6.

DISPUB92 has more detailed categories for transfers and Home Health Care and distinguishes patients that died in the hospital from those that died outside of the hospital. The following table lists how the values of DISPUB92 map to the values of DISPUniform:

Coding of DISPUB92 into DISPUniform			
DISPUB92		DISPUniform	
Value	Description	Value	Description
1	Routine	1	Routine
71	Another institution for outpatient services. <i>Value was added beginning in the 2000 HCUP data.</i>		
72	This institution for outpatient services. <i>Value was added beginning in the 2000 HCUP data.</i>		
2	Short-term Hospital	2	Transfer to Short-term Hospital
9	Admitted as an inpatient to this hospital. Valid only on outpatient data. <i>Value was added beginning in the 2001 HCUP data.</i>		
43	Federal health facility		

3	Skilled Nursing Facility (SNF)	5	Transfer Other: Includes Skilled Nursing Facility (SNF), Intermediate Care Facility (ICF), Another Type of Facility
4	Intermediate Care Facility (ICF)		
5	Another Type of Facility		
51	Hospice - Medical Facility		
61	Within this institution to a hospital-based Medicare approved swing bed. <i>Value was added beginning in the 2000 HCUP data.</i>		
62	Discharge, transferred to another rehabilitation facility including rehabilitation distinct part units of a hospital. <i>Value was added beginning in 2001 HCUP data.</i>		
63	Discharge, transferred to a long term care hospital swing bed. <i>Value was added beginning in the 2001 HCUP data.</i>	6	Home Health Care (HHC)
64	Discharge, transferred to a nursing facility certified by Medicaid, but not certified by Medicare. <i>Value was added beginning in the 2002 HCUP data.</i>		
6	Home Health Care (HHC)		
8	Home IV Provider		
50	Hospice-Home	7	Against Medical Advice (AMA)
7	Against Medical Advice (AMA)		
20	Died in Hospital	20	Died

40	Died at Home. <i>Prior to the 2001 data, value 40 "Died at Home" was mapped to missing (.).</i>	99	Discharge alive, destination unknown. <i>Value was added beginning in the 2001 data.</i>
41	Died in Medical Facility. <i>Prior to 2001 data, value 41 "Died in Medical Facility" was mapped to missing (.).</i>		
42	Died, place unknown. <i>Prior to the 2001 data, value 42 "Died, place unknown" was mapped to missing (.).</i>		
99	Discharged alive, destination unknown. <i>Value was added beginning in the 2001 data.</i>		
.	Missing	.	Missing
.A	Invalid	.A	Invalid

DISP_X retains the disposition of patient as provided by the data source.

Uniform Values			
Variable	Description	Value	Value Description
DISPUniform	Disposition of patient, uniform coding	1	Routine
		2	Transfer to short-term hospital
		5	Transfer other: includes Skilled Nursing Facility (SNF), Intermediate Care Facility (ICF), and another type of facility
		6	Home Health Care (HHC)
		7	Against medical advice (AMA)
		20	Died in hospital
		99	Discharged alive, destination unknown, beginning in 2001
		.	Missing
		.A	Invalid

State Specific Notes

California

California			
DISP_X		DISPUniform	
Value	Description	Value	Description
01	Routine (Home)	1	Routine
09	Prison/Jail		
02	Acute care (within this hospital)	2	Transfer to short-term hospital
05	Acute care (another hospital)		
03	Other care (within this hospital)	5	Transfer other: includes skilled nursing facility, intermediate care facility, and other types of facility
04	Skilled nursing/Intermediate care (within this hospital)		
06	Other care (another hospital)		
07	Skilled nursing/Intermediate care (another hospital)		
08	Residential care facility		
12	Home Health Services	6	Home health care
10	Against medical advice	7	Against medical advice
11	Died	20	Died in hospital
13	Other (beginning in 2001)	99	Discharged alive, destination unknown (beginning in 2001 data)
00, Blank	Missing	.	Missing (includes died outside of hospital)
Any values not documented by the data source		.A	Invalid
There is not enough detail in the coding of DISP_X to code the HCUP variable DISPUB92.			
Beginning in 2001, the DISP_X value of "13" (Other) will be mapped to the HCUP DISPUniform value of "99" (Discharged alive, destination unknown). This change more accurately reflects the documentation provided by California as "Other" does not pertain to "Another Hospital". Prior to 2001, DISP_X value "13" was mapped to the DISPUniform value "5" (Transfer other).			

Maryland

Maryland			
DISP_X		DISPUniform	
Value	Description	Value	Description
01	Home or self-care	1	Routine
05	Acute care general hospital	2	Transfer to short-term hospital
06	Other health care facility	5	Transfer other: includes skilled nursing facility, intermediate care facility, and other types of facility
10	Rehabilitation facility		
11	Rehabilitation unit of other hospital		
12	On-site distinct rehabilitation unit		
13	Transfer to nursing facility		
14	On-site psychiatric unit (inpatient only)		
15	On-site sub-acute unit (inpatient only)		
16	Other sub-acute care facility (inpatient only)		
03	Home health care	6	Home health care
08	Left against medical advice	7	Against medical advice
07	Died	20	Died
--		99	Discharged alive, destination unknown, beginning in 2001
09, 99, Blank	Unknown	.	Missing (includes died outside of hospital)
02	Do not use	.A	Invalid
04	Do not use		
Any values not documented by the data source			
There is not enough detail in the coding of DISP_X to code the HCUP variable DISPUB92.			

DQTR - Discharge quarter

General Notes

Discharge quarter (DQTR) is derived from either the month of the discharge date or the supplied discharge quarter. If both of those fields are invalid or missing, DQTR is set to zero. For these cases, a temporary discharge quarter = 3 was used for the DRG grouper and ICD-9-CM verification routines because these algorithms require a valid discharge quarter.

For HCUP inpatient data only, a temporary discharge quarter = 3 was used for the DRG grouper and ICD-9-CM verification routines when the discharge quarter was missing or invalid because these algorithms require a valid discharge quarter.

Uniform Values

Variable	Description	Value	Value Description
DQTR	Discharge quarter	1	First quarter (Jan - Mar)
		2	Second quarter (Apr - Jun)
		3	Third quarter (Jul - Sep)
		4	Fourth quarter (Oct - Dec)
		0	Missing or invalid

State Specific Notes

Florida

Beginning in 1997, Florida did not supply discharge date. DQTR was assigned from the discharge quarter provided by Florida.

DRG - DRG in use on discharge date

General Notes

The Diagnosis Related Group (DRG) appropriate for the date of discharge is assigned by the HCFA DRG Grouper algorithm during HCUP processing.

Diagnosis and Procedures Used for DRG Assignment

Beginning in the 1996 data, the DRG grouper can handle a maximum of 50 diagnosis and 50 procedure codes. Only diagnoses and procedures that are valid on the date of discharge are used by the grouper for DRG assignment.

In the 1988-1995 data, the DRG grouper cannot handle more than 15 diagnoses and 15 procedures. Therefore, the following rules were used when more than 15 diagnoses or 15 procedures were available:

- the principal diagnosis/procedure (regardless of validity) is retained in DX1/PR1. No secondaries are shifted into the principal position.
- the first 14 valid (by HCUP standards) additional diagnosis or procedure codes are passed to the HCFA DRG grouper.

Different Definitions of Diagnosis and Procedure Validity

HCUP validation of diagnosis and procedure codes allows a window of time around the official ICD-9-CM coding changes (usually October 1), for anticipation of or lags in response to official ICD-9-CM coding changes. During the 1988-1997 HCUP data processing, a six-month window (three months before and three months after) was allowed. Beginning in the 1998 data, a year window (six months before and six months after) was allowed.

The DRG Grouper rules differ in two ways:

- diagnosis and procedure codes must be valid on the date of discharge to be used for assigning the DRG; and
- some valid diagnoses (E-codes) are ruled by the DRG Grouper to be invalid if entered as a principal diagnosis.

This inconsistency between the definition of a valid diagnosis or procedure is obvious when a discharge has a valid principal diagnosis under HCUP standards, but the assigned DRG is 470 "Ungroupable." Consider a discharge with DX1="V300" on October 1, 1989. The diagnosis code "V300" is considered valid by HCUP standards because until September 30, 1989 "V300" is a valid ICD-9-CM code. The DRG Grouper

does not recognize the "V300" code on October 1, 1989 and therefore groups the record to "Ungroupable," DRG=470 and MDC=0.

Changes in DRG Grouper Logic

Until the eighth DRG version (before October 1, 1990), the first step in the determination of the DRG had been the assignment of the appropriate MDC based on the principal diagnosis. Beginning in October 1990, there are two types of exceptions:

- The principal diagnosis is not the initial data element in DRG assignment when the initial step in DRG assignment is based on a procedure. If a patient has a liver transplant (DRG 480), a bone marrow transplant (DRG 481) or tracheostomy (DRG 482 and 483), then the patient is assigned to these DRGs independent of the MDC assigned from the principal diagnosis.
- Assignment to MDC 24 (multiple trauma) and MDC 25 (patients with HIV infection) is based on BOTH principal diagnosis and procedure.

The Need for a Valid Discharge Date

The DRG grouper needs a valid discharge date because DRG versions change at specific points in time. If the discharge date was invalid or not available from a data source, a temporary discharge date (for use only by the DRG grouper) was created based on the discharge quarter and year according to the following rules:

- Discharge year (YEAR) is always nonmissing.
- Discharge quarter (DQTR) ranges from zero to 4, where zero indicates that the quarter was missing or invalid.

Discharge Quarter (DQTR)	Temporary Date (MM/DD/YY) passed to DRG Grouper
1	01/01/YY
2	04/01/YY
3	07/01/YY
4	10/01/YY
0	07/01/YY

Labels

Labels for the DRGs are provided as an ASCII file in HCUP Tools: Labels and Formats.

Uniform Values			
Variable	Description	Value	Value Description
DRG	DRG in use on discharge date	nnn	DRG value

State Specific Notes
<i>None</i>

DRG18 - DRG, Version 18

General Notes

The Diagnosis Related Group, Version 18 (DRG18) is assigned by the HCFA DRG Grouper algorithm during HCUP processing. DRG18 is available on the HCUP databases beginning in 1998.

Diagnosis and Procedures Used for DRG Assignment

Beginning in the 1996 data, the DRG grouper can handle a maximum of 50 diagnosis and 50 procedure codes. Only diagnoses and procedure that are valid on the date of discharge are used by the grouper for DRG assignment.

In the 1988-1995 data, the DRG grouper cannot handle more than 15 diagnoses and 15 procedures. Therefore, the following rules were used when more than 15 diagnoses or 15 procedures were available:

- the principal diagnosis/procedure (regardless of validity) is retained in DX1/PR1. No secondaries are shifted into the principal position.
- the first 14 valid (by HCUP standards) additional diagnosis or procedure codes are passed to the HCFA DRG grouper and 3M Mapper software.

Logically Mapping ICD-9-CM Codes for DRG Version 18

The diagnoses or procedures selected by the above rules are first passed to the 3M Mapper software so that each ICD-9-CM code can be logically translated into codes in effect during fiscal year 2000, the period associated with DRG Version 18. The translated codes are then passed to the DRG Version 18 HCFA Grouper software.

Different Definitions of Diagnosis and Procedure Validity

HCUP validation of diagnosis and procedure codes allows a window of time around the official ICD-9-CM coding changes (usually October 1), for anticipation of or lags in response to official ICD-9-CM coding changes. During the 1988-1997 HCUP data processing, a six-month window (three months before and three months after) was allowed. Beginning in the 1998 data, a year window (six months before and six months after) was allowed.

The DRG Grouper rules differ in two ways:

- diagnosis and procedure codes must be valid on the date of discharge to be used for assigning the DRG; and
- some valid diagnoses (E-codes) are ruled by the DRG Grouper to be invalid if entered as a principal diagnosis.

This inconsistency between the definition of a valid diagnosis or procedure is obvious when a discharge has a valid principal diagnosis under HCUP standards, but the assigned DRG is 470 "Ungroupable." Consider a discharge with DX1="V300" on October 1, 1989. The diagnosis code "V300" is considered valid by HCUP standards because until September 30, 1989 "V300" is a valid ICD-9-CM code. The DRG Grouper does not recognize the "V300" code on October 1, 1989 and therefore groups the record to "Ungroupable," DRG=470 and MDC=0.

Changes in DRG Grouper Logic

Until the eighth version (before October 1, 1990), the first step in the determination of the DRG had been the assignment of the appropriate MDC based on the principal diagnosis. Beginning in October 1990, there are two types of exceptions:

- The principal diagnosis is not the initial data element in DRG assignment when the initial step in DRG assignment is based on a procedure. If a patient has a liver transplant (DRG 480), a bone marrow transplant (DRG 481) or tracheostomy (DRG 482 and 483), then the patient is assigned to these DRGs independent of the MDC assigned from the principal diagnosis.
- Assignment to MDC 24 (multiple trauma) and MDC 25 (patients with HIV infection) is based on BOTH principal diagnosis and procedure.

Labels

Labels for the DRGs are provided as an ASCII file in HCUP Tools: Labels and Formats.

Formats

A format to label DRG18 is documented in HCUP Tools: Variable Labels and Formats.

Uniform Values			
Variable	Description	Value	Value Description
DRG18	DRG, Version 18	nnn	DRG value

State Specific Notes

None

DRGVER - DRG grouper version used on discharge date

General Notes

The DRG Grouper Version (DRGVER) is assigned by the HCFA DRG grouper during HCUP processing. For discharges occurring before October 1, 1991, DRGVER contains the DRG "revision" number. For discharges after that date, DRGVER contains the DRG "version" number (which is one value higher than the revision number). This coding scheme is consistent with the labeling of the DRG reference material, including the DRG coding books. Thus, on September 30, 1991 the DRGVER = 7; but on October 1, 1991 the DRGVER = 9.

Uniform Values

Variable	Description	Value	Value Description
DRGVER	DRG grouper version used on discharge date	4	4th revision, eff. Oct 1, 1987
		5	5th revision, eff. Oct 1, 1988
		6	6th revision, eff. Oct 1, 1989
		7	7th revision, eff. Oct 1, 1990
		9	Version 9, eff. Oct 1, 1991
		10	Version 10, eff. Oct 1, 1992
		11	Version 11, eff. Oct 1, 1993
		12	Version 12, eff. Oct 1, 1994
		13	Version 13, eff. Oct 1, 1995
		14	Version 14, eff. Oct 1, 1996
		15	Version 15, eff. Oct 1, 1997
		16	Version 16, eff. Oct 1, 1998
		17	Version 17, eff. Oct 1, 1999
		18	Version 18, eff. Oct 1, 2000
		19	Version 19, eff. Oct 1, 2001
		20	Version 20, eff. Oct 1, 2002

State Specific Notes

None

DSHOSPID - Data source hospital number

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 AHA. For example, the data source treats two separate facilities as two hospitals, while the AHA Annual Survey treats the two facilities as a single hospital, or vice versa. For consistency across states, HCUP defines hospitals in accordance with the American Hospital Association Annual Survey of Hospitals. 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 of Hospitals. For detailed information about this linking process, see the special report on HCUP Hospital Identifiers.

DSHOSPID is missing if the data source that contributed discharge data to the KID prohibits the release of hospital identifiers.

Uniform Values

Variable	Description	Value	Value Description
DSHOSPID	Data source hospital number	13(a)	Data source hospital number

State Specific Notes

California

Prior to 1998, the variable DSHOSPID is length 9 with the first digit indicating the level of care, the next two digits for state "06", and then a 6-digit hospital identifier that included the county code.

Beginning in 1998, DSHOSPID is length 6 and only contains the unique hospital identifier. The level of care indicator is retained in the HCUP variable LEVELCARE.

Regardless of whether the information on the level of care is stored in the first digit of DSHOSPID or variable LEVELCARE, the values are defined as follows:

0=	Type of unit unknown (beginning in 1996)
1=	General acute care
2=	Not a valid code
3=	Skilled nursing and intermediate care (long term care)
4=	Psychiatric care
5=	Alcohol/chemical dependency recovery treatment
6=	Acute physical medicine rehabilitation care.

The reliability of this indicator for the type of care depends on how it was assigned.

Beginning in 1995. Hospitals were required to assign type of care codes to individual records for certain discharges. These discharges included:

general acute care (value = 1),

skilled nursing and intermediate care (value = 3), and

rehabilitation care (value = 6).

For discharges from facilities licensed as psychiatric care (value = 4) or alcohol/chemical dependency recovery treatment (value = 5), California continued to assign the type of care code to all discharges from the facility.

Maryland

In 2000, some values of DSHOSPID have leading blanks. These DSHOSPIDs need to be left justified to be consistent with discharges from the same DSHOSPID in 2000 and other years.

Oregon

Beginning with 1995 data, Oregon changed the format of the state-specific hospital identification numbers stored in DSHOSPID. The new format is incompatible with the format used in previous years.

Washington

Included with the records of general acute care stays from community hospitals are records from alcohol dependency units, bone marrow transplant units, extended care units, psychiatric units, rehabilitation units, group health units, and swing bed units. Records for these different types of care can be identified by the fourth digit of the supplied hospital identifier (DSHOSPID) on each patient record:

None	General acute care
A=	Alcohol Dependency Unit
B=	Bone Marrow Transplant Unit
E=	Extended Care Unit
H=	Tacoma General/Group Health Combined
I=	Group Health only at Tacoma Hospital
P=	Psychiatric Unit
R=	Rehabilitation Unit
S=	Swing Bed Unit

Washington assigns this value to DSHOSPID based upon the type of unit discharging the patient.

DXn - Diagnosis

General Notes

In the HCUP inpatient databases, the first listed diagnosis (DX1) is the principal diagnosis. In the HCUP outpatient databases, the first listed diagnosis (DX1) may not be the principal diagnosis; it may just be the first listed diagnosis on the record.

The original value of the first listed diagnosis (DX1), whether blank or coded, is retained in the first position of the diagnosis vector. Starting at the first secondary diagnosis (DX2), the diagnoses are shifted during HCUP processing to eliminate blank secondary diagnoses. For example, if DX2 and DX4 contain nonmissing diagnoses and DX3 is blank, then the value of DX4 is shifted into DX3. Secondary diagnoses are never shifted into the first listed position (DX1).

Prior to 2003, E-codes are included in the diagnosis array (DXn). Beginning in 2003, any separately reported E-codes and any E-codes encountered in the diagnosis array are placed in a separate array specific to E codes (ECODEn).

Diagnoses are compared to a list of ICD-9-CM codes valid for the discharge date. Anticipation of or lags in response to official ICD-9-CM coding changes are permitted for discharges occurring within a window of time around the official ICD-9-CM coding changes (usually October 1). In the data prior to 1998, a six months window (three months before and three months after) is allowed. Beginning in the 1998 data, a year window (six months before and six months after) is allowed. For example, the code for Single Liveborn changed from "V300 " to "V3000" as of October 1, 1989. Under HCUP validation procedures, "V300 " is classified as valid for discharges on December 31, 1989, and "V3000" is classified as valid for discharges on July 1, 1989. If the diagnosis is not left justified, contains intermittent blanks, or is zero filled, then the diagnosis will be invalid.

Diagnoses are compared to the sex of the patient (EDX03 beginning in the 1998 data and ED1nn prior to 1998) and the patient's age (EAGE04 and EAGE05 beginning in the 1998 data and ED3nn and ED4nn prior to 1998) for checking the internal consistency of the record.

How invalid and inconsistent codes are handled varies by data year.

Beginning in the 1998 data, invalid and inconsistent diagnoses are masked directly. Validity flags are not included on the HCUP record. Clinical Classifications Software (CCS) data elements are coded with respect to the diagnosis.

	Invalid Diagnosis	Inconsistent Code
The value of DXn	"invl"	"incn"
DXCCSn	Set to invalid (.A).	Set to inconsistent (.C)

Prior to 1998 data, invalid and inconsistent diagnoses are retained on the record. Validity flags (DXVn) indicate invalid, inconsistent diagnosis codes. Clinical Classifications Software (CCS) data elements use the former name (DCCHPRn). The CCS was formerly known as the Clinical Classifications for Health Policy Research (CCHPR). The diagnosis related data elements are coded as follows:

	Invalid Diagnosis	Inconsistent Code
The value of DXn	Unchanged	Unchanged
DXVn	Set to 1	Set to inconsistent (.C)
DCCHPRn	Set to invalid (.A).	Retained (values 1-260)

The validity flags (DXVn) need to be used in connection with any analysis of the diagnoses (DXn).

Uniform Values			
Variable	Description	Value	Value Description
DXn	Diagnosis	annnn	Diagnosis code
		Blank	Missing
		invl	Invalid: beginning with 1998 data, EDX02
		incn	Inconsistent: beginning with 1998 data, EAGE04, EAGE05, EDX03

State Specific Notes

Arizona

Beginning with 1995 discharges, Arizona reports two "cause of injury" E-codes in separate variables. During processing of the 1995 to 2002 data, these E-codes are placed after the last non-missing diagnosis code if they are not already recorded as a secondary diagnosis. Beginning in 2003, the two separately reported E-codes, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

Arizona reports some diagnosis codes with an explicit decimal point. The decimal point was removed during HCUP processing.

California

HIV Test Result Diagnoses

California law prohibits the release of HIV test results in patient-identifiable form to any outside party without the patient's consent. Therefore, records that include certain ICD-9-CM codes that indicate HIV test results were not included in the data supplied for HCUP. California eliminated all occurrences of these codes from the diagnosis fields and packed the diagnosis vectors to cover gaps from such removals.

The following ICD-9-CM codes were affected:

From January 1988 to October 1, 1994, diagnosis codes of 044.x or 795.8 were removed by the data source prior to submitting data to HCUP.

Beginning October 1, 1994, diagnosis codes of 795.71 or V08 were removed by the data source prior to submitting data to HCUP. These ICD-9-CM codes replaced the earlier codes.

HIV-related diagnoses 042.x and 043.x were unaffected.

The number of such diagnoses eliminated from the principal diagnosis position will be smaller than it otherwise might have been due to a practice in California that actively discourages the reporting of codes for HIV test results (044.x, 795.8, 795.71, and V08) as a principal diagnosis. During data editing, California flags discharges reporting one of these codes in the principal diagnosis position and then calls the submitting hospital to ask if the principal diagnosis should be changed. Hospitals have the option of deleting the code, changing it, or leaving it in place.

Shriner's Hospitals

Shriner's hospitals do not report diagnoses, procedures or total charges.

Psychiatric Diagnoses

Prior to 1995, some hospitals reported psychiatric diagnoses in DSM III which California then converted into ICD-9-CM diagnosis codes. The ICD-9-CM diagnosis codes are included in the HCUP database.

From 1995-1998, some psychiatric hospitals began submitting data for primary diagnosis according to DSM IV criteria. DSM IV codes are indistinguishable in appearance from ICD-9-CM codes but have substantially different meanings. Because of similarities in the coding structure, the source was unable to convert the DSM IV

codes to ICD-9-CM codes. DSM IV codes may occur in the HCUP data. Psychiatric hospitals may be included in the California data; no documentation was available on the use of DSM IV codes in psychiatric units of acute care hospitals.

Beginning in 1999, DSM psychiatric codes are not accepted by OSHPD and are not present in the HCUP databases.

E-Codes

Beginning with 1990 discharges, the source reports five "cause of injury" E-codes as separate variables. During processing of the 1990 to 2002 data, E-codes were placed after the last non-missing diagnosis code. Beginning in 2003, the two separately reported E-codes, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

California does not require the reporting of E-codes in the range E870-E879 (misadventures and abnormal reactions).

Hawaii

Hawaii reports one "cause of injury" E code as a separate data element. Prior to 2003, During HCUP processing, this E code was placed after the last non-missing diagnosis code during HCUP processing. Beginning with 2003 HCUP processing, this E code is placed at the beginning of the separate HCUP E-code array (ECODEn).

Iowa

Beginning in data year 2001, the Iowa Hospital Association prohibits the release of two types of discharges:

- HIV Infections (defined by MDC of 25) and
- Behavioral Health including chemical dependency care or psychiatric care (defined by a service code of BHV).

These discharges were not included in the source file provided to HCUP and are therefore not included in the HCUP files.

Beginning in 1994, Iowa reports one "cause of injury" E-code. Beginning in 1998, Iowa added one "place of injury" E-code. During processing of the 1994 to 2002 data, these separately reported E-code variables are placed at the end of the diagnosis vector; since the vector is packed during processing to remove blanks, the position of the E-code for a specific discharge depends on the number of diagnoses reported. Beginning in 2003, the two separately reported E-codes, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

Kentucky

Prior to 2002, Kentucky reports one "cause of injury" E-codes as a separate variable. Beginning in June 2002, Kentucky reports two separate E-code fields. Prior to 2003, during HCUP processing, these separately reported E-codes were placed after the last non-missing secondary diagnosis. Beginning in 2003, the two separately reported E-codes, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

Kentucky supplied diagnosis codes in a field length of 6. Only the first five characters contained in the left-justified source field were used to assign the HCUP diagnosis codes.

Maryland

Maryland reports one "cause of injury" E-code as a separate variable. Prior to 2003, during HCUP processing, this separately reported E-code was placed after the last non-missing secondary diagnosis. Beginning in 2003, the separately reported E-code, and any E-codes encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

Maryland supplied diagnosis codes in a field of length 7. Only the first five characters contained in the left-justified source field were used to assign the HCUP diagnosis codes.

The last secondary diagnosis field on the source data was 9-filled instead of blank when no diagnosis was coded. During HCUP processing, the 9-filled diagnosis was set to blank.

Massachusetts

Beginning in 1993, Massachusetts reported one "cause of injury" E-code. Prior to 2003, during HCUP processing, the separately reported E-code was placed after the last non-missing secondary diagnosis. E-codes can appear in other secondary diagnosis codes. Beginning in 2003, the separately reported E-code, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

Minnesota

Minnesota reports one "cause of injury" E-codes in a separate variable. Prior to 2003, during HCUP processing, this E-code was placed after the last non-missing diagnosis code. Beginning in 2003, the separately reported E-codes, and any E-code encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

Nebraska

The Nebraska Hospital Association prohibits the release of discharge records for patients with HIV diagnoses. These discharges were not included in the source file provided to HCUP and are therefore not included in the HCUP files.

Nebraska reports one "cause of injury" E-code in a separate variable. Prior to 2003, during HCUP processing, this E-code was placed after the last non-missing diagnosis code. Beginning in 2003, the separately reported E-code, and any E-code encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

New Hampshire

New Hampshire reports one "cause of injury" E-code as a separate variable. The separately reported E-code and any E-codes encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

New Jersey

Beginning with 1993 discharges, New Jersey reports one "cause of injury" E-codes as a separate variable. Prior to 2003, during HCUP processing, this E-code was placed after the last non-missing diagnosis code. Beginning in 2003, the separately reported E-code, and any E-codes encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

Before 1994, the diagnosis codes provided by the state were right-padded with zeros (e.g., the diagnosis code '436' was supplied as '43600'). For the HCUP database the following algorithm was used to validate the diagnosis codes:

Check the five-digit code for validity (using a six-month window for coding changes, 3 months before and 3 months after October of each year when ICD-9-CM coding changes occur).

1. If the five-digit code is valid, set DXn to the five-digit code and set DXVn = 0.
2. If the five-digit code is invalid and the fifth digit is a zero, create a four-digit code by deleting the trailing zero and re-check for validity (using six-month window for coding changes). If the four-digit code is valid, set DXn to the four-digit code and set DXVn = 0.
3. If the four-digit code is invalid and the fourth digit is a zero, create a three-digit code by deleting the trailing zero and re-check for validity (using six-month window for coding changes). If the three-digit code is valid, set DXn to the three-digit code and set DXVn = 0.
4. If the five-, four- and three-digit codes are invalid, save the original five-digit code and set the validity flag to indicate an invalid code (DXVn = 1).

New York

Beginning in 1993, New York reports "cause of injury" and "place of injury" E-codes. Prior to 2003, during HCUP processing, these separately reported E-codes were placed after the last nonmissing secondary diagnosis. When a "cause of injury" E-code in the range of E850.0-E869.9 or E880.0-E928.9 was reported, then a "place of injury" E-code was also reported. If the hospital stay involved the possibility of classifying more than one situation or event, only the single cause of injury, poisoning, or adverse effect that was most severe was reported. Beginning in 2003, the separately reported E-codes, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

North Carolina

Beginning in 2002, North Carolina reports one "cause of injury" E-code. Prior to 2003, during HCUP processing, this separately reported E-code is placed after the last non-missing secondary diagnosis. Beginning in 2003, the separately reported E-code and any E-codes encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

North Carolina supplied diagnosis codes in a field length of 6. Only the first five characters contained in the left-justified source field were used to assign the HCUP diagnosis codes.

Oregon

Prior to 1998, Oregon reports one "cause of injury" E-codes as a separate variable. Beginning in 1998, Oregon reports two "cause of injury" E-codes. Prior to 2003, during HCUP processing, these separately reported E-codes are placed after the last non-missing secondary diagnosis. Beginning in 2003, the two separately reported E-codes, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

Oregon supplied diagnosis codes in a field of length 6. Only the first five characters contained the diagnosis code and were used to assign the HCUP diagnosis codes.

Rhode Island

Rhode Island reports one "cause of injury" E-code in a separate variable. Prior to 2003, during HCUP processing, this E-code was placed after the last non-missing diagnosis code. Beginning in 2003, the separately reported E-code, and any E-codes encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

South Carolina

Prior to 2000 data, a small number of discharges explicitly included decimals in the diagnosis field, usually the decimal is implicit. This is problematic because South Carolina supplied diagnoses in a field of length 5. If decimals were included, then a valid 5-digit code would be truncated. For example, the diagnosis for unspecified sickle cell anemia "28260" would be incorrectly reported as "262.6". Prior to 1998, invalid diagnosis codes are marked by a validity flag (DXVn = 1). Beginning in 1998, invalid diagnosis codes are masked (Dxn = "invl").

Beginning in 2000 data this was no longer a problem; explicit decimals were not included in the diagnosis codes.

South Dakota

South Dakota separately reports one "cause of injury" E-code and one "place of injury" E-code. Prior to 2003, during HCUP processing, these E-codes were placed after the last non-missing diagnosis code. Beginning in 2003, the separately reported E-code, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

Tennessee

Tennessee reports one "cause of injury" E-code as a separate variable. Prior to 2003, during HCUP processing, this E-code was placed after the last non-missing diagnosis code. Beginning in 2003, the separately reported E-code and any E-codes encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

Texas

Texas reports one "cause of injury" E-code as a separate variable. Prior to 2003, during HCUP processing, this separately reported E-code was placed after the last non-missing secondary diagnosis. Beginning in 2003, the separately reported E-code, and any E-codes encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

Texas supplied diagnosis codes in a field length of 6. Only the first five characters contained in the left-justified source field were used to assign the HCUP diagnosis codes.

Utah

Utah reports one "cause of injury" E-code as a separate variable. Prior to 2003, during HCUP processing, this E-code was placed after the last non-missing diagnosis code. Beginning in 2003, the separately reported E-code, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

Vermont

Vermont reports one "cause of injury" E-code as a separate variable. Prior to 2003, during HCUP processing, this separately reported E-code was placed after the last non-missing secondary diagnosis. Beginning in 2003, the separately reported E-code and any E-codes encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

Vermont supplied diagnosis codes in a field of length 6. Only the first five characters contained in the left-justified source field were used to assign the HCUP diagnosis codes.

Virginia

Virginia reports one "external injury code" E-code as a separate data element. Prior to 2003, during HCUP processing, this E-code was placed after the last non-missing diagnosis code. Beginning in 2003, the separately reported E-code, and any E-code encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

Washington

Washington reported diagnosis codes in a field of length 6 for 1988-1992 and, beginning in 1993, in a field of length 7. Only the first five characters contain the diagnosis code and were used to assign the HCUP diagnosis code.

In 1988, Washington did not report "cause of injury" E-codes. From 1989-1992, Washington reports two "cause of injury" E-codes. Beginning in 1993, Washington reports only one "cause of injury" E-code. Prior to 2003, during HCUP processing, any separately reported E-code was placed after the last non-missing secondary diagnosis. Washington does not require hospitals to report E-codes in the range E870-E879 (misadventures and abnormal reactions) to the state data organization. Beginning in 2003, the separately reported E-code, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

West Virginia

West Virginia reports one "cause of injury" E-codes as a separate variable. Prior to 2003, during HCUP processing, are placed in a separate array specific to E codes (ECODEn). Beginning in 2003, the separately reported E-codes and any E-codes encountered in the diagnosis variables are placed in a separate array specific to E codes (ECODEn).

West Virginia supplied diagnosis codes in a field length of 6. Only the first five characters contained in the left-justified source field were used to assign the HCUP diagnosis codes.

Wisconsin

To comply with statutory requirements, Wisconsin modified diagnosis and procedure codes that explicitly referenced induced termination of pregnancy to eliminate distinctions between induced and spontaneous termination. The following codes were modified:

- Diagnoses with the first three digit of 634, 635, 636, 637, 638 were recoded to 637, while retaining the reported fourth digit,
- Procedure 6901 was changed to 6902,
- Procedure 6951 was changed to 6952,
- Procedure 6993 was changed to 6999,
- Procedure 7491 was changed to 7499,
- Procedure 750 was changed to 7599, and
- Procedures 9641-9649 were changed to 964 (which would be flagged as invalid, PRV=1).

Wisconsin reports one "cause of injury" E-code. Prior to 2003, during HCUP processing, this separately reported E-code was placed after the last non-missing secondary diagnosis. Beginning in 2003, the separately reported E-code, and any E-codes encountered in the diagnosis variables, are placed in a separate array specific to E codes (ECODEn).

DXCCSn - Clinical Classifications Software (CCS): diagnosis classification

General Notes

Clinical Classifications Software (CCS) consists of over 260 diagnosis categories. This system is based on ICD-9-CM codes. All diagnosis codes are classified.

DXCCSn is coded as follows:

- 1 to 259 if the diagnosis code (DXn) is valid by the HCUP criteria and not an E-code (External Causes of Injury and Poisoning). The HCUP criteria for diagnosis validation allows a year window (six months before and six months after) around the official ICD-9-CM coding changes (usually October 1), for anticipation of or lags in response to official ICD-9-CM coding changes.
- 2601-2621 if the diagnosis code (DXn) is a valid E-code by the HCUP criteria.
- DXCCSn is missing (.), if there is no diagnosis code (DXn = " ").
- DXCCSn is set to invalid (.A), if the diagnosis code (DXn) is invalid by the HCUP criteria (EDX02).
- DXCCSn is set to inconsistent (.C), if the diagnosis code (DXn) is inconsistent with age (EAGE04 and EAGE05) or sex of the patient (EDX03).

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

Labels

Labels for CCS categories are provided as an ASCII file in HCUP Tools: Labels and Formats.

Formats

Formats to label CCS categories are documented in HCUP Tools: Labels and Formats. A format is also available to map CCS codes into a few broad classes of conditions based on ICD-9-CM chapters.

Uniform Values			
Variable	Description	Value	Value Description
DXCCSn	Clinical Classifications Software (CCS): diagnosis classification	1-259	CCS Diagnosis Codes
		260	CCS E-code Class (1988-1997 data)
		2601-2621	CCS E-code Class (beginning with 1998 data)
		.	No diagnosis code
		.A	Invalid diagnosis code: beginning with 1998 data, EDX02
		.C	Inconsistent: beginning with 1998 data, EAGE04, EAGE05, EDX03

State Specific Notes

None

ECODEn - E code n

General Notes

Prior to 2003, external causes of injury codes "E codes" are included in the diagnosis array (DXn). Beginning in 2003, any separately reported E codes and any E codes encountered in the diagnosis array are placed in a separate array specific to E codes (ECODEn).

E codes reported on a discharge record are compared to a list of valid E codes for the discharge date. Anticipation of or lags in response to official ICD-9-CM coding changes are permitted for discharges occurring within a window of time around the official ICD-9-CM coding changes (usually October 1). A year window (six months before and six months after) is allowed. Invalid E codes are masked directly and Clinical Classifications Software (CCS) data elements (E_CCsn) are set to invalid (.A).

The maximum number of E codes reported varies by state. HCUP retains all E codes provided by the data source in the State Inpatient Databases, but only the first four E codes are retained on the KID.

Uniform Values

Variable	Description	Value	Value Description
ECODEn	E code n	E code	annnn
		Blank	Missing
		Invl	Invalid E code

State Specific Notes

None

ELECTIVE - Elective versus non-elective admission

General Notes

ELECTIVE indicates whether the admission to the hospital was elective. This information was derived from the type of admission (ATYPE). If the admission type indicated an elective admission (ATYPE = 3), then ELECTIVE was set to 1. If the admission type was missing or invalid, then ELECTIVE is also missing or invalid.

Uniform Values

Variable	Description	Value	Value Description
ELECTIVE	Elective versus non-elective admission	0	Non-elective admission
		1	Elective admission
		.	Missing
		.A	Invalid

State Specific Notes

None

E_CCSn - Clinical Classifications Software (CCS): E code classification

General Notes

Clinical Classifications Software (CCS) consists of over 260 diagnosis categories. This system is based on ICD-9-CM codes. All diagnosis codes including external cause of injury codes "E codes" are classified.

Prior to 2003, external cause of injury codes "E codes" are included in the diagnosis array (DXn) with CCS values in the corresponding array DXCCSn. Beginning in 2003, any separately reported E codes and any E codes encountered in the diagnosis array are placed in a separate array specific to E codes (ECODEn). The corresponding array E_CCSn contains the CCS category.

In the CCS, E codes are classified into 20 categories (values 2601-2621). E_CCSn is missing (.), if there is no E code (ECODEn = " "). E_CCSn is set to invalid (.A), if the E code (ECODEn) is invalid by the HCUP criteria.

Labels

Labels for CCS categories are provided as an ASCII file in HCUP Tools: Labels and Formats.

Formats

Formats to label CCS categories are documented in HCUP Tools: Labels and Formats. A format is also available to map CCS codes into a few broad classes of conditions based on ICD-9-CM chapters.

Uniform Values			
Variable	Description	Value	Value Description
E_CCSn	Clinical Classifications Software (CCS): E code classification	2601-2621	CCS E-code Class (beginning with 1998 data)
		.	No diagnosis code
		.A	Invalid diagnosis code: beginning with 1998 data, EDX02
		.C	Inconsistent: beginning with 1998 data EDX03

State Specific Notes

None

FEMALE - Indicator of sex

General Notes

The sex of the patient (FEMALE) is provided by the data source. All non-male, non-female (e.g., "other") values are set to missing (.).

If FEMALE is inconsistent with diagnoses (EDX03) or procedures (EPR03), FEMALE is set to inconsistent (.C).

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

Uniform Values

Variable	Description	Value	Value Description
FEMALE	Indicator of sex	0	Male
		1	Female
		.	Missing
		.A	Invalid
		.C	Inconsistent, EDX03, EPR03

State Specific Notes

Colorado

According to the documentation available from the source, "Other/Unknown" includes patients undergoing sex changes, undetermined sex, live births with congenital abnormalities, and patients whose sex was unavailable from any source document. The source value for "Other/Unknown" was recoded to missing (.), during HCUP processing of 1988-1992 discharges.

Beginning in 1993, "Other/Unknown" was recoded to invalid (.A) during HCUP processing.

Utah

The source value "E" for "Encrypted patient gender (confidential data)" is recoded to missing (FEMALE = .).

Utah encrypts the patient gender for the following two conditions:

Patients with the Major Diagnosis Code of "Human Immunodeficiency Virus Infection" (value 25) and

Diagnosis Related Groups "Alcohol/Drug Abuse or Dependence" (values 433-437).

HOSPBRTH - Indicates in-hospital birth

General Notes			
Uniform Values			
Variable	Description	Value	Value Description
HOSPBRTH	Indicates in-hospital birth	0	Not an in-hospital birth
		1	In-hospital birth

State Specific Notes			
<i>None</i>			

HOSPID - HCUP hospital identification number

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 AHA. For example, the data source treats two separate facilities as two hospitals, while the AHA Annual Survey treats the two facilities as a single hospital, or vice versa. For consistency across states, HCUP defines hospitals in accordance with the American Hospital Association Annual Survey of Hospitals. 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 of Hospitals. For detailed information about this linking process, see the special report on HCUP Hospital Identifiers.

The HCUP hospital identifier (HOSPID) is based on the AHA hospital identifier and is defined as:

- SSnnn, where SS = State FIPS Code, and
- nnn = hospital number unique to state.

The data element HOSPID is available in the Hospital file.

Uniform Values			
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Variable	Description	Value	Value Description
HOSPID	HCUP hospital identification number	5(n)	HCUP hospital identification number
		Blank	Missing

State Specific Notes

None

HOSPST - Hospital State postal code

General Notes

HOSPST indicates the hospital's two-character state postal code (e.g., "CA" for California).

Uniform Values

Variable	Description	Value	Value Description
HOSPST	Hospital State postal code	aa	Hospital State postal code

State Specific Notes

None

KID_STRATUM - Stratum used to post-stratify hospital

General Notes

KID_STRATUM is a four-digit stratum identifier used to post-stratify hospitals for the calculation of universe and frame weights.

The hospital's census region, ownership/control, location/teaching, and bedsize were obtained from the AHA Annual Survey of Hospitals.

- A metropolitan statistical area is considered urban, and a non-metro statistical area is rural.
- Teaching hospitals have an AMA-approved residency program, are a member of the Council of Teaching Hospitals (COTH) or have a ratio of full-time equivalent interns and residents to beds of .25 or higher.
- Bedsize assesses the number of short-term acute beds in a hospital.

The hospital's bedsize category is nested within location and teaching status.

BEDSIZE CATEGORIES			
<u>Location and Teaching Status</u>	Hospital Bedsize		
	<u>Small</u>	<u>Medium</u>	<u>Large</u>
NORTHEAST REGION			
Rural	1-49	50-99	100+
Urban, nonteaching	1-124	125-199	200+
Urban, teaching	1-249	250-424	425+
MIDWEST REGION			
Rural	1-29	30-49	50+
Urban, nonteaching	1-74	75-174	175+
Urban, teaching	1-249	250-374	375+
SOUTHERN REGION			
Rural	1-39	40-74	75+
Urban, nonteaching	1-99	100-199	200+
Urban, teaching	1-249	250-449	450+

WESTERN REGION			
Rural	1-24	25-44	45+
Urban, nonteaching	1-99	100-174	175+
Urban, teaching	1-199	200-324	325+

Some strata were combined for sampling and weight calculations. Consequently, a given hospital's actual value for a stratifier may differ from those indicated by the value of KID_STRATUM. Each hospital's actual values of stratifiers are contained in separate data elements:

<u>Stratifier</u>	<u>1997 KID</u>	<u>2000 KID</u>
Region	H_REGION	HOSP_REGION
Ownership/Control	H_CONTRL	HOSP_CONTROL
Location/Teaching	H_LOCTCH	HOSP_LOCTEACH
Bedsizes	H_BEDSZ	HOSP_BEDSIZE

For detailed information about the KID sampling design, see the year-specific report on the Design of the HCUP Kids' Inpatient Database.

Collapse KID_STRATUM for Small Cell Size. If fewer than two frame hospitals, less than 30 uncomplicated births, less than 30 complicated births, and less than 30 non-birth pediatric discharges were contained in a stratum, then the second digit (control) was changed to a collapsed category.

Children's Hospitals. KID_STRATUM was set to 9999 for children's hospitals. The AHA Annual Survey of Hospitals and information from the National Association of Children's Hospitals and Related Institutions (NACHRI) were used to identify children's hospitals. AHRQ and NACHRI were consulted about the resolution of any inconsistencies in the coding of hospital type.

Data element Name. The HCUP data element name for the stratum has changed over time. In the 1997 KID, this same information is stored in the data element STRATUM.

Uniform Values			
Variable	Description	Value	Value Description
KID_STRATUM	Stratum used to post-stratify hospital	n	1st Digit = 1 Geographic: Northeast (1), Midwest (2), South (3), West (4)
		n	2nd Digit = 2 Control: Government, nonfederal (1), Private, not-for-profit (2), Private, investor-owned (3), Private, either not-for-profit or investor-owned (4)
		n	3rd Digit = 3 Location / Teaching: Rural (1), Urban nonteaching (2), Urban teaching (3)
		n	4th Digit = 4 Bedsize: Small (1), Medium (2), Large (3)
		9999	Children's Hospital

State Specific Notes

None

LOS - Length of stay, cleaned

General Notes

Length of stay (LOS) is calculated by subtracting the admission date (ADATE) from the discharge date (DDATE). Same-day stays are therefore coded as 0. Leave days are not subtracted. Before edit checks are performed, LOS and LOS_X have the same value. If LOS is set to inconsistent (.C), the value of LOS_X is retained.

LOS is not equal to the calculated value in the following cases:

- LOS is set to the supplied length of stay if the length of stay cannot be calculated (ADATE and/or DDATE is missing or invalid). Note: If the supplied length of stay codes same-day stays as 1 or subtracts leave days, then the supplied length of stay is NOT used.
- LOS is missing (.) if the length of stay cannot be calculated and the supplied length of stay is missing.
- LOS is invalid (.A) if
 - it is greater than the maximum value allowed during HCUP processing (the maximum allowed in the 1988-1997 data is 32,767; the maximum allowed beginning in the 1998 data is 20 years)
 - - or -
 - the length of stay cannot be calculated and the supplied length of stay is nonnumeric.
- An invalid calculated LOS is not replaced by the supplied length of stay.
- If the data source does not supply either admission date (ADATE) and discharge date (DDATE), or length of stay, then beginning in the 1998 data LOS is not present on the HCUP files. In the 1988-1997 data, LOS is retained on the HCUP files and is set to unavailable from source (.B).
- LOS is inconsistent (.C) if
 - LOS is negative (ELOS03 beginning in the 1998 data and ED011 in the 1988-1997 data),
 - Excessively long (ELOS04 beginning in the 1998 data and ED601 in the 1988-1997 data), or
 - Charges per day are unjustifiably low (ED911) or high (ED921).

Edit checks ED911 and ED921 are only performed on the 1988-1997 data. No charge per day edit checks are performed on the HCUP data beginning in the 1998 data.

Uniform Values			
Variable	Description	Value	Value Description
LOS	Length of stay, cleaned	0 - 365 (for HCUP inpatient data), 0-3 (for HCUP outpatient data)	Days (In the 1988-1997 inpatient data, LOS can be greater than 365 days)
		.	Missing
		.A	Invalid
		.B	Unavailable from source (coded in 1988-1997 data only)
		.C	Inconsistent: beginning with 1998 data, ELOS03, ELOS04; in 1988-1997 data, ED011, ED601, ED911n, ED921

State Specific Notes

Arizona

Beginning in 1995, the source reports same-day stays as zero days so the supplied length of stay was used to assign LOS when length of stay could not be calculated from dates. Prior to 1995, the reported length of stay was not used when LOS could not be calculated because Arizona coded same-day stays with a value of 1 and subtracted days of absence from LOS.

Colorado

The reported length of stay was not used when LOS could not be calculated because Colorado:

- coded same-day stays with the value 1 and
- subtracted days of absence

Connecticut

Length of stay could not be calculated from dates since Connecticut did not report full admission and discharge dates. During HCUP processing, the reported length of stay and a flag which indicates same-day stays were used to assign LOS. If the same-day flag was not coded, the reported length of stay was retained as supplied (i.e., if the

reported length of stay was 1 and the same-day flag is not coded, then LOS is set to 1 and not reset to 0).

Florida

Beginning in 2000, the supplied length of stay was used to assign LOS and LOS_X because Florida did not provide the admission and discharge date necessary for calculating length of stay. The supplied length of stay was coded according to the HCUP standard that assigns a length of stay of zero (0) to same day stays.

In 1997-1999, the coding of LOS and LOS_X is inconsistent with the coding of length of stay in other states. Florida provided the reported length of stay but not the admission and discharge date necessary for calculating LOS. Florida codes same-day stays as LOS=1; the HCUP standard coding of same-day stays is LOS=0. Usually 2% of a states' discharges are same-day stays.

Prior to 1997, the reported length of stay was not used when LOS could not be calculated because Florida:

- coded same-day stays with the value 1 and
- subtracted days of absence.

Georgia

Beginning with the 2001 data, Georgia no longer codes same day stays with a value of 1. Reported length of stay is used when length of stay cannot be calculated.

Prior to 2001, the reported length of stay was not used when LOS could not be calculated because Georgia coded same-day stays with a value of 1.

Hawaii

Only the calculated length of stay could be used to assign LOS because Hawaii did not supply reported length of stay.

Illinois

The reported length of stay was not used when LOS could not be calculated because Illinois coded same-day stays with a value of 1.

Iowa

The reported length of stay was not used when LOS could not be calculated because Iowa coded same-day stays with a value of 1.

Indiana

Only the calculated length of stay could be used to assign LOS because Indiana codes same day stays with a value of 1.

Kansas

The reported length of stay was not used when LOS could not be calculated because Kansas coded same-day stays with a value of 1.

Kentucky

The reported length of stay was not used when LOS could not be calculated because Kentucky coded same-day stays with a value of 1.

Massachusetts

The supplied length of stay was not used when LOS could not be calculated because Massachusetts:

- coded same-day stays with the value 1 and
- subtracted days of absence.

Minnesota

The reported length of stay was not used when LOS could not be calculated because Minnesota coded same-day stays with the value 1.

Missouri

The reported length of stay was not used when LOS could not be calculated because Missouri coded same-day stays with a value of 1. The appropriate edit check for consistency of reported and calculated length of stay could not be performed.

Nebraska

The reported length of stay was not used when LOS could not be calculated because Nebraska coded same-day stays with the value 1.

New Hampshire

Only the calculated length of stay could be used to assign LOS because New Hampshire codes same day stays with a value of 1.

Nevada

Only the calculated length of stay could be used to assign LOS because Nevada codes same day stays with a value of 1.

New York

The assignment of LOS and LOS_X varies by year in New York:

- Beginning in 2000 data, the length of stay (LOS and LOS_X) in New York was calculated from the admission and discharge dates. Because New York masked the dates on AIDS/HIV* records, the calculated length of stay was missing. During HCUP processing, other information provided by New York was used to determine LOS and LOS_X when the calculated length of stay was missing. The length of stay provided by New York (which did not include leave days), total leave days, and a flag that indicates a same day stay were used to determine a length of stay that was consistent with the coding of length of stay on other HCUP records.
- In the 1998-1999 data purchased from NTIS, the length of stay (LOS and LOS_X) in New York was calculated from the admission and discharge dates. Because New York masked the admission and discharge dates on AIDS/HIV* records, LOS and LOS_X was missing (.) on these discharges. An updated version of the 1998-1999 data is available through the HCUP Central Distributor with LOS and LOS_X coded on the New York AIDS/HIV* records. The updated version has LOS and LOS_X calculated using the method described for the 2000 data.
- In the 1998-1999 data purchased from HCUP Central Distributor, the length of stay (LOS and LOS_X) in New York was calculated using the method described for the 2000 data.
- In the 1988-1997 HCUP data, LOS and LOS_X could not be calculated from dates because New York did not report full admission and discharge dates. During HCUP processing, the length of stay provided by New York was used to assign LOS and LOS_X. The length of stay provided by New York was adjusted during HCUP processing to be consistent with the coding of length of stay in other states.

*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.

North Carolina

The reported length of stay was not used when LOS could not be calculated because North Carolina coded same-day stays with the value 1.

Ohio

Only the calculated length of stay could be used to assign LOS because Ohio codes same day stays with a value of 1.

Oregon

Prior to 1994, the reported length of stay was assigned to LOS if dates were not available. However, the coding of same day stay varies: some Oregon hospitals report discharges on the day of admission as one day stay (LOS=1), in addition to reporting same day stay as zero days (LOS=0).

Beginning in 1994, the reported length of stay was not used when LOS could not be calculated from dates because Oregon coded all same-day stays as one day (LOS=1).

South Carolina

The reported length of stay was not used when LOS could not be calculated because South Carolina coded same-day stays with a value of 1.

South Dakota

Only the calculated length of stay could be used to assign LOS because South Dakota codes same day stays with a value of 1.

Tennessee

Only the calculated length of stay could be used to assign LOS because Tennessee did not report length of stay.

Texas

The reported length of stay was not used when LOS could not be calculated because Texas coded same-day stays with the value 1.

Utah

The reported length of stay was not used when LOS could not be calculated because Utah coded same-day stays with a value of 1.

Vermont

The reported length of stay was not used when LOS could not be calculated because Vermont coded same-day stays with the value 1.

Washington

The reported length of stay was not used when LOS could not be calculated because Washington:

 coded same-day stays with the value 1 and
 subtracted days of absence.

West Virginia

Beginning in 2001, West Virginia provides LOS.

Prior to 2001, only the calculated length of stay was used to assign LOS because West Virginia did not provide the reported length of stay.

Wisconsin

Only the calculated length of stay was used to assign LOS and LOS_X. For 1988-1994, the reported length of stay was not used when LOS could not be calculated because Wisconsin subtracted leave days and coded length of stay greater than 999 days as 999 days. Beginning with 1995, length of stay was not supplied.

LOS_X - Length of stay, uncleaned

General Notes

Length of stay (LOS_X) is calculated by subtracting the admission date (ADATE) from the discharge date (DDATE). Same-day stays are therefore coded as 0. Leave days are not subtracted. Before edit checks are performed, LOS and LOS_X have the same value. If LOS is set to inconsistent (.C), the value of LOS_X is retained. LOS_X may contain negative or excessively large values.

LOS_X is not equal to the calculated value in the following cases:

- LOS_X is set to the supplied length of stay if the length of stay cannot be calculated (ADATE and/or DDATE is missing or invalid). Note: If the supplied length of stay codes same-day stays as 1 or subtracts leave days, then the supplied length of stay is NOT used.
- LOS_X is missing (.) if the length of stay cannot be calculated and the supplied length of stay is missing.
- LOS_X is invalid (.A) if
 - it is greater than the maximum value allowed during HCUP processing (the maximum allowed in the 1988-1997 data is 32,767; the maximum allowed beginning in the 1998 data is 20 years)
 - - or -
 - the length of stay cannot be calculated and the supplied length of stay is nonnumeric.
- An invalid calculated LOS_X is not replaced by the supplied length of stay.
- If the data source does not supply either admission date (ADATE) and discharge date (DDATE), or length of stay, then beginning in the 1998 data LOS_X is not present on the HCUP files. In the 1988-1997 data, LOS_X is retained on the HCUP files and is set to unavailable from source (.B).

Uniform Values			
Variable	Description	Value	Value Description
LOS_X	Length of stay, uncleaned	+/- 7,305	Days (In the 1988-1997 inpatient data, LOS_X can be greater than 7,305 days)
		.	Missing
		.A	Invalid (nonnumeric or out of range)
		.B	Unavailable from source (coded in 1988-1997 data only)

State Specific Notes

Arizona

Beginning in 1995, the source reports same-day stays as zero days so the supplied length of stay was used to assign LOS_X when length of stay could not be calculated from dates. Prior to 1995, the reported length of stay was not used when LOS_X could not be calculated because Arizona coded same-day stays with a value of 1 and subtracted days of absence from LOS.

Colorado

The reported length of stay was not used when LOS_X could not be calculated because Colorado:

- coded same-day stays with the value 1 and
- subtracted days of absence.

Connecticut

Length of stay could not be calculated from dates since Connecticut did not report full admission and discharge dates. During HCUP processing, the reported length of stay and a flag which indicates same-day stays were used to assign LOS_X. If the same-day flag was not coded, the reported length of stay was retained as supplied (i.e., if the reported length of stay was 1, and the same-day flag is not coded, then LOS_X is set to 1 and not reset to 0).

Florida

Beginning in 2000, the supplied length of stay was used to assign LOS and LOS_X because Florida did not provide the admission and discharge date necessary for calculating length of stay. The supplied length of stay was coded according to the HCUP standard that assigns a length of stay of zero (0) to same day stays.

In 1997-1999, the coding of LOS and LOS_X is inconsistent with the coding of length of stay in other states. Florida provided the reported length of stay but not the admission and discharge date necessary for calculating LOS_X. Florida codes same-day stays as LOS_X=1; the HCUP standard coding of same-day stays is LOS_X=0. Usually 2% of a states' discharges are same-day stays.

Prior to 1997, the supplied length of stay was not used when length of stay could not be calculated because Florida:

coded same-day stays with the value 1 and
subtracted days of absence.

Georgia

Beginning with the 2001 data, Georgia no longer codes same day stays with a value of 1. Reported length of stay is used when length of stay cannot be calculated.

Prior to 2001, the reported length of stay was not used when LOS_X could not be calculated because Georgia coded same-day stays with a value of 1.

Hawaii

Only the calculated length of stay could be used to assign LOS_X because Hawaii did not supply reported length of stay.

Illinois

The supplied length of stay was not used when length of stay could not be calculated because Illinois coded same-day stays with a value of 1.

Iowa

The reported length of stay was not used when length of stay could not be calculated because Iowa coded same-day stays with a value of 1.

Indiana

Only the calculated length of stay could be used to assign LOS_X because Indiana codes same day stays with a value of 1.

Kansas

The reported length of stay was not used when length of stay could not be calculated because Kansas coded same-day stays with a value of 1.

Kentucky

The reported length of stay was not used when LOS_X could not be calculated because Kentucky coded same-day stays with a value of 1.

Massachusetts

The supplied length of stay was not used when LOS could not be calculated because Massachusetts:

coded same-day stays with the value 1 and
subtracted days of absence.

Minnesota

The reported length of stay was not used when LOS_X could not be calculated because Minnesota coded same-day stays with the value 1.

Missouri

The reported length of stay was not used when LOS_X could not be calculated because Missouri coded same-day stays with a value of 1.

Nebraska

The reported length of stay was not used when LOS_X could not be calculated because Nebraska coded same-day stays with the value 1.

New Hampshire

Only the calculated length of stay could be used to assign LOS_X because New Hampshire codes same day stays with a value of 1.

Nevada

Only the calculated length of stay could be used to assign LOS_X because Nevada codes same day stays with a value of 1.

New York

The assignment of LOS and LOS_X varies by year in New York:

Beginning in 2000 data, the length of stay (LOS and LOS_X) in New York was calculated from the admission and discharge dates. Because New York masked the dates on AIDS/HIV* records, the calculated length of stay was missing. During HCUP processing, other information provided by New York was used to determine LOS and LOS_X when the calculated length of stay was missing. The length of stay provided by New York (which did not include leave days), total leave days, and a flag that indicates a same day stay were used to determine a length of stay that was consistent with the coding of length of stay on other HCUP records.

In the 1998-1999 data purchased from NTIS, the length of stay (LOS and LOS_X) in New York was calculated from the admission and discharge dates. Because New York masked the admission and discharge dates on AIDS/HIV* records, LOS

and LOS_X was missing (.) on these discharges. An updated version of the 1998-1999 data is available through the HCUP Central Distributor with LOS and LOS_X coded on the New York AIDS/HIV* records. The updated version has LOS and LOS_X calculated using the method described for the 2000 data.

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

North Carolina

The reported length of stay was not used when LOS_X could not be calculated because North Carolina coded same-day stays with the value 1.

Ohio

Only the calculated length of stay could be used to assign LOS_X because Ohio codes same day stays with a value of 1.

Oregon

Prior to 1994, the reported length of stay was assigned to LOS_X if dates were not available. However, the coding of same day stay varies: some Oregon hospitals report discharges on the day of admission as one day stay (LOS_X=1), in addition to reporting same day stays as zero days (LOS_X=0).

Beginning in 1994, the reported length of stay was not used when length of stay could not be calculated from dates because Oregon coded all same-day stays as one day (LOS_X=1).

South Carolina

The reported length of stay was not used when LOS_X could not be calculated because South Carolina coded same-day stays with a value of 1.

South Dakota

Only the calculated length of stay could be used to assign LOS_X because South Dakota codes same day stays with a value of 1.

Tennessee

Only the calculated length of stay could be used to assign LOS_X because Tennessee did not report length of stay.

Texas

The reported length of stay was not used when LOS_X could not be calculated because Texas coded same-day stays with the value 1.

Utah

The reported length of stay was not used when LOS_X could not be calculated because Utah coded same-day stays with a value of 1.

Vermont

The reported length of stay was not used when LOS_X could not be calculated because Vermont coded same-day stays with the value 1.

Washington

The reported length of stay was not used when length of stay could not be calculated because Washington:

 coded same-day stays with the value 1 and

 subtracted days of absence.

West Virginia

Beginning in 2001, West Virginia provides LOS_X.

Prior to 2001, only the calculated length of stay was used to assign LOS_X because West Virginia did not provide the reported length of stay.

Wisconsin

Only the calculated length of stay was used to assign LOS and LOS_X. For 1988-1994, the reported length of stay was not used when LOS could not be calculated because Wisconsin subtracted leave days and coded length of stay greater than 999 days as 999 days. Beginning with 1995, length of stay was not supplied.