



Texas Health Care Information Council

206 East 9th Street • Suite 19.140 • Austin Texas 78701 • Phone 512-482-3312 • Fax 512-453-2757 • www.thcic.state.tx.us

January 2, 2003

Hospital Numbered Letter Volume 6 Number 1

Order the 2002 PUDF at a Discount

THCIC will offer discounts for purchasers who wish to buy all four quarters of the 2002 PUDF data. Purchasers must complete the order form, a signed User's Agreement, and payment for the complete 2002 data by February 15, 2003. THCIC will then mail out each quarter of data to the purchaser as it becomes available. Discounts will not be offered after February 15th or for purchases of individual quarters. The PUDF discounted price for all four quarters of 2002 for participating hospitals is \$1600 (plus shipping) and for all other purchasers is \$3200 (plus shipping).

Upcoming Inpatient Quality Indicator Report

THCIC anticipates the hospital review/comment of the 2001 IQI report in mid-January 2003. Hospitals will receive its unique ID and passwords prior to the release to hospitals by mail. The unique ID and passwords will be mailed to the Primary Contact THCIC has on file around the second week in January.

THCIC 837 Transition

The Council approved a plan recommended by the HIS TAC and staff for THCIC to transition to collecting data using the 837-claim format during the December 6th meeting. The plan calls for THCIC to continue to accept submissions in the UB92 version 6.0 format through the end of processing for the 4th quarter 2003 submissions. Beginning with the claims submitted for the 1st quarter 2004 submission, all claims will need to be in the THCIC 837 claim format. This would include any late claims with service dates in 2003.

In addition, the Council approved the data elements that are to comprise the new THCIC 837 Minimum Data. Recommendations for each of the data elements from the HIS TAC, QM TAC and staff were considered by the HDD Committee during the decision making process.

The changes from the current minimum data set to the THCIC 837 Minimum Data Set includes expanding the number of occurrences for diagnosis and procedure codes and adding new data elements. The additional data elements that will be required are the Patients' Country of Residence, E-codes, Occurrence Span Codes and Associated Dates, Occurrence Codes and Associated Dates, Value Codes and Associated Amounts, and Condition Codes.

There will be some format presentation changes required by the 837-claim format and additional "overhead" qualifier data elements that are used to qualify (or identify the content of) other data elements.

The rules addressing the 837 transition changes will be presented to the HDD Committee and the Council as the February 28th meetings. More information on the specifications and transition schedule for the THCIC 837 will be available in January.

Ethnicity and Race Questionnaire Documents

The Texas Health Care Information Council has created a document that hospital staff can use to obtain the ethnicity and race information required to be collected on hospital inpatients, by Texas State law [Texas Health & Safety Code, §108.009(k), and administrative rules found at 25 TAC §1301.19(c)(1) and (2)]. The rule specifies that the patient should self-report, and that if the patient cannot (for example, comatose, severely injured, or died shortly after admission) or refuses, the hospital staff shall use their best judgment to identify the patient's ethnic and racial background.

Accompanying this document is an instruction sheet that the hospital may provide to its personnel to use as a guide for administering collection of this information. Included are English and Spanish versions of the questions to be presented to the patient. Use of these guidelines is optional. Also, you may translate the document into other languages, as appropriate.

These documents will be placed on the Website shortly and will be in the next release of the Technical Specifications Manual.

If you have questions regarding this document and the requirements, please contact Bruce Burns, DC at (512) 482-3320.

Instructions for State Ethnicity and Race Questionnaire
(For Hospital Use Only)

For Hospitals Staff Use in collecting and reporting Ethnicity and Race

RECOMMENDED PROCEDURE

- I. Present Questionnaire to the patient, parents or the legal guardian of the patient and say, "The State of Texas requires this information".
- II. If the patient, parent or legal guardian of the patient asks "Why?" Tell them that is required by state law and either read or refer them to the top of the page under "Background Information".
- III. If the patient cannot read. A person elected by the patient or hospital personnel should read the questions to the patient and record the responses.
- IV. If the patient refuses or cannot respond to the question (for example, comatose, severely injured, deceased), then hospital personnel should select the most appropriate choice (with available information) in the Ethnicity and Race categories.
 - A. If the ethnicity choice cannot be determined by appearance or last name, mark the patient as "non-Hispanic".
 - B. If the race choice cannot be determined by appearance or last name, mark the patient as "Other".

Note: Hispanics should be marked "White" for their race unless there is evidence they are of a different race (Black, Asian or Pacific Islander, or American Indian/Eskimo/Aleut). For example, many persons from the Caribbean Islands such as the Dominican Republic are of a "Hispanic" ethnicity and "Black" race.

State Required Ethnicity and Race Questions

BACKGROUND INFORMATION

Texas law requires the Texas Health Care Information Council to collect information on the race/ethnic backgrounds of hospital patients. Hospitals are required to ask patients to identify their own race and ethnic backgrounds.

The data obtained through this process will be used to assist researchers in determining whether or not all citizens of Texas are receiving access to adequate health care.

If patients fail to identify their own race and ethnic backgrounds, hospital staff will use its best judgment in making the identification.

QUESTIONS

Question #1: Ethnic Background

(mark the box that the patient believes most accurately identifies his/her ethnic background)

Is the patient . . . ?

- (1) Hispanic/Latino (21352)
- (2) Not Hispanic/Latino (21865)

Question #2: Race

(mark the box that the patient believes most accurately identifies his/her race)

Is the patient . . . ?

- (1) American Indian/Eskimo/Aleut (10025)
- (2) Asian or Pacific Islander (20289)
- (3) Black (20545)
- (4) White (21063)
- (5) Other *Includes all other responses not listed above. Patients who consider themselves as multiracial or mixed should choose this category.* (21311)

Preguntas que el estado requiere relacionadas a pertenencia étnica y raza

Información sobre antecedentes

La ley en Texas exige al *Texas Health Care Information Council* que reúna información sobre raza y antecedentes étnicos de los pacientes de hospital. A los hospitales se les requiere preguntar a los pacientes que identifiquen su propia raza y antecedentes étnicos.

Los datos obtenidos a través de este proceso serán utilizados para asistir a los investigadores a determinar si todos los ciudadanos de Texas están recibiendo acceso a la atención médica adecuada o no.

Si acaso los pacientes no identifican su propia raza y antecedentes étnicos, el personal del hospital utilizará su mejor juicio al hacer la identificación.

Preguntas

Pregunta #1: Antecedentes étnicos

(Marque el cuadro que el paciente crea identifica con más exactitud sus antecedentes étnicos)

¿Es el paciente . . . ?

- (1) Hispano, latino (21352)
- (2) Ni hispano, ni latino (21865)

Pregunta #2: Raza

(Marque el cuadro que el paciente crea identifica con más exactitud su raza)

¿Es el paciente . . . ?

- (1) Indio americano, esquimal, proveniente de las Islas Aleutianas (10025)
- (2) Asiático o isleño del Pacífico (20289)
- (3) Negro (20525)
- (4) Blanco (21063)
- (5) Otro *Incluye todas las otras respuestas que no se enumeran arriba. Los pacientes que se consideren ellos mismos descendientes de varias razas o de razas mixtas deben escoger esta categoría.*(21311)

Helpful Numbers

Questions/Problems	Contact Person	Phone Number
Compliance Issues	Dee Shaw	(512) 482-3318
Council Media Plans	Priscilla Boston	(512) 482-3316
Data submission	Ann Shelton	(972) 766-6311
Data corrections/certification	Help Desk	(888) 308-4953
Hospitalization Reports	Sylvia Cook	(512) 482-3323
Statistical Methods	Zhongmin Li	(512) 482-3324
Policies/Rules	Bruce Burns	(512) 482-3320
Training/Changing Liaisons	Terry Salazar	(512) 482-3322

JCAHO Website

The Business Associate Agreement is now available on the JCAHO website. You can access this document from the home page for each accreditation program area of the website, under "What's New."

Here's a sample link into the Hospital Accreditation Program.

<http://www.jcaho.org/accredited+organizations/hospitals/index.htm>

Any questions related to this agreement contact, Anthony J. Tirone, Director, Federal Relations at atirone@jcaho.org, or tele: (202) 783-6685.

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>

- 1/2003 – Release of IQI 2001 Report for hospital review/comment
- 1/15/03 – Last day to submit corrections to 2q02 certification file
- 2/1/03 – Last day to submit 3q02 claims corrections (without a fee)



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February 3, 2003

Hospital Numbered Letter Volume 6 Number 2

1999 - 2001 Inpatient Quality Indicator Report

THCIC is preparing to release a multiyear comparison on 25 Inpatient Quality Indicators (IQI) using the Agency for Healthcare Research and Quality (AHRQ)'s IQI software, version 2.1. Performance in the years 1999, 2000 (a repeat release), and 2001 are covered in this report. Hospitals included in the report can review how they will appear in the report beginning February 7, and can submit comments for inclusion in a section of the report during a 60-day review period ending April 7. To improve and facilitate the hospital review process, THCIC is now providing data in an Excel format. This allows hospitals to sort and analyze the data along lines of institutional interest. To better inform reviewers, THCIC also provides a column indicating whether each hospital's annual performance is significantly lower or higher than the state average rate for that year.

Be On The Lookout! On January 31st THCIC mailed out letters to the primary contact for each reporting hospital containing directions on accessing the 1999-2001 IQI report. All reporting hospitals will have access to the IQI report site beginning February 7th.

If your hospital has not received its letter by February 7th, please contact Dee Shaw at 512-482-3318 or, preferably, by e-mail at dee.shaw@thcic.state.tx.us. Access information will only be provided to the primary contact on file with THCIC or the hospital administrator.

Agency Publication

THCIC has published a book on the *Indicators of Inpatient Care in Texas Hospitals, 2000 (October 2002)*. This professionally bound 210-page report contains bar charts on 25 measures of hospital performance and provides consumers with reliable and comparable data on hospitals throughout the state. Order your copy today for \$35 (including tax and shipping) at <http://www.thcic.state.tx.us/DataRequestForm.htm> or call Sandra Martin at 512-482-3312.

Order the 2002 PUDF at a Discount

THCIC will offer discounts for purchasers who wish to buy all four quarters of the 2002 Public Use Data File (PUDF) data. Purchasers must submit the order form, a signed User's Agreement, and payment for the complete 2002 data by March 1, 2003. THCIC will then mail out each quarter of data to the purchaser as it becomes available. Discounts for the 2002 PUDF will not be offered after March 1st or for purchases of individual quarters. The PUDF discounted price for all four quarters of 2002 for participating hospitals is \$1600 (plus shipping) and for all other purchasers is \$3200 (plus shipping). Order your copy at:

<http://www.thcic.state.tx.us/DataRequestForm.htm>.

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Statistical Methods	Zhongmin Li	(512) 482-3324
Policies/Rules	Bruce Burns	(512) 482-3320
Training/Changing Liaisons	Terry Salazar	(512) 482-3322

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from
<http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>

- 2/21/03 – Health Information Systems TAC meeting
- 2/28/03 – THCIC Council meeting
- 2/28/03 – THCIC Appointments Committee meeting
- 2/28/03 – THCIC Hospital Discharge Data Committee meeting
- 2/28/03 – THCIC Health Plan Data Committee meeting
- 3/1/03 – 2q02 certification letters and comments due
- 3/1/03 – Hospitals receive 3q02 certification file
- 3/1/03 – 4q02 claims due



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March 3, 2003

Hospital Numbered Letter Volume 6 Number 3

Hospital Procedures And Technical Specifications Manual Updated

The "Hospital Procedures and Technical Specifications" has been updated to include the ANSI ASC X12N 837 format for the submission of data beginning with first quarter 2004 data submissions. The Council will allow hospitals to submit discharge data in the current UB92 Version 6 Electronic Format through data submissions for fourth quarter 2003. If a hospital converts to the ANSI 837 format prior to that time the following data elements will be mapped back into the UB92 V6 codes:

ANSI 837 Data Elements	UB92 Version 6 Electronic Format Data Elements
Claim Type Indicator Code (See Appendix 9, Table 6)	Standard and Non-Standard Source of Payment Codes
ANSI 837 Race Codes (See Appendix 9 Table 3)	UB92 V6 Race Codes
ANSI 837 Ethnicity Codes (See Appendix 9, Table 4)	UB92 V6 Ethnicity Codes

Copies of the Ethnicity and Race Questionnaire Documents are also included in Appendix 10 of the "Hospital Procedures and Technical Specifications Manual"

Agency Publication

THCIC has published a book on the *Indicators of Inpatient Care in Texas Hospitals, 2000 (October 2002)*. This professionally bound 210-page report contains bar charts on 25 measures of hospital performance and provides consumers with reliable and comparable data on hospitals throughout the state. Order your copy today for \$35 (includes tax and shipping) at <http://www.thcic.state.tx.us/DataRequestForm.htm> or call Sandra Martin at 512-482-3312.

Amendments To The Hospital Discharge Data Rules

The Council met on Friday February 28, 2003 and approved proposed amendments to the Hospital Discharge Data (HDD) rules. The amendments address the change in format from UB92 language to ANSI ASC X12N Form 837 Standards (ANSI 837) terminology. Included with this change in format is the addition of new data elements to the minimum data set requirements for submitting the ANSI 837.

The Council, in accordance with the advice of the Health Information Systems Technical Advisory Committee (HIS TAC), will require a slightly modified version of the ANSI ASC X12N Form 837 Institutional Guide. The differences are the location of the Race Code and the additional E-Codes (maximum of 9 permitted).

The following data elements are added to the minimum required data elements list:

- Patient Address Line 2 (if applicable);
- Patient Country;
- Claim Filing Indicator Code;
- Payer Name;
- National Plan Identifier;
- Admission/ Start of Care Hour;
- Patient Discharge Hour;
- Occurrence Span Code – up to 24 occurrences (if applicable);
- Occurrence Span Code Associated Date – up to 24 occurrences (if applicable);
- Occurrence Code – up to 24 occurrences (if applicable);
- Occurrence Code Associated Date – up to 24 occurrences (if applicable);
- Value Code – up to 24 occurrences (if applicable);
- Value Code Associated Amount – up to 24 occurrences (if applicable);
- Condition Code – up to 24 occurrences (if applicable);
- Total Claim Charges;
- Revenue Service Line Details (up to 999 service lines) (all applicable)
 - Revenue Code;
 - Procedure Code;
 - HCPCS/HIPPS Procedure Modifier 1;
 - HCPCS/HIPPS Procedure Modifier 2;
 - HCPCS/HIPPS Procedure Modifier 3;
 - HCPCS/HIPPS Procedure Modifier 4;
 - Charge Amount;
 - Unit Code;
 - Unit Quantity;
 - Unit Rate;
 - Non-covered Charge Amount;
- Service Provider Primary Identifier – Provider Federal Tax ID (EIN) or National Provider Identifier (when HIPAA rule is implemented);
- Service Provider State; Service Provider Secondary Identifier – THCIC 6-digit Hospital ID assigned to each facility.

THCIC Helpful Numbers

Questions/Problems	Contact Person	Phone Number
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Please note that the THCIC fax number is (512) 453-2757.

Please Dial Correctly

THCIC moved its offices nearly 3 years ago; however, hospitals are still trying to call and fax information to the old phone numbers. Only the phone and fax numbers listed above should be used when trying to contact THCIC.

THCIC Hospital Training

The next hospital training session is scheduled for **March 21, 2003** in Austin. It will cover the submission, correction, and certification of data, and will not cover the 837 submission. Training will be from 9:30 a.m. to 3:00 p.m. at the Brown-Heatly Building located at 4900 N Lamar Blvd in Room 1420. Please contact Terry Salazar at 512-482-3322 for a reservation. The training is free!

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>

- 3/1/032q02 certification letters and comments due
- 3/1/03Hospitals receive 3q02 certification file
- 3/1/03Last day to submit 4q02 claims without penalty
- 3/21/03Hospital training in Austin
- 4/15/03Last day to submit changes during certification of Qtr 3 '02 data
- 5/1/03Last day to submit corrections (without a fee) for 4q02 claims



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April 7, 2003

Hospital Numbered Letter Volume 6 Number 4

Amendments to the Hospital Discharge Data Rules Posted

Amendments to the rules were posted in the *Texas Register* on March 21, 2003 and can be obtained at the following website <http://texinfo.library.unt.edu/texasregister/pdf/2003/0321is.pdf>. The amendments are located on pages 28 *TexReg* 2451 through 2466. The comment period ends April 21, 2003.

The amendments modify the language of the Hospital Discharge Data rules to encompass the change in format to ANSI X12N Form 837 Institutional Claim Guide as required by HIPAA. The format is modified slightly to include the following data elements, which are not included with the 837 Institutional Claim:

Data Element	Loop	Data Segment Location
Race	2010BA or 2010CA	DMG05-3
Ethnicity	2300	NTE02
Additional E-codes	2300	HI04-HI12

The Race code and the additional E-code data segments are considered as “Not Used” data segment fields in the ANSI X12N Form 837 Institutional Claim Guide, but are used in the ANSI X12N Form 837 Health Care Service Data Reporting Guide.

The Council’s Health Information Systems Technical Advisory Committee and the Board’s Hospital Discharge Data Committee have reviewed and recommended that these data elements be collected in the above named locations.

Technical Specifications Manual, Version 9

On March 28, 2003, THCIC released Version 9 of the Hospital Procedures and Technical Specification manual. The changes to the documents are noted in the front of the manual. Most of the changes are regarding matching the usage requirements in Section 6.12 to the table Section 6.11. This manual may be downloaded from the THCIC web site at: http://www.thcic.state.tx.us/hospitals/Tech_Requirements_Specifications.zip.

3M Releases Version 20 of the APR-DRG Grouper

3M has updated their All Patient Refined – Diagnosis Related Grouper (APR-DRG) and the Council will be looking to modify its systems to accommodate version 20 APR-DRG with the first quarter discharges for Council selected years (hospitals will be notified prior to each

implementation). 3M has made some substantial changes to this application program, including definitional changes and changing the number of base APR-DRGs.

Twenty-four (24) new base APR-DRGs and 65 base APD-DRGs are removed and the 144 base APR-DRGs have major modifications to their definitions. Some of the changes reclassify some the APR-DRGs. Newborn MDC 15 criteria is redefined and MDC 21 (Injuries), MDC 24 (HIV) and MDC 25 (multiple trauma) have assignment definitions redefined. All of these changes may modify the look and categorization of your hospitals data.

Version 15 and version 20 are not comparable, therefore in order to make comparisons or analyze historical data and trends a hospital will need to use the ICD9 code mapping software to run the older data through the Version 20 APR-DRG.

Version 20 of the APR-DRG will require interface changes to utilize all of the updates. Additional fields are used to accommodate weights and trims.

Additional information will be presented as the Council receives the updates from 3M.

FTP Capabilities are Now Available at THIN

If you have large data files to upload to the THIN you may want to investigate this option? In other word if you spend a lot of computer and phone time uploading your data to THIN, this may alleviate that situation for you.

FTP (File Transfer Protocol) is a client-server protocol that allows a user on one computer to transfer files to and from another computer over the Internet. FTP is an industry standard protocol that allows for the transmission of data between systems of varying types using an Internet connection.

THIN has announced the implementation of Internet FTP file submission as an option for submitting claims and THCIC data. If you are interested in this please contact THIN at (972) 766-5480 Monday through Friday, 8 a.m. to 4:30 p.m. (CT) or E-mail - thin@bcbstx.com.

Following are the requirements for utilizing this transmission option.

Requirements:

- FTP client package is necessary.
- **PGP** encryption is **MANDATORY**. THIN will not accept unencrypted files and the only method currently supported is PGP. PGP provides 128 bit encryption, which is the strongest available on the market today.
- You must provide your public key to THIN.
- THIN will provide you with their public key to be used for decrypting the response files.
- You will continue to use your existing THIN Submitter/Logon ID and password.

THCIC Helpful Numbers

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Please note that the THCIC fax number is (512) 453-2757.

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>

- 4/15/03Last day to submit changes during certification of Qtr 3 '02 data
- 5/1/03Last day to submit corrections (without a fee) for 4q02 claims
- 6/1/033q02 certification letter due
- 6/1/03Last day to submit 1q03 claims
- 6/1/03Hospital to receive the 4q02 certification file



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May 27, 2003

Hospital Numbered Letter Volume 6 Number 5

Indicators of Inpatient Care in Texas Hospitals, 1999-2001

On Thursday, May 29, 2003 the Texas Health Care Information Council will release to the public *Indicators of Inpatient Care in Texas Hospitals, 1999-2001*. The report again uses Agency for Healthcare Research and Quality (AHRQ) Inpatient Quality Indicator (IQI) methodology to provide a window into the quality of care provided in Texas hospitals.

The report will appear on THCIC's website much the same as it did for THCIC's release of 2000 data last fall, with 3 significant improvements. First and foremost, THCIC will provide the public with the ability to search for hospital performance data in the report, geographically (hospitals within metropolitan statistical areas [MSAs]) or by indicator. Second, three discrete years of risk-adjusted results will be included in the report, allowing consumers to begin to assess trends in each hospital's performance. Third, the charts for 2001 (only) will include confidence intervals plotted on top of each hospital's results. This allows readers to more clearly see the statistical significance of each hospital's performance in 2001. All of these improvements are the direct result of feedback THCIC received from the release last fall.

For this release, THCIC does not plan a press conference, rather the media will be alerted via a press release.

Transition to the THCIC 837 Claim Format

The Council's plan to transition to collecting data using the THCIC 837 claim format calls for THCIC to accept submissions in the UB92 version 6.0 format through the end of processing for the 4th quarter 2003 submissions. Then, beginning with the claims submitted for the 1st quarter 2004 submission, all claims will need to be in the THCIC 837 claim format. This would include any late claims with service dates in 2003.

The THCIC 837 Minimum Data Set includes some changes from the current data set. The changes include expanding the number of occurrences for diagnosis and procedure codes and adding new data elements. The additional data elements that will be required are the Patient's Country of Residence, E-codes, Occurrence Span Codes and Associated Dates, Occurrence Codes and Associated Dates, Value Codes and Associated Amounts, and Condition Codes.

There are some format presentation changes required by the THCIC 837 claim format and additional "overhead" qualifier data elements that are used to qualify (or identify the content of) other data elements.

The rules addressing the 837 transition changes will be finalized and approved at the June 6th Council meeting.

Hospital Procedures And Technical Specifications Manual Updated

The Hospital Procedures and Technical Specifications, version 9 includes the specifications for the THCIC 837 claim format.

Transition Period Processing

Hospitals may begin submitting claims in the THCIC 837 format as soon as testing is completed with THIN (summer of 2003). For those hospitals that begin submitting claims in the THCIC 837 format prior to the 2004 claim submission, those submissions will be “mapped” back into the UB92 format for processing by THIN and Commonwealth. There are three data elements that must be translated prior to being mapped back into the UB92 format. Those data elements and their mapping are as follows:

ANSI 837	UB92
Claim Type Indicator Code (See Appendix 9, Table 6)	UB92 Standard and Non-Standard Source of Payment Codes
ANSI 837 Race Codes (See Appendix 9 Table 3)	UB92 Race Codes
ANSI 837 Ethnicity Codes (See Appendix 9, Table 4)	UB92 Ethnicity Codes

THCIC 837 Claim Submission Approval

Texas Health Information Network (THIN) is scheduled to begin accepting test submissions June 23, 2003. The test will confirm that the submission is a readable THCIC 837 data file. Submitters must have THCIC approval for a valid test in order to submit production data files.

As the test review process involves manual intervention that place limitations on the number of submissions that may be reviewed, **submitters (vendors and those hospitals that submit data to THIN) will need to schedule a date to test their THCIC 837 claim submissions.** This will allow both the submitter and THIN to avoid bottlenecks and time delays.

Submitters should complete the attached form (THCIC 837 Claim Submission Testing Request Form) and fax to Dee Shaw at (512) 453-2757. (The document may be obtained separately from Dee Shaw at Dee.Shaw@thcic.state.tx.us or (512) 482-3318).

All submitters must get their test submissions reviewed and approved prior to submitting production data.

Reminder: FTP Capabilities are Now Available at THIN

THIN has announced the implementation of Internet FTP file submission as an option for submitting claims and THCIC data. If you are interested in this please contact THIN at (972) 766-5480 Monday through Friday, 8 a.m. to 4:30 p.m. (CT) or E-mail - thin@bcbstx.com.

If your data file uploads to the THIN are consuming large amounts of time or the phone line keeps disconnecting, you may want to investigate this option.

The THIN FTP capability allows you to use the Internet to transmit your data to THIN. The FTP (File Transfer Protocol) is an industry recognized client-server protocol that allows a user on one computer to transfer files between systems of varying types.

Your data transmission will be protected by use of a private/public key encryption methodology. The requirements for utilizing this transmission option are as follows:

- You must obtain the PGP FTP client package. (**PGP** encryption is **MANDATORY**. THIN will not accept unencrypted files and the only method currently supported is PGP. PGP provides 128 bit encryption, which is the strongest available on the market today.
- You must provide your public key to THIN.
- THIN will provide you with their public key to be used for decrypting the response files.
- You will continue to use your existing THIN Submitter/Logon ID and password.

Hospital Training

The next THCIC hospital training session will be held on June 18, 2003 from 9:30am until 4:00pm. The training will be located in Austin at the Brown-Heatly Bldg, 4900 N Lamar, Room 1410. Interested hospital representatives should contact Terry Salazar at 512-482-3322 by June 13th for additional information and to register for this free training.

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>

- 6/1/033q02 certification letter due
- 6/1/03Last day to submit 1q03 claims
- 6/1/03Hospital to receive the 4q02 certification file
- 6/6/03.....Board & Committee meetings
- 6/18/03Hospital Training in Austin



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June 16, 2003

Hospital Numbered Letter Volume 6 Number 6

THCIC Hit by State Budget Cut September 1, 1995 – August 31, 2003

HB2292 (available on-line at www.capitol.state.tx.us), passed by the Legislature during May and now signed into law by Governor Perry, abolishes the Texas Health Care Information Council as a state agency and moves its “power and duties” to the new Department of State Health Services. The official transition timeline will be known after December 1, 2003, at which time the Executive Commissioner of Health & Human Services is required to submit an action plan to the Governor and Legislature, including timelines.

What does this mean to Texas hospitals? It means hospitals are still required by State law (Chapter 108, Health and Safety Code) to report inpatient discharges to the State just as they have been doing since 1998. Many questions about the future of the program have yet to be answered; however, we know that THCIC’s hospital discharge data program will continue and that we will do everything possible to make the transition almost invisible to those of you who are reporting data to the State.

Although the details are still being worked out for the transitional “change in ownership”, THCIC does not anticipate any delay in production. THCIC will keep hospitals updated as more information becomes available.

Amendments to HDD Rules Approved by Board

THCIC’s Board voted for adoption of the amendments to the Hospital Discharge Data Rules on June 6, 2003. Most of the proposed amendments that were published in the *Texas Register* on March 21, 2003 were adopted. The Council anticipates the adopted version to be published in the June 27, 2003 edition of the *Texas Register*.

The adopted version of the amendments had some changes from the proposed version for §1301.19 (c)(1 & 2) and §1301.19(e)(1-11).

In Section 1301.19 (c) (1 & 2), the proposed 5 digit codes for Race and Ethnicity were withdrawn; therefore, the current code set will continue to be used. The *Hospital Procedure and Technical Specifications Manual* is being updated to reflect this change and is anticipated to be available on the THCIC web site by June 30th.

RACE Codes

**Loop - 2010BA or Loop 2010CA,
Data Segment - DMG05**

- 1 = American Indian/Eskimo/Aleut
- 2 = Asian or Pacific Islander
- 3 = Black
- 4 = White
- 5 = Other race

ETHNICITY Codes

**Loop – 2300
Data Segment – NTE02**

- 1 = Hispanic or Latino origin
- 2 = Not of Hispanic or Latino origin

In Section 1301.19(e)(1-11), the ANSI Loop and Data segment location language was removed as a result of comments to the proposed text.

The proposed text can be viewed on page 32 of the PDF document (*28 TexReg 2451*) on the *Texas Register* Website page <http://texinfo.library.unt.edu/texasregister/pdf/2003/0321is.pdf> or at <http://texinfo.library.unt.edu/texasregister/html/2003/mar-21/PROPOSED/25.HEALTH%20SERVICES.html#90>

If you have questions concerning the Hospital Discharge Data amendments or the rules, contact Dr. Bruce Burns at the Council (512.482.3320 or by e-mail at Bruce.Burns@THCIC.STATE.TX.US).

2nd Quarter PUDF Release

The Public Use Data File for second quarter 2002 will be available this week and will be sent to those users who have requested it. The file can be purchased for \$500 by participating hospitals and for \$1000 by all other users. The file includes records for over 683,000 inpatients discharged by 430 hospitals during April, May, and June of 2002.

THIN Helpdesk

The Texas Health Information Network (THIN) has requested that hospitals experiencing THCIC data submission problems contact the THIN Helpdesk at 972.766.5480.

CCS Helpdesk

Commonwealth Clinical Systems (CCS) would like to remind hospitals that have had a change in THCIC ID number (usually due to a change in the hospital's Tax ID number) that they must contact the CCS Helpdesk for a new password to gain access to the data under the new THCIC ID. Hospitals may contact the CCS Helpdesk at 888.308.4953.

4th quarter 2002 Certification File

All Texas hospitals that submitted 4th quarter 2002 discharge data should have received their 4q02 Certification Files by June 6, 2003. The Certification File, once uploaded into the CertView software, allows a hospital to review their data, print a certification letter, and create certification comments. The deadline for making any corrections to the 4q02 certification file is July 15, 2003. Corrections received after July 15th will be rejected.

The 4q02 certification letter must be received by THCIC by September 1, 2003. Fax submissions are acceptable. 4q02 certification comments, due the same day, must be created using the CertView software and saving it in ASCII format. The ASCII file may then be copied to a diskette for mailing to Commonwealth Clinical Systems (CCS) in Charlottesville, VA or uploaded by modem to CCS. Additional instructions may be found at <http://www.comclin.net/thcic/commentinstr.doc> or by contacting the CCS Helpdesk at 888.308.4953.

Incorrect Information on the Certification Letter

The certification letters hospitals must submit to THCIC are generated through the CertView software. CertView is updated quarterly with the hospital certifier information for each certification period. The newest version should be downloaded for each certification quarter to insure that the certification letter is as accurate as possible.

The CertView software may be downloaded at <http://www.comclin.net/diana/>.

Hospital Checks and Balances

On occasion, THCIC has received calls from hospital staffers saying that the Certification file they received “only contained part of the claims they submitted”. Unfortunately, by the time the hospitals receive their Certification files, any corrections made to that file generates a fee to the hospital.

There are ways for hospitals to confirm their claim submission totals prior to receiving the Certification file. First is the initial data submission to THIN. All hospitals receive a **rEDI Link Blue Acceptance Response Report** once the data is transmitted. This report will notify the submitter if the data was accepted or rejected and the total number of claims submitted and accepted. If a hospital doesn't receive the Response Report, the submitter should contact the THIN Helpdesk at 972.766.5480.

Once the data has been submitted and accepted at THIN, it is transmitted to CCS for processing. Within a week of submission, but usually after just a couple of days, the hospital primary contact will receive notification of a **Frequency of Error (FER)** report in their electronic mailbox (or receive the information on diskette). The FER report will confirm the total number of claims submitted, broken down by month, in addition to alerting the hospital of claims in error. Keep in mind that claims in error may not be able to be processed to be included in the certification file (another reason for missing certification claims). If a hospital doesn't receive the FER report, its liaison should contact the CCS Helpdesk at 888.308.4953.

So, remember ... two reports are needed for hospitals to confirm that the number of claims submitted to THCIC was the number of claims received by THCIC.

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>

- 6/18/03 - Hospital Training in Austin, contact Terry at 512-482-3322
- 7/15/03 – Last day to make corrections to the 4q02 certification file
- 8/01/03 – Last day to submit corrections (without a fee) for 1q03 data



Texas Health Care Information Council

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July 18, 2003

Hospital Numbered Letter Volume 6 Number 7

THCIC to Maintain Web-Based Registry of Providers Honoring Advanced Directives

For consumers seeking providers honoring advance directives

Senate Bill 1320 - Relating to certain advance directives for medical treatment and medical treatment decisions. Signed by Governor Perry on June 20, 2003, the bill is effective immediately.

Chapter 166, Health and Safety Code, was amended by SB 1320, mandating THCIC to maintain a web-based registry of providers and groups interested in assisting the transfer of patients on whose behalf life-sustaining treatment is being sought and patients on whose behalf the withholding or withdrawal of life-sustaining treatment is being sought.

Providers may sign up for the registry at www.thcic.state.tx.us. This is a passive directory and will be updated only upon input by providers.

837 Testing Delayed

Texas Health Information Network (THIN) has delayed testing of the 837-claim format until mid-August. THCIC will issue a notification as to the date that testing will begin as soon as that date is confirmed. Hospitals that have scheduled to test before mid-August will be contacted to reschedule.

Reminder: Hospitals must schedule 837 testing dates through THCIC. The form to schedule testing is located at the end of the newsletter.

837 Pilot

THCIC is seeking hospitals to participate in the pilot for the submission, correction, and certification of the THCIC 837-format. Hospitals wishing to participate should contact Dee Shaw by e-mail at dee.shaw@thcic.state.tx.us providing the facility name, address, city, licensed bed size, a contact person, phone number, fax number, and E-mail address.

Fourth Quarter 2002 Data DRG Assignment Miscue

Some hospitals received an unusual number of claims for fourth quarter 2002 that is now being certified that was not groupable by the 3M APR-DRG software. This was caused by the Grouper expecting to find a birth weight for newborns. The problem was with the 3M software and not with the hospital data. The 3M software has now been corrected and the encounters have been rerun through the 3M software and the encounter files now contain the appropriate HCFA DRG and APR DRG values. The problem was not with the hospital data and hospitals can continue to use their existing certification data files and reports to certify their fourth quarter 2002 data. If a

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hospital would like to receive new certification data files, they may email the Commonwealth Helpdesk at thcichelp@comclin.net and request new fourth quarter 2002 certification files. Due to schedule constraints, all requests must be made no later than July 31st.

The deadline of September 1, 2003 remains for certification of the fourth quarter 2002 data.

Elimination of Paper and Diskette Distribution

Due to budgetary reductions, THCIC will no longer be able to furnish audit reports (Frequency of Error reports [(FER)], error data, or certification data on paper or diskette. Hospitals will need to download their audit reports/error data and certification files from their mailbox at Commonwealth. The effective date for this change is November 1, 2003.

For those hospitals that may not be able to make the transition by November 1, THCIC has authorized Commonwealth to continue to provide the reports / data on paper or diskette until the hospital has been able to make the transition. There will be a charge of \$ 30.00 plus shipping per distribution. The charge will be payable directly to Commonwealth. Hospitals must contact Commonwealth at 888-308-4953 to arrange to receive data on diskette prior to November 1st in order to prevent disruption in receipt of reports, error data and certification files.

Hospitals that are receiving certification data on CD: THCIC will continue to provide certification files on CD to those hospitals that have data volumes that preclude dial-up data transfer. THCIC is working to provide Internet FTP transfer capability that will allow large volume hospitals to download data directly. At that time, THCIC will no longer offer distribution of certification data on CD. THCIC will provide 90 days notification once the Internet FTP option is available.

Hospitals Required to Report to THCIC

HB2292, signed into law by Governor Perry in June, abolishes THCIC as a state agency and moves its "power and duties" to the new Department of State Health Services effective September 1, 2003. Many questions about the future of the program have yet to be answered; however, we know that THCIC's hospital discharge data program will continue and that we will do everything possible to make the transition almost invisible to those of you who are reporting data to the State.

Hospitals will still be required to report data "as usual" to THCIC.

Although the details are still being worked out for the transitional "change in ownership", THCIC does not anticipate any delay in production. THCIC will keep hospitals updated as more information becomes available.

THIN Helpdesk

The Texas Health Information Network (THIN) has requested that hospitals experiencing THCIC data submission problems contact the THIN Helpdesk at 972.766.5480.

Charges for Making Changes During Certification

The charges for correcting hospital data *during certification* changes effective September 1, 2003. Attached is the pricing guide and options available to hospitals. While we intend the guide to be self-explanatory, please do not hesitate to contact us at 512-482-3312 if you have questions.

Commonwealth will continue the current practice of quoting a cost for the work via a “work order”. Commonwealth must receive approval from THCIC on the work order in order to begin work. As before, this charge will be billed by and is payable directly to Commonwealth.

Pricing Structure for Corrections at Certification Effective September 1, 2003

Component	Description	Charge
Recreate certification files	A base charge will be billed for each “recreation of certification files and reports” ¹ .	\$ 332.00
Assistance with corrections (optional)	If the hospital chooses not to submit corrections through THIN using standard transactions, the hospital may request assistance from Commonwealth in making corrections. The request may be in writing or verbal. The hospital will receive a written detailed price quote (work order). The hospital must approve the work order before work can commence.	Formula: \$ 85.00 * Hrs ²
Distribution media	The charge for the distribution of the certification files depends on the media. Charges for distribution are as follows: In Electronic Mailbox On Diskette On CD NOTE: Hospitals may change the media to be used by contacting THCIC.	Free \$ 12.50 \$ 12.50
Shipping	For hospitals that receive their data on CD or diskette, the shipping charge of the carrier is passed directly to the hospital.	Pass-thru from shipping carrier
Rush order (Optional)	Certification files will be recreated and distributed based on the THCIC schedule. If hospitals want to obtain the certification files sooner than scheduled, they may request a “rush” be placed on processing and the data will be processed and mailed such that the hospital receives the new files within one to three days of acceptance of the rush order.	\$ 250.00

¹ “Recreation of certification files and reports” is defined as: all activities required for receiving corrections submitted through THIN in standard UB transaction format, processing through the Edits subsystem, recreating certification files and reports, and distributing the files into the hospital’s mailbox.

² Hrs – Number of person hours required to perform the tasks comprising this request.

Update of the Hospital Procedures and Technical Specifications Manual Delayed

The finalization of the THCIC Hospital Procedures and Technical Specifications Manual has been delayed, due to issues discovered during internal testing of data. The THCIC staff is continuing to work with THIN and CCS regarding the testing of the data collection system.

THCIC staff discovered that the THIN translator could not accept the 5-digit race and ethnicity codes as previously published, therefore the Council will maintain the current coding structure for Race and Ethnicity:

1 = American Indian/Eskimo/ Aleut	1 = Hispanic or Latino Origin
2 = Asian or, Pacific Islander	2 = Not of Hispanic or Latino Origin
3 = Black	
4 = White	
5 = Other Race	

THCIC staff has received information from several hospitals and associations that the statement “THCIC – Not used” is confusing to programmers. It will be removed from the next update.

Another change that will appear in the update manual is the Receiver ID code. It will remain “YTHCIC” until hospitals start reporting first quarter 2004 discharges at which time the Receiver ID code will then change to “YTH837”.

Another change discovered that affects data submitters for more than one hospital is that if the facility renders the service to the patient and that is different from the Billing Provider and the Pay-to Provider, the submitter should not mix the data for different facilities in a data submission file (“Envelope” or “Function Group”). This will cause problems in identifying the data for the individual facilities rendering the services to the patients.

THCIC staff is continuing to update and test the audits for the data submission and these will be appear in the next update. Several new audits have been identified, specifically relating to the qualifier codes and missing data elements.

Other changes are presented on the Version Updates section of the manual.

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>

- 7/15/03 – Last day to make corrections to the 4q02 certification file
- 8/01/03 – Last day to submit corrections (without a fee) for 1q03 data
- 9/1/03 – 4q02 certification letter/comments due
- 9/1/03 – Last day to submit 2q03 claims
- 9/1/03 – Hospitals to receive 1q03 certification file



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July 31, 2003

Hospital Numbered Letter Volume 6 Number 8

4Q02 Certification Data, CertView and DRG Descriptions For 001-099

The Council has uncovered an issue that will affect the certification reports for hospitals that had patients assigned DRGs between 001 and 099. For DRGs 001 - 099, the DRG descriptions will appear as blank on the following physician reports: DRG Mortality Stats by Physician Report (C08), Patients for Attending Physician Report (C10) and Patients for Operating Physician Report (C11). All other information should appear on these reports.

A revised (7/28/03) CertView Software program is available at <http://www.comclin.net/thcic/Certview03b2.exe> which will allow you to print out your reports again and include the DRG descriptions for 001-099. Hospitals with missing DRG descriptions that used the CertView software prior to 7/28/03 should download the revised version.

Elimination of Paper and Diskette Distribution

Due to budgetary reductions, THCIC will no longer be able to furnish audit reports (Frequency of Error reports [(FER)], error data, or certification data on paper or diskette. Hospitals will need to download their audit reports/error data and certification files from their mailbox at Commonwealth. The effective date for this change is November 1, 2003.

For those hospitals that may not be able to make the transition by November 1, THCIC has authorized Commonwealth to continue to provide the reports / data on paper or diskette until the hospital has been able to make the transition. There will be a charge of \$ 30.00 plus shipping per distribution. The charge will be payable directly to Commonwealth. Hospitals must contact Commonwealth at 888-308-4953 to arrange to receive data on diskette prior to November 1st in order to prevent disruption in receipt of reports, error data and certification files.

Hospitals that are receiving certification data on CD: THCIC will continue to provide certification files on CD to those hospitals that have data volumes that preclude dial-up data transfer. THCIC is working to provide Internet FTP transfer capability that will allow large volume hospitals to download data directly. At that time, THCIC will no longer offer distribution of certification data on CD. THCIC will provide 90 days notification once the Internet FTP option is available.

THCIC to Maintain Web-Based Registry of Providers Honoring Advanced Directives

For consumers seeking providers honoring advance directives

This article should be forwarded to all hospital physicians, Chief Information Officers, and hospital administrators.

Senate Bill 1320 - Relating to certain advance directives for medical treatment and medical treatment decisions. Signed by Governor Perry on June 20, 2003, the bill is effective immediately.

Chapter 166, Health and Safety Code, was amended by SB 1320, mandating THCIC to maintain a web-based registry of providers and groups interested in assisting the transfer of patients on whose behalf life-sustaining treatment is being sought and patients on whose behalf the withholding or withdrawal of life-sustaining treatment is being sought.

Providers may sign up for the registry at www.thcic.state.tx.us. This is a passive directory and will be updated only upon input by providers.

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>

- 8/01/03 – Last day to submit corrections (without a fee) for 1q03 data
- 8/22/03 – HDD Committee meeting
- 8/22/03 – Council meeting
- 9/1/03 – 4q02 certification letter/comments due
- 9/1/03 – Last day to submit 2q03 claims
- 9/1/03 – Hospitals to receive 1q03 certification file



Texas Health Care Information Council

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August 28, 2003

Hospital Numbered Letter Volume 6 Number 9

THCIC 837 Claim Testing/Submission

Texas Health Information Network (THIN) is now accepting test submissions for the ANSI 837 claims. A successful test will confirm that the submission is a readable THCIC 837 data file. Submitters must have THCIC confirmation of a successful valid test in order to submit production data files.

Because the test review process involves manual interventions that place limitations on the number of submissions that may be reviewed, **submitters (vendors and hospitals that submit data to THIN) will need to schedule a date to test their THCIC 837 claim submissions.** This will allow both the submitter and THIN to avoid bottlenecks and time delays. Submitters must submit the Testing Request Form no later than November 3, 2003 indicating a test date prior to the June 1, 2004 deadline for submitting 1q04 discharges.

Submitters should complete the attached form (THCIC 837 Claim Submission Testing Request Form) and fax it to Dee Shaw at (512) 453-2757. (The document may be obtained separately from Dee Shaw at Dee.Shaw@thcic.state.tx.us or (512) 482-3318).

All submitters must have their test submissions reviewed and approved prior to submitting production data.

837 Pilot

THCIC is seeking hospitals to participate in the pilot for the submission, correction, and certification of the THCIC 837 format. Pilot hospitals will be asked to run a “mini” file through the complete submission – correction – certification process during the first months of 2004, with the goal of completing the pilot by the end of March. Hospitals wishing to participate should contact Dee Shaw by e-mail at dee.shaw@thcic.state.tx.us providing the facility name, address, city, licensed bed size, a contact person, phone number, fax number, and E-mail address.

Update of the Hospital Procedures and Technical Specifications Manual Delayed

The finalization of the THCIC Hospital Procedures and Technical Specifications Manual has been delayed, due to issues discovered during internal testing of data. The THCIC staff is continuing to work with THIN and CCS regarding the testing of the data collection system.

THCIC staff discovered that the THIN translator could not accept the 5-digit race and ethnicity codes as previously published; therefore, the Council will maintain the current coding structure for Race and Ethnicity:

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2 = Asian or, Pacific Islander

2 = Not of Hispanic or Latino Origin

3 = Black

4 = White

5 = Other Race

THCIC staff has received information from several hospitals and associations that the statement “THCIC – Not used” is confusing to programmers. It will be removed from the next update.

Another change that will appear in the update manual is the Receiver ID code. It will remain “YTHCIC” until hospitals start reporting first quarter 2004 discharges at which time the Receiver ID code will then change to “YTH837”.

Another change discovered that affects data submitters for more than one hospital is that if the facility renders the service to the patient and that is different from the Billing Provider and the Pay-to Provider, the submitter should not mix the data for different facilities in a data submission file (“Envelope” or “Function Group”). This will cause problems in identifying the data for the individual facilities rendering the services to the patients.

THCIC staff is continuing to update and test the audits for the data submission and these will appear in the next update. Several new audits have been identified, specifically relating to the qualifier codes and missing data elements.

Other changes are presented in the Version Updates section of the manual.

Utilization of Specific Inpatient Procedures by Texas Hospital Referral Region Released

The Texas Health Care Information Council (THCIC) announces the release of its third annual report on Utilization of Specific Inpatient Procedures by Texas Hospital Referral Region. The report, which includes data for 1999-2001, presents variation in the use of nine procedures in 24 health care service areas in the state. The report uses performance measures and methodology developed by the Agency for Healthcare Research and Quality (AHRQ) of the U.S. Department of Health and Human Services, and geographic areas developed by the *Dartmouth Atlas of Health Care*. The procedures included are those for which there are concerns about over- or under-utilization, including:

cesarean section

vaginal birth after cesarean section

incidental appendectomy among the elderly

hysterectomy

laminectomy and/or spinal fusion

transurethral prostatectomy

radical prostatectomy

laparoscopic cholecystectomy

coronary artery bypass graft

The report can be accessed on the home page of THCIC's website at www.thcic.state.tx.us. Questions regarding the report should be directed to Sylvia Cook at (512) 482-3323.

Reminder – Effective Nov 1st, THCIC will no longer distribute corrections and certification data on paper or diskette

Due to budgetary reductions, THCIC will no longer be able to furnish audit reports (Frequency of Error reports [(FER)], error data, or certification data on paper or diskette. Hospitals will need

to download their audit reports/error data and certification files from their mailbox at Commonwealth. The effective date for this change is November 1, 2003.

For those hospitals that may not be able to make the transition by November 1, THCIC has authorized Commonwealth to continue to provide the reports / data on paper or diskette until the hospital is able to make the transition. There will be a charge to the hospital of \$ 30.00 plus shipping per distribution. The charge will be payable directly to Commonwealth Clinical Systems, Inc. Hospitals must contact Commonwealth at 888-308-4953 prior to November 1st to arrange to receive data on diskette in order to prevent disruption in receipt of reports, error data and certification files.

For hospitals that are receiving certification data on CD, THCIC will continue to provide certification files on CD to those hospitals that have data volumes that preclude dial-up data transfer. THCIC is working to provide Internet FTP transfer capability that will allow large volume hospitals to download data directly. At that time, THCIC will no longer offer distribution of certification data on CD. THCIC will provide 90 days notification once the Internet FTP option is available.

Cost of the PUDF Increases

Effective September 1, 2003, the cost of the Public Use Data File will increase. Texas hospitals that submit data to THCIC may purchase any quarterly data for \$750 each or purchase a year (1st, 2nd, 3rd, and 4th quarter data of any one year) of data for \$2500. Participating hospitals wishing to pre-purchase the 2003 PUDF may do so for a reduced cost of \$2250 if paid for by November 1, 2003.

For all other purchasers of the PUDF, any quarterly data may be purchased for \$1500. Yearly data will cost \$5000. THCIC has reduced the cost of the 2003 PUDF to \$4500 if purchased by November 1, 2003.

The PUDF user agreement and order form may be found at <http://www.thcic.state.tx.us/Publications.htm#PUDF>.

3q02 PUDF Release

The Public Use Data File for third quarter 2002 will be available by mid-September and will be sent to those who have already purchased it. The file can be purchased for \$750 by participating hospitals and for \$1500 by all other users. The file includes records for inpatients discharged during July, August, and September of 2002. The PUDF user agreement and order form may be found at <http://www.thcic.state.tx.us/Publications.htm#PUDF>.

Claim Acceptance Response Report Message

You might have noticed informational message 162 on the rEDI-link Blue – Claim Acceptance Response, stating that UBF Version 060 will be **invalid** on 10/16/03. THCIC has an agreement with THIN that will allow the continued submission of UBF (*UB92 Electronic Format*) version 060 until June 1, 2004 (*Deadline for 1Q04 discharges*).

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In other words, if you are submitting discharge data to THCIC, you may continue to submit UB92 Electronic version 060; however, if you are submitting claims for payment, they may or may not be allowed in the 060 format beginning 10/16/03. THIN is aware of the document by

CMS/OCR "Guidance on Compliance with HIPAA Transactions and Code Sets AFTER THE OCTOBER 16, 2003, IMPLEMENTATION DEADLINE" about not penalizing facilities for not submitting and will be advising its customers on how it will be handling this situation in the near future.

If you have questions regarding how THIN will handle this contact the THIN Helpdesk at (972) 766-5480.

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>

- 9/1/03 – 4q02 certification letter/comments due
- 9/1/03 – Last day to submit 2q03 claims
- 9/1/03 – Hospitals to receive 1q03 certification file
- 10/15/03 - Last day to submit changes during certification of Qtr 1 '03 data



Texas Health Care Information Council

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October 10, 2003

Hospital Numbered Letter Volume 6 Number 10

HHSC Transition Legislative Oversight Committee (TLOC)

At a meeting of the Health and Human Services Transition Legislative Oversight Committee held Friday, October 3, hospitals were assured by Gregg Phillips, Health and Human Services Deputy Commissioner for Program Services, that the Hospital Discharge Data Collection process will be continued in the reorganization of the Health and Human Services agencies. Hospitals voiced concerns about the continuation of the process in HB 2292 consolidation public hearings held throughout the state. The Committee recognized that hospitals will incur expenses in preparation for the transition to a new data collection format for year 2004 discharges and were given assurances that the program has value for the State and will be continued.

The next TLOC meeting is scheduled for 9:00 a.m. on October 21, 2003 in room 1400 of the Brown-Heatly Building at 4900 North Lamar in Austin. It is expected that the draft transition plan will be posted on the HHSC web site by that date. For additional information, please contact Cindy Niles at (512) 424-6538 or by e-mail at cindy.niles@hhsc.state.tx.us.

Reminder – Effective Nov 1st, THCIC will no longer distribute corrections and certification data on paper or diskette

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THCIC will continue to provide certification files on CD to those hospitals that have data volumes that preclude dial-up data transfer. THCIC is working to provide Internet FTP transfer capability that will allow large volume hospitals to download data directly. At that time, THCIC will no longer offer distribution of certification data on CD. THCIC will provide 90 days notification once the Internet FTP option is available.

PROGRESS REPORT: Transition To The THCIC 837

THCIC is in the quality assurance step of the first phase of the transition to the THCIC 837. This first phase or “837 map back” is effective for claims submitted in the THCIC 837 format for services submitted for calendar year 2003. During this time, all claims submitted in the THCIC

837 format will be mapped back into the UB92 for processing. This is necessary in order to retain consistency in data format for the calendar year. Beginning with 2004 discharges the UB92 version 060 electronic format will no longer be acceptable and the THCIC 837 format is expected. The deadline for 1Q2004 data is June 1, 2004.

The technical specifications for the THCIC 837 claim format are available on the THCIC website at http://www.thcic.state.tx.us/Reporting_Requirements.htm#WhattoReport. The specifications are targeted to submission of the THCIC 837 claim and contain requirements beyond the HIPAA 837 format. Questions have been raised as to whether the specifications are final. As we have all seen this journey with the HIPAA transactions and their complexities, specifications may change in the future as HIPAA regulations allow for changes.

THCIC 837

Submission Test Procedure Change

For those of you who are working on the system preparation of the 837 claims for submission to THCIC (and payers), you have found that the 837 claim is a complex syntactical structure that is very much dependent upon qualifiers (data elements that identify other data elements). A slip in the claim structure or use of qualifiers can cause, at a minimum, loss or misinterpretation of data elements.

THIN recognizes this issue and has available a tool for testing claim format and syntax. This tool is available via the THIN website and provides immediate feedback.

In order to speed the test process, THCIC asks that all providers (or their vendors) that submit claims to THCIC use this testing tool prior to submission of data to THIN for live test review.

The tool and instructions are available at www.thinedi.com. In order to use the tool, providers must first obtain a test submitter identifier. This can be obtained by contacting the THIN Helpdesk at (972) 766-6900.

Once test scenarios have been successfully reviewed using the tool, you may schedule to submit the data to THIN for test processing and approval.

Limit On Number Of Claims For Batch Or Transaction Set

THIN recently applied a new audit (263) which sends a warning message to the submitter who has submitted a file in which the batch contained more than 5000 claims. THCIC was notified that this went into effect the week of August 18, 2003.

This audit will become an error message and will begin rejecting the file in the near future. The audit will remain with the transition to the THCIC 837 format. The audit will be activated when a Transaction Set (ST segment to SE segment) contains more than 5000 claim records. This will affect hospitals, submitters or vendors for large volume providers. If you have this situation you may submit two "batches" (UB92 - 10 Record to 95 Record) within the file (UB92 - 1 Record to 99 Record) or for the THCIC 837 you may submit two Transaction Sets (837 - ST segment to SE segment) within the Functional Group (837 - GS segment to GE segment).

Identification Of Service Facilities/Providers When Multiple Providers Are Submitted In One (1) THCIC 837 Submission File

[If a vendor or hospital that submits data for more than one facility to THCIC (more than one THCIC ID).] In order to keep from having data mis-identified at THCIC, the submitter should submit only one facility per “Functional Group”. It is very important to get this correct; otherwise, your facility may not get recognized as having submitted data and could be penalized. It is also very important to get the qualifying codes correct or the data may not be identified correctly.

There are three different places (Loops) that provider information can be submitted in the THCIC837 and ANSI 837 formats:

- 1) **Loop 2000B - PRV01** Data Segment: Identifies which provider render the services to patient:
 - a. “BI” - Billing Provider in Loop 2010AA
 - b. “PT” – Pay-To Provider in Loop 2010AB
 - c. “Blank” – Service Provider in Loop 2310E
- 2) **Loop 2010AA for the Billing Provider,**
 - a. NM101 – “85” Billing Provider Entity Code
 - b. NM102 – “2” Non-Person entity
 - c. NM103 – Name of Organization,
 - d. NM108 – “24” EIN Identification Code Qualifier
 - e. NM109 – Employer’s Identification Number (EIN),
 - f. N301 – Street Address of the Billing Provider
 - g. REF01 = “1J” – Facility ID Number (Reference Identification Qualifier)
 - h. REF02 – THCIC ID (Six Digit Number)
- 3) **Loop 2010AB for the Pay-To Provide, and**
 - a. NM101 – “87” Pay-to Provider Entity Code
 - b. NM102 – “2” Non-Person entity
 - c. NM103 – Name of Organization,
 - d. NM108 – “24” EIN Identification Code Qualifier
 - e. NM109 – Employer’s Identification Number (EIN),
 - f. N301 – Street Address of the Billing Provider
 - g. REF01 = “1J” – Facility ID Number (Reference Identification Qualifier)
 - h. REF02 – THCIC ID (Six Digit Number)
- 4) **Loop 2310E for the Service Provider.**
 - a. NM101 – “FA” Service Provider Entity Code
 - b. NM102 – “2” Non-Person entity
 - c. NM103 – Name of Organization,
 - d. NM108 – “24” EIN Identification Code Qualifier
 - e. NM109 – Employer’s Identification Number (EIN),
 - f. N301 – Street Address of the Billing Provider
 - g. REF01 = “1J” – Facility ID Number (Reference Identification Qualifier)
 - h. REF02 – THCIC ID (Six Digit Number)

Notice Of Ungroupable Encounters By The APR-DRG Grouper

A situation has been uncovered that will affect claims that have a Patient Status code of “62” (*Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital. (Effective retroactive to 1/1/02.)*), “71” (*Discharged/transferred/referred to another institution for*

outpatient services as specified by the discharge plan of care (To be discontinued on 4/1/03)) or “72” (Discharged/transferred/referred to this institution for outpatient services as specified by the discharge plan of care (To be discontinued on 4/1/03)), and a CMS “MDC 15” (Newborns and Other Neonates with Conditions Originating in the Perinatal Period) or “MDC 20” (Alcohol/Drug Induced Organic Mental Disorders) or “MDC 22” (Burns). 3M Corporation has informed the Council that these particular encounters will not be grouped in the APR-DRG grouper version 15 because the patient status codes were not available when code for version 15 was being developed. The codes are grouped in APR-DRG version 20 which the Council will be going to some time in the future.

The DRG report that comes with certification data will identify these encounters. The report will list the encounter and will have a “05” (*Invalid Discharge Disposition*) as the reason the encounter was not grouped.

The Council suggests that if you do incur one of these ungroupable encounters, you should address this in the comments (optional). The Council will put the following message in the Data User’s Manual’s for all of the following Public Use Data Files and Research Files created until the Council implements version 20 of the 3M APR-DRG grouper:

Records with MDC codes of **15** (Newborns and Other Neonates with Conditions Originating in the Perinatal Period) or **20** (Alcohol/Drug Induced Organic Mental Disorders) or **22** (Burns) and one of the following Patient Status codes **62** (*Discharged/transferred to an inpatient rehabilitation facility*), **71** (*Discharged/transferred/referred to another institution for outpatient services*) or **72** (*Discharged/transferred/referred to this institution for outpatient services*) will contain an APR-DRG of **956** (Ungroupable). These Patient Status codes were not valid when version 15 of the 3M APR-DRG grouper was developed and a valid code is required for APR-DRG assignment. APR-DRG grouper Version 20 does include these codes and will create grouper assignments along with Risk of Mortality and Severity of Illness scores.

Cost of the PUDF Increases

Effective September 1, 2003, the cost of the Public Use Data File has increased. Texas hospitals that submit data to THCIC may purchase any quarterly data for \$750 each or purchase a year (1st, 2nd, 3rd, and 4th quarter data of any one year) of data for \$2500. Participating hospitals wishing to pre-purchase the 2003 PUDF may do so for a discounted cost of \$2250 if paid for by November 1, 2003.

For all other purchasers of the PUDF, any quarterly data may be purchased for \$1500. Yearly data will cost \$5000. THCIC has discounted the cost of the 2003 PUDF to \$4500 if purchased by November 1, 2003.

The PUDF user agreement and order form may be found at <http://www.thcic.state.tx.us/Publications.htm#PUDF>.

3q02 PUDF Release

The Public Use Data File for third quarter 2002 has been released and has been sent to those who have already purchased it. The file may be purchased for \$750 by participating hospitals and for \$1500 by all other users. The file includes records for inpatients discharged during July, August, and September of 2002. The PUDF user agreement and order form may be found at

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<http://www.thcic.state.tx.us/Publications.htm#PUDF>. Purchasers who have not received their copy of the 3q02 PUDF should contact Laura Farmer at (512) 482-3314.

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>.

- 10/15/03 - Last day to submit changes during certification of Qtr 1 '03 data
- 11/1/03 – Last day to submit corrections for 2q03 data
- 12/1/03 – Last day to submit 3q03 data



Texas Health Care Information Council

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November 26, 2003

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THCIC Transition

As you might be aware, THCIC's funding was reduced substantially during the last Legislative session. Considerable innovation and flexibility are required to make sure that neither the hospital discharge data nor the HMO/HEDIS data collection programs are placed in jeopardy during the period leading to the creation of the **Department of State Health Services** sometime in the spring of 2004.

THCIC is working with the Health & Human Services Commission and the Texas Department of Health to implement a transition plan wherein each of these programs is continued, and without disruptions that might impact any of the stakeholders. THCIC's business manager (Laura Farmer) and program experts (Dee Shaw, Bruce Burns, and Sylvia Cook) became TDH employees on November 1st and are now a part of the **Center for Health Statistics (CHS)** department under Mike Gilliam. Jim Loyd will remain as the Council's Executive Director through December 31st.

The Council has not given-up its policy-making authority, powers, duties, and functions. However, it is expected that the changes that occur during November-December, 2003, will enable TDH to provide the THCIC programs with better operational support than before. Staff from HHSC, THCIC, and TDH are working hard to make sure that the on-going transition takes place with minimal disruption and that the viability of the programs is maintained. Data integrity and quality operations will continue.

****Our staff will be moving to new offices within TDH (under CHS) effective the week of December 15th. Please refer to the THCIC web site (www.thcic.state.tx.us) for updates on staff phone and fax numbers and a new mailing address.**

Toll Free Number at TDH

The **Center for Health Statistics (CHS)** now has a toll free number. The number can only be dialed from Texas and is 1-866-239-7279.

Hospital Data Submitters Needed for 837 Pilot

THCIC is seeking hospitals to participate in the pilot for the submission, correction, and certification of the THCIC 837 format. Pilot hospitals will be asked to run a "mini" file through the complete submission – correction – certification process during the first months of 2004, with the goal of completing the pilot by the end of March. Hospitals wishing to participate should contact Dee Shaw by e-mail at dee.shaw@thcic.state.tx.us. Please provide the facility name, address, city, licensed bed size, a contact person, phone number, fax number, e-mail address, and how you generally submit your data (e.g., directly through your Information Systems department, using an in house system with a vendor, or through a submitting agent (vendor or clearinghouse or a parent hospital network)).

Audit Messages 856 and 864

On October 1, 2003 THCIC had its contractors change the internal format for data being passed to Commonwealth Clinical Systems (CCS). During this transition phase two programming errors occurred, one at THIN and one at CCS. The following audit messages were sent back to hospitals "Error 856: Patient Status is required" and "Error 864: SSN is required - None present".

THIN initiated a program that caused claims with Patient Status codes of 62, 63 and 64 to have the codes blanked. The altered data was passed on to CCS. Once CCS processed the data, claims that had these patient status codes (blanked by THIN) were marked as Error 856.

1. For hospitals that had more than 50 claims with the 856 Error message, the error data file is being regenerated and the hospitals will receive a replacement error data file.
2. For those hospitals that had 49 or fewer claims with the 856 Error message and are using the Data Correction Software provided by the THCIC, mark these claims "Accept as is" and include them in the upload file back to CCS. When the corrected claim comes from THIN, it will overlay the errant claim and if other errors exist, they will be returned to the primary contact person. The Pull Report or Hardcopy report identifies the patient control numbers for the claims that are required to be marked "Accept as is".
3. For those hospitals that had 49 or fewer claims with the 856 Error message and are not using the Data Correction Software, the hospital's corrected error file and reports will be rerun, the original claim will be overlaid, and any additional errors will be returned in the error claim file and reports.

Regarding "Error 864: SSN is required - None present", CCS implemented a change in the audit logic that caused the patients with a Social Security Number (SSN) of "Blank" or "999999999" to be marked with Error 864.

1. For those hospitals that had more than 50 claims with the 864 Error message, the error data file is being regenerated and the hospitals will receive another error data file.
2. For those hospitals that had 49 or fewer claims with the 864 Error message and are using the Data Correction Software provided by the THCIC, mark these claims "Accept as is" and include them in the upload file back to CCS. When the corrected claim comes from THIN, it will overlay the errant claim and if other errors exist, they will be returned to the primary contact person. The Pull Report or Hardcopy report identifies the patient control numbers for the claims that are required to be marked "Accept as is".
3. For those hospitals that had 49 or fewer claims with the 864 Error message and are not using the Data Correction Software, the hospital's corrected error file and reports will be rerun, the original claim will be overlaid, and any additional errors will be returned in the error claim file and reports.

The production schedule has been adjusted to provide additional time for these correction. Below is the modified schedule for addressing these two issues.

Key Activity	Q1-03	Q2-03	Q3-03	Q4-03	Q1-04	Q2-04
Cutoff for initial submission	6/1/03	9/1/03	12/1/03	3/1/04	6/1/04	9/1/04
Cutoff for corrections	8/1/03	11/1/03	2/1/04	4/1/04	8/15/04	11/1/04
Hospitals retrieve certification files	9/1/03	12/15/03	3/1/04	5/1/04	9/15/04	12/1/04
Cutoff for corrections at time of certification	10/15/03	1/25/04	4/15/04	6/1/04	11/1/04	1/15/05
Final encounter available to hospitals	11/1/03	2/10/04	5/1/04	6/15/04	11/15/04	2/1/05
Certification letters and comments due	12/1/03	3/1/04	6/1/04	9/1/04	12/15/04	3/1/05

Important Phone Numbers

Texas Health Information Network (THIN)
 THIN Helpdesk – 972-766-5480
 Sherri Kelly – 972-766-8706
 Ann Shelton – 972-766-6311

Commonwealth Clinical Systems (CCS)
 THCIC Helpdesk – 888-308-4953 or THCICHelp@comclin.net

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from <http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>.

- 12/1/03 – Last day to submit 3q03 data without penalty
- 12/1/03 – 1q03 Certification Letter due
- 12/15/03 – Hospitals to received 2q03 certification file
- 12/15/03 – 12/19/03 – THCIC staff moves to CHS.

Happy Thanksgiving from the staff at THCIC



Texas Health Care Information Council

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December 11, 2003

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THCIC is Moving

During the week of December 15th (Monday), THCIC staff will be moving to a new location within the Texas Department of Health (TDH) complex. Current phone numbers for staff will be operational through December 16th (Tuesday). Effective December 17th (Wednesday) staff may be contacted by dialing 512-458-7261, the main phone number at the TDH Center for Health Statistics (CHS). Please note that staff may be delayed from returning phone calls due to their involvement in the relocation efforts.

Effective December 16th (Tuesday, close of business), the current THCIC fax number (512-453-2757) will no longer be in service. Please monitor the THCIC web site at www.thcic.state.tx.us for updates on THCIC staff phone numbers and fax numbers.

The new address for all mail correspondence and package deliveries to THCIC is:

Texas Health Care Information Council
TDH-Center for Health Statistics
1100 W. 49th Street, M-660
Austin, TX 78756

The main phone number for CHS is: (512) 458-7261

THCIC staff e-mail addresses remain the same (**first.last@thcic.state.tx.us**).

Hospital Data Submitters Needed for 837 Pilot

The staff at THCIC is beginning to test the 837 data submission process and it may be beneficial for hospitals to participate in a pilot of the data submission process. Hospitals volunteering for the pilot must complete the 837 testing through THIN by early January 2004. Currently, there are no hospitals that meet this criteria.

THCIC is seeking hospitals to participate in a pilot of the submission, correction, and certification of data in the THCIC 837 format. Pilot hospitals will be asked to run a “mini” file through the complete submission – correction – certification process during the first months of 2004, with the goal of completing the pilot by the end of March. Hospitals wishing to participate should contact Dee Shaw by e-mail at dee.shaw@thcic.state.tx.us. Please provide the facility name, address, city, licensed bed size, a contact person, phone number, fax number, e-mail address, and how you generally submit your data (e.g., directly through your Information Systems department, using an in house system with a vendor, or through a submitting agent (vendor or clearinghouse or a parent hospital network)).

Important Phone Numbers

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Ann Shelton – 972-766-6311

Commonwealth Clinical Systems (CCS)

THCIC Helpdesk – 888-308-4953 or THCICHelp@comclin.net

THCIC

Center for Health Statistics (CHS) – 512-458-7261

Data Sales

The calendar year 2002 Public Use Data File (PUDF) will be ready for shipment by the end of December. This completes the fourth complete calendar year for which hospital discharge data will be available. Purchase instructions can be found on the THCIC web site at

<http://www.thcic.state.tx.us/Publications.htm#PUDF>.

Be sure to ask about pricing discounts if ordering multiple years of the PUDF in the same order.

Reminders and Deadlines

The complete hospital discharge data schedule may be downloaded from

<http://www.thcic.state.tx.us/hospitals/schedule/schedule.htm>.

- 12/15/03 – Hospitals to receive 2q03 certification file
- 12/15/03 – 12/19/03 – THCIC staff moves to CHS