

NM Health Policy Commission HIDD Electronic Record Layout					Required?
Effective: Reporting 2011 data					
NOTE: The file has <u>fixed width data columns</u> and must be padded with spaces to provide the full record length of 620 (last position ending on space 621). Fields highlighted are those fields affected by the Rule change for 2011 data.					Note that all elements are required as available by facilities.
Data Set Name: HIDD (New Mexico Hospital Inpatient Discharge Data)					
Data Fields = 91					
Record Length = 620					
Data Element and Position	Start Location	Number denotes field length limit	Data Type		
1 New Mexico State License Number, left justified	1	8	Character		X
2 Medicare Provider Number, left justified	9	6	Character		X
3 Provider zip code (5 or 9 digits), left justified	15	9	Numeric		X
4 Admission hour (military time)	24	4	Numeric		X
5 Patient Admission Date (mmdyyy)	28	8	Numeric		X
6 Point of Origin (1 to 9, A, D, E and F)	36	1	Numeric		X
7 Type of Admission (1 to 4, 9)	37	1	Numeric		X
8 Patient EMS Ambulance Run Number, left justified	38	6	Character	If applicable	
9 Traffic Crash Report Number, left justified	44	6	Character	If applicable	
10 Patient Medical Record Number, left justified	50	17	Character		X
11 Patient Medicaid ID Number	67	19	Character	If applicable	
12 Patient Control Number, left justified	86	20	Character		X
13 Birth weight (grams)	106	6	Numeric	If applicable	
14 Attending Physician NPI (assigned by Medicare)	112	10	Character		X
15 Operating Physician NPI (assigned by Medicare)	122	10	Character	If applicable	
16 Discharge hour (military time)	132	4	Numeric		X
17 Patient Discharge Date (mmdyyy)	136	8	Numeric		X
18 Patient Status (01 to 99)	144	2	Character		X
19 Primary Payer Category (1 to 10, 88), right justified	146	2	Numeric		X
20 Primary Payer Identification Name, left justified	148	25	Character		X
21 Primary Payer Type (1 to 3, 88), right justified	173	2	Numeric		X
22 Secondary Payer Category (1 to 10, 88), right justified	175	2	Numeric	If applicable	
23 Secondary Payer Identification Name, left justified	177	25	Character	If applicable	
24 Secondary Payer Type (1 to 3, 88), right justified	202	2	Numeric	If applicable	
25 Total Charges (nearest dollar), right justified	204	11	Numeric		X
26 Patient First Name, left justified	215	14	Character		X
27 Patient Last Name, left justified	229	15	Character		X
28 Patient Middle Initial	244	1	Character		X
29 Patient Social Security Number	245	9	Numeric		X
30 Patient Street Address, left justified	254	25	Character		X
31 Patient City, left justified	279	20	Character	If Zip Not Provided	
32 Patient County, left justified	299	20	Character		
33 Patient State, left justified	319	25	Character	If Zip Not Provided	
34 Patient Zip code (5 or 9 digits), left justified	344	9	Numeric		X
35 Patient Date of Birth (mmdyyy)	353	8	Numeric		X
36 Patient Race - multiple (R1 to R7, R9)	361	12	Character		X
37 Patient Ethnicity (E1, E2, E6, E7)	373	2	Character		X
38 Patient Tribal Affiliation - up to five (T1 to T22, T100, T200, T300)	375	20	Character		X
39 Sex of Patient (M, F, U)	395	1	Character		X
40 Patient Principal Diagnosis code (ICD-9-CM), left justified	396	6	Character		X
41 Patient 2nd Diagnosis code (ICD-9-CM), left justified	402	6	Character	If applicable	
42 Patient 3rd Diagnosis code (ICD-9-CM), left justified	408	6	Character	If applicable	
43 Patient 4th Diagnosis code (ICD-9-CM), left justified	414	6	Character	If applicable	
44 Patient 5th Diagnosis code (ICD-9-CM), left justified	420	6	Character	If applicable	
45 Patient 6th Diagnosis code (ICD-9-CM), left justified	426	6	Character	If applicable	
46 Patient 7th Diagnosis code (ICD-9-CM), left justified	432	6	Character	If applicable	
47 Patient 8th Diagnosis code (ICD-9-CM), left justified	438	6	Character	If applicable	
48 Patient 9th Diagnosis code (ICD-9-CM), left justified	444	6	Character	If applicable	
49 Patient 10th Diagnosis code (ICD-9-CM), left justified	450	6	Character	If applicable	
50 Patient 11th Diagnosis code (ICD-9-CM), left justified	456	6	Character	If applicable	
51 Patient 12th Diagnosis code (ICD-9-CM), left justified	462	6	Character	If applicable	
52 Patient 13th Diagnosis code (ICD-9-CM), left justified	468	6	Character	If applicable	
53 Patient 14th Diagnosis code (ICD-9-CM), left justified	474	6	Character	If applicable	
54 Patient 15th Diagnosis code (ICD-9-CM), left justified	480	6	Character	If applicable	
55 Patient 16th Diagnosis code (ICD-9-CM), left justified	486	6	Character	If applicable	
56 Patient 17th Diagnosis code (ICD-9-CM), left justified	492	6	Character	If applicable	

57	Patient 18th Diagnosis code (ICD-9-CM), left justified	498	6	Character	If applicable
58	1st E-Code, left justified, (required)	504	6	Character	If Princ. Diag. indicates trauma or poisoning
59	2nd E-Code, left justified	510	6	Character	If applicable
60	3rd E-Code, left justified	516	6	Character	If applicable
61	Patient Principal Diagnosis, Present on Admission, left justified	522	1	Character	X
62	Patient 2nd Diagnosis, Present on Admission, left justified	523	1	Character	X
63	Patient 3rd Diagnosis, Present on Admission, left justified	524	1	Character	X
64	Patient 4th Diagnosis, Present on Admission, left justified	525	1	Character	X
65	Patient 5th Diagnosis, Present on Admission, left justified	526	1	Character	X
66	Patient 6th Diagnosis, Present on Admission, left justified	527	1	Character	X
67	Patient 7th Diagnosis, Present on Admission, left justified	528	1	Character	X
68	Patient 8th Diagnosis, Present on Admission, left justified	529	1	Character	X
69	Patient 9th Diagnosis, Present on Admission, left justified	530	1	Character	X
70	Patient 10th Diagnosis, Present on Admission, left justified	531	1	Character	X
71	Patient 11th Diagnosis, Present on Admission, left justified	532	1	Character	X
72	Patient 12th Diagnosis, Present on Admission, left justified	533	1	Character	X
73	Patient 13th Diagnosis, Present on Admission, left justified	534	1	Character	X
74	Patient 14th Diagnosis, Present on Admission, left justified	535	1	Character	X
75	Patient 15th Diagnosis, Present on Admission, left justified	536	1	Character	X
76	Patient 16th Diagnosis, Present on Admission, left justified	537	1	Character	X
77	Patient 17th Diagnosis, Present on Admission, left justified	538	1	Character	X
78	Patient 18th Diagnosis, Present on Admission, left justified	539	1	Character	X
79	Patient Diagnosis Related Group (DRG) Code	540	3	Numeric	X
80	Patient Principal Procedure code (ICD-9-CM), left justified	543	5	Character	If applicable
81	Patient 2nd Procedure code (ICD-9-CM), left justified	548	5	Character	If applicable
82	Patient 3rd Procedure code (ICD-9-CM), left justified	553	5	Character	If applicable
83	Patient 4th Procedure code (ICD-9-CM), left justified	558	5	Character	If applicable
84	Patient 5th Procedure code (ICD-9-CM), left justified	563	5	Character	If applicable
85	Patient 6th Procedure code (ICD-9-CM), left justified	568	5	Character	If applicable
86	Procedure date for patient principal procedure code (mmddyyyy)	573	8	Numeric	If applicable
87	Procedure date for patient 2nd procedure code (mmddyyyy)	581	8	Numeric	If applicable
88	Procedure date for patient 3rd procedure code (mmddyyyy)	589	8	Numeric	If applicable
89	Procedure date for patient 4th procedure code (mmddyyyy)	597	8	Numeric	If applicable
90	Procedure date for patient 5th procedure code (mmddyyyy)	605	8	Numeric	If applicable
91	Procedure date for patient 6th procedure code (mmddyyyy)	613	8	Numeric	If applicable

REPORTING SCHEDULE			
Reporting period	Report due to the commission	Commission Returns integrity and validation errors	Final corrected report due to the commission
January 1 - March 31	June 30	July 31	August 30
April 1 - June 30	September 30	October 31	November 30
July 1 - September 30	December 31	January 30 of the following year	February 28 of the following year
October 1 - December 31	March 31 of the following year	April 30 of the following year	May 31 of the following year