

# **APPENDIX G**

## **INDEX**

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT  
CALIFORNIA EMERGENCY DEPARTMENT AND  
AMBULATORY SURGERY DATA REPORTING MANUAL,  
MEDICAL INFORMATION REPORTING FOR CALIFORNIA, THIRD EDITION**

**INDEX**

	Page
Abstract Record Number .....	29
Ambulatory Surgery Data Record.....	7, 11
Appeals to penalties.....	21, Appendix B
Approval Criteria.....	24
Automobile Medical.....	57
Availability of Patient Data .....	x
Cancelled Procedures.....	83
CHAMPUS (TRICARE).....	57
Chemical Dependency.....	35
Charity (as Expected Source of Payment) .....	59
Commercial Insurance .....	58
Consolidated Facilities .....	12
Contact Person.....	1
Data Transmittal Requirements .....	20
Date of Birth.....	30
Defaults .....	26-27
Designated Agent.....	3, 7, 18
Diagnoses	
Other .....	61
Principal .....	73
Disability payment .....	58
Discontinued Care.....	36, 52
Disposition of Patient .....	32
Examples .....	41-52
Due Dates .....	5
E-codes .....	63, 75
Emergency Care Data Record.....	7, 11
Emergency Department .....	8
Encounter .....	8
Error.....	8
Error Tolerance Levels.....	26
Ethnicity .....	53
Exclusive Provider Organization (EPO).....	57, 58, 59
Expected Source of Payment .....	55
Extension Request form.....	Appendix F
Extension Requests .....	92
External Cause of Injury (E-codes).....	63, 75

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT  
CALIFORNIA EMERGENCY DEPARTMENT AND  
AMBULATORY SURGERY DATA REPORTING MANUAL,  
MEDICAL INFORMATION REPORTING FOR CALIFORNIA, THIRD EDITION**

Facility Identification Number.....	3, 8
Failure to File a Data Report.....	23
Federal health coverage .....	36, 59
Fee for Service Health Plans .....	57
File Specifications for MIRCAl Online Transmission .....	Appendix C
Format .....	14, Appendix C
Forms .....	Appendix F
Freestanding Ambulatory Surgery Clinic.....	8, 11
Glossary .....	Appendix A
Health Maintenance Organization (HMO) .....	57, 58
History of the Patient Data Program .....	v
Home Health Services .....	33
Hospice Care.....	37
Hours of Operation.....	ix
How OSHPD Processes and Edits Patient Data.....	ix
ICD-9-CM (Diagnosis codes) .....	8
Intermediate Care Facility (ICF).....	35
Law (California Health and Safety Code) .....	Appendix D
Left against medical advice (AMA) .....	36
Left without being seen (LWBS) .....	36, 52
Licensee .....	,9
Licensee change .....	5
Manual Abstract Reporting Forms.....	Appendix F
Medicaid (Medi-Cal).....	59
Medicare.....	57, 59
Method of Submission .....	15
Modifications, requests for .....	91
Observation .....	33, 88
Online Test Options .....	18
Other Diagnoses .....	61
Other External Cause of Injury (E-code) .....	63
Other Procedures.....	66
Outpatient.....	9
Patient Social Security Number (Patient’s SSN).....	71
Penalties.....	23, 93, Appendix B
Point of Service (POS).....	56, 57, 59
Preferred Provider Organization (PPO).....	55, 57, 59
Primary Contact Person.....	1
Principal Diagnosis.....	73
Principal External Cause of Injury (E-code).....	75
Principal Procedure.....	80
Procedure	
Other .....	66
Principal .....	80

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT  
 CALIFORNIA EMERGENCY DEPARTMENT AND  
 AMBULATORY SURGERY DATA REPORTING MANUAL,  
 MEDICAL INFORMATION REPORTING FOR CALIFORNIA, THIRD EDITION**

Provider .....	9
Psychiatric hospital.....	39
Race .....	84
Record .....	9
Regulations (California Code of Regulations) .....	Appendix E
Report.....	9
Reporting Facility.....	9
Reporting Periods .....	4-6
Reporting Requirements .....	1-21
overview .....	vii
Request for Modifications to Patient Data Reporting .....	91
Routine Discharge.....	33
Section 1011 funds .....	59
Self Pay .....	55
Service Date.....	87
Sex.....	89
Social Security Number (patient's) .....	71
State Holidays .....	ix
Swing Bed .....	38
Undocumented Aliens, payment for .....	59
Urgent Care.....	35
User Account Administrator .....	2, 10
Worker's Compensation.....	59
ZIP Code .....	90