

# Specialty Hospital File Layout, 1998-Present

Field #	Name	Type	Size	Description
1	DOB	Date	8	Date of birth
2	AGE	Number Byte		Patient's age
3	SEX	Number Byte		Sex 1 Male 2 Female
4	RACE	Text	1	Race 1 White, non-Hispanic 2 Black, non-Hispanic 3 Asian/Pacific Islander 4 American Indian 5 Hispanic 6 Other X Unknown
5	ZIPCODE	Text	5	Residence 5 digit ZIP code XXXXX Unknown YYYYY Non-US
6	HOSPITAL	Text	6	Hospital identification number 5101 Beech Hill Hospital 5105 Hampstead Hospital 5109 Charter Brookside Behavioral Health Systems 5110 New Hampshire Hospital 5111 Northeast Rehabilitation Hospital 5113 Seaborne Hospital 5115 Seminole Point Hospital 5123 Portsmouth Pavilion 5125 Healthsouth Rehabilitation Hospital
7	ADMITDT	Date	8	Admit date
8	DISCHDT	Date	8	Discharge date
9	LOS	Number Integ		Length of stay in days 1 Less than full-day or full-day stay
10	ADMSOURC	Number Byte		Referral (Admission) Source 1 Self 2 Family/friend 3 Employer 4 Media/advertisement 5 Educational system 6 Nursing home 7 Court/police 8 Prison 9 Physician 10 Community mental health center 11 Acute care hospital 12 Psychiatric hospital 13 Mental health professional 14 Transitional housing setting 15 Private agency (e.g., VNA, CAP) 16 HMO/PPO 17 Other managed care 18 Other 19 Unknown

Field #	Name	Type	Size	Description
11	DISPOSIT	Number	Byte	Patient disposition 1 Other short term hospital 2 Skilled nursing facility 3 Intermediate care facility 4 Structured/assisted living 5 Home, self care 6 Home health service 7 Against medical advice 8 Died 9 Transfer to Rehabilitation facility 10 Transfer to Rehab. in acute facility 11 Transfer to Substance abuse facility 12 Transfer to Subs. abuse in acute facility 13 Transfer to Psychiatric facility 14 Transfer to Psych. in acute facility 15 Partial hospitalization
12	PRINDX	Text	5	Principal diagnosis ICD9-CM Code, implied decimal point
13	SECDX1 - SECDX9	Text	5	Secondary diagnosis #1 - #5 ICD9-CM Code, implied decimal point
14	ECODE	Text	6	Cause of injury in Principal Diagnosis ICD9-CM Code, implied decimal point
15	HCFADRG	Number	Integ	HCFA DRG in effect on discharge
16	HCFAMDC	Number	Byte	HCFA MDC
17	PRIPAYOR	Number	Byte	Primary payor source 1 Self pay 2 Workers compensation 3 Medicare 4 Medicaid 5 HMO 6 Other government 7 Blue Cross 8 Commercial insurance 9 Other 10 Medicare Managed Care 11 Medicaid Managed Care
18	CHARGE	Number	Long	Total charges 9999999 Over \$9,999,999
19	CHARGENT	Number	Long	Total net charges less professional svcs. 9999999 Over \$9,999,999
20	MRN	Text	9	Medical record or patient account number (not unique)
21	UNIQUEID	Text	10	Encrypted Social Security number
22	SYSTEMID	Number	Long	File record number