

NM Health Policy Commission HIDD Electronic Record Layout					Required?
Effective: Reporting 2009 data					
NOTE: The file has <u>fixed width data columns</u> and must be padded with spaces to provide the full record length of 587 (last position ending on space 588).					Note that all elements are required as available by facilities.
Data Set Name: HIDD (New Mexico Hospital Inpatient Discharge Data)					
Data Fields = 89					
Record Length = 587					
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	
3	Provider zip code (5 or 9 digits), left justified	15	9	Numeric	
4	Admission hour (military time)	24	4	Numeric	X
5	Patient Admission Date (mmddyyyy)	28	8	Numeric	X
6	Source of Admission (1 to 9)	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	
9	Traffic Crash Report Number, left justified	44	6	Character	
10	Patient Medical Record Number, left justified	50	17	Character	
11	Patient Medicaid ID Number	67	19	Character	
12	Patient Control Number, left justified	86	20	Character	
13	Birth weight (grams)	106	6	Numeric	
14	Attending Physician NPI (assigned by Medicare)	112	10	Character	
15	Operating Physician NPI (assigned by Medicare)	122	10	Character	
16	Discharge hour (military time)	132	4	Numeric	X
17	Patient Discharge Date (mmddyyyy)	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	
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	
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	
26	Patient First Name, left justified	215	14	Character	
27	Patient Last Name, left justified	229	15	Character	
28	Patient Middle Initial	244	1	Character	
29	Patient Social Security Number	245	9	Numeric	
30	Patient Street Address, left justified	254	25	Character	
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 (mmddyyyy)	353	8	Numeric	X
36	Patient ethnicity/race	361	1	Character	X
37	Sex of Patient (M,F)	362	1	Character	X
38	Patient Principal Diagnosis code (ICD-9-CM), left justified (Changed from Principal Diagnosis Code)	363	6	Character	X
39	Patient 2nd Diagnosis code (ICD-9-CM), left justified	369	6	Character	If applicable
40	Patient 3rd Diagnosis code (ICD-9-CM), left justified	375	6	Character	If applicable
41	Patient 4th Diagnosis code (ICD-9-CM), left justified	381	6	Character	If applicable
42	Patient 5th Diagnosis code (ICD-9-CM), left justified	387	6	Character	If applicable
43	Patient 6th Diagnosis code (ICD-9-CM), left justified	393	6	Character	If applicable
44	Patient 7th Diagnosis code (ICD-9-CM), left justified	399	6	Character	If applicable
45	Patient 8th Diagnosis code (ICD-9-CM), left justified	405	6	Character	If applicable
46	Patient 9th Diagnosis code (ICD-9-CM), left justified	411	6	Character	If applicable
47	Patient 10th Diagnosis code (ICD-9-CM), left justified	417	6	Character	If applicable
48	Patient 11th Diagnosis code (ICD-9-CM), left justified	423	6	Character	If applicable
49	Patient 12th Diagnosis code (ICD-9-CM), left justified	429	6	Character	If applicable
50	Patient 13th Diagnosis code (ICD-9-CM), left justified	435	6	Character	If applicable
51	Patient 14th Diagnosis code (ICD-9-CM), left justified	441	6	Character	If applicable
52	Patient 15th Diagnosis code (ICD-9-CM), left justified	447	6	Character	If applicable
53	Patient 16th Diagnosis code (ICD-9-CM), left justified	453	6	Character	If applicable
54	Patient 17th Diagnosis code (ICD-9-CM), left justified	459	6	Character	If applicable
55	Patient 18th Diagnosis code (ICD-9-CM), left justified	465	6	Character	If applicable

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Data Fields = 89					
Record Length = 587					
Data Element and Position	Start Location	Number denotes field length limit	Data Type		
56 1st E-Code, left justified, (required)	471	6	Character		If Princ. Diag. indicates trauma or poisoning
57 2nd E-Code, left justified	477	6	Character		If applicable
58 3rd E-Code, left justified	483	6	Character		If applicable
59 Patient Principal Diagnosis, Present on Admission, left justified	489	1	Character		X
60 Patient 2nd Diagnosis, Present on Admission, left justified	490	1	Character		If applicable
61 Patient 3rd Diagnosis, Present on Admission, left justified	491	1	Character		If applicable
62 Patient 4th Diagnosis, Present on Admission, left justified	492	1	Character		If applicable
63 Patient 5th Diagnosis, Present on Admission, left justified	493	1	Character		If applicable
64 Patient 6th Diagnosis, Present on Admission, left justified	494	1	Character		If applicable
65 Patient 7th Diagnosis, Present on Admission, left justified	495	1	Character		If applicable
66 Patient 8th Diagnosis, Present on Admission, left justified	496	1	Character		If applicable
67 Patient 9th Diagnosis, Present on Admission, left justified	497	1	Character		If applicable
68 Patient 10th Diagnosis, Present on Admission, left justified	498	1	Character		If applicable
69 Patient 11th Diagnosis, Present on Admission, left justified	499	1	Character		If applicable
70 Patient 12th Diagnosis, Present on Admission, left justified	500	1	Character		If applicable
71 Patient 13th Diagnosis, Present on Admission, left justified	501	1	Character		If applicable
72 Patient 14th Diagnosis, Present on Admission, left justified	502	1	Character		If applicable
73 Patient 15th Diagnosis, Present on Admission, left justified	503	1	Character		If applicable
74 Patient 16th Diagnosis, Present on Admission, left justified	504	1	Character		If applicable
75 Patient 17th Diagnosis, Present on Admission, left justified	505	1	Character		If applicable
76 Patient 18th Diagnosis, Present on Admission, left justified	506	1	Character		If applicable
77 Patient Diagnosis Related Group (DRG) Code	507	3	Numeric		
78 Patient Principal Procedure code (ICD-9-CM), left justified (Changed from Principal Procedure Code)	510	5	Character		If applicable
79 Patient 2nd Procedure code (ICD-9-CM), left justified	515	5	Character		If applicable
80 Patient 3rd Procedure code (ICD-9-CM), left justified	520	5	Character		If applicable
81 Patient 4th Procedure code (ICD-9-CM), left justified	525	5	Character		If applicable
82 Patient 5th Procedure code (ICD-9-CM), left justified	530	5	Character		If applicable
83 Patient 6th Procedure code (ICD-9-CM), left justified	535	5	Character		If applicable
84 Procedure date for patient principal procedure code (mmddyyyy) (Changed from Principal Procedure Date)	540	8	Numeric		If applicable
85 Procedure date for patient 2nd procedure code (mmddyyyy)	548	8	Numeric		If applicable
86 Procedure date for patient 3rd procedure code (mmddyyyy)	556	8	Numeric		If applicable
87 Procedure date for patient 4th procedure code (mmddyyyy)	564	8	Numeric		If applicable
88 Procedure date for patient 5th procedure code (mmddyyyy)	572	8	Numeric		If applicable
89 Procedure date for patient 6th procedure code (mmddyyyy)	580	8	Numeric		If applicable