

STATE OF CALIFORNIA
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

**Emergency Department and Ambulatory
Surgery Data File Documentation
January-June 2007**

NONPUBLIC VERSION
(also applicable to Customized Datasets)

**COMMA-DELIMITED TEXT FORMAT
and
SAS Datasets**

CD-ROM

November 2007

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INTRODUCTION

California Emergency Department and Ambulatory Surgery Center Datasets

Public Datasets

The California Office of Statewide Health Planning and Development (OSHPD) provides a public dataset of the Emergency Department (ED) and Ambulatory Surgery (AS) Databases (based on National Standards) available for purchase on compact disc (CD). The data is made available by OSHPD once it has been screened by the editing program and corrected by the individual hospitals. To de-identify records to protect patient confidentiality, demographic variables in the public dataset are masked. (See the public dataset documentation for the masking logic and specific percentages of variable masking).

Nonpublic Datasets

Nonpublic datasets are available in accordance with the Information Practices Act and section 128766 of the Health and Safety Code, consistent with limited dataset requirements under 45 CFR section 164.514. For information regarding access to nonpublic datasets, please contact OSHPD's Healthcare Information Resource Center at (916) 322-2814. **This documentation booklet applies to any customized nonpublic dataset supplied by OSHPD.**

General assistance is available by calling OSHPD's Healthcare Information Resource Center at (916) 322-2814, or by visiting our Web site at www.oshpd.ca.gov.

Only brief descriptions are given for data elements. For more detailed descriptions, please refer to the California Emergency Department and Ambulatory Data Reporting Manual at www.oshpd.ca.gov/MIRCal/programs/EDASManual/EDASReporting.htm. Additional information can also be found on the Laws & Regulations page at www.oshpd.ca.gov/MIRCal/aboutMircal/laws.htm.

Notes on Importing this data:

The fields listed below contain numeric codes that are not numeric values; most PC software will treat these fields as numeric values unless formatted otherwise. Thus, when importing the data into your software, these fields should be formatted as text or alpha-numeric to retain the leading and trailing zeros.

- OSHPD-Facility Identification Number
- County of Patient's Residence
- Patient ZIP code
- Expected Principal Source of Payment
- Disposition of Patient
- 5 Age Category and 20 Age Category fields
- Service Quarter
- Ethnicity
- Race
- **All** diagnosis code fields (principal and other)
- **All** procedure code fields (principal and other)

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It is strongly recommended that leading zeros be maintained for these variables, and especially that all Diagnosis and Procedure code fields be formatted as "text". These particular fields are comprised of ICD-9-CM and CPT codes, some of which begin with alpha characters. In addition, many Diagnosis (ICD-9-CM) and Procedure (CPT) codes have leading and/or trailing zeros. For example, the ICD-9-CM code for *Salmonella Gastroenteritis* is "003.0". When formatted as numeric, it will appear as "3", producing an invalid diagnostic code for *Salmonella Gastroenteritis*.

Comma-Delimited Data Format

In the comma-delimited set, the length of each field and the length of each record will vary according to the data reported. To assist you in using the comma-delimited datasets, a header row identifying each data element is provided in the position of the first record.

Each data element is separated by a comma and is defined and described in this documentation. Appendix H contains a table listing the field label (used in the header row), field name, field type (format), and maximum number of characters. This table includes all variables in the master file. Nonpublic datasets are customized to include only the approved set of variables.

Fields containing missing data values will appear as consecutive delimiters (commas). This will not pose a problem with most PC software. However, some software packages may handle consecutive delimiters as a single delimiter and adjustments will need to be made.

Note: Due to error tolerance levels, it is possible for some invalid values to remain in the database "as reported" by the facility. This means that for some observations, you may find blank values, invalid alpha characters in numeric fields, out-of-range numeric values, etc. For information on error tolerance levels, refer to the MIRCal ED & AS Edit Flag Description Guide at www.oshpd.ca.gov/MIRCal/programs/EDASEditGuide.pdf.

SAS Datasets

SAS datasets are version 9.1 (.sas7bdat files).

Facility Exceptions

Modifications and Non-Compliant Facilities

Some facilities have applied for and been granted "modifications" to standard data reporting requirements. Other facilities were unable to complete specific fields as required and were deemed "non-compliant" at the time of reporting. See Appendix D (Data Exceptions) for a listing of all non-compliant facilities and those with approved modifications and their affected variables.

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DATA ELEMENT FIELD DESCRIPTIONS – FACILITY VARIABLES

HOSPITAL or AMBULATORY SURGERY CENTER IDENTIFICATION NUMBER

FIELD NAME: fac_id

DEFINITION: A unique six-digit identifier assigned to each facility by the Office of Statewide Health Planning and Development. The first two digits indicate the county in which the facility is located. The last four digits are unique within each county.

CODES, CATEGORIES AND COMMENTS:

99 = 01-58 = County Codes (see Appendix A)
9999 = 0001-9999 = Unique Facility Identifier (within county)

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 6

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HOSPITAL OR AMBULATORY SURGERY CENTER LICENSE TYPE

FIELD NAME: lic_type

DEFINITION: Indicates the license type of the reporting facility.

CODES, CATEGORIES AND COMMENTS:

H = Hospital-based

C = Freestanding clinic – any entity licensed by the Department of Health Services Licensing and Certification that is not hospital-operated and operates exclusively for the purpose of providing surgical services to patients not requiring hospitalization.

Note: OSHPD does not collect data from unlicensed, freestanding ambulatory surgery centers, even if they are leased, contracted, or Medicare-approved. To determine licensure, go to the OSHPD ALIRTS system on the Internet: www.alirts.oshpd.ca.gov, enter the facility's name in the search dialogue box, and click "search." For assistance with this system contact the Healthcare Information Resource Center at (916) 322-2814.

H is a valid entry for ED data (includes only those with basic standby and comprehensive permits licensed by the Department of Health Services.

C and H are valid entries for AS data.

VARIABLE TYPE: Text /Alpha-numeric

VARIABLE LENGTH: 1

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FACILITY ZIP CODE

FIELD NAME: faczip

DEFINITION: This is a unique code assigned to a specific geographic area by the U.S. Postal Service. The ZIP code in this field designates the location of the facility.

The ZIP codes are verified against the list provided by the United States Postal Service (1-800-ASK-USPS or www.usps.com).

VARIABLE TYPE: Text /Alpha-numeric

VARIABLE LENGTH: 5

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FACILITY COUNTY CODE

FIELD NAME: fac_co

DEFINITION: The 2-digit code for the county in which the Facility is located. The County Code ranges from "01" to "58," for Alameda through Yuba counties. See Appendix A for the complete listing of all 58 counties and their respective codes.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 2

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DATA ELEMENT FIELD DESCRIPTIONS – ENCOUNTER VARIABLES

PATIENT TYPE

FIELD NAME: pat_type

DEFINITION: Indicates whether the patient was treated in a hospital based Emergency Department or a hospital based or free-standing Ambulatory Surgery Center.

CODES, CATEGORIES AND COMMENTS:

CodeCategory
A = Ambulatory Surgery
E = Emergency Department

All other values for Type of Care are not considered valid.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 1

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SERVICE DAY OF WEEK

FIELD NAME: serv_d

DEFINITION: Day of week the patient was treated at the facility.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	=	<u>Category</u>
1	=	Sunday
2	=	Monday
3	=	Tuesday
4	=	Wednesday
5	=	Thursday
6	=	Friday
7	=	Saturday

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 1

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SERVICE MONTH

FIELD NAME: serv_m

DEFINITION: Month of year the patient was treated.

CODES, CATEGORIES AND COMMENTS:

Month (Two-digit): 01-12 = January through December

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 2

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SERVICE QUARTER

FIELD NAME: serv_q

DEFINITION: Quarter the patient was treated in an Emergency Department or Ambulatory or Surgery Center.

CODES, CATEGORIES AND COMMENTS:

	<u>Code</u>	<u>Quarter</u>
One-digit quarter	1	January-March
	2	April-June
	3	July-September
	4	October-December

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 1

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SERVICE YEAR

FIELD NAMES: serv_y

DEFINITION: Year the patient was treated in an Emergency Department or Ambulatory Surgery Center.

CODES, CATEGORIES AND COMMENTS:

Four-digit year - This is comprised of first two digits century and last two digits year.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 4

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PATIENT'S DISPOSITION

FIELD NAME: dispn

DEFINITION: The consequent arrangement or event ending a patient's encounter in the reporting facility shall be reported as follows:

CODES, CATEGORIES AND COMMENTS:

Patient's Disposition:

<u>Code</u>	<u>Category</u>
01	Discharged to home or self care (routine discharge).
02	Discharged/transferred to a short term general hospital for inpatient care.
03	Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation of covered skilled care.
04	Discharged/transferred to an intermediate care facility (ICF).
05	Discharged/transferred to another type of institution not defined elsewhere in this code list.
06	Discharged/transferred to home under care of organized home health service organization.
07	Left against medical advice or discontinued care.
20	Expired.
43	Discharged/transferred to a federal health care facility.
50	Discharged home with hospice care.
51	Discharged to a medical facility with hospice care.
61	Discharged/transferred to a hospital-based Medicare approved swing bed.
62	Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part unit of a hospital.
63	Discharged/transferred to a Medicare certified long-term care hospital (LTCH).
64	Discharged/transferred to a nursing facility certified under Medicaid (Medi-Cal), but not certified under Medicare.
65	Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital.
66	Discharged/transferred to a Critical Access Hospital (CAH).
00	Other
99	Invalid/blank

All other values for Patient's Disposition are not considered valid.

Patients admitted to a hospital from the emergency department or a hospital-based ambulatory surgery facility have only one record. It is reported in the inpatient data. Patients admitted to a hospital from a licensed freestanding ambulatory surgery center or certified ambulatory surgery center have two records – one in ambulatory surgery data and one in the inpatient data.

VARIABLE TYPE: Text /Alpha-numeric

VARIABLE LENGTH: 2

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**RECORD LINKAGE NUMBER
(Encrypted Social Security Number)**

FIELD NAME: rln

DEFINITION: The patient's Social Security Number is encrypted into a unique 9-digit alpha-numeric number. If the patient's Social Security Number was not recorded in the patient's medical record, or if the Social Security Number was invalid and could not be corrected, the Record Linkage number is shown as "-----". The value reported is the patient's Social Security Number, not the Social Security Number of another individual, such as the mother of a newborn or the insurance beneficiary under whose account the hospital's bill is to be submitted.

CODES, CATEGORIES AND COMMENTS:

Record Linkage Numbers coded as "-----" (9 hyphens) are a result of "unknown" or blank Social Security Numbers.

The Record Linkage Number can be used to link records for the same patient across time regardless of the admitting hospital. .

VARIABLE TYPE: Text /Alpha-numeric

VARIABLE LENGTH: 9

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DATA ELEMENT FIELD DESCRIPTIONS – PATIENT DEMOGRAPHICS

AGE IN DAYS and AGE IN YEARS (at Service)

FIELD NAMES: agdyserv and agyrserv

DEFINITION: Age of patient at time of encounter.

CODES, CATEGORIES AND COMMENTS:

- **Newborns** (born and treated on the same day) will be assigned an age value of 1 day.
- **Age less than 1 year** will be shown in **days** (1-364 DAYS).
- **Ages 1 year and over** will be shown in **years only**.

Age = 000 000 indicates age is unknown. This occurs when the year of birth is incomplete or unknown.

VARIABLE TYPE: Numeric

VARIABLE LENGTH: 3

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SEX

FIELD NAME: SEX

DEFINITION: This is the gender of the patient.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>
M=	Male
F=	Female
U=	Unknown
I=	Invalid

All other values for Sex are not considered valid.

"Unknown" indicates that the patient's sex was not available from the medical record. It is also used for congenital abnormalities that obscure sex identification and sex change operations.

VARIABLE TYPE: Text /Alpha-numeric

VARIABLE LENGTH: 1

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ETHNICITY

FIELD NAME: eth

DEFINITION: This code indicates whether or not the patient's ethnicity is Hispanic. This includes a person who identifies with or is of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>
E1=	Hispanic
E2=	Non-Hispanic
99=	Unknown
00=	Invalid/Blank

The unknown category includes patients who did not declare ethnicity and one has not been assigned.

Ethnicity of a Newborn – The parent(s) declares the ethnicity of a newborn. If the parent(s) does not declare the newborn's ethnicity, the ethnicity of the mother is reported.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 2

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RACE

FIELD NAME: RACE (all caps)

DEFINITION: This code indicates the patient's racial background.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>
R1	American Indian/Alaska Native – A person having origins in or who identifies with any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
R2	Asian – A person having origins in or who identifies with Asian Indian, Bangladeshi, Bhutanese, Burmese, Cambodian, Chinese, Filipino, Hmong, Indonesian, Iwo Jiman, Japanese, Korean, Laotian, Madagascar, Malaysian, Maldivian, Nepalese Okinawan, Pakistani, Singaporean, Sri Lankan, Taiwanese, Thai, and Vietnamese.
R3	Black or African American – A person having origins in or who identifies with any of the black racial groups of Africa including Botswanan, Ethiopian, Liberian, Namibian, Nigerian, Zairean, Barbadian, Dominican, Haitian, Jamaican, Tobagoan, Trinidadian, and West Indian.
R4	Native Hawaiian or Other Pacific Islander – A person having origins in or who identifies with the following groups: Native Hawaiian, Carolinian, Chamorro, Chuukese (Trukese), Fijian, Guamanian, Kiribati, Kosraean, Marshallese, Melanesian, Microesian, Mariana Islander, Hew Hebrides, Palauan, Papua New Guinean, Pohopeian, Polynesian, Saipanese, Samoan, Solomon Islander, Tahitian, Tokelauan, Tongan, and Yapese.
R5	White – A person having origins in or who identifies with any of the original Caucasian peoples of Europe, North Africa, or the Middle East. This may include the following groups: Armenian, English, French, German, Irish, Italian, Polish, Scottish, Middle Eastern, North African, Assyrian, Egyptian, Iranian, Iraqi, Lebanese, Palestinian, Syrian, Afghanistani, Israeli, and Arab.
R9	Other Race – Any possible options not covered in the above categories. This category includes patients who cite more than one race.
99	Unknown – If the patient's race is not recorded in the patient's medical record, the race should be reported as "Unknown". This category includes patients who cannot or refuse to declare race.
00	Invalid/Blank (Default applied by OSHPD).

The unknown category includes patients who do not declare ethnicity and one has not been assigned.

Race of a Newborn – The parent(s) declares the ethnicity of a newborn. If the parent(s) does not declare the newborn's ethnicity, the ethnicity of the mother is reported.

VARIABLE TYPE: Text /Alpha-numeric
VARIABLE LENGTH: 2

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RACE GROUPS

FIELD NAME: race_grp

DEFINITION: Race/Ethnicity recoded into broader categories for purposes of data display.
Hispanic "Ethnicity" is grouped regardless of "race". In other words, if the Ethnicity is Hispanic, the Race Group is Hispanic.

CODES, CATEGORIES, AND COMMENTS:

If Ethnicity = Hispanic then Race Group = 3 (Hispanic)
If Ethnicity not equal to Hispanic and Race = R1 (American Indian) then Race Group = 5 (American Indian)
If Ethnicity not equal to Hispanic and Race = R2 (Asian) then Race Group = 4 (Asian)
If Ethnicity not equal to Hispanic and Race = R3 (Black or African American) then Race Group = 2 (Black)
If Ethnicity not equal to Hispanic and Race = R4 (Native Hawaiian) then Race Group = 4 (Asian)
If Ethnicity not equal to Hispanic and Race = R5 (White) then Race Group = 1 (White)
If Ethnicity not equal to Hispanic and Race = R9 (Other Race) then Race Group = 6 (Other)
If Ethnicity not equal to Hispanic and Race = 00 or 99 then Race Group = 0 (Unknown)

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 1

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PATIENT ZIP CODE – Five-Digit

FIELD NAME: PATZIP (all CAPS)

DEFINITION: The ZIP code of the patient's residence (all five digits). This is a unique code assigned to a specific geographic area by the U.S. Postal Service for the patient's usual residence.

CODES, CATEGORIES AND COMMENTS:

- The five digits of the ZIP code of the patient's residence.
- If the field is coded with 99999, the ZIP code is unknown.
- The ZIP codes are verified against the list provided by the United States Postal Service (1-800-ASK-USPS or www.usps.com).

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 5

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PATIENT'S COUNTY OF RESIDENCE

FIELD NAME: patco

DEFINITION: The county of residence code is assigned based on the reported patient's ZIP code.

CODES, CATEGORIES AND COMMENTS:

Codes: 00-58

01-58 indicates a county in California (see list in Appendix A); "00" indicates that the patient's ZIP code was unknown, outside California, outside the U.S., homeless, or partial.

Note – Using the reported ZIP code, OSHPD assigns the patient's county of residence. ZIP codes are designed for mail delivery, not to identify political boundaries. Therefore, some ZIP codes cross county boundaries. For such ZIP codes, OSHPD assigns the county with the greatest population in the respective ZIP code.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 2

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EXPECTED SOURCE OF PAYMENT

FIELD NAME: payer

DEFINITION This code indicates the category of payer (type of entity or organization) who is expected to pay or did pay the greatest share of the patient's bill.

CODES, CATEGORIES, AND COMMENTS

09 = Self Pay - Payment directly by the patient, personal guarantor, relatives, or friends. The greatest share of patient's bill is not expected to be paid by any form of insurance or other health plan.

11 = Other Non-federal programs - Include any form of payment from local, county, or state government agencies.

12 = Preferred Provider Organization (PPO) - Includes Blue Cross/Blue Shield or commercial insurance companies under a PPO arrangement. Does not include Medi-Cal patients under a PPO arrangement.

13 = Point of Service (POS) - Includes Blue Cross/Blue Shield or commercial insurance companies under a POS arrangement.

14 = Exclusive Provider Organization (EPO) - Includes Blue Cross/Blue Shield or commercial insurance companies under an EPO arrangement.

16 = Health Maintenance Organization (HMO) Medicare Risk - Includes Medicare Patients covered under an HMO arrangement only.

AM = Automobile Medical - Includes PPO, POS, EPO, HMO and Fee for Service or any other payment resulting from automobile coverage.

BL = Blue Cross/Blue Shield - Includes only BC/BS Fee for Service payments.

CH = CHAMPUS (TRICARE) - Includes any PPO, POS, EPO, HMO, Fee for Service, or other payment from the Civilian Health and Medical Program of the Uniformed Services or from TRICARE.

CI = Commercial Insurance Company - Includes payments from insurance carriers on a Fee for Services basis; Excludes PPO, POS, and EPO payments.

DS = Disability - Payments resulting from disability coverage.

HM = Health Maintenance Organization - HMO payment payers. Does not include Medicare HMO or Medi-Cal HMO.

MA = Medicare Part A - Defined by Title XVIII of the Social Security Act. Covers inpatient hospital stays, care in a skilled nursing facility, hospice care and some home health care.

MB = Medicare Part B - Defined by Title XVIII of the Social Security Act. Covers some outpatient hospital care and some home health services.

MC = Medi-Cal or Medi-Cal Managed Care Plan - Defined by Title XIX of the Social Security Act and Title I of the Federal Medicare Act (PL 89-97). Includes all Medi-Cal including Fee for Service, PPO, POS, EPO, and HMO.

OF = Other Federal Program - Federal programs not covered by any other category.

TV = Title V - Defined by the Federal Medicare Act (PL 89-97) for Maternal and Child Health. Title V of

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the Social Security Act is administered by the Health Resources and Services Administration, Public Health Service, Department of Health and Human Services. Includes California Children Services and Maternal and Child Health program payments not covered under Medi-Cal.

VA = Veterans Affairs Plan - Includes any PPO, POS, EPO, HMO, Fee for Service or other payment resulting from Veterans Administration coverage.

WC = Workers' Compensation Health Claim - Includes payments from Workers' Compensation Health Claim insurance.

00 = Other - Includes Payments by governments of other countries, payment by local or organized charities such as the Cerebral Palsy Foundation, Easter Seals, March of Dimes, Shriners, and payments not listed in other categories.

Note: The payer categories are found in three implementation guides (837 Health Care Services: Data Reporting Guide, 837 Health Care Claim Institutional, and 837 Health Care Claim: Professional).

Due to lack of definitions, five payer categories were not included in this data element and are not accepted by OSHPD as valid payers. They are Central Certification, Indemnity Insurance, Liability, Liability Medical, and Mutually Defined or Unknown. If these payer categories were responsible for payment, these would be included in "other" when reporting to OSHPD.

99 = Invalid/blank - (Default applied by OSHPD)

For detailed information on Expected Source of Payment, please refer to the California ED & AS Data Reporting Manual at www.oshpd.ca.gov/MIRCal/programs/EDASManual/EDASReporting.htm.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 2

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DATA ELEMENT FIELD DESCRIPTION – CLINICAL VARIABLES

PRINCIPAL DIAGNOSIS

FIELD NAME: dx_prin

DEFINITION: The condition problem or other reason established, after study, to be the chief cause of the encounter for care.

CODES, CATEGORIES AND COMMENTS:

The appropriate codes to be entered for this data element are specified in the International Classification of Diseases, 9th Revision, Clinical Modification, U.S. Department of Health and Human Services, Washington D.C. (ICD-9-CM).

The following codes for Diagnosis are not accepted by OSHPD:

Morphology codes in ICD-9-CM

SNODO

DSM

E-Codes in ICD-9-CM

Italicized codes for Manifestation Conditions in ICD-9-CM (for Principal Diagnosis field)

CODE STRUCTURE (examples):

Content of Field: V5781 Would be read as: V57.81

Content of Field: 3441 Would be read as: 344.1

(Implied decimal is read after the first three character positions.)

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 7

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OTHER DIAGNOSES (Maximum 24 Other Diagnoses)

FIELD NAME: odx1-odx24

:

DEFINITION Conditions that coexist at the time of the encounter for emergency or ambulatory surgery care, that develop subsequently during the encounter, or that affect the treatment received. Diagnoses shall be coded according to the ICD-9-CM. ICD-9-CM codes from the Supplementary Classification of External Causes of Injury and Poisoning (E800-E999) and codes from Morphology of Neoplasms (M800-M997) are not reported as other diagnoses.

CODES, CATEGORIES AND COMMENTS:

Other Diagnoses has a maximum of 24 other diagnoses, if reported.

Identical (duplicate) diagnosis codes are not acceptable by OSHPD.

The following codes for Diagnosis are not accepted by OSHPD:

Morphology codes in ICD-9-CM

SNODO

DSM

E-Codes in ICD-9-CM

Italicized codes for Manifestation Conditions in ICD-9-CM (for Principal Diagnosis field)

CODE STRUCTURE (examples):

Content of Field: V5781 Would be read as: V57.81

Content of Field: 3441 Would be read as: 344.1

(Implied decimal is read after the first three positions.)

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 7

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PRINCIPAL PROCEDURE

FIELD NAME: pr_prin

DEFINITION: The principal procedure is one that is surgical in nature, or carries a procedural risk, or carries an anesthetic risk. The procedure related to the principal diagnosis, as the chief reason for the encounter, shall be selected as the principal procedure.

CODES, CATEGORIES AND COMMENTS:

- The procedure is coded according to the Current Procedural Terminology, (CPT-4).
- A Principal Procedure was reported on each Ambulatory Surgery record if the outpatient procedure was performed in general operating rooms, ambulatory surgery rooms, endoscopy units, cardiac catheterization labs of hospitals, or freestanding ambulatory surgery clinics.
- Category II CPT-4 codes are not accepted by OSHPD.
- Modifiers are not accepted by OSHPD.
- HCPCS (Level II) codes are not accepted by OSHPD.
- ICD-9-CM codes are not accepted for ED and AS data by OSHPD.

CODE STRUCTURE (examples):

Five digit number with no imbedded or implied decimal

Content of field 31255 Nasal/Sinus Endoscopy surgical, with ethmoidectomy, total
 38120 Laparoscopy, surgical, splenectomy

For more information on surgery, procedural risks, and anesthetic risk, refer to the California ED & AS Data Reporting Manual at www.oshpd.ca.gov/MIRCal/programs/EDASManual/EDASReporting.htm.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 5

**CALIFORNIA EMERGENCY DEPARTMENT and AMBULATORY SURGERY
CENTER DATA
January-June 2007**

**OTHER PROCEDURES
(Maximum 20)**

FIELD NAME: opr1-opr20

DEFINITION: A significant procedure is one that is surgical in nature, or carries a procedural risk, or carries an anesthetic risk.

CODES, CATEGORIES AND COMMENTS:

- The procedure is coded according to the Current Procedural Terminology, (CPT-4).
- A Principal Procedure was reported on each Ambulatory Surgery record if the outpatient procedure was performed in general operating rooms, ambulatory surgery rooms, endoscopy units, cardiac catheterization labs of hospitals, or freestanding ambulatory surgery clinics.
- Category II CPT-4 codes are not accepted by OSHPD.
- Modifiers are not accepted by OSHPD.
- HCPCS (Level II) codes are not accepted by OSHPD.
- ICD-9-CM codes are not accepted for ED and AS data by OSHPD.

CODE STRUCTURE (examples):

Five digit number with no imbedded or implied decimal

Content of field 31255 Nasal/Sinus Endoscopy, surgical, with ethmoidectomy, total
 38120 Laparoscopy, surgical, splenectomy

For more information on surgery, procedural risks, and anesthetic risk, refer to the California ED & AS Data Reporting Manual at www.oshpd.ca.gov/MIRCal/programs/EDASManual/EDASReporting.htm.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 5

**CALIFORNIA EMERGENCY DEPARTMENT and AMBULATORY SURGERY
CENTER DATA
January-June 2007**

PRINCIPAL EXTERNAL CAUSE OF INJURY – E-CODE

FIELD NAME: ec_prin

DEFINITION: The external cause of injury consists of the ICD-9-CM codes E800-E999 (E-Codes) that are used to describe the external cause of injuries, poisonings, and adverse effects. If the information is available in the medical record, E-Codes sufficient to describe the external cause are reported for patients with a principal and/or other diagnoses classified as injuries or poisonings in Chapter 17 of the ICD-9-CM (800-999), or where a code from Chapters 1-16 of the ICD-9-CM (001-799) indicates that an additional E-Code is applicable. The reporting of E-Codes in the range E870-E879 (misadventures and abnormal reactions) is not required. The principal E-Code is reported only for the inpatient hospitalization during which the injury, poisoning, and/or adverse effect was first diagnosed and/or treated.

To assure uniform reporting of E-Codes, when multiple codes are required to completely classify the cause, the first (principal) E-Code will describe the mechanism that resulted in the most severe injury, poisoning, or adverse effect.

CODES, CATEGORIES AND COMMENTS:

The valid E-Codes are specified in E-Code chapter of the ICD-9-CM codebook.

CODE STRUCTURE (examples):

Content of Field: E9068 Would be read as: E906.8
Content of Field: E899 Would be read as: E899.
(Implied decimal is read after the first four positions.)

For more information regarding how E-Codes are reported, please refer to the California Emergency Department and Ambulatory Surgery Data Reporting Manual at www.oshpd.ca.gov/MIRCal/programs/EDASManual/EDASReporting.htm.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 7

**CALIFORNIA EMERGENCY DEPARTMENT and AMBULATORY SURGERY
CENTER DATA
January-June 2007**

OTHER EXTERNAL CAUSE OF INJURY – E-CODES

FIELD NAME: ec1-ec4

DEFINITION: The external cause of injury consists of the ICD-9-CM codes E800-E999 (E-Codes) that are used to describe the external cause of injuries, poisonings, and adverse effects. If the information is available in the medical record, E-codes sufficient to describe the external cause are reported for patients with a principal and/or other diagnoses classified as injuries or poisonings in Chapter 17 of the ICD-9-CM (800-999), or where a code from Chapters 1-16 of the ICD-9-CM (001-799) indicates that an additional E-code is applicable. The reporting of E-Codes in the range E870-E879 (misadventures and abnormal reactions) is not required. An E-Code is reported only for the inpatient hospitalization during which the injury, poisoning, and/or adverse effect was first diagnosed and/or treated.

If the principal E-Code does not include a description of the place of occurrence of the most severe injury, or poisoning, an additional E-Code is reported to designate the place of occurrence, if available in the medical record. Place of occurrence is coded as E849.0 - E849.9.

Up to three additional E-Codes will be reported, if necessary to completely describe the mechanism(s) that contributed to, or the causal events surrounding, any injury or poisoning, or adverse effect first diagnosed and/or treated during the current inpatient hospitalization.

CODES, CATEGORIES AND COMMENTS:

The valid E-Codes specified in E-Code chapter of the ICD-9-CM codebook.

CODE STRUCTURE (examples):

Content of Field: E9068 Would be read as: E906.8

Content of Field: E899 Would be read as: E899.

(Implied decimal is read after the first four positions.)

For more information regarding how E-Codes are reported, please refer to the California Emergency Department and Ambulatory Surgery Data Reporting Manual at www.oshpd.ca.gov/MIRCal/programs/EDASManual/EDASReporting.htm.

VARIABLE TYPE: Text/Alpha-numeric

VARIABLE LENGTH: 7

**CALIFORNIA EMERGENCY DEPARTMENT and AMBULATORY SURGERY
CENTER DATA
January-June 2007**

DATA ELEMENT FIELD DESCRIPTIONS – DATES AND IDENTIFIERS

DATE OF BIRTH

FIELD NAME: brthdate
DEFINITION: The date the patient was born.

SERVICE DATE

FIELD NAME: serv_dt
DEFINITION: The date the encounter occurred. If a patient arrives at an Emergency Department or Ambulatory Surgery Center on one day and leaves the following day, the date of the beginning of the encounter is the date reported.

**CALIFORNIA EMERGENCY DEPARTMENT and AMBULATORY SURGERY
CENTER DATA
January-June 2007**

RECORD LINKAGE NUMBER SEQUENCE

FIELD NAME: RLN_SEQ

DEFINITION: This field tracks the sequence of encounters for patients who are treated more than once during the calendar year, in the order of their encounters, based on record linkage number and service date. If the RLN and Service Date are identical on more than one record, records will be sequenced in the order read.

**CALIFORNIA PATIENT DISCHARGE DATA
January-December 2004**

APPENDICES

A full set of appendix files in a portable document format (.pdf) is included for easy viewing and printing. In addition, a subset of five appendices is duplicated in an Excel file with each appendix in an individual worksheet. These Excel worksheets can be used with relational database software to link code numbers from the data to their respective labels (e.g., the Hospital ID Number, (OSHPD_ID), from the dataset can be matched with the hospital name in Appendix F). See the tables below for appendix descriptions.

APPENDICES FOLDER		
Appendices	File Name	Description
A	App_A_counties.pdf	County Names and Codes.
B	App_B_apc.pdf	Ambulatory Patient Category (APCs) <i>not yet available</i>
C	App_C_apg.pdf	Ambulatory Patient Groups (APGs) Codes <i>not yet available</i>
D-AS	App_D_AS_exceptions.pdf	Data Exceptions (as reported) – AS data
D-ED	App_D_ED_exceptions.pdf	Data Exceptions (as reported) – ED data
E	Not used at this time	
F-AS	App_F_AS_facility_list.pdf	Facility Listing – AS data
F-ED	App_F_ED_hospital_list.pdf	Hospital Listing – ED data
G	App_G_report_form.pdf	Manual Abstract Reporting Form (OSHPD-1370.ED and OSHPD-1370.AS)

MS-EXCEL APPENDIX FILE (filename.xls)		
A duplicate subset of appendices (in MS-Excel format) is also located in the Appendices folder. The worksheets in this file can be used as relational database tables to link codes with labels		
Appendices	Worksheet Name	Description
A	Appendix A	County Names and Codes
D-AS	Appendix D-AS	Data Exceptions (as reported) – ED data
D-ED	Appendix D-ED	Data Exceptions (as reported) – AS data
F-AS	Appendix F-AS	Hospital Listing – ED data
F-ED	Appendix F-ED	Facility List – AS data

Appendix A - California Counties

County #	Name	County #	Name
01	Alameda	36	San Bernardino
02	Alpine	37	San Diego
03	Amador	38	San Francisco
04	Butte	39	San Joaquin
05	Calaveras	40	San Luis Obispo
06	Colusa	41	San Mateo
07	Contra Costa	42	Santa Barbara
08	Del Norte	43	Santa Clara
09	El Dorado	44	Santa Cruz
10	Fresno	45	Shasta
11	Glenn	46	Sierra
12	Humboldt	47	Siskiyou
13	Imperial	48	Solano
14	Inyo	49	Sonoma
15	Kern	50	Stanislaus
16	Kings	51	Sutter
17	Lake	52	Tehama
18	Lassen	53	Trinity
19	Los Angeles	54	Tulare
20	Madera	55	Tuolumne
21	Marin	56	Ventura
22	Mariposa	57	Yolo
23	Mendocino	58	Yuba
24	Merced	Small County Groups	
25	Modoc		
26	Mono		
27	Monterey	CE	Alpine, Inyo, Mariposa & Mono Counties
28	Napa	NE	Modoc, Plumas & Sierra Counties
29	Nevada	NW	Colusa, Glenn & Trinity Counties
30	Orange		
31	Placer		
32	Plumas		
33	Riverside		
34	Sacramento		
35	San Benito		

Appendix D-AS
1st half 2007 Data Exceptions, by Facility

OSHPD_ID	FACILITY NAME	Begin Date	End Date	Action Description	Comments
154089	CBCC Pain Medicine and Surgery Center, Inc	1/1/2007	5/31/2007	Ethnicity	Facility was not collecting this data. Facility will begin collecting June 1, 2007 allowing patients to self-identify their Race and Ethnicity.
				Race	Facility was not collecting this data. Facility will begin collecting June 1, 2007 allowing patients to self-identify their Race and Ethnicity.
	Kaiser Foundation Hospitals - Northern California				
430805	Kaiser Foundation Hospital - Anaheim	1/1/2007	3/31/2007	Disposition	Disposition categories reported are: 00, 01, 02, 03, 06, 07, and 20. Full compliance for reporting encounter data according to OSHPD requirements April 1, 2007.
				Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
				Race (Race only)	"Native Hawaiian/Other Pacific Islander" is reported as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters April 1, 2007.
010856	Kaiser Foundation Hospital - Oakland	1/1/2007	3/31/2007	Disposition	Request to report selected categories. Categories that will be reported are: 00, 01, 02, 03, 06, 07, 20, 50, 51, and 62. Full compliance for reporting encounters according to OSHPD requirements April 1, 2007.
				Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, BL, 11, OF, 12 and CI. Full compliance for reporting encounters according to OSHPD requirements is expected April 1, 2008.
				Race (Race only)	"Native Hawaiian/Other Pacific Islander" is reported as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters April 1, 2007.
074093	Kaiser Foundation Hospital - Richmond	1/1/2007	3/31/2007	Disposition	Request to report selected categories. Categories that will be reported are: 00, 01, 02, 03, 06, 07, 20, 50, 51, and 62. Full compliance for reporting encounters according to OSHPD requirements April 1, 2007.
				Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, BL, 11, OF, 12 and CI. Full compliance for reporting encounters according to OSHPD requirements is expected April 1, 2008.
				Race (Race only)	"Native Hawaiian/Other Pacific Islander" is reported as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters April 1, 2007.
430805	Kaiser Foundation Hospital - Santa Clara (old location)	1/1/2007	1/31/2007	Disposition	Request to report selected categories. Categories that will be reported are: 00, 01, 02, 03, 06, 07, 20, 50, 51, and 62. Full compliance for reporting encounters according to OSHPD requirements April 1, 2007.
				Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, BL, 11, OF, 12 and CL. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2007.
				Race (Race only)	"Native Hawaiian/Other Pacific Islander" is reported as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters April 1, 2007.

Appendix D-AS
1st half 2007 Data Exceptions, by Facility

OSHPD_ID	FACILITY NAME	Begin Date	End Date	Action Description	Comments
	Kaiser Foundation Hospitals - Southern California				
196035	Kaiser Foundation Hospital - Baldwin Park	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment will be reported in the following categories: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
190430	Kaiser Foundation Hospital - Bellflower	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
361223	Kaiser Foundation Hospital - Fontana	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
190431	Kaiser Foundation Hospital - Harbor City	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
190646	Kaiser Foundation Hospital - Harbor City	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
190432	Kaiser Foundation Hospital - Panorama City	1/1/2007	9/30/2007	Disposition	Disposition categories reported are 00, 01, 02, 03, 07, and 20. Full compliance for reporting encounters according to OSHPD requirements October 1, 2007.
			12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
			9/30/2007	Race (Race only)	Report "Native Hawaiian/Other Pacific Islander" as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters October 1, 2007.
334025	Kaiser Foundation Hospital - Riverside	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, and CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
370730	Kaiser Foundation Hospital - San Diego	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, and CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
190429	Kaiser Foundation Hospital - Sunset	1/1/2007	6/30/2007	Disposition	Disposition categories reported are 00, 01, 02, 03, 07, and 20. Full compliance for reporting encounters according to OSHPD requirements July 1, 2007.
			12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
			6/30/2007	Race (Race only)	Report "Native Hawaiian/Other Pacific Islander" as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters July 1, 2007.
190434	Kaiser Foundation Hospital - West LA	1/1/2007	3/31/2007	Disposition	Disposition categories reported are 00, 01, 02, 03, 07, and 20. Full compliance for reporting encounters according to OSHPD requirements April 1, 2007.
			12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
			3/31/2007	Race (Race only)	Report "Native Hawaiian/Other Pacific Islander" as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters April 1, 2007.

Appendix D-AS
1st half 2007 Data Exceptions, by Facility

OSHPD_ID	FACILITY NAME	Begin Date	End Date	Action Description	Comments
191450	Kaiser Foundation Hospital - Woodland Hills	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
214022	Marin Ophthalmic Ambulatory Surgery Center	1/1/2007	3/31/2007	Disposition	Facility confirmed they have not been capturing Disposition of Patient data. They have been reporting all patients as "Other". They will be in compliance with the April-June 2007 data.
				Ethnicity	Facility confirmed they have not been capturing Ethnicity data. They have been reporting all patients as "Unknown". They will be in compliance with the April-June 2007 data.
				Race	Facility confirmed they have not been capturing Race data. They have been reporting all patients as "Unknown". They will be in compliance with the April-June 2007 data.
364289	Ontario-Vineyard Ambulatory Surgery Center	1/1/02007	12/31/2007	Disposition	Disposition categories reported are 00, 01, 02, 03, 07, and 20. Full compliance for reporting encounters according to OSHPD requirements January 1, 2008.
				Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters according to OSHPD requirements is expected January 1, 2008.
				Race (Race only)	Report "Native Hawaiian/Other Pacific Islander" as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters January 1, 2007.
294018	Sierra Ambulatory Surgery Center, LLC	1/1/2007	4/8/2007	Race	New facility, was recently notified that data was to be reported to OSHPD. Facility had not captured Race and Ethnicity
			3/31/2007	Other	Did not report data for the 1/1/2007-3/31/2007 report period. Newly licensed facility was recently informed that data was to be reported to OSHPD. Facility stated hardship to pull and enter into MIRCal over 600 encounters. Will begin reporting for the 4/1/2007-6/30/2007 report period
304135	Vista Surgical Center, Inc	1/1/2007	6/30/2007	Ethnicity	Ethnicity not captured correctly (should be self-reported by patient). Ethnicity will be self-reported by patients beginning July 1, 2007.
				Race	Race not captured correctly (should be self-reported by patient). Race will be self-reported by patients beginning July 1, 2007.

Appendix D-ED
1st half 2007 Data Exceptions, by Facility

OSHPD_ID	Facility Name	Begin Date	End Date	Action Description	Comments
014132	<u>Kaiser Foundation Hospitals - Northern California</u>	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
104062	Kaiser Foundation Hospital - Fremont				
380857	Kaiser Foundation Hospital - Fresno				
101858	Kaiser Foundation Hospital - Geary (S.F.)	1/1/2007	12/31/2007	Principal Diagnosis	First Other Diagnosis is reported as Principal Diagnosis and 799.9 is used as Principal when no Other Diagnosis is available. Full compliance is expected for all Kaiser North Emergency Departments January 1, 2008
394009	Kaiser Foundation Hospital - Hayward				
410804	Kaiser Foundation Hospital - Manteca				
480989	Kaiser Foundation Hospital - Redwood City	1/1/2007	12/31/2007	Other Diagnosis	Reporting 1st Other Diagnosis as Principal and using 799.9 as Principal diagnosis when no Other Diagnosis is available. Correct reporting will begin January 1, 2008.
340913	Kaiser Foundation Hospital - Rehab Ctr - Vallejo				
314024	Kaiser Foundation Hosp - Sac/Roseville - Morse	1/1/2007	12/31/2007	Principal External Cause of Injury	Reporting 1st Other E-code as Principal. Correct reporting will begin January 1, 2008
210992	Kaiser Foundation Hosp - Sac/Roseville -Eureka				
494019	Kaiser Foundation Hospital - San Rafael	1/1/2007	12/31/2007	Other External Cause of Injury	Reporting 1st Other E-code as Principal. Correct reporting will begin January 1, 2008
431506	Kaiser Foundation Hospital - Santa Rosa				
342344	Kaiser Foundation Hospital - Santa Teresa Comm	1/1/2007	12/31/2007	Other Procedures	Reporting 1st Other Procedure as Principal Procedure. Correct reporting will begin January 1, 2008.
410806	Kaiser Foundation Hospital - South Sacramento				
070990	Kaiser Foundation Hospital - South San Francisco	1/1/2007	12/31/2007	Principal Procedure	Reporting 1st Other Procedure as Principal Procedure. Correct reporting will begin January 1, 2008.
	Kaiser Foundation Hospital - Walnut Creek				
		1/1/2007	12/31/2007	Disposition	Disposition categories reported are: 00, 01, 02, 03, 06, 07, and 20. Full compliance for reporting encounter data according to OSHPD requirements January 1, 2008.
		1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
		1/1/2007	12/31/2007	Principal Diagnosis	First Other Diagnosis is reported as Principal Diagnosis and 799.9 is used as Principal when no Other Diagnosis is available. Full compliance is expected for all Kaiser North Emergency Departments January 1, 2008
010856	Kaiser Foundation Hospital - Oakland				
074093	Kaiser Foundation Hospital - Richmond	1/1/2007	12/31/2007	Other Diagnosis	Reporting 1st Other Diagnosis as Principal and using 799.9 as Principal diagnosis when no Other Diagnosis is available. Correct reporting will begin January 1, 2008.
430805	Kaiser Foundation Hospital - Santa Clara				
		1/1/2007	12/31/2007	Principal External Cause of Injury	Reporting 1st Other E-code as Principal. Correct reporting will begin January 1, 2008
		1/1/2007	12/31/2007	Other External Cause of Injury	Reporting 1st Other E-code as Principal. Correct reporting will begin January 1, 2008
		1/1/2007	12/31/2007	Other Procedures	Reporting 1st Other Procedure as Principal Procedure. Correct reporting will begin January 1, 2008.
		1/1/2007	12/31/2007	Principal Procedure	Reporting 1st Other Procedure as Principal Procedure. Correct reporting will begin January 1, 2008.
		1/1/2007	12/31/2006	Disposition	Disposition categories reported are: 00, 01, 02, 03, 06, 07, and 20. Full compliance for reporting encounter data according to OSHPD requirements January 1, 2007.
301132	<u>Kaiser Foundation Hospitals - Southern California</u>				
190432	Kaiser Foundation Hospital - Anaheim				
190429	Kaiser Foundation Hospital - Panorama City	1/1/2007	12/31/2006	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2007.
190434	Kaiser Foundation Hospital - Sunset				
	Kaiser Foundation Hospital - West LA	1/1/2007	12/31/2006	Race (Race only)	"Native Hawaiian/Other Pacific Islander" is reported as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters January 1, 2007.
196035	Kaiser Foundation Hospital - Baldwin Park	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.

Appendix D-ED
1st half 2007 Data Exceptions, by Facility

OSHPD_ID	Facility Name	Begin Date	End Date	Action Description	Comments
190430	Kaiser Foundation Hospital - Bellflower	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2007.
190431	Kaiser Foundation Hospital -Harbor City	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
361223	Kaiser Foundation Hospital - Fontana	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
334025	Kaiser Foundation Hospital - Riverside	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
370730	Kaiser Foundation Hospital - San Diego	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
191450	Kaiser Foundation Hospital - Woodland Hills	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.

Appendix D-ED
1st half 2007 Data Exceptions, by Facility

OSHPD_ID	Facility Name	Begin Date	End Date	Action Description	Comments
014132	<u>Kaiser Foundation Hospitals - Northern California</u>	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
104062	Kaiser Foundation Hospital - Fremont				
380857	Kaiser Foundation Hospital - Fresno				
101858	Kaiser Foundation Hospital - Geary (S.F.)	1/1/2007	12/31/2007	Principal Diagnosis	First Other Diagnosis is reported as Principal Diagnosis and 799.9 is used as Principal when no Other Diagnosis is available. Full compliance is expected for all Kaiser North Emergency Departments January 1, 2008
394009	Kaiser Foundation Hospital - Hayward				
410804	Kaiser Foundation Hospital - Manteca				
480989	Kaiser Foundation Hospital - Redwood City	1/1/2007	12/31/2007	Other Diagnosis	Reporting 1st Other Diagnosis as Principal and using 799.9 as Principal diagnosis when no Other Diagnosis is available. Correct reporting will begin January 1, 2008.
340913	Kaiser Foundation Hospital - Rehab Ctr - Vallejo				
314024	Kaiser Foundation Hosp - Sac/Roseville - Morse	1/1/2007	12/31/2007	Principal External Cause of Injury	Reporting 1st Other E-code as Principal. Correct reporting will begin January 1, 2008
210992	Kaiser Foundation Hosp - Sac/Roseville -Eureka				
494019	Kaiser Foundation Hospital - San Rafael	1/1/2007	12/31/2007	Other External Cause of Injury	Reporting 1st Other E-code as Principal. Correct reporting will begin January 1, 2008
431506	Kaiser Foundation Hospital - Santa Rosa				
342344	Kaiser Foundation Hospital - Santa Teresa Comm	1/1/2007	12/31/2007	Other Procedures	Reporting 1st Other Procedure as Principal Procedure. Correct reporting will begin January 1, 2008.
410806	Kaiser Foundation Hospital - South Sacramento				
070990	Kaiser Foundation Hospital - South San Francisco	1/1/2007	12/31/2007	Principal Procedure	Reporting 1st Other Procedure as Principal Procedure. Correct reporting will begin January 1, 2008.
	Kaiser Foundation Hospital - Walnut Creek				
		1/1/2007	12/31/2007	Disposition	Disposition categories reported are: 00, 01, 02, 03, 06, 07, and 20. Full compliance for reporting encounter data according to OSHPD requirements January 1, 2008.
		1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
		1/1/2007	12/31/2007	Principal Diagnosis	First Other Diagnosis is reported as Principal Diagnosis and 799.9 is used as Principal when no Other Diagnosis is available. Full compliance is expected for all Kaiser North Emergency Departments January 1, 2008
010856	Kaiser Foundation Hospital - Oakland				
074093	Kaiser Foundation Hospital - Richmond	1/1/2007	12/31/2007	Other Diagnosis	Reporting 1st Other Diagnosis as Principal and using 799.9 as Principal diagnosis when no Other Diagnosis is available. Correct reporting will begin January 1, 2008.
430805	Kaiser Foundation Hospital - Santa Clara				
		1/1/2007	12/31/2007	Principal External Cause of Injury	Reporting 1st Other E-code as Principal. Correct reporting will begin January 1, 2008
		1/1/2007	12/31/2007	Other External Cause of Injury	Reporting 1st Other E-code as Principal. Correct reporting will begin January 1, 2008
		1/1/2007	12/31/2007	Other Procedures	Reporting 1st Other Procedure as Principal Procedure. Correct reporting will begin January 1, 2008.
		1/1/2007	12/31/2007	Principal Procedure	Reporting 1st Other Procedure as Principal Procedure. Correct reporting will begin January 1, 2008.
		1/1/2007	12/31/2006	Disposition	Disposition categories reported are: 00, 01, 02, 03, 06, 07, and 20. Full compliance for reporting encounter data according to OSHPD requirements January 1, 2007.
301132	<u>Kaiser Foundation Hospitals - Southern California</u>				
190432	Kaiser Foundation Hospital - Anaheim				
190429	Kaiser Foundation Hospital - Panorama City	1/1/2007	12/31/2006	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2007.
190434	Kaiser Foundation Hospital - Sunset				
	Kaiser Foundation Hospital - West LA	1/1/2007	12/31/2006	Race (Race only)	"Native Hawaiian/Other Pacific Islander" is reported as "Asian". Data to be in full compliance with OSHPD requirements beginning with encounters January 1, 2007.
196035	Kaiser Foundation Hospital - Baldwin Park	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.

Appendix D-ED
1st half 2007 Data Exceptions, by Facility

OSHPD_ID	Facility Name	Begin Date	End Date	Action Description	Comments
190430	Kaiser Foundation Hospital - Bellflower	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2007.
190431	Kaiser Foundation Hospital -Harbor City	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
361223	Kaiser Foundation Hospital - Fontana	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
334025	Kaiser Foundation Hospital - Riverside	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
370730	Kaiser Foundation Hospital - San Diego	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.
191450	Kaiser Foundation Hospital - Woodland Hills	1/1/2007	12/31/2007	Expected Source of Payment	Expected Source of Payment is reported as: BL, 12, 16, MA, MC, WC, 09, 00, HM, CI. Full compliance for reporting encounters in according to OSHPD requirements is expected January 1, 2008.

FACILITY LISTING
Ambulatory Surgery Centers
1st Half 2007

Facility ID	Facility Name	ZIP Code	DHS/MHS License	# of Encounters
Total Encounters				1,502,944
010735	ALAMEDA HOSPITAL	94501	140000002	2,190
010739	ALTA BATES SUMMIT MED CTR-ALTA BATES CAMPUS	94705	140000004	3,663
010776	CHILDRENS HOSPITAL AND RESEARCH CTR AT OAKLAND	94609	140000015	2,882
010805	EDEN MEDICAL CENTER	94546	140000030	1,032
010846	ALAMEDA CO MED CTR - HIGHLAND CAMPUS	94602	140000046	1,205
010856	KAISER FND HOSP - OAKLAND CAMPUS	94611	140000052	2,456
010858	KAISER FND HOSP - HAYWARD	94545	140000053	1,904
010937	ALTA BATES SUMMIT MED CTR-SUMMIT CAMPUS-HAWTHORNE	94609	140000284	2,742
010967	ST. ROSE HOSPITAL	94545	140000107	1,003
010983	VALLEY MEMORIAL HOSPITAL - LIVERMORE	94550	140000114	4,072
010987	WASHINGTON HOSPITAL - FREMONT	94538	140000116	1,180
013619	SAN LEANDRO HOSPITAL	94578	140000030	452
014015	EAST BAY MEDICAL SURGICAL CENTER, L.P.	94546	140000313	599
014022	SURGERY CTR. OF ALTA BATES SUMMIT MED. CTR, LLC, THE	94609	140000317	2,639
014035	SAN LEANDRO SURGERY CENTER	94578	140000348	2,566
014038	MISSION VALLEY SURGERY CENTRE	94539	140000369	157
014078	TRIVALLEY OUTPATIENT SURGERY CENTER	94588	550000429	74
014080	OPTIMA OPHTHALMIC MEDICAL ASSOCIATES, INC.	94541	140000450	420
014086	WASHINGTON OUTPATIENT SURGERY CENTER	94538	140000466	3,065
014102	PLASTIC AND RECONSTRUCTIVE SURGERY CENTER	94566	140000491	266
014125	FREMONT AMBULATORY SURGERY CENTER	94538	140000527	3,174
014132	KAISER FND HOSP - FREMONT	94538	140000053	1,733
014157	WEBSTER SURGERY CENTER	94609	140000590	1,114
014159	EYE MD LASER AND SURGERY CENTER	94609	140000588	1,856
014160	EAST BAY ENDOSCOPY CENTER, L.P.	94608	140000597	2,766
014165	FREMONT SURGERY CENTER-NORTH	94538	140000600	1,434
014174	BAY SURGERY CENTER	94609	140000656	853
014180	DIALYSIS ACCESS CENTER, INC.	94609	140000669	729
014184	PLEASANTON SURGERY CENTER	94566	140000667	1,441
014186	EAST BAY ENDOSURGERY CENTER	94612	140000674	2,936
014193	GREATER BAY ENDOSCOPY CENTER	94541	140000707	1,556
014206	OMNI SURGI CENTER, LP	94538	550000063	300
014219	PROCEDURE SUITES, FREMONT CENTER	94538	550000376	475
034002	SUTTER AMADOR HOSPITAL	95642	030000008	716
034003	AMADOR SURGERY CENTER	95642	030000778	902
040802	BIGGS GRIDLEY MEMORIAL HOSPITAL	95948	230000007	253
040875	FEATHER RIVER HOSPITAL	95969	230000017	2,056
040937	OROVILLE HOSPITAL	95966	230000022	2,344
040962	ENLOE MEDICAL CENTER- ESPLANADE CAMPUS	95926	230000027	3,973
044018	EYE LIFE INSTITUTE	95969	230000222	121
044153	CHICO SURGERY CENTER, LP	95926	230000315	1,832
044158	NORTH VALLEY ENDOSCOPY CENTER	95928	230000349	1,593
044162	SKYWAY SURGERY CENTER	95528	230000358	2,141
050932	MARK TWAIN ST. JOSEPH'S HOSPITAL	95249	030000058	359
060870	COLUSA REGIONAL MEDICAL CENTER	95932	230000149	190
070904	DOCTORS MEDICAL CENTER - SAN PABLO/PINOLE	94806	110000485	1,604

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Facility ID	Facility Name	ZIP Code	DHS/MHS License	# of Encounters
070924	CONTRA COSTA REGIONAL MEDICAL CENTER	94553	140000090	1,701
070934	SUTTER DELTA MEDICAL CENTER	94509	140000258	1,779
070988	JOHN MUIR MEDICAL CENTER-WALNUT CREEK CAMPUS	94598	140000265	2,706
070990	KAISER FND HOSP - WALNUT CREEK	94596	140000290	5,595
071018	JOHN MUIR MEDICAL CENTER-CONCORD CAMPUS	94520	140000128	2,725
074014	SIERRA SURGI-CENTER	94598	140000344	3,948
074017	SAN RAMON REGIONAL MEDICAL CENTER	94583	140000345	3,290
074030	EYE CENTER OF NORTHERN CALIFORNIA SURGICENTER	94530	140000382	3
074041	DANVILLE AMBULATORY SURGERY CENTER	94526	140000413	43
074056	CALIFORNIA EYE CLINIC	94509	140000483	490
074068	LASER SURGERY CENTER, LTD	94598	140000518	2,075
074091	SEQUOIA SURGICAL PAVILION	94598	140000649	3,450
074093	KAISER FND HOSP - RICHMOND CAMPUS	94804	140000052	1,145
074098	TRESANTI MEDICAL CORPORATION, THE	94583	140000665	1,154
074099	SAN RAMON ENDOSCOPY CENTER, INC.	94583	140000660	2,953
074100	PREMIER SURGERY CENTER	94520	140000668	3,185
074107	SAN RAMON SURGERY CENTER	94583	140000709	750
074111	CANYON PINOLE SURGERY CENTER	94564	140000713	438
074121	MOUNT DIABLO SURGERY CENTER	94520	550000123	962
074127	BRENTWOOD SURGERY CENTER - BRENTWOOD	94513	550000304	162
084001	SUTTER COAST HOSPITAL	95531	110000067	2,759
090793	BARTON MEMORIAL HOSPITAL	96150	030000013	1,391
090933	MARSHALL MEDICAL CENTER (1-RH)	95667	030000059	1,042
094021	EL DORADO SURGERY CENTER	95667	030000767	2,037
094024	MARSHALL SURGERY CENTER	95682	030000788	655
100005	COMMUNITY MEDICAL CENTER - CLOVIS	93612	040000004	5,471
100717	COMMUNITY REGIONAL MEDICAL CENTER-FRESNO	93721	040000096	3,553
100745	KINGSBURG MEDICAL CENTER	93631	040000116	2
100797	SIERRA KINGS DISTRICT HOSPITAL	93654	040000149	398
100822	UNIVERSITY MEDICAL CENTER	93702	040000096	796
100899	ST. AGNES MEDICAL CENTER	93710	040000173	5,765
104006	VALLEY MEDICAL PLAZA AMBULATORY SURGICAL CENTER	93720	040000241	528
104039	SIERRA SURGERY CENTER	93710	040000310	250
104040	VISION CARE SURGERY CENTER	93720	040000312	3,012
104045	WOODWARD PARK SURGICENTER	93720	040000325	888
104047	FRESNO SURGICAL HOSPITAL	93710	040000332	1,572
104050	E. N. T. FACIAL SURGERY CENTER	93720	040000345	1,352
104062	KAISER FND HOSP - FRESNO	93720	040000384	4,685
105006	FRESNO ENDOSCOPY CENTER	93720	040000483	988
105009	ADVANCED SURGERY CENTER	93710	040000443	290
105010	UROLOGY ASSOCIATES OF CENTRAL CALIFORNIA, INC.	93720	040000484	913
105016	NORTH POINT SURGERY CENTER, INC.	93711	040000515	1,390
105017	COMPREHENSIVE PAIN MANAGEMENT CENTER	93720	040000514	1,603
105019	CENTRAL CALIFORNIA ENDOSCOPY CENTER	93710	040000525	6,144
105021	SUMMIT SURGICAL	93720	040000527	3,019
105029	FRESNO HEART AND SURGICAL HOSPITAL	93720	040000551	928
105032	REGIONAL HAND CENTER OF CENTRAL CALIFORNIA	93720	040000548	524

FACILITY LISTING
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Facility ID	Facility Name	ZIP Code	DHS/MHS License	# of Encounters
105033	GASTROENTEROLOGY AND LIVER DISEASE MEDICAL CTR., INC.	93720	040000547	721
105036	COMMUNITY OUTPATIENT SURGERY CENTER	93721	040000552	202
105039	PLAZA SURGICAL CENTER, LP	93720	040000555	1,821
105047	FRESNO DENTAL SURGERY CENTER	93721	550000219	1,757
110889	GLENN MEDICAL CENTER	95988	230000018	167
121002	MAD RIVER COMMUNITY HOSPITAL	95521	110000031	3,161
121051	REDWOOD MEMORIAL HOSPITAL	95540	110000173	1,026
121080	ST. JOSEPH HOSPITAL - EUREKA	95501	110000075	3,676
130699	EL CENTRO REGIONAL MEDICAL CENTER	92243	090000004	1,922
130760	PIONEERS MEMORIAL HOSPITAL	92227	090000087	1,064
134022	VALLEY ENDOSCOPY CENTER	92243	090000507	2,373
141273	NORTHERN INYO HOSPITAL	93514	240000179	408
150706	DELANO REGIONAL MEDICAL CENTER	93215	120000180	1,314
150722	BAKERSFIELD MEMORIAL HOSPITAL- 34TH STREET	93301	120000181	4,003
150736	KERN MEDICAL CENTER	93305	120000182	2,070
150737	KERN VALLEY HEALTHCARE DISTRICT	93240	120000183	217
150761	MERCY HOSPITAL - BAKERSFIELD	93301	120000184	3,682
150775	GOOD SAMARITAN HOSPITAL-BAKERSFIELD	93308	120000146	153
150782	RIDGECREST REGIONAL HOSPITAL	93555	120000186	791
150788	SAN JOAQUIN COMMUNITY HOSPITAL	93301	120000187	1,604
154012	PHYSICIANS PLAZA SURGICAL CENTER	93301	120000210	2,025
154035	ALLIANCE SURGERY CENTER	93301	120000298	545
154074	BAKERSFIELD ENDOSCOPY CENTER	93301	120000440	2,530
154075	SOUTHWEST SURGICAL CENTER	93309	120000458	1,431
154089	TRUXTUN SURGERY CENTER, INC.	93309	120000475	3,948
154091	INDIAN WELLS VALLEY SURGERY CENTER	93555	120000489	443
154095	PACIFIC COAST SURGICAL CENTER NO.7	93215	120000505	580
154098	CBCC PAIN MEDICINE AND SURGERY CENTER, INC.	93309	120000512	791
154101	BAKERSFIELD HEART HOSPITAL	93308	120000526	914
154104	TEHACHAPI SURGERY CENTER, INC.	93561	120000546	167
154106	MILLENNIUM SURGERY CENTER, INC.	93311	120000551	4,864
154107	EMPIRE SURGERY CENTER PARTNERS	93309	120000550	1,232
154135	SOUTHWEST OUTPATIENT SURGERY CENTER	93311	550000191	44
154140	HEALING ARTS SURGERY CENTER	93301	550000439	13
160702	CORCORAN DISTRICT HOSPITAL	93212	040000087	288
160725	HANFORD COMMUNITY MEDICAL CENTER	93230	040000102	4,040
160787	CENTRAL VALLEY GENERAL HOSPITAL	93230	040000140	347
164016	SURGITEK OUTPATIENT CENTER, INC.	93230	040000420	616
164017	KINGS EYE CENTER MEDICAL GROUP, INC.	93230	040000455	441
164021	HANFORD SURGERY CENTER	93230	040000507	915
171049	REDBUD COMMUNITY HOSPITAL	95422	110000174	782
171395	SUTTER LAKESIDE HOSPITAL	95453	110000094	2,374
184004	LASSEN SURGERY CENTER	96130	230000279	344
184008	BANNER LASSEN MEDICAL CENTER	96130	230000020	474
190017	ALHAMBRA HOSPITAL	91801	930000005	821
190034	ANTELOPE VALLEY HOSPITAL MEDICAL CENTER	93534	930000008	2,966
190049	VISTA HOSPITAL OF SAN GABRIEL VALLEY	91706	930000390	60

FACILITY LISTING
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Facility ID	Facility Name	ZIP Code	DHS/MHS License	# of Encounters
190053	ST. MARY MEDICAL CENTER	90801	930000012	2,010
190066	BELLFLOWER MEDICAL CENTER	90706	930000015	1,267
190081	BEVERLY HOSPITAL	90640	930000389	1,781
190110	BROTMAN MEDICAL CENTER	90231	930000022	1,547
190125	CALIFORNIA HOSPITAL MEDICAL CENTER - LOS ANGELES	90015	930000024	1,232
190148	CENTINELA FREEMAN REG MED CTR-CENTINELA CAMPUS	90301	930000027	4,211
190155	CENTURY CITY DOCTORS HOSPITAL	90067	930000029	450
190159	TRI-CITY REGIONAL MEDICAL CENTER	90716	930000030	2,337
190170	CHILDREN'S HOSPITAL OF LOS ANGELES	90027	930000032	3,935
190176	CITY OF HOPE HELFORD CLINICAL RESEARCH HOSPITAL	91010	930000033	1,354
190196	VISTA HOSPITAL OF SOUTH BAY	90247	930000037	252
190197	COMMUNITY AND MISSION HSP OF HNTG PK - SLAUSON	90255	930000038	931
190198	LOS ANGELES COMMUNITY HOSPITAL	90023	930000039	123
190200	SAN GABRIEL VALLEY MEDICAL CENTER	91776	930000041	2,193
190240	LAKEWOOD REGIONAL MEDICAL CENTER	90712	930000046	2,750
190243	DOWNEY REGIONAL MEDICAL CENTER	90241	930000048	4,053
190256	EAST LOS ANGELES DOCTORS HOSPITAL	90023	930000049	400
190280	ENCINO-TARZANA REGIONAL MED CTR-ENCINO	91436	930000051	1,242
190298	FOOTHILL PRESBYTERIAN HOSPITAL-JOHNSTON MEMORIAL	91741	930000052	1,615
190307	PACIFIC ALLIANCE MEDICAL CENTER, INC.	90012	930000054	846
190315	GARFIELD MEDICAL CENTER	91754	930000057	3,488
190323	GLENDALE ADVENTIST MEDICAL CENTER - WILSON TERRACE	91206	930000059	3,397
190328	EAST VALLEY HOSPITAL MEDICAL CENTER	91740	930000060	243
190352	GREATER EL MONTE COMMUNITY HOSPITAL	91733	930000063	243
190380	HOLLYWOOD COMMUNITY HOSPITAL OF HOLLYWOOD	90028	930000066	215
190382	HOLLYWOOD PRESBYTERIAN MEDICAL CENTER	90027	930000067	2,354
190385	PROVIDENCE HOLY CROSS MEDICAL CENTER	91345	930000404	2,095
190392	GOOD SAMARITAN HOSPITAL-LOS ANGELES	90017	930000071	3,712
190400	HUNTINGTON MEMORIAL HOSPITAL	91105	930000372	3,474
190413	CITRUS VALLEY MEDICAL CENTER - IC CAMPUS	91723	930000131	2,021
190422	TORRANCE MEMORIAL MEDICAL CENTER	90505	930000076	10,651
190429	KAISER FND HOSP - SUNSET	90027	930000077	7,864
190430	KAISER FND HOSP - BELLFLOWER	90706	930000078	4,598
190431	KAISER FND HOSP - HARBOR CITY	90710	930000079	2,715
190432	KAISER FND HOSP - PANORAMA CITY	91402	930000080	3,555
190434	KAISER FND HOSP - WEST LA	90034	930000081	2,955
190455	LANCASTER COMMUNITY HOSPITAL	93534	930000085	822
190470	LITTLE COMPANY OF MARY HOSPITAL	90503	930000089	3,744
190475	COMMUNITY HOSPITAL OF LONG BEACH	90804	930000090	352
190500	CENTINELA FREEMAN REG MED CTR-MARINA CAMPUS	90291	930000096	1,077
190517	ENCINO-TARZANA REGIONAL MED CTR-TARZANA	91356	930000097	3,028
190521	MEMORIAL HOSPITAL OF GARDENA	90247	930000098	914
190522	GLENDALE MEMORIAL HOSPITAL AND HEALTH CENTER	91204	930000099	4,787
190524	MISSION COMMUNITY HOSPITAL - PANORAMA CAMPUS	91402	930000101	630
190525	LONG BEACH MEMORIAL MEDICAL CENTER	90806	930000102	4,546
190529	METHODIST HOSPITAL OF SOUTHERN CALIFORNIA	91007	930000103	1,708
190534	OLYMPIA MEDICAL CENTER	90019	930000105	1,520

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Facility ID	Facility Name	ZIP Code	DHS/MHS License	# of Encounters
190547	MONTEREY PARK HOSPITAL	91754	930000108	1,045
190552	MOTION PICTURE AND TELEVISION HOSPITAL	91364	930000109	1,629
190555	CEDARS SINAI MEDICAL CENTER	90048	930000110	12,278
190568	NORTHRIDGE HOSPITAL MEDICAL CENTER	91328	930000114	4,361
190570	NORWALK COMMUNITY HOSPITAL	90650	930000039	25
190587	PACIFIC HOSPITAL OF LONG BEACH	90806	930000117	1,131
190630	POMONA VALLEY HOSPITAL MEDICAL CENTER	91767	930000128	7,588
190631	PRESBYTERIAN INTERCOMMUNITY HOSPITAL	90602	930000129	5,919
190636	CITRUS VALLEY MEDICAL CENTER - QV CAMPUS	91790	930000131	2,444
190661	CITY OF ANGELS MEDICAL CENTER-DOWNTOWN CAMPUS	90026	930000137	565
190673	SAN DIMAS COMMUNITY HOSPITAL	91773	930000139	1,683
190680	LITTLE COMPANY OF MARY - SAN PEDRO HOSPITAL	90732	930000142	1,237
190681	MIRACLE MILE MEDICAL CENTER	90036	930000143	274
190687	SANTA MONICA - UCLA MEDICAL CENTER	90404	930000146	1,306
190696	PACIFICA HOSPITAL OF THE VALLEY	91352	930000148	267
190708	SHERMAN OAKS HOSPITAL	91403	930000149	490
190754	ST. FRANCIS MEDICAL CENTER	90262	930000157	2,154
190756	ST. JOHN'S HEALTH CENTER	90404	930000158	5,168
190758	PROVIDENCE SAINT JOSEPH MEDICAL CENTER	91505	930000159	6,686
190762	ST. VINCENT MEDICAL CENTER	90057	930000161	3,286
190766	COAST PLAZA DOCTORS HOSPITAL	90650	930000162	615
190784	TEMPLE COMMUNITY HOSPITAL	90004	930000164	1,834
190796	UCLA MEDICAL CENTER	90095	930000165	13,469
190812	VALLEY PRESBYTERIAN HOSPITAL	91405	930000170	2,254
190818	VERDUGO HILLS HOSPITAL	91208	930000173	2,566
190854	LOS ANGELES METROPOLITAN MEDICAL CENTER	90018	930000187	250
190857	DOCTORS HOSPITAL OF WEST COVINA, INC	91790	930000188	384
190859	WEST HILLS HOSPITAL AND MEDICAL CENTER	91307	930000189	1,289
190878	WHITE MEMORIAL MEDICAL CENTER	90033	930000195	2,773
190883	WHITTIER HOSPITAL MEDICAL CENTER	90605	930000402	948
190949	HENRY MAYO NEWHALL MEMORIAL HOSPITAL	91355	930000206	2,797
190969	HEALTH SOUTH ARCADIA OUTPATIENT SURGERY CENTER	91007	930000212	1,507
191041	SURGERY CENTER OF SOUTH BAY	90505	930000223	2,092
191216	USC KENNETH NORRIS, JR. CANCER HOSPITAL	90033	930000267	3,483
191227	LOS ANGELES CO HARBOR-UCLA MEDICAL CENTER	90502	060000129	2,565
191228	LOS ANGELES CO USC MEDICAL CENTER	90033	060000130	1,809
191230	MARTIN LUTHER KING JR.-HARBOR HOSPITAL	90059	060000132	480
191231	LOS ANGELES COUNTY OLIVE VIEW-UCLA MEDICAL CENTER	91342	060000133	1,574
191306	LAC/RANCHO LOS AMIGOS NATIONAL REHAB CENTER	90242	060000161	119
191450	KAISER FND HOSP - WOODLAND HILLS	91367	930000358	2,366
194005	SAN FERNANDO VALLEY SURGERY CENTER	91345	930000399	2,642
194069	HUNTINGTON OUTPATIENT SURGERY CENTER	91105	930000433	2,258
194083	20TH STREET SURGERY CENTER, LLC	90404	930000437	344
194152	SAN GABRIEL VALLEY SURGICAL CENTER	91790	930000450	3,068
194175	AMBULATORY SURGICAL CENTER OF SOUTHERN CALIFORNIA	91754	930000452	1,929
194219	USC UNIVERSITY HOSPITAL	90033	930000459	4,114
194235	VALENCIA OUTPATIENT SURGICAL CENTER	91321	930000463	1,541

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Facility ID	Facility Name	ZIP Code	DHS/MHS License	# of Encounters
194264	ENDOSCOPY CENTER OF THE SOUTH BAY, THE	90505	930000465	3,971
194268	WARDLOW SURGERY CENTER	90807	930000466	325
194275	PACIFIC SURGICENTER INC.	90404	930000639	303
194276	MONTEBELLO SURGERY CENTER, THE	90640	930000640	384
194285	ENDOSCOPY CENTER OF SOUTHERN CALIFORNIA	90404	930000644	3,376
194286	M/S SURGERY CENTER	90262	930000643	886
194300	ANTELOPE VALLEY SURGERY CENTER	93534	930000656	1,289
194329	HALLMARK SURGICAL CENTER OF NORTHRIDGE	91324	930000672	1,062
194546	PALOS VERDES AMBULATORY SURGERY MEDICAL CENTER,INC	90505	930000722	71
194569	GLENDALE EYE SURGERY CENTER	91203	930000717	2,323
194595	GREATER LONG BEACH ENDOSCOPY CENTER	90806	930000806	3,053
194596	ASSIL EYE INSTITUTE	90404	930000805	463
194597	SURGERY CENTER OF SANTA MONICA	90403	930000804	2,069
194598	VALLEY ENDOSCOPY CENTER, THE	91356	930000809	1,311
194602	CAMDEN SURGERY CENTER OF BEVERLY HILLS	90210	930000816	286
194682	BRENTWOOD SURGERY CENTER - LOS ANGELES	90025	930000863	16
194737	SOUTHERN CALIFORNIA SURGERY CENTER	90255	930000868	11
194776	SANTA MONICA SURGERY AND LASER CENTER	90404	930000873	234
194781	COMPREHENSIVE OUTPATIENT SURGERY CENTER	90211	930000874	436
194794	BEVERLY HILLS CENTER FOR SPECIAL SURGERY, THE	90035	930000875	118
194815	DEL REY SURGERY CENTER	90292	930000878	40
194834	DOWNEY SURGERY CENTER	90240	930000877	717
194865	BEVERLY HILLS SUNSET SURGERY CENTER, INC	90069	930000884	601
194960	SOLIS SURGICAL ARTS CENTER	91403	930000888	331
194977	COLUMBIA WEST HILLS SURGICAL CENTER	91307	930000890	4,083
194978	MADISON PARK SURGERY AND LASER CENTER	90505	930000891	4
194996	BEVERLY HILLS ADVANCED SURGERY INSTITUTE	90212	930000895	296
194997	JIN H. SUH, M.D., MEDICAL OFFICE	90006	930000894	564
194999	BRENTWOOD AMBULATORY SURGICAL MEDICAL CENTER	90025	930000900	245
195011	CENTER FOR ORTHOPEDIC SURGERY	91405	930000898	2,830
195035	COLIMA ENDOSCOPY CENTER	91748	930000903	696
196035	KAISER FND HOSP - BALDWIN PARK	91706	930000920	6,615
196045	LOS ANGELES ENDOSCOPY CENTER	90020	930000913	1,086
196046	CENTER FOR OUTPATIENT SURGERY	90603	930000917	3,523
196047	FREEDOM VISION CENTERS MEDICAL ASSOCIATES	91436	930000916	1,028
196049	BEVERLY HILLS CTR FOR ARTHROSCOPIC AND OUTPT SURGERY	90035	930000918	300
196051	HARVARD SURGERY CENTER	90019	930000919	41
196052	SPECIALTY SURGICAL CENTER	90210	930000921	1,972
196053	PARKSIDE SURGERY INSTITUTE	90404	930000922	59
196054	PASADENA LASER AND SURGERY CENTER	91106	930000924	181
196058	MID-WILSHIRE SURGERY CENTER	90036	930000925	60
196069	KERLAN-JOBE SURGERY CENTER	90045	930000907	1,619
196071	LOS ANGELES SURGICAL CENTER	90057	930000912	1,414
196072	MIRACLE MILE OUTPATIENT SURGERY CENTER	90036	930000897	225
196082	PACIFIC COAST SURGERY CENTER	90505	930000927	276
196084	S AND B SURGERY CENTER	90212	930000914	2,427
196094	ENCINO PLAZA SURGICAL CENTER	91316	930000931	2,752

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196106	COAST SURGERY CENTER OF SOUTH BAY	90505	930000932	1,810
196115	STARPOINT SURGERY CENTER, STUDIO CENTER	91607	930000905	460
196117	BEVERLY HILLS DOCTORS SURGERY CENTER	90212	930000935	527
196118	WILSHIRE SURGICENTER	90211	930000936	497
196165	PASADENA AMBULATORY SURGERY CENTER	91105	930000945	7
196167	ST. VINCENT EYE SURGERY MEDICAL CENTER	90057	930000943	1,151
196168	EARL AND LORRAINE MILLER CHILDRENS HOSPITAL	90806	930000949	1,700
196171	REGIONAL VALLEY SURGERY CENTER	93534	930000947	1,262
196174	SHERMAN OAKS SURGERY CENTER	91403	930000946	214
196175	TARZANA SURGERY CENTER, INC.	91356	930000944	230
196176	SPALDING OUTPATIENT SURGERY CENTER	90212	930000948	375
196178	BEDFORD OUTPATIENT SURGERY CENTER	90210	930000950	813
196193	BRIGHTON SURGICAL CENTER, INC.	90210	930000953	527
196194	ALAMEDA SURGERY CENTER	91505	930000952	1,343
196195	FOUR SEASONS SURGERY CENTER OF ENCINO	91316	930000955	71
196200	PALMDALE - LANCASTER SURGERY CENTER	93534	930000956	795
196204	PASADENA SURGERY CENTER	91105	930000957	1,295
196216	SURGERY CENTER OF LONG BEACH	90806	930000963	1,837
196217	AIRPORT ENDOSCOPY CENTER	90045	930000964	3,506
196221	SANTA CLARITA SURGERY CTR FOR ADVANCED PAIN MGMNT	91355	930000958	1,631
196239	LA PEER SURGERY CENTER LLC	90211	930000968	1,033
196247	ALLCARE AMBULATORY SURGERY CENTER	91405	930000966	897
196261	SPECIALTY SURGICAL CENTER OF ENCINO, L.P.	91436	930000971	4,863
196262	TORRANCE SURGERY CENTER, L.P.	90505	930000973	2,601
196287	SERRA CLINIC SURGERY CENTER	91352	930000976	438
196303	JOURNEY LITE OF THOUSAND OAKS	91361	050000568	51
196309	PACIFIC ENDO-SURGICAL CENTER	90505	930000979	2,771
196310	ENDOSCOPY CENTER AT SKYPARK	90505	930000980	6,364
196320	PASADENA ENDOSCOPY CENTER	91105	930000974	4,214
196336	S AND B SURGERY CENTER II	90212	930000978	385
196349	THE CENTER FOR AMBULATORY SURGICAL TREATMENT	90024	930000985	1,895
196433	UNITED SURGERY MEDICAL CENTER	90640	930000995	192
196504	VALLEY DIGESTIVE HEALTH CENTER, INC.	91006	930000996	2,179
196505	ADVANCED DIAGNOSTICS AND SURGICAL CENTER	91801	930000997	4,499
196511	HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CTR.	93536	060000872	508
196514	MED-LASER SURGICAL CENTER	90604	930000999	1,608
196516	MONTEREY PARK OUTPATIENT SURGERY CENTER	91754	930000988	362
196524	SPECIALTY SURGICAL CENTER OF BEVERLY HILLS, L.P.	90211	930001000	4,239
196536	THIRD STREET SURGERY CENTER	90013	930001001	1,285
196552	FOOTHILL SURGERY CENTER	91006	930001003	1,295
196553	GLENDORA DIGESTIVE DISEASE INSTITUTE	91740	930001004	2,584
196554	ENDOSCOPY CENTER OF SANTA MONICA	90025	930001005	2,133
196559	TRIANGLE SURGERY CENTER	90210	930001006	70
196561	BEDFORD AMBULATORY SURGERY CENTER	90210	930001007	62
196568	DIAMOND BAR SURGERY CENTER	91765	550000343	920
196585	SPECIALTY SURGICAL CENTER OF ARCADIA, L.P.	91006	930001013	1,498
196612	CENTINELA VALLEY ENDOSCOPY CENTER	90301	550000012	2,059

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196623	SAN GABRIEL AMBULATORY SURGERY CENTER	91776	550000023	816
196624	CHEVY CHASE AMBULATORY CENTER	91205	550000021	790
196664	OAK TREE ASC	91101	930000938	930
196679	CASA COLINA SURGERY CENTER	91767	550000065	1,917
196769	UNITED MEDICAL ENDOSCOPY CENTER, INC.	93534	550000201	5,600
196803	WESTLAKE SURGICAL CENTER	91361	550000254	72
196809	ENCINO SURGICAL MEDICAL CENTER	91436	550000247	873
196821	BEACH DISTRICT SURGERY CENTER, L.P.	90277	550000281	1,162
201281	MADERA COMMUNITY HOSPITAL	93637	040000191	1,110
204006	MADERA SURGERY CENTER	93637	550000518	306
204019	CHILDREN'S HOSPITAL CENTRAL CALIFORNIA	93638	040000160	3,300
204021	MADERA AMBULATORY ENDOSCOPY CENTER	93637	040000337	1,224
210992	KAISER FND HOSP - SAN RAFAEL	94903	110000357	1,661
211006	MARIN GENERAL HOSPITAL	94904	110000361	2,717
214022	MARIN OPHTHALMIC AMBULATORY SURGI CLINIC	94901	110000410	484
214032	ENDOSCOPY CENTER OF MARIN	94904	110000421	2,163
214034	NOVATO COMMUNITY HOSPITAL	94945	110000375	958
214036	MARIN SPECIALTY SURGERY CENTER	94904	110000487	1,806
214038	NOVATO ENDOSCOPY CENTER, LLC	94947	110000505	1,219
214039	GREENBRAE SURGERY CENTER	94904	110000520	266
220733	JOHN C FREMONT HEALTHCARE DISTRICT	95338	040000108	116
230949	FRANK R HOWARD MEMORIAL HOSPITAL	95490	110000013	336
231013	MENDOCINO COAST DISTRICT HOSPITAL	95437	110000040	982
231396	UKIAH VALLEY MEDICAL CENTER/HOSPITAL DRIVE	95482	110000095	1,763
234019	UKIAH SURGERY CENTER	95482	110000321	265
234027	HARRY B. MATOSSIAN, M.D. ENDOSCOPY CENTER	95482	110000514	671
240924	MEMORIAL HOSPITAL LOS BANOS	93635	040000177	493
240942	MERCY MEDICAL CENTER MERCED-COMMUNITY CAMPUS	95340	040000178	962
240948	MERCY MEDICAL CENTER MERCED-DOMINICAN CAMPUS	95340	040000178	2,649
244015	MERCED AMBULATORY ENDOSCOPY CENTER	95348	040000358	754
244030	CASTLE SURGICENTER, PARTNERSHIP	95301	040000485	2,425
244032	ADVANCED ENDOSCOPY CENTER	95348	040000497	479
244035	UNIVERSITY SURGERY CENTER	95340	040000537	2,455
244040	INTERVENTIONAL PAIN CENTER OF MERCED	95340	550000054	978
260011	MAMMOTH HOSPITAL	93546	240000008	315
270744	COMMUNITY HOSPITAL MONTEREY PENINSULA	93940	070000026	2,721
270777	GEORGE L MEE MEMORIAL HOSPITAL	93930	070000047	300
270875	SALINAS VALLEY MEMORIAL HOSPITAL	93901	070000083	1,299
274026	SALINAS SURGERY CENTER	93901	070000345	1,430
274033	MONTEREY PENINSULA SURGERY CENTER	93940	070000398	2,734
274043	NATIVIDAD MEDICAL CENTER	93906	070000070	1,217
274050	MONTEREY DOCTORS SURGERY CENTER	93940	070000607	714
274052	VANTAGE SURGERY CENTER	93901	070000637	1,010
274058	LAS VENTANAS SURGERY CENTER	93906	070000682	563
274061	MONTEREY BAY ENDOSCOPY CENTER	93940	070000315	2,471
274063	ADVANCED MEDICAL SURGERY CENTER	93901	070000711	739
281047	QUEEN OF THE VALLEY HOSPITAL - NAPA	94558	110000060	3,800

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281078	ST. HELENA HOSPITAL	94574	110000073	1,885
281297	N M HOLDERMAN MEMORIAL HOSPITAL (VET'S HOME OF CAL	94599	150000494	127
284005	NAPA SURGERY CENTER, LLC	94558	110000247	636
291023	SIERRA NEVADA MEMORIAL HOSPITAL	95945	230000152	833
291053	TAHOE FOREST HOSPITAL	96160	230000151	431
294013	SIERRA ENDOSCOPY CENTER, INC.	95945	230000350	1,828
294016	TRUCKEE SURGERY CENTER	96161	230000353	492
294017	GRASS VALLEY SURGERY CENTER	95945	550000151	630
294018	SIERRA AMBULATORY SURGERY CENTER, LLC	95945	550000155	468
300032	CHILDREN'S HOSPITAL OF ORANGE COUNTY	92668	060000011	3,620
300225	ORANGE COAST MEMORIAL MEDICAL CENTER	92708	060000066	5,210
301097	ANAHEIM GENERAL HOSPITAL	92804	060000079	444
301098	ANAHEIM MEMORIAL MEDICAL CENTER	92801	060000080	3,724
301132	KAISER FND HOSP - ANAHEIM	92807	060000091	4,946
301140	CHAPMAN MEDICAL CENTER	92669	060000097	1,333
301155	COLLEGE HOSPITAL COSTA MESA	92627	060000100	93
301175	FOUNTAIN VALLEY RGNL HOSP AND MED CTR - EUCLID	92708	060000109	6,672
301188	WESTERN MEDICAL CENTER HOSPITAL - ANAHEIM	92805	060000117	627
301205	HOAG MEMORIAL HOSPITAL PRESBYTERIAN	92663	060000122	11,198
301209	HUNTINGTON BEACH HOSPITAL	92647	060000124	223
301234	LA PALMA INTERCOMMUNITY HOSPITAL	90623	060000136	456
301248	LOS ALAMITOS MEDICAL CENTER	90720	060000142	4,381
301258	COASTAL COMMUNITIES HOSPITAL	92704	060000143	1,253
301262	MISSION HOSPITAL REGIONAL MEDICAL CENTER	92691	060000146	1,244
301279	UNIVERSITY OF CALIFORNIA IRVINE MEDICAL CENTER	92668	060000148	5,414
301283	GARDEN GROVE HOSPITAL AND MEDICAL CENTER	92643	060000152	2,452
301297	PLACENTIA LINDA HOSPITAL	92670	060000157	2,372
301317	SADDLEBACK MEMORIAL MEDICAL CENTER	92653	060000166	2,893
301325	SADDLEBACK MEMORIAL MEDICAL CENTER - SAN CLEMENTE	92673	060000166	2,029
301337	SOUTH COAST MEDICAL CENTER	92677	060000171	1,665
301340	ST. JOSEPH HOSPITAL - ORANGE	92868	060000172	9,863
301342	ST. JUDE MEDICAL CENTER	92835	060000173	10,203
301357	TUSTIN HOSPITAL MEDICAL CENTER	92680	060000178	129
301379	WEST ANAHEIM MEDICAL CENTER	92804	060000182	219
301540	OUT-PATIENT SURGERY CENTER	92647	060000186	50
301566	WESTERN MEDICAL CENTER - SANTA ANA	92705	060000188	2,222
304041	MISSION SURGERY CENTER	92691	060000265	2,265
304045	IRVINE REGIONAL HOSPITAL AND MEDICAL CENTER	92718	060000275	2,600
304056	AMBULATORY SURGICAL CENTERS, INC	92612	060000281	130
304064	SADDLEBACK VALLEY OUTPATIENT SURGERY	92653	060000292	2,512
304082	PACIFIC HILLS SURGERY CENTER, INC.	92653	060000309	1,153
304083	NORTH ANAHEIM SURGICENTER	92801	060000305	3,771
304093	AESTHETICARE OUTPATIENT SURGERY CENTER	92675	060000321	266
304109	SADDLEBACK EYE CENTER	92653	060000337	1,250
304110	NEWPORT BEACH SURGERY CENTER	92663	060000339	3,671
304113	CHILDREN'S HOSPITAL AT MISSION	92691	060000348	231
304130	LA VETA SURGICAL CTR., AN AFFILIATE OF HEALTHSOUTH	92868	060000358	2,316

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304135	VISTA SURGICAL CENTER, INC.	92668	060000365	77
304141	GASTRODIAGNOSTIC, A MEDICAL GROUP	92868	060000371	1,837
304166	NEWPORT BEACH ORANGE COAST ENDOSCOPY CENTER	92663	060000399	2,092
304174	ORANGE CO INSTITUTE OF GASTROENTEROLOGY AND ENDOSCOPY	92691	060000405	1,296
304190	ST. JOSEPH SURGERY AND LASER CENTER, INC.	92866	060000429	343
304197	IRVINE MULTI-SPECIALITY SURGICAL CARE	92614	060000436	1,148
304203	DIGESTIVE DISEASE CENTER	92653	060000442	2,455
304219	MESA SURGICENTER	92835	060000459	139
304225	CROWN VALLEY SURGICENTER	92691	060000466	1,073
304247	MIMG ENDOSCOPY CENTER	92691	060000510	3,779
304264	NEWPORT COAST SURGERY CENTER, INC.	92660	060000533	2,007
304279	MAGNOLIA SURGERY CENTER	92683	060000773	2,052
304286	MILE SQUARE SURGERY CENTER, INC.	92708	060000784	1,605
304287	FOUR SEASONS SURGERY CENTERS OF ANAHEIM	92802	060000785	254
304289	CALIFORNIA SPECIALTY SURGERY CENTER	92691	060000798	1,310
304291	PROCEDURE CENTER OF IRVINE	92618	060000801	151
304292	SANTA ANA OUTPATIENT SURGERY CENTER, L.P.	92705	060000802	190
304294	PAULARINO SURGERY CENTER	92626	060000800	1,127
304298	MAIN STREET SPECIALTY SURGERY CENTER, LP	92868	060000827	4,001
304300	ORANGE COAST SURGERY CENTER	92805	060000831	38
304310	PACIFIC GASTROENTEROLOGY ENDOSCOPY CENTER	92691	060000855	942
304313	LAGUNA HILLS SURGERY CENTER	92637	060000879	1,485
304315	LOS ALAMITOS SURGERY CENTER	90720	060000882	812
304332	HUNTINGTON SURGERY CENTER	92647	060000939	218
304333	SPECIALTY SURGICAL CENTER OF IRVINE, L.P.	92618	060000938	3,331
304342	NEWPORT PLAZA SURGICAL CENTER	92627	060000957	618
304345	IRVINE ENDOSCOPY AND SURGICAL INSTITUTE	92618	550000008	1,389
304346	FULLERTON SURGICAL CENTER	92835	550000031	2,339
304379	ORTHOPEDIC SURGERY CENTER OF ORANGE COUNTY, LLC	92660	060000520	2,831
310791	SUTTER AUBURN FAITH HOSPITAL	95602	030000012	2,734
311000	SUTTER ROSEVILLE MEDICAL CENTER	95661	030000083	3,515
314010	AUBURN SURGERY CENTER	95603	030000425	1,323
314024	KAISER FND HOSP - SACRAMENTO/ROSEVILLE-EUREKA	95661	030000052	3,875
314031	ROSEVILLE SURGERY CENTER	95661	030000764	898
314033	SOUTH PLACER SURGERY CENTER, L.P.	95661	030000772	1,326
314035	SUTTER ROSEVILLE ENDOSCOPY CENTER	95661	030000786	2,950
320859	EASTERN PLUMAS HOSPITAL-PORTOLA CAMPUS	96122	230000014	143
320986	PLUMAS DISTRICT HOSPITAL	95971	230000030	329
321016	SENECA HEALTHCARE DISTRICT	96020	230000032	126
331152	CORONA REGIONAL MEDICAL CENTER-MAIN	91720	250000126	1,622
331164	DESERT REGIONAL MEDICAL CENTER	92262	250000139	4,580
331168	EISENHOWER MEMORIAL HOSPITAL	92270	250000142	3,397
331194	HEMET VALLEY MEDICAL CENTER	92543	250000145	719
331216	JOHN F KENNEDY MEMORIAL HOSPITAL	92201	250000155	2,925
331288	PALO VERDE HOSPITAL	92225	250000184	310
331293	PARKVIEW COMMUNITY HOSPITAL MEDICAL CENTER	92503	250000186	1,070
331312	RIVERSIDE COMMUNITY HOSPITAL	92501	250000194	3,562

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331326	SAN GORGONIO MEMORIAL HOSPITAL	92220	250000199	440
334007	HEMET URO-ENDO SURGICENTER, INC.	92543	250000271	148
334018	MENIFEE VALLEY MEDICAL CENTER	92585	250000338	584
334025	KAISER FND HOSP - RIVERSIDE	92505	250000327	3,276
334044	RIVERSIDE EYE, EAR, NOSE AND THROAT INST. SURG. CTR.	92501	250000356	860
334048	MORENO VALLEY COMMUNITY HOSPITAL	92555	250000398	905
334062	GOLDEN TRIANGLE SURGI-CENTER	92562	250000434	1,731
334068	SOUTHWEST HEALTHCARE SYSTEM-MURRIETA	92562	250000262	2,007
334075	TEMECULA VALLEY DAY SURGERY AND PAIN THERAPY CENTER	92562	250000452	1,398
334076	INLAND SURGERY CENTER	92543	250000263	460
334081	PODIATRIC SURGERY CENTER	92543	250000447	121
334085	HEMET HEALTHCARE SURGICENTER	92543	250000486	924
334092	GLENWOOD SURGICAL CENTER, L P	92503	250000491	2,332
334106	ARLINGTON PODIATRY SURGERY CENTER	92504	250000527	392
334122	SOUTHLAND ENDOSCOPY CENTER	92543	250000545	823
334129	MAGNOLIA PLASTIC SURGERY CENTER	92505	250000559	399
334436	HOPE SQUARE SURGICAL CENTER	92270	250000515	2,117
334440	EL MIRADOR SURGICAL CENTER	92263	250000583	2,627
334465	SURGERY CENTER OF RIVERSIDE, THE	92503	250000625	46
334480	FSCI, INC., SURGERY CENTER	92262	250000682	65
334487	RIVERSIDE COUNTY REGIONAL MEDICAL CENTER	92555	250000195	2,220
334488	VALLEY ENDOSCOPY CENTER	92543	250000678	340
334495	AARONSON PLASTIC SURGERY CENTER	92262	250000738	134
334499	LA QUINTA SURGERY CENTER	92253	250000744	189
334504	ADVANCED PAIN MANAGEMENT	92270	250000753	2,597
334507	DESERT ORTHOPEDIC SURGERY CENTER	92270	250000761	1,442
334512	RIVERSIDE MEDICAL CLINIC SURGICAL CENTER	92506	250000763	3,606
334516	AURORA SURGERY CENTER	92260	250000771	532
334520	OAKS SURGERY CENTER, THE	92562	250000779	2,940
334522	THE PLASTIC SURGERY INSTITUTE	92270	250000785	36
334529	MIRAGE ENDOSCOPY CENTER L.P.	92270	250000789	3,667
334535	ENDOSCOPY CENTER OF THE INLAND EMPIRE	92562	250000794	1,932
334538	DE ANZA SURGERY CENTER	92501	250000795	1,109
334539	INLAND SURGERY CENTER MURRIETA	92562	250000796	447
334550	SEDONA SURGICAL CENTER, INC.	92201	250000805	724
334555	TEMECULA VALLEY ENDOSCOPY CENTER	92562	250000810	1,168
334556	RENAISSANCE SURGERY CENTER OF EL PASEO	92260	250000809	44
334562	HEMET ENDOSCOPY CENTER	92543	250000455	721
334578	INDIO SURGERY CENTER INC.	92201	550000265	597
340913	KAISER FND HOSP - SACRAMENTO/ROSEVILLE-MORSE	95825	030000052	4,267
340947	MERCY GENERAL HOSPITAL	95819	030000062	6,823
340950	MERCY SAN JUAN HOSPITAL	95608	030000063	5,270
340951	METHODIST HOSPITAL OF SACRAMENTO	95823	030000064	2,841
341006	UNIVERSITY OF CALIFORNIA DAVIS MEDICAL CENTER	95817	030000086	10,601
341051	SUTTER GENERAL HOSPITAL	95816	030000102	3,780
341052	SUTTER MEMORIAL HOSPITAL	95819	030000102	3,965
341088	GREATER SACRAMENTO SURGERY CENTER	95821	030000116	3,418

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341608	SUTTER SURGERY CENTER	95825	030000134	2,079
342259	PLASTIC SURGERY CENTER MEDICAL GROUP, INC, THE	95825	030000191	511
342344	KAISER FND HOSP - SOUTH SACRAMENTO	95823	030000228	3,865
344005	SACRAMENTO MIDTOWN ENDOSCOPY CENTER	95819	030000333	2,523
344015	HEALTHSOUTH SURGERY CENTER - FORT SUTTER	95816	030000308	3,589
344023	EYE SURGERY CENTER OF NORTHERN CALIFORNIA, THE	95621	030000363	290
344029	MERCY HOSPITAL - FOLSOM	95630	030000372	1,057
344036	MARTEL EYE INSTITUTE	95670	030000387	317
344066	SUTTER ALHAMBRA SURGERY CENTER, L.P.	95816	030000446	1,810
344097	SACRAMENTO EYE SURGICENTER	95816	030000515	442
344114	SHRINERS HOSPITALS FOR CHILDREN NORTHERN CALIF.	95817	030000620	485
344118	MICHAEL J. FAZIO, MD. SURGERY CENTER	95816	030000658	704
344128	PAIN DIAGNOSTIC AND TREATMENT CENTER, L.P.	95816	030000705	1,718
344129	FOLSOM SURGERY CENTER	95630	030000763	1,886
344130	FOLSOM SIERRA ENDOSCOPY CENTER L.P.	95630	030000765	1,713
344134	PROCEDURE CENTER OF SOUTH SACRAMENTO	95823	030000773	1,231
344135	CAPITOL CITY SURGERY CENTER	95815	030000780	1,260
350784	HAZEL HAWKINS MEMORIAL HOSPITAL	95023	070000004	1,038
361105	BARSTOW COMMUNITY HOSPITAL	92311	240000110	457
361110	BEAR VALLEY COMMUNITY HOSPITAL	92315	240000111	177
361144	CHINO VALLEY MEDICAL CENTER	91710	240000125	401
361166	MONTCLAIR HOSPITAL MEDICAL CENTER	91763	240000141	214
361223	KAISER FND HOSP - FONTANA	92335	240000159	5,031
361246	LOMA LINDA UNIVERSITY MEDICAL CENTER	92354	240000169	10,213
361266	MOUNTAINS COMMUNITY HOSPITAL	92352	240000176	141
361308	REDLANDS COMMUNITY HOSPITAL	92373	240000191	2,068
361318	SAN ANTONIO COMMUNITY HOSPITAL	91786	240000196	2,517
361323	COMMUNITY HOSPITAL OF SAN BERNARDINO	92411	240000198	1,138
361339	ST. BERNARDINE MEDICAL CENTER	92404	240000206	3,399
361343	ST. MARY REGIONAL MEDICAL CENTER	92307	240000207	2,541
361370	VICTOR VALLEY COMMUNITY HOSPITAL	92392	240000218	1,847
361458	COLORADO RIVER MEDICAL CENTER	92363	240000227	6
362041	HI-DESERT MEDICAL CENTER	92252	240000231	420
364008	INLAND SURGERY CENTER	92373	240000270	3,134
364019	UPLAND OUTPATIENT SURGICAL CENTER	91786	240000740	937
364023	LOMA LINDA AMBULATORY SURGICAL CENTER	92354	240000308	30
364061	STARPOINT HEALTH, INC.	92392	240000389	111
364062	APPLE VALLEY SURGERY CENTER	92307	240000375	271
364086	CENTRE FOR PLASTIC SURGERY, THE	92404	240000436	72
364095	HIGH DESERT ENDOSCOPY	92307	240000466	678
364104	FOOTHILL AMBULATORY SURGERY CENTER	91786	240000458	113
364122	REDLANDS DENTAL SURGERY CENTER	92374	240000513	1,308
364125	PACIFIC EYE INSTITUTE	91786	240000525	2,296
364139	HI DESERT SURGERY CENTER	92307	240000553	163
364140	MOUNTAIN VIEW SURGERY CENTER AND MEDICAL CLINIC	92374	240000549	2,298
364144	DESERT VALLEY HOSPITAL	92392	240000562	603
364188	RANCHO SPECIALTY HOSPITAL	91730	240000652	265

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364231	ARROWHEAD REGIONAL MEDICAL CENTER	92324	240000197	2,366
364239	WIKA ENDOSCOPY CENTER	92307	240000689	938
364246	INLAND EMPIRE OUTPATIENT SURGERY CENTER, INC.	92405	240000756	307
364247	SAN ANTONIO AMBULATORY SURGICAL CENTER, INC.	91786	240000773	2,341
364253	PREMIER OUTPATIENT SURGERY CENTER, INC.	92324	240000827	1,214
364263	BENEFIT SURGERY CENTER	91730	240000845	119
364278	HALLMARK SURGICAL CENTER	92407	240000858	1,478
364282	FOUR SEASONS SURGERY CENTERS OF ONTARIO	91762	240000859	713
364289	ONTARIO-VINEYARD AMBULATORY SURGERY CENTER	91761	240000868	5,497
364309	ADVANCED AMBULATORY SURGERY CENTER, LP	92374	550000011	1,196
364315	PHYSICIAN'S SURGERY CENTER	92395	550000094	1,066
370652	ALVARADO HOSPITAL	92120	090000013	3,856
370658	SCRIPPS MERCY HOSPITAL - CHULA VISTA	91910	090000074	2,043
370673	CHILDREN'S HOSPITAL - SAN DIEGO	92123	080000028	6,747
370689	SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER	92118	090000036	474
370694	SHARP MEMORIAL HOSPITAL	92123	080000039	7,564
370695	SHARP MARY BIRCH HOSPITAL FOR WOMEN	92123	080000615	1,101
370705	FALLBROOK HOSPITAL DISTRICT	92028	080000005	998
370714	GROSSMONT HOSPITAL	91942	080000006	5,677
370730	KAISER FND HOSP - SAN DIEGO	92120	080000062	8,998
370744	SCRIPPS MERCY HOSPITAL	92103	090000074	4,640
370755	PALOMAR MEDICAL CENTER	92025	080000083	1,325
370759	PARADISE VALLEY HOSPITAL	92050	090000086	927
370771	SCRIPPS MEMORIAL HOSPITAL - LA JOLLA	92037	080000050	5,511
370780	TRI-CITY MEDICAL CENTER	92056	080000099	5,642
370782	UNIVERSITY OF CALIF-SAN DIEGO MEDICAL CENTER	92103	090000101	9,698
370787	PROMISE HOSPITAL OF SAN DIEGO	92105	090000105	803
370838	SAN DIEGO OUTPATIENT SURGICAL CENTER	92103	090000114	1,096
370875	SHARP CHULA VISTA MEDICAL CENTER	91911	090000008	2,754
370977	POMERADO HOSPITAL	92064	080000127	1,596
371256	SCRIPPS GREEN HOSPITAL	92037	080000139	8,080
371394	SCRIPPS MEMORIAL HOSPITAL - ENCINITAS	92024	080000148	2,551
371705	GROSSMONT SURGERY CENTER	91942	080000252	2,612
371721	ESCONDIDO SURGERY CENTER	92025	080000265	2,445
374074	CENTRE FOR SURGERY OF ENCINITAS	92024	080000373	1,974
374077	PREMIERE SURGERY CENTER, INC	92026	080000372	908
374087	CENTER FOR ENDOSCOPY	92056	080000391	2,953
374088	UTC SURGICENTER	92122	080000389	516
374108	HEALTHSOUTH NORTH COAST SURGERY CENTER	92056	080000001	1,587
374136	ELITE SURGICAL CENTERS, POINT LOMA	92110	090000444	356
374137	LA JOLLA ENDOSCOPY CENTER	92037	080000443	1,916
374139	AMBULATORY CARE SURGERY CENTER, INC.	92123	080000458	96
374147	HEALTHSOUTH RANCHO BERNARDO SURGERY CENTER	92128	080000465	1,995
374149	SAN DIEGO ENDOSCOPY CENTER, A PARTNERSHIP	92103	090000423	1,723
374159	EYE SURGERY CENTER OF SOUTHERN CALIFORNIA, INC	92083	080000475	307
374162	SURGICAL EYE CARE CENTER	92008	080000480	518
374181	ENDOSCOPY CENTER OF CHULA VISTA	91910	090000342	1,421

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374233	OASIS HEALTHSOUTH SURGERY CENTER	92123	080000581	832
374243	COAST SURGERY CENTER	92123	080000619	1,541
374264	PACIFIC SURGICAL INSTITUTE OF PAIN MANAGEMENT	92108	090000607	359
374276	DEL MAR SURGERY CENTER	92130	080000649	811
374283	PARKWAY ENDOSCOPY CENTER	92025	080000655	2,003
374288	LA JOLLA ORTHOPEDIC SURGERY CENTER	92037	080000653	2,147
374309	ELITE SURGICAL CENTERS DEL MAR	92130	080000756	627
374314	POWAY SURGERY CENTER LP	92064	080000768	1,102
374331	MISSION VALLEY HEIGHTS SURGERY CENTER	92108	080000761	3,402
374339	SCRIPPS MERCY SURGERY PAVILION	92103	090000675	2,550
374383	OTAY LAKES SURGERY CENTER, LLC	91914	550000297	641
374389	SAN DIEGO CENTER FOR REPRODUCTIVE SURGERY	92123	550000427	111
374399	EUCLID ENDOSCOPY CENTER, LP	92114	550000513	59
380857	KAISER FND HOSP - GEARY S F	94115	220000188	5,287
380929	CALIFORNIA PACIFIC MED CTR-PACIFIC CAMPUS	94115	220000197	12,054
380939	SAN FRANCISCO GENERAL HOSPITAL	94110	220000063	4,773
380960	ST. FRANCIS MEMORIAL HOSPITAL	94109	220000069	1,630
380964	ST. LUKE'S HOSPITAL	94110	220000070	1,646
380965	ST. MARY'S MEDICAL CENTER, SAN FRANCISCO	94117	220000071	3,017
381154	UCSF MEDICAL CENTER	94122	220000091	3,095
382715	CHINESE HOSPITAL	94133	220000122	3,077
384012	PRESIDIO SURGERY CENTER	94115	220000236	2,733
384156	WOLFENDEN MEDICAL INSTITUTE FOR PLASTIC SURGERY	94109	220000394	63
384168	POST STREET SURGERY CENTER, LLC	94115	220000485	550
384170	PACIFIC HEIGHTS SURGERY CENTER	94115	220000492	721
384171	SAN FRANCISCO ENDOSCOPY CENTER, LLC	94118	220000489	3,817
384172	SAN FRANCISCO SURGERY CENTER	94108	220000496	864
384195	GOLDEN GATE ENDOSCOPY CENTER, L.P.	94118	550000401	356
390846	DAMERON HOSPITAL	95203	030000024	1,787
390923	LODI MEMORIAL HOSPITAL	95240	030000056	2,315
391010	SAN JOAQUIN GENERAL HOSPITAL	95231	030000087	1,230
391042	ST. JOSEPH'S MEDICAL CENTER OF STOCKTON	95204	030000284	1,699
391056	SUTTER TRACY COMMUNITY HOSPITAL	95376	030000105	2,874
392287	DOCTORS HOSPITAL OF MANTECA	95336	030000203	1,946
394004	LODI OUTPATIENT SURGICAL CENTER	95242	030000345	1,505
394009	KAISER FND HOSP-MANTECA	95336	030000393	2,579
394023	SAN JOAQUIN LASER AND SURGERY CENTER	95204	030000469	912
394024	AMBULATORY SURGICAL CENTER OF THE ZEITER EYE	95202	030000483	1,554
394061	AMBULATORY SURGERY CENTER OF STOCKTON	95204	030000758	1,172
394069	STOCKTON ENDOSCOPY CENTER, LLC	95204	030000792	1,807
400466	ARROYO GRANDE COMMUNITY HOSPITAL	93420	050000021	536
400480	FRENCH HOSPITAL MEDICAL CENTER	93401	050000031	2,519
400524	SIERRA VISTA REGIONAL MEDICAL CENTER	93405	050000059	1,654
400548	TWIN CITIES COMMUNITY HOSPITAL	93465	050000078	1,547
404006	HEALTHSOUTH SURGERY CENTER	93401	050000269	865
404021	ENDOSCOPY CENTER OF THE CENTRAL COAST, THE	93405	050000424	1,458
404022	SANI EYE SURGERY CENTER	93465	050000434	106

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404024	SIERRA VISTA MEDICAL PAVILION AMBULATORY SURGERY	93405	050000441	94
404027	HALCYON LASER AND SURGERY CENTER, INC	93420	050000462	723
404039	GALILEO SURGERY CENTER	93405	050000531	1,186
404045	OAK PARK SURGERY CENTER	93420	050000571	1,089
404047	POSADA AMBULATORY SURGERY CENTER, L.P.	93465	050000580	646
404048	TEMPLETON ENDOSCOPY CENTER	93465	050000582	991
404053	COASTAL SURGICAL INSTITUTE	93449	050000593	2,299
404065	TEMPLETON SURGERY CENTER LLC	93465	550000366	265
410782	SAN MATEO MEDICAL CENTER	94403	220000015	1,232
410804	KAISER FND HOSP - REDWOOD CITY	94063	220000021	2,273
410806	KAISER FND HOSP - SOUTH SAN FRANCISCO	94080	220000022	1,670
410817	SETON MEDICAL CENTER	94015	220000026	4,218
410852	PENINSULA MEDICAL CENTER	94010	220000037	4,342
410891	SEQUOIA HOSPITAL	94062	220000045	1,797
414009	CAMPUS SURGERY CENTER LP	94015	220000254	1,215
414015	ATHERTON PLASTIC SURGERY CENTER	94027	220000269	105
414018	MENLO PARK SURGICAL HOSPITAL	94025	220000276	1,220
414063	MID-PENINSULA ENDOSCOPY CENTER	94401	220000361	2,907
414067	SPINAL DIAGNOSTICS AND TREATMENT CENTER, LLC	94015	220000387	2,119
414084	ATHERTON ENDOSCOPY CENTER	94027	220000491	1,238
414085	DIGESTIVE DIAGNOSTIC CENTER, INC.	94015	220000490	915
420483	GOLETA VALLEY COTTAGE HOSPITAL	93111	050000034	663
420491	LOMPOC HEALTHCARE DISTRICT	93436	050000038	1,420
420493	MARIAN MEDICAL CENTER	93454	050000040	1,964
420514	SANTA BARBARA COTTAGE HOSPITAL	93105	050000140	3,593
420522	SANTA YNEZ VALLEY COTTAGE HOSPITAL	93463	050000057	374
424016	SHEPARD EYE CENTER MEDICAL GROUP	93454	050000322	784
424041	ENDOSCOPY SURGERY CENTER OF SANTA MARIA	93454	050000516	864
424044	SANTA MARIA AMBULATORY SURGERY AND LASER CENTER INC.	93454	050000530	711
424045	PREMIER SURGERY CENTER OF SANTA BARBARA	93105	050000545	799
424049	SUMMIT SURGERY CENTER	93105	050000556	1,033
424050	CYPRESS AMBULATORY SURGERY CENTER	93454	050000559	717
424051	SANTA BARBARA SURGICAL CENTER, L.P.	93105	050000560	2,600
424052	SPINE AND PAIN TREATMENT MEDICAL CENTER	93458	050000561	2,331
424057	SANTA MARIA DIGESTIVE DIAGNOSTIC CENTER	93454	050000572	2,854
424060	PLAZA SURGERY CENTER, L.P.	93454	050000578	1,219
424061	SANTA BARBARA ENDOSCOPY CENTER, LLC	93101	050000579	1,144
424065	PREMIER SURGERY CENTER OF SANTA MARIA	93454	550000485	11
430705	REGIONAL MEDICAL OF SAN JOSE	95116	070000005	3,940
430743	COMMUNITY HOSPITAL OF LOS GATOS	95032	070000025	2,407
430763	EL CAMINO HOSPITAL	94040	070000660	2,345
430779	GOOD SAMARITAN HOSPITAL-SAN JOSE	95124	070000048	4,363
430805	KAISER FND HOSP - SANTA CLARA	95051	070000661	5,671
430837	O'CONNOR HOSPITAL - SAN JOSE	95128	070000072	3,998
430883	SANTA CLARA VALLEY MEDICAL CENTER	95128	070000085	5,962
430905	STANFORD HOSPITAL	94305	070000662	11,043
431040	SURGECENTER OF PALO ALTO	94301	220000424	4,491

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431506	KAISER FND HOSP - SANTA TERESA COMMUNITY HOSPITAL	95119	070000117	4,610
434003	LOS GATOS SURGICAL CENTER	95032	070000227	2,974
434023	PLASTIC SURGERY CENTER	94306	220000441	371
434024	FOREST SURGERY CENTER	95128	070000226	917
434040	LUCILE SALTER PACKARD CHILDREN'S HOSP. AT STANFORD	94304	070000659	1,943
434045	EL CAMINO SURGERY CENTER	94040	220000443	3,455
434046	BASCOM SURGERY CENTER	95008	070000306	1,099
434112	SAN JOSE MEDICAL GROUP ENDOSCOPY SUITE	95124	070000438	969
434114	SOUTH BAY ENDOSCOPY CENTER, A MEDICAL CORPORATION	95128	070000447	979
434115	CAMINO MEDICAL GROUP, INC.-ENDOSCOPY UNIT	94086	220000452	914
434135	SILICON VALLEY SURGERY CENTER	95032	070000480	3,211
434138	ST. LOUISE REGIONAL HOSPITAL	95020	070000266	914
434147	MONTPELIER AMBULATORY SURGICAL CENTER	95116	070000612	1,508
434148	ENDOSCOPY CENTER OF SILICON VALLEY	95124	070000622	1,483
434149	WAVERLEY SURGERY CENTER	94301	220000472	4,312
434150	ENDOSCOPY CENTER OF SAN JOSE	95128	070000639	1,038
434151	LOS ALTOS SURGERY CENTER	94024	220000309	517
434159	VALLEY AMBULATORY SURGERY CENTER	95124	070000704	635
434163	ADVANCED SURGERY CENTER	95128	550000041	951
434169	PENINSULA EYE SURGERY CENTER	94040	550000072	2,078
434170	BAY AREA SURGICAL GROUP	95050	550000076	873
434171	NORTHERN CALIFORNIA KIDNEY STONE CENTER	95032	070000228	280
434173	SAMARITAN ENDOSCOPY CENTER	95032	550000093	1,385
434175	SOUTH BAY SURGERY CENTER	95037	550000124	519
434191	PALO ALTO MED. FDN. - CAMINO DIVISION SURGICENTER	94040	550000470	990
440755	DOMINICAN HOSPITAL-SANTA CRUZ/SOQUEL	95065	070000030	1,607
441238	SANTA CRUZ SURGERY CENTER	95065	070000113	1,723
444003	CYPRESS OUTPATIENT SURGICAL CENTER, INC.	95065	070000225	2,101
444012	SUTTER MATERNITY AND SURGERY CENTER OF SANTA CRUZ	95065	070000399	3,676
444013	WATSONVILLE COMMUNITY HOSPITAL	95076	070000097	753
444015	CENTRAL COAST ENDOSCOPY CENTER	95019	070000450	965
444019	CENTRAL COAST SURGERY CENTER	95019	070000651	935
450936	MAYERS MEMORIAL HOSPITAL	96028	230000021	285
450940	SHASTA REGIONAL MEDICAL CENTER	96049	230000023	5,310
450949	MERCY MEDICAL CENTER	96001	230000024	2,485
454011	SURGERY CENTER OF NORTHERN CALIFORNIA	96001	230000180	1,312
454013	PATIENTS' HOSPITAL OF REDDING	96001	230000195	215
454026	ASSOCIATES OUTPATIENT SURGERY CENTER	96001	230000246	136
454031	REDDING ENDOSCOPY CENTER	96001	230000273	2,188
454032	RIVERSIDE SURGERY CENTER, INC.	96001	230000289	675
454039	APOGEE OUT PATIENT SURGERY CENTER	96001	230000324	1,467
454040	COURT STREET SURGERY CENTER	96001	230000328	2,212
454042	REDDING SURGERY CENTER, LP	96001	230000330	670
454047	MERCY SURGERY CENTER	96001	230000354	1,757
470871	MERCY MEDICAL CENTER MT. SHASTA	96067	230000015	1,105
474007	FAIRCHILD MEDICAL CENTER	96097	230000035	845
480989	KAISER FND HOSP - REHABILITATION CENTER VALLEJO	94590	110000026	2,944

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481094	SUTTER SOLANO MEDICAL CENTER	94590	110000082	1,554
481357	NORTH BAY MEDICAL CENTER	94533	110000093	1,702
484001	NORTH BAY VACAVALLEY HOSPITAL	95687	110000093	445
484045	SUTTER FAIRFIELD SURGERY CENTER	94533	110000525	3,199
490919	SUTTER MEDICAL CENTER OF SANTA ROSA-CHANATE CAMPUS	95404	110000005	3,452
490964	HEALDSBURG DISTRICT HOSPITAL	95448	110000019	639
491001	PETALUMA VALLEY HOSPITAL	94954	110000001	1,800
491064	SANTA ROSA MEMORIAL HOSPITAL-MONTGOMERY	95405	140000648	3,490
491076	SONOMA VALLEY HOSPITAL	95476	110000072	619
491338	PALM DRIVE HOSPITAL	95472	110000091	519
494003	HEALTHSOUTH SURGERY CENTER OF SANTA ROSA	95405	110000180	1,552
494006	SEBASTOPOL AMBULATORY SURGERY CENTER	95472	110000189	430
494019	KAISER FND HOSP - SANTA ROSA	95403	110000213	2,828
494041	PETALUMA SURGICENTER	94954	110000263	70
494055	NORTH BAY EYE ASSOCIATES, ASC	95401	110000297	352
494075	4TH STREET LASER AND SURGERY CENTER	95404	110000344	1,030
494087	ENDOSCOPY CENTER OF SANTA ROSA	95405	110000493	1,885
500852	DOCTORS MEDICAL CENTER	95350	030000026	3,563
500867	EMANUEL MEDICAL CENTER, INC	95380	030000035	2,617
500939	MEMORIAL HOSPITAL MEDICAL CENTER - MODESTO	95355	030000061	6,188
500967	OAK VALLEY DISTRICT HOSPITAL (2-RH)	95361	030000069	702
502389	MCHENRY SURGERY CENTER PARTNERS, L.P.	95350	030000303	893
504022	MODESTO SURGERY CENTER, INC.	95350	030000552	795
504030	PUEBLO NUEVO AESTHETIC AND RECONSTRUCTIVE SURGERY	95350	030000575	130
504038	STANISLAUS SURGICAL HOSPITAL	95355	030000695	5,577
504046	VALLEY SURGERY CENTER, LP	95355	030000784	410
504047	NORTHERN CALIFORNIA SURGERY CENTER	95382	550000135	1,045
504054	SYLVAN SURGERY CENTER, INC.	95355	550000147	173
504055	SALIDA SURGERY CENTER	95368	550000144	1,286
504057	TOWER HEALTH AND WELLNESS SURGERY CENTER	95382	550000195	547
510882	FREMONT MEDICAL CENTER	95991	230000126	3,218
514009	ENDOSCOPY CENTER, THE	95991	230000220	1,751
514010	FEATHER RIVER SURGERY CENTER	95991	230000226	1,285
514021	SUTTER NORTH PROCEDURE CENTER	95991	230000270	768
514032	SUTTER NORTH SURGERY CENTER	95991	550000084	1,619
521041	ST. ELIZABETH COMMUNITY HOSPITAL	96080	230000036	1,379
524007	RED BLUFF SURGERY CENTER, INC.	96080	230000282	98
524012	TEHAMA SURGERY CENTER, INC.	96080	550000099	82
531059	TRINITY HOSPITAL	96093	230000038	229
540734	KAWEAH DELTA DISTRICT HOSPITAL	93291	120000580	2,824
540798	SIERRA VIEW DISTRICT HOSPITAL	93257	120000584	1,978
540816	TULARE DISTRICT HOSPITAL	93274	120000585	1,774
544007	MEDICAL ARTS AMBULATORY SURGERY CENTER	93291	120000599	322
544016	VISALIA CENTER FOR AMBULATORY MEDICINE AND SURGERY	93277	120000603	2,042
544027	CYPRESS SURGERY CENTER	93277	120000610	1,438
544047	MILL CREEK AMBULATORY SURGERY CENTER	93291	120000629	172
544057	SIERRA AMBULATORY SURGERY CENTER, A MEDICAL CORP.	93291	120000644	574

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Facility ID	Facility Name	ZIP Code	DHS/MHS License	# of Encounters
544066	NOBLE SURGERY CENTER	93277	120000663	583
544071	NATRAJ SURGERY CENTER, INC.	93257	550000077	81
544072	COURTYARD SURGERY PAVILION	93291	550000162	344
551061	TUOLUMNE GENERAL HOSPITAL	95370	030000107	473
554001	SONORA EYE SURGERY CENTER	95370	030000368	758
554011	SONORA REGIONAL MEDICAL CENTER - GREENLEY	95370	030000094	1,820
554017	SONORA SURGERY CENTER	95370	030000804	814
560473	COMMUNITY MEMORIAL HOSPITAL-SAN BUENAVENTURA	93003	050000026	6,080
560481	VENTURA COUNTY MEDICAL CENTER	93003	050000032	1,673
560492	LOS ROBLES HOSPITAL & MEDICAL CENTER	91360	050000039	3,755
560501	OJAI VALLEY COMMUNITY HOSPITAL	93023	050000045	532
560508	ST. JOHN'S PLEASANT VALLEY HOSPITAL	93010	050000048	1,571
560525	SIMI VALLEY HOSPITAL AND HEALTH CARE SVCS-SYCAMORE	93065	050000216	413
560529	ST. JOHN'S REGIONAL MEDICAL CENTER	93030	050000064	3,318
564012	ASPEN OUTPATIENT CENTER	93065	050000229	632
564022	T SURGERY CENTER	93003	050000270	1,134
564027	LOS ROBLES SURGICENTER	91360	050000280	1,410
564037	CHANNEL ISLANDS SURGICENTER	93030	050000297	3,333
564047	PLAZA SURGICAL CENTER, INC.	93003	050000315	97
564048	VENTURA OUT-PATIENT SURGERY, INC.	93003	050000359	74
564072	THOUSAND OAKS ENDOSCOPY CENTER	91360	050000438	2,372
564081	WESTLAKE EYE SURGERY CENTER	91361	050000450	532
564107	SPANISH HILLS SURGERY CENTER, LLC	93010	550000062	1,158
564115	DERMATOLOGY AND REJUVENATION MEDICAL CENTER	91360	050000557	48
564118	SAXON SURGICAL CENTER, INC.	91360	050000564	437
564119	CALIFORNIA MINIMALLY INVASIVE SURGICAL CENTER, INC	91320	050000566	216
564121	THOUSAND OAKS SURGICAL HOSPITAL	91361	050000596	1,776
564127	PACIFIC SURGERY CENTER OF VENTURA	93003	050000581	674
564128	VENTURA SURGERY CENTER, INC.	93003	050000587	457
564133	VENTURA ENDOSCOPY CENTER, LLC	93003	050000592	2,363
564136	ST. JOHN'S OUTPATIENT SURGERY CENTER	93030	550000097	454
564154	SIMI SURGERY CENTER, INC.	93065	550000363	714
571086	WOODLAND MEMORIAL HOSPITAL	95695	030000115	3,395
574010	SUTTER DAVIS HOSPITAL	95616	030000124	3,045
574016	DAVIS SURGERY CENTER	95616	030000777	1,105
580996	RIDEOUT MEMORIAL HOSPITAL	95901	230000126	1,172
584003	TWIN CITIES SURGICENTER, INC.	95901	230000215	629
				1,502,944

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Facility ID	Facility Name	ZIP Code	DHS/DMH License #	# of Encounters
		Total Encounters		4,421,717
010735	ALAMEDA HOSPITAL	94501	140000002	7,644
010739	ALTA BATES SUMMIT MED CTR-ALTA BATES CAMPUS	94705	140000004	16,951
010776	CHILDRENS HOSPITAL AND RESEARCH CTR AT OAKLAND	94609	140000015	24,112
010805	EDEN MEDICAL CENTER	94546	140000030	11,956
010846	ALAMEDA CO MED CTR - HIGHLAND CAMPUS	94602	140000046	31,508
010856	KAISER FND HOSP - OAKLAND CAMPUS	94611	140000052	16,714
010858	KAISER FND HOSP - HAYWARD	94545	140000053	14,230
010937	ALTA BATES SUMMIT MED CTR-SUMMIT CAMPUS-HAWTHORNE	94609	140000284	14,982
010967	ST. ROSE HOSPITAL	94545	140000107	16,393
010983	VALLEY MEMORIAL HOSPITAL - LIVERMORE	94550	140000114	11,135
010987	WASHINGTON HOSPITAL - FREMONT	94538	140000116	18,340
013619	SAN LEANDRO HOSPITAL	94578	140000030	9,852
014132	KAISER FND HOSP - FREMONT	94538	140000053	9,839
034002	SUTTER AMADOR HOSPITAL	95642	030000008	6,911
040802	BIGGS GRIDLEY MEMORIAL HOSPITAL	95948	230000007	3,855
040875	FEATHER RIVER HOSPITAL	95969	230000017	7,266
040937	OROVILLE HOSPITAL	95966	230000022	10,800
040962	ENLOE MEDICAL CENTER- ESPLANADE CAMPUS	95926	230000027	9,252
050932	MARK TWAIN ST. JOSEPH'S HOSPITAL	95249	030000058	4,608
060870	COLUSA REGIONAL MEDICAL CENTER	95932	230000149	2,655
070904	DOCTORS MEDICAL CENTER - SAN PABLO/PINOLE	94806	110000485	17,406
070924	CONTRA COSTA REGIONAL MEDICAL CENTER	94553	140000090	21,023
070934	SUTTER DELTA MEDICAL CENTER	94509	140000258	22,574
070988	JOHN MUIR MEDICAL CENTER-WALNUT CREEK CAMPUS	94598	140000265	18,766
070990	KAISER FND HOSP - WALNUT CREEK	94596	140000290	16,268
071018	JOHN MUIR MEDICAL CENTER-CONCORD CAMPUS	94520	140000128	20,022
074017	SAN RAMON REGIONAL MEDICAL CENTER	94583	140000345	7,531
074093	KAISER FND HOSP - RICHMOND CAMPUS	94804	140000052	11,700
084001	SUTTER COAST HOSPITAL	95531	110000067	8,945
090793	BARTON MEMORIAL HOSPITAL	96150	030000013	8,454
090933	MARSHALL MEDICAL CENTER (1-RH)	95667	030000059	11,346
100005	COMMUNITY MEDICAL CENTER - CLOVIS	93612	040000004	11,624
100697	COALINGA REGIONAL MEDICAL CENTER	93210	040000085	3,808
100717	COMMUNITY REGIONAL MEDICAL CENTER-FRESNO	93721	040000096	27,165
100745	KINGSBURG MEDICAL CENTER	93631	040000116	2,886
100797	SIERRA KINGS DISTRICT HOSPITAL	93654	040000149	8,033
100822	UNIVERSITY MEDICAL CENTER	93702	040000096	9,868
100899	ST. AGNES MEDICAL CENTER	93710	040000173	24,564
104062	KAISER FND HOSP - FRESNO	93720	040000384	10,126
110889	GLENN MEDICAL CENTER	95988	230000018	2,496
121002	MAD RIVER COMMUNITY HOSPITAL	95521	110000031	7,702
121031	JEROLD PHELPS COMMUNITY HOSPITAL	95542	110000052	1,291
121051	REDWOOD MEMORIAL HOSPITAL	95540	110000173	5,806
121080	ST. JOSEPH HOSPITAL - EUREKA	95501	110000075	10,585
130699	EL CENTRO REGIONAL MEDICAL CENTER	92243	090000004	18,882
130760	PIONEERS MEMORIAL HOSPITAL	92227	090000087	18,412
141273	NORTHERN INYO HOSPITAL	93514	240000179	3,101

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Facility ID	Facility Name	ZIP Code	DHS/DMH License #	# of Encounters
141338	SOUTHERN INYO HOSPITAL	93545	24000205	670
150706	DELANO REGIONAL MEDICAL CENTER	93215	12000180	8,682
150722	BAKERSFIELD MEMORIAL HOSPITAL- 34TH STREET	93301	12000181	14,273
150736	KERN MEDICAL CENTER	93305	12000182	20,886
150737	KERN VALLEY HEALTHCARE DISTRICT	93240	12000183	2,674
150761	MERCY HOSPITAL - BAKERSFIELD	93301	12000184	19,391
150782	RIDGECREST REGIONAL HOSPITAL	93555	12000186	7,943
150788	SAN JOAQUIN COMMUNITY HOSPITAL	93301	12000187	13,589
150808	TEHACHAPI HOSPITAL	93561	12000188	4,687
154101	BAKERSFIELD HEART HOSPITAL	93308	12000526	2,912
160702	CORCORAN DISTRICT HOSPITAL	93212	04000087	3,169
160725	HANFORD COMMUNITY MEDICAL CENTER	93230	04000102	20,987
160787	CENTRAL VALLEY GENERAL HOSPITAL	93230	04000140	7,578
171049	REDBUD COMMUNITY HOSPITAL	95422	11000174	7,040
171395	SUTTER LAKESIDE HOSPITAL	95453	11000094	8,055
184008	BANNER LASSEN MEDICAL CENTER	96130	23000020	4,030
190017	ALHAMBRA HOSPITAL	91801	93000005	3,455
190034	ANTELOPE VALLEY HOSPITAL MEDICAL CENTER	93534	93000008	39,085
190045	CATALINA ISLAND MEDICAL CENTER	90704	93000010	554
190053	ST. MARY MEDICAL CENTER	90801	93000012	16,419
190066	BELLFLOWER MEDICAL CENTER	90706	93000015	11,473
190081	BEVERLY HOSPITAL	90640	93000389	12,560
190110	BROTMAN MEDICAL CENTER	90231	93000022	9,310
190125	CALIFORNIA HOSPITAL MEDICAL CENTER - LOS ANGELES	90015	93000024	20,551
190148	CENTINELA FREEMAN REG MED CTR-CENTINELA CAMPUS	90301	93000027	22,034
190155	CENTURY CITY DOCTORS HOSPITAL	90067	93000029	2,964
190159	TRI-CITY REGIONAL MEDICAL CENTER	90716	93000030	2,621
190170	CHILDREN'S HOSPITAL OF LOS ANGELES	90027	93000032	28,281
190197	COMMUNITY AND MISSION HSP OF HNTG PK - SLAUSON	90255	93000038	12,578
190198	LOS ANGELES COMMUNITY HOSPITAL	90023	93000039	2,798
190200	SAN GABRIEL VALLEY MEDICAL CENTER	91776	93000041	8,609
190240	LAKEWOOD REGIONAL MEDICAL CENTER	90712	93000046	15,076
190243	DOWNEY REGIONAL MEDICAL CENTER	90241	93000048	20,117
190256	EAST LOS ANGELES DOCTORS HOSPITAL	90023	93000049	7,371
190280	ENCINO-TARZANA REGIONAL MED CTR-ENCINO	91436	93000051	4,825
190298	FOOTHILL PRESBYTERIAN HOSPITAL-JOHNSTON MEMORIAL	91741	93000052	8,334
190315	GARFIELD MEDICAL CENTER	91754	93000057	7,253
190323	GLENDALE ADVENTIST MEDICAL CENTER - WILSON TERRACE	91206	93000059	11,931
190328	EAST VALLEY HOSPITAL MEDICAL CENTER	91740	93000060	2,369
190352	GREATER EL MONTE COMMUNITY HOSPITAL	91733	93000063	6,411
190382	HOLLYWOOD PRESBYTERIAN MEDICAL CENTER	90027	93000067	12,852
190385	PROVIDENCE HOLY CROSS MEDICAL CENTER	91345	93000404	19,845
190392	GOOD SAMARITAN HOSPITAL-LOS ANGELES	90017	93000071	11,099
190400	HUNTINGTON MEMORIAL HOSPITAL	91105	93000372	22,286
190413	CITRUS VALLEY MEDICAL CENTER - IC CAMPUS	91723	93000131	5,046
190422	TORRANCE MEMORIAL MEDICAL CENTER	90505	93000076	23,809
190429	KAISER FND HOSP - SUNSET	90027	93000077	26,736
190430	KAISER FND HOSP - BELLFLOWER	90706	93000078	35,127

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190431	KAISER FND HOSP - HARBOR CITY	90710	930000079	20,845
190432	KAISER FND HOSP - PANORAMA CITY	91402	930000080	13,841
190434	KAISER FND HOSP - WEST LA	90034	930000081	23,174
190455	LANCASTER COMMUNITY HOSPITAL	93534	930000085	8,064
190470	LITTLE COMPANY OF MARY HOSPITAL	90503	930000089	19,522
190475	COMMUNITY HOSPITAL OF LONG BEACH	90804	930000090	8,292
190500	CENTINELA FREEMAN REG MED CTR-MARINA CAMPUS	90291	930000096	8,297
190517	ENCINO-TARZANA REGIONAL MED CTR-TARZANA	91356	930000097	11,061
190521	MEMORIAL HOSPITAL OF GARDENA	90247	930000098	11,722
190522	GLENDALE MEMORIAL HOSPITAL AND HEALTH CENTER	91204	930000099	11,910
190524	MISSION COMMUNITY HOSPITAL - PANORAMA CAMPUS	91402	930000101	5,996
190525	LONG BEACH MEMORIAL MEDICAL CENTER	90806	930000102	29,384
190529	METHODIST HOSPITAL OF SOUTHERN CALIFORNIA	91007	930000103	15,185
190534	OLYMPIA MEDICAL CENTER	90019	930000105	6,042
190547	MONTEREY PARK HOSPITAL	91754	930000108	4,665
190555	CEDARS SINAI MEDICAL CENTER	90048	930000110	26,966
190568	NORTHRIDGE HOSPITAL MEDICAL CENTER	91328	930000114	16,122
190570	NORWALK COMMUNITY HOSPITAL	90650	930000039	2,698
190587	PACIFIC HOSPITAL OF LONG BEACH	90806	930000117	5,158
190630	POMONA VALLEY HOSPITAL MEDICAL CENTER	91767	930000128	28,929
190631	PRESBYTERIAN INTERCOMMUNITY HOSPITAL	90602	930000129	25,225
190636	CITRUS VALLEY MEDICAL CENTER - QV CAMPUS	91790	930000131	15,448
190673	SAN DIMAS COMMUNITY HOSPITAL	91773	930000139	6,537
190680	LITTLE COMPANY OF MARY - SAN PEDRO HOSPITAL	90732	930000142	13,487
190687	SANTA MONICA - UCLA MEDICAL CENTER	90404	930000146	11,447
190696	PACIFICA HOSPITAL OF THE VALLEY	91352	930000148	7,230
190708	SHERMAN OAKS HOSPITAL	91403	930000149	6,670
190754	ST. FRANCIS MEDICAL CENTER	90262	930000157	23,794
190756	ST. JOHN'S HEALTH CENTER	90404	930000158	12,019
190758	PROVIDENCE SAINT JOSEPH MEDICAL CENTER	91505	930000159	21,544
190762	ST. VINCENT MEDICAL CENTER	90057	930000161	3,458
190766	COAST PLAZA DOCTORS HOSPITAL	90650	930000162	4,791
190796	UCLA MEDICAL CENTER	90095	930000165	12,945
190812	VALLEY PRESBYTERIAN HOSPITAL	91405	930000170	19,509
190818	VERDUGO HILLS HOSPITAL	91208	930000173	7,181
190859	WEST HILLS HOSPITAL AND MEDICAL CENTER	91307	930000189	13,545
190878	WHITE MEMORIAL MEDICAL CENTER	90033	930000195	14,503
190883	WHITTIER HOSPITAL MEDICAL CENTER	90605	930000402	8,802
190949	HENRY MAYO NEWHALL MEMORIAL HOSPITAL	91355	930000206	15,860
191227	LOS ANGELES CO HARBOR-UCLA MEDICAL CENTER	90502	060000129	21,389
191228	LOS ANGELES CO USC MEDICAL CENTER	90033	060000130	40,974
191230	MARTIN LUTHER KING JR.-HARBOR HOSPITAL	90059	060000132	21,738
191231	LOS ANGELES COUNTY OLIVE VIEW-UCLA MEDICAL CENTER	91342	060000133	17,615
191450	KAISER FND HOSP - WOODLAND HILLS	91367	930000358	14,075
196035	KAISER FND HOSP - BALDWIN PARK	91706	930000920	27,711
201281	MADERA COMMUNITY HOSPITAL	93637	040000191	17,654
204019	CHILDREN'S HOSPITAL CENTRAL CALIFORNIA	93638	040000160	24,635
210992	KAISER FND HOSP - SAN RAFAEL	94903	110000357	10,222

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Facility ID	Facility Name	ZIP Code	DHS/DMH License #	# of Encounters
211006	MARIN GENERAL HOSPITAL	94904	110000361	14,576
214034	NOVATO COMMUNITY HOSPITAL	94945	110000375	7,559
220733	JOHN C FREMONT HEALTHCARE DISTRICT	95338	040000108	2,180
230949	FRANK R HOWARD MEMORIAL HOSPITAL	95490	110000013	4,774
231013	MENDOCINO COAST DISTRICT HOSPITAL	95437	110000040	4,052
231396	UKIAH VALLEY MEDICAL CENTER/HOSPITAL DRIVE	95482	110000095	11,490
240924	MEMORIAL HOSPITAL LOS BANOS	93635	040000177	11,128
240942	MERCY MEDICAL CENTER MERCED-COMMUNITY CAMPUS	95340	040000178	19,501
250955	SURPRISE VALLEY COMMUNITY HOSPITAL	96104	230000025	198
250956	MODOC MEDICAL CENTER	96101	230000026	1,225
260011	MAMMOTH HOSPITAL	93546	240000008	4,216
270744	COMMUNITY HOSPITAL MONTEREY PENINSULA	93940	070000026	19,901
270777	GEORGE L MEE MEMORIAL HOSPITAL	93930	070000047	4,382
270875	SALINAS VALLEY MEMORIAL HOSPITAL	93901	070000083	17,067
274043	NATIVIDAD MEDICAL CENTER	93906	070000070	14,827
281047	QUEEN OF THE VALLEY HOSPITAL - NAPA	94558	110000060	13,769
281078	ST. HELENA HOSPITAL	94574	110000073	2,362
291023	SIERRA NEVADA MEMORIAL HOSPITAL	95945	230000152	10,828
291053	TAHOE FOREST HOSPITAL	96160	230000151	5,203
300032	CHILDREN'S HOSPITAL OF ORANGE COUNTY	92668	060000011	21,603
300225	ORANGE COAST MEMORIAL MEDICAL CENTER	92708	060000066	9,093
301097	ANAHEIM GENERAL HOSPITAL	92804	060000079	4,578
301098	ANAHEIM MEMORIAL MEDICAL CENTER	92801	060000080	17,273
301132	KAISER FND HOSP - ANAHEIM	92807	060000091	17,143
301140	CHAPMAN MEDICAL CENTER	92669	060000097	4,811
301175	FOUNTAIN VALLEY RGNL HOSP AND MED CTR - EUCLID	92708	060000109	13,050
301188	WESTERN MEDICAL CENTER HOSPITAL - ANAHEIM	92805	060000117	8,747
301205	HOAG MEMORIAL HOSPITAL PRESBYTERIAN	92663	060000122	26,140
301209	HUNTINGTON BEACH HOSPITAL	92647	060000124	7,924
301234	LA PALMA INTERCOMMUNITY HOSPITAL	90623	060000136	5,635
301248	LOS ALAMITOS MEDICAL CENTER	90720	060000142	11,445
301258	COASTAL COMMUNITIES HOSPITAL	92704	060000143	9,480
301262	MISSION HOSPITAL REGIONAL MEDICAL CENTER	92691	060000146	14,116
301279	UNIVERSITY OF CALIFORNIA IRVINE MEDICAL CENTER	92668	060000148	12,439
301283	GARDEN GROVE HOSPITAL AND MEDICAL CENTER	92643	060000152	11,794
301297	PLACENTIA LINDA HOSPITAL	92670	060000157	9,514
301317	SADDLEBACK MEMORIAL MEDICAL CENTER	92653	060000166	12,709
301325	SADDLEBACK MEMORIAL MEDICAL CENTER - SAN CLEMENTE	92673	060000166	5,786
301337	SOUTH COAST MEDICAL CENTER	92677	060000171	5,416
301340	ST. JOSEPH HOSPITAL - ORANGE	92868	060000172	21,176
301342	ST. JUDE MEDICAL CENTER	92835	060000173	18,983
301357	TUSTIN HOSPITAL MEDICAL CENTER	92680	060000178	1,449
301379	WEST ANAHEIM MEDICAL CENTER	92804	060000182	10,225
301566	WESTERN MEDICAL CENTER - SANTA ANA	92705	060000188	8,961
304045	IRVINE REGIONAL HOSPITAL AND MEDICAL CENTER	92718	060000275	10,281
304113	CHILDREN'S HOSPITAL AT MISSION	92691	060000348	8,019
310791	SUTTER AUBURN FAITH HOSPITAL	95602	030000012	9,929
311000	SUTTER ROSEVILLE MEDICAL CENTER	95661	030000083	24,661

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Facility ID	Facility Name	ZIP Code	DHS/DMH License #	# of Encounters
314024	KAISER FND HOSP - SACRAMENTO/ROSEVILLE-EUREKA	95661	030000052	16,138
320859	EASTERN PLUMAS HOSPITAL-PORTOLA CAMPUS	96122	230000014	1,554
320986	PLUMAS DISTRICT HOSPITAL	95971	230000030	2,061
321016	SENECA HEALTHCARE DISTRICT	96020	230000032	1,452
331152	CORONA REGIONAL MEDICAL CENTER-MAIN	91720	250000126	17,518
331164	DESERT REGIONAL MEDICAL CENTER	92262	250000139	23,131
331168	EISENHOWER MEMORIAL HOSPITAL	92270	250000142	17,022
331194	HEMET VALLEY MEDICAL CENTER	92543	250000145	13,110
331216	JOHN F KENNEDY MEMORIAL HOSPITAL	92201	250000155	21,194
331288	PALO VERDE HOSPITAL	92225	250000184	4,536
331293	PARKVIEW COMMUNITY HOSPITAL MEDICAL CENTER	92503	250000186	14,465
331312	RIVERSIDE COMMUNITY HOSPITAL	92501	250000194	25,644
331326	SAN GORGONIO MEMORIAL HOSPITAL	92220	250000199	10,859
334018	MENIFEE VALLEY MEDICAL CENTER	92585	250000338	7,089
334025	KAISER FND HOSP - RIVERSIDE	92505	250000327	15,302
334048	MORENO VALLEY COMMUNITY HOSPITAL	92555	250000398	11,021
334068	SOUTHWEST HEALTHCARE SYSTEM-MURRIETA	92562	250000262	30,870
334487	RIVERSIDE COUNTY REGIONAL MEDICAL CENTER	92555	250000195	33,362
340913	KAISER FND HOSP - SACRAMENTO/ROSEVILLE-MORSE	95825	030000052	19,634
340947	MERCY GENERAL HOSPITAL	95819	030000062	13,750
340950	MERCY SAN JUAN HOSPITAL	95608	030000063	23,564
340951	METHODIST HOSPITAL OF SACRAMENTO	95823	030000064	17,924
341006	UNIVERSITY OF CALIFORNIA DAVIS MEDICAL CENTER	95817	030000086	20,405
341051	SUTTER GENERAL HOSPITAL	95816	030000102	19,605
341052	SUTTER MEMORIAL HOSPITAL	95819	030000102	11,821
342344	KAISER FND HOSP - SOUTH SACRAMENTO	95823	030000228	27,236
344029	MERCY HOSPITAL - FOLSOM	95630	030000372	10,080
350784	HAZEL HAWKINS MEMORIAL HOSPITAL	95023	070000004	6,843
361105	BARSTOW COMMUNITY HOSPITAL	92311	240000110	10,016
361110	BEAR VALLEY COMMUNITY HOSPITAL	92315	240000111	4,752
361144	CHINO VALLEY MEDICAL CENTER	91710	240000125	13,558
361166	MONTCLAIR HOSPITAL MEDICAL CENTER	91763	240000141	6,758
361223	KAISER FND HOSP - FONTANA	92335	240000159	33,965
361246	LOMA LINDA UNIVERSITY MEDICAL CENTER	92354	240000169	20,117
361266	MOUNTAINS COMMUNITY HOSPITAL	92352	240000176	2,765
361308	REDLANDS COMMUNITY HOSPITAL	92373	240000191	14,275
361318	SAN ANTONIO COMMUNITY HOSPITAL	91786	240000196	18,166
361323	COMMUNITY HOSPITAL OF SAN BERNARDINO	92411	240000198	16,116
361339	ST. BERNARDINE MEDICAL CENTER	92404	240000206	18,772
361343	ST. MARY REGIONAL MEDICAL CENTER	92307	240000207	23,184
361370	VICTOR VALLEY COMMUNITY HOSPITAL	92392	240000218	14,967
361458	COLORADO RIVER MEDICAL CENTER	92363	240000227	4,698
362041	HI-DESERT MEDICAL CENTER	92252	240000231	7,765
364144	DESERT VALLEY HOSPITAL	92392	240000562	12,918
364231	ARROWHEAD REGIONAL MEDICAL CENTER	92324	240000197	48,194
370652	ALVARADO HOSPITAL	92120	090000013	8,918
370658	SCRIPPS MERCY HOSPITAL - CHULA VISTA	91910	090000074	14,934
370673	CHILDREN'S HOSPITAL - SAN DIEGO	92123	080000028	27,759

**EMERGENCY DEPARTMENT
Facility Listing
1st Half 2007**

Facility ID	Facility Name	ZIP Code	DHS/DMH License #	# of Encounters
370689	SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER	92118	090000036	5,730
370694	SHARP MEMORIAL HOSPITAL	92123	080000039	17,798
370705	FALLBROOK HOSPITAL DISTRICT	92028	080000005	4,368
370714	GROSSMONT HOSPITAL	91942	080000006	30,221
370730	KAISER FND HOSP - SAN DIEGO	92120	080000062	39,256
370744	SCRIPPS MERCY HOSPITAL	92103	090000074	20,113
370755	PALOMAR MEDICAL CENTER	92025	080000083	22,299
370759	PARADISE VALLEY HOSPITAL	92050	090000086	13,914
370771	SCRIPPS MEMORIAL HOSPITAL - LA JOLLA	92037	080000050	11,645
370780	TRI-CITY MEDICAL CENTER	92056	080000099	27,498
370782	UNIVERSITY OF CALIF-SAN DIEGO MEDICAL CENTER	92103	090000101	26,624
370875	SHARP CHULA VISTA MEDICAL CENTER	91911	090000008	18,634
370977	POMERADO HOSPITAL	92064	080000127	11,337
371394	SCRIPPS MEMORIAL HOSPITAL - ENCINITAS	92024	080000148	12,386
380857	KAISER FND HOSP - GEARY S F	94115	220000188	10,662
380929	CALIFORNIA PACIFIC MED CTR-PACIFIC CAMPUS	94115	220000197	18,867
380939	SAN FRANCISCO GENERAL HOSPITAL	94110	220000063	18,088
380960	ST. FRANCIS MEMORIAL HOSPITAL	94109	220000069	13,047
380964	ST. LUKE'S HOSPITAL	94110	220000070	3,272
380965	ST. MARY'S MEDICAL CENTER, SAN FRANCISCO	94117	220000071	8,077
381154	UCSF MEDICAL CENTER	94122	220000091	15,306
382715	CHINESE HOSPITAL	94133	220000122	2,425
390846	DAMERON HOSPITAL	95203	030000024	11,889
390923	LODI MEMORIAL HOSPITAL	95240	030000056	9,238
391010	SAN JOAQUIN GENERAL HOSPITAL	95231	030000087	20,087
391042	ST. JOSEPH'S MEDICAL CENTER OF STOCKTON	95204	030000284	17,697
391056	SUTTER TRACY COMMUNITY HOSPITAL	95376	030000105	14,453
392287	DOCTORS HOSPITAL OF MANTECA	95336	030000203	10,621
394009	KAISER FND HOSP-MANTECA	95336	030000393	7,999
400466	ARROYO GRANDE COMMUNITY HOSPITAL	93420	050000021	10,079
400480	FRENCH HOSPITAL MEDICAL CENTER	93401	050000031	6,599
400524	SIERRA VISTA REGIONAL MEDICAL CENTER	93405	050000059	9,645
400548	TWIN CITIES COMMUNITY HOSPITAL	93465	050000078	13,884
410782	SAN MATEO MEDICAL CENTER	94403	220000015	14,874
410804	KAISER FND HOSP - REDWOOD CITY	94063	220000021	9,154
410806	KAISER FND HOSP - SOUTH SAN FRANCISCO	94080	220000022	14,256
410817	SETON MEDICAL CENTER	94015	220000026	10,872
410828	SETON MEDICAL CENTER - COASTSIDE	94038	220000026	1,657
410852	PENINSULA MEDICAL CENTER	94010	220000037	17,524
410891	SEQUOIA HOSPITAL	94062	220000045	9,523
420483	GOLETA VALLEY COTTAGE HOSPITAL	93111	050000034	6,079
420491	LOMPOC HEALTHCARE DISTRICT	93436	050000038	8,293
420493	MARIAN MEDICAL CENTER	93454	050000040	21,869
420514	SANTA BARBARA COTTAGE HOSPITAL	93105	050000140	9,677
420522	SANTA YNEZ VALLEY COTTAGE HOSPITAL	93463	050000057	1,852
430705	REGIONAL MEDICAL OF SAN JOSE	95116	070000005	22,617
430743	COMMUNITY HOSPITAL OF LOS GATOS	95032	070000025	6,098
430763	EL CAMINO HOSPITAL	94040	070000660	16,295

**EMERGENCY DEPARTMENT
Facility Listing
1st Half 2007**

Facility ID	Facility Name	ZIP Code	DHS/DMH License #	# of Encounters
430779	GOOD SAMARITAN HOSPITAL-SAN JOSE	95124	070000048	16,733
430805	KAISER FND HOSP - SANTA CLARA	95051	070000661	17,366
430837	O'CONNOR HOSPITAL - SAN JOSE	95128	070000072	19,168
430883	SANTA CLARA VALLEY MEDICAL CENTER	95128	070000085	29,676
430905	STANFORD HOSPITAL	94305	070000662	17,267
431506	KAISER FND HOSP - SANTA TERESA COMMUNITY HOSPITAL	95119	070000117	12,535
434138	ST. LOUISE REGIONAL HOSPITAL	95020	070000266	11,478
440755	DOMINICAN HOSPITAL-SANTA CRUZ/SOQUEL	95065	070000030	16,477
444013	WATSONVILLE COMMUNITY HOSPITAL	95076	070000097	12,784
450936	MAYERS MEMORIAL HOSPITAL	96028	230000021	2,001
450940	SHASTA REGIONAL MEDICAL CENTER	96049	230000023	13,740
450949	MERCY MEDICAL CENTER	96001	230000024	20,213
470871	MERCY MEDICAL CENTER MT. SHASTA	96067	230000015	3,378
474007	FAIRCHILD MEDICAL CENTER	96097	230000035	5,384
480989	KAISER FND HOSP - REHABILITATION CENTER VALLEJO	94590	110000026	11,809
481094	SUTTER SOLANO MEDICAL CENTER	94590	110000082	12,299
481357	NORTH BAY MEDICAL CENTER	94533	110000093	15,749
484001	NORTH BAY VACAVALLEY HOSPITAL	95687	110000093	9,338
490919	SUTTER MEDICAL CENTER OF SANTA ROSA-CHANATE CAMPUS	95404	110000005	10,834
490964	HEALDSBURG DISTRICT HOSPITAL	95448	110000019	4,078
491001	PETALUMA VALLEY HOSPITAL	94954	110000001	8,008
491064	SANTA ROSA MEMORIAL HOSPITAL-MONTGOMERY	95405	140000648	14,148
491076	SONOMA VALLEY HOSPITAL	95476	110000072	4,272
491338	PALM DRIVE HOSPITAL	95472	110000091	3,728
494019	KAISER FND HOSP - SANTA ROSA	95403	110000213	12,905
500852	DOCTORS MEDICAL CENTER	95350	030000026	29,293
500867	EMANUEL MEDICAL CENTER, INC	95380	030000035	25,095
500939	MEMORIAL HOSPITAL MEDICAL CENTER - MODESTO	95355	030000061	27,376
500967	OAK VALLEY DISTRICT HOSPITAL (2-RH)	95361	030000069	8,967
521041	ST. ELIZABETH COMMUNITY HOSPITAL	96080	230000036	13,314
531059	TRINITY HOSPITAL	96093	230000038	1,898
540734	KAWEAH DELTA DISTRICT HOSPITAL	93291	120000580	29,741
540798	SIERRA VIEW DISTRICT HOSPITAL	93257	120000584	22,624
540816	TULARE DISTRICT HOSPITAL	93274	120000585	13,067
551061	TUOLUMNE GENERAL HOSPITAL	95370	030000107	4,254
554011	SONORA REGIONAL MEDICAL CENTER - GREENLEY	95370	030000094	9,901
560473	COMMUNITY MEMORIAL HOSPITAL-SAN BUENAVENTURA	93003	050000026	14,668
560481	VENTURA COUNTY MEDICAL CENTER	93003	050000032	18,446
560492	LOS ROBLES HOSPITAL & MEDICAL CENTER	91360	050000039	12,583
560501	OJAI VALLEY COMMUNITY HOSPITAL	93023	050000045	3,319
560508	ST. JOHN'S PLEASANT VALLEY HOSPITAL	93010	050000048	6,848
560525	SIMI VALLEY HOSPITAL AND HEALTH CARE SVCS-SYCAMORE	93065	050000216	9,482
560529	ST. JOHN'S REGIONAL MEDICAL CENTER	93030	050000064	19,068
571086	WOODLAND MEMORIAL HOSPITAL	95695	030000115	9,251
574010	SUTTER DAVIS HOSPITAL	95616	030000124	9,796
580996	RIDEOUT MEMORIAL HOSPITAL	95901	230000126	23,942
				4,421,717

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
EMERGENCY CARE DATA RECORD
MANUAL ABSTRACT REPORTING FORM
For use with encounters on or after January 1, 2006**

Instructions: For a description of the data elements, refer to the appropriate section of the Patient Data Reporting Requirements
(Title 22, Sections 97251 through 97265)

A. FACILITY ID NUMBER

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B. ABSTRACT RECORD NUMBER (Optional)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

1. DATE OF BIRTH

Month			Day			Year (4-digit)													
M	M	D	D	C	C	Y	Y												

2. SEX

F Female
M Male
U Unknown

--

3. RACE

R1 American Indian or Alaska Native
R2 Asian
R3 Black or African American
R4 Native Hawaiian or Other Pacific Islander
R5 White
R9 Other Race
99 Unknown

--	--

4. ETHNICITY

E1 Hispanic or Latino
E2 Non-Hispanic or Non-Latino
99 Unknown

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5. ZIP CODE

--	--	--	--	--	--	--	--

99999 = Unknown

6. PATIENT'S SOCIAL SECURITY NUMBER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Report 000000001(Unknown) if not recorded in the patient's medical record

7. SERVICE DATE

Month			Day			Year (4-digit)													
M	M	D	D	C	C	Y	Y												

15. EXPECTED SOURCE OF PAYMENT

--	--

- 09 Self Pay
- 11 Other Non-federal programs
- 12 Preferred Provider Organization (PPO)
- 13 Point of Service (POS)
- 14 Exclusive Provider Organization (EPO)
- 16 Health Maintenance Organization (HMO) Medicare Risk
- AM Automobile Medical
- BL Blue Cross/Blue Shield
- CH CHAMPUS (TRICARE)
- CI Commercial Insurance Company
- DS Disability
- HM Health Maintenance Organization
- MA Medicare Part A
- MB Medicare Part B
- MC Medicaid (Medi-Cal)
- OF Other federal program
- TV Title V
- VA Veterans Affairs Plan
- WC Workers' Compensation Health Claim
- 00 Other

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
EMERGENCY CARE DATA RECORD
MANUAL ABSTRACT REPORTING FORM
For use with encounters on or after January 1, 2006**

A. FACILITY ID NUMBER

--	--	--	--	--	--	--	--

B. ABSTRACT RECORD NUMBER (Optional)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

1. DATE OF BIRTH (MMDDCCYY)

--	--	--	--	--	--	--	--

7. SERVICE DATE (MMDDCCYY)

--	--	--	--	--	--	--	--

14. DISPOSITION OF PATIENT

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- 01 Discharged to home or self care (routine discharge)
- 02 Discharged/transferred to a short term general hospital for inpatient care
- 03 Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation of covered skilled care
- 04 Discharged/transferred to an intermediate care facility (ICF)
- 05 Discharged/transferred to another type of institution not defined elsewhere in this code list
- 06 Discharged/transferred to home under care of organized home health service organization in anticipation of covered skilled care
- 07 Left against medical advice or discontinued care
- 20 Expired
- 43 Discharged/transferred to a federal health care facility
- 50 Discharged home with hospice care
- 51 Discharged to a medical facility with hospice care
- 61 Discharged/transferred to a hospital-based Medicare approved swing bed
- 62 Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part unit of a hospital
- 63 Discharged/transferred to a Medicare certified long term care hospital (LTCH)
- 64 Discharged/transferred to a nursing facility certified under Medicaid (Medi-Cal), but not certified under Medicare
- 65 Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital
- 66 Discharged/transferred to a Critical Access Hospital (CAH)
- 00 Other

8. PRINCIPAL DIAGNOSIS

ICD-9-CM CODE

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9. OTHER DIAGNOSIS

ICD-9-CM CODE

a.					
b.					
c.					
d.					
e.					
f.					
g.					
h.					

i.					
j.					
k.					
l.					
m.					
n.					
o.					
p.					

q.					
r.					
s.					
t.					
u.					
v.					
w.					
x.					

OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
 EMERGENCY CARE DATA RECORD
 MANUAL ABSTRACT REPORTING FORM
 For use with encounters on or after January 1, 2006

A. FACILITY ID NUMBER

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B. ABSTRACT RECORD NUMBER (Optional)

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1. DATE OF BIRTH (MMDDCCYY)

--	--	--	--	--	--	--	--	--	--

7. SERVICE DATE (MMDDCCYY)

--	--	--	--	--	--	--	--	--	--

10. PRINCIPAL E-CODE

ICD-9-CM CODE

E					
---	--	--	--	--	--

11. OTHER E-CODES

ICD-9-CM CODE

a.

E					
---	--	--	--	--	--

b.

E					
---	--	--	--	--	--

c.

E					
---	--	--	--	--	--

d.

E					
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12. PRINCIPAL PROCEDURE

CPT-4 CODE

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13. OTHER PROCEDURES

CPT-4 CODE

a.						k.					
b.						l.					
c.						m.					
d.						n.					
e.						o.					
f.						p.					
g.						q.					
h.						r.					
i.						s.					
j.						t.					