

**Emergency Department
and
Ambulatory Surgery Data
File Documentation**

**Information Practices Act (IPA) File
January – June 2009**

SAS Version 9.2

Emergency Department and Ambulatory Surgery Data

January-June 2009
File Documentation – IPA File

CONTENTS

Introduction

General Information	4
Disclosure Policy.....	5
Modifications and Variant Action Reports	5
Changes to Reporting of Disposition	5
The Capen vs. Shewry Decision.....	5
Importing Notes.....	6
File Format.....	6

File Documentation

Facility Identification Number.....	7
Facility County	7
Facility ZIP Code.....	7
License Type.....	8
Record Linkage Number	8
Date of Birth	8
Age in Days (at service date).....	8
Age in Years (at service date).....	8
Age Group – Pivot Table.....	9
Age Group – Perspectives 65	9
Age Group – Perspectives 60	9
Gender	10
Ethnicity	10
Race.....	10
Race Group – Normalized	11
Principal Language Spoken	11
Principal Language Spoken – Write-in Text.....	12
Patient ZIP Code.....	12
Patient County	12
Service Date	13
Service Day of the Week	13
Service Month	13
Service Quarter.....	14
Service Year	14
Patient Type.....	14
Expected Source of Payment	14
Disposition	15
External Cause of Injury – Principal E-Code.....	16
External Cause of Injury – Other E-Codes (up to 4)	16
Principal Diagnosis	17
Other Diagnoses (up to 24).....	17
Principal Procedure.....	17
Other Procedures (up to 20)	17

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

Appendices

Appendix A - Policy on the Disclosure of Patient Level Healthcare Data and Information .	A 1-2
Appendix B - Data Exceptions and Modifications.....	B 1-22
Appendix C - Emergency Department Encounters by Facility.....	C 1-8
Appendix D - Ambulatory Surgery Encounters by Facility.....	D 1-14
Appendix E - Expected Source of Payment Definitions.....	E 1-2
Appendix F - Disposition Definitions.....	F 1-3
Appendix G - Race and Ethnicity Definitions.....	G 1-2
Appendix H - Principal Language Spoken (PLS).....	H 1
Appendix I - Manual Abstract Reporting Form (ED).....	I 1-3
Appendix J - Manual Abstract Reporting Form (AS).....	J 1-3
Appendix K- County Name and Codes.....	K 1

Emergency Department and Ambulatory Surgery Data

January-June 2009
File Documentation – IPA File

INTRODUCTION

General Information:

The California Office of Statewide Health Planning and Development (OSHPD) provides public datasets of data collected from Emergency Departments (ED) and Ambulatory Surgery (AS) facilities in California. Each record within the dataset consists of one outpatient encounter, also known as a service visit, for each time a patient is treated. Data collected for these encounters include demographic, clinical, expected payer, and facility information.

Ambulatory Surgery data include encounters from general acute care hospitals and licensed freestanding Ambulatory Surgery Centers, during which at least one ambulatory surgery procedure is performed. While not all freestanding Ambulatory Surgery Centers are required to be licensed by the California Department of Public Health (CDPH), the freestanding Ambulatory Surgery Centers that are licensed by California Department of Public Health as surgical clinics are required to report. The recent Capen decision affects these licensed entities and is discussed in more detail below under the heading The Capen vs. Shewry Decision.

An ambulatory surgery procedure is defined as those procedures performed on an outpatient basis in the general operating rooms, ambulatory surgery rooms, endoscopy units, or cardiac catheterization laboratories of a hospital or a freestanding ambulatory surgery center. If the procedure was done elsewhere such as radiology, OSHPD cannot mandate collection from those areas not specified in the law. If a hospital-based AS encounter resulted in a same-hospital admission, the hospital-based AS encounter would be combined with the inpatient record. A separate AS record would not be reported for that scenario. When analyzing hospital-based AS records, you may want to include the AS direct admission using the inpatient's source of admission's site for Ambulatory Surgery and licensure for "Admitting Hospital".

Emergency Department (ED) data includes encounters from hospitals licensed to provide emergency medical services. ED services include basic, standby, or comprehensive. Urgent care should not be automatically considered an ED. Urgent care centers or clinics are licensed by the California Medical Board, and can be owned and operated by a physician or contracted out by a hospital, or acts as a drop-in for the ambulatory care clinic. Urgent care is not intended to be a replacement for ED. The ED encounter includes those patients who had a face-to-face contact with the provider. In the event of elopement or left without being seen, the patient did not have a face-to-face encounter with the provider and therefore, the ED record was not reported. The provider is a person with primary responsibility for assessing and treating the condition of a patient at a given contact and exercises independent judgment in the care of the patient. This includes medical doctor, doctor of osteopathy, doctor of dental surgery, or a doctor of podiatric medicine. If the ED encounter resulted in a same-hospital admission, the ED encounter would be combined with the inpatient record. A separate ED record would not be reported for that scenario. When analyzing ED records, you may want to include the ED direct admissions by the inpatient's source of admission's route for ER.

For more details on the definitions of the data reported and reporting requirements, see the California Emergency Department and Ambulatory Surgery Data Reporting Manual at www.oshpd.ca.gov/HID/MIRCal/EDASManual.html.

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

Disclosure Policy:

It is the policy of the Office of Statewide Health Planning and Development (OSHPD) to respect the privacy of individuals by protecting the confidentiality of all patient-level healthcare data and information that it collects, uses, and disseminates. Accordingly, OSHPD will carefully evaluate all requests for disclosure of patient-level healthcare data and information and will ensure that all disclosures comply with applicable laws and regulations.

OSHPD may disclose patient-level healthcare data and information to the general public only if OSHPD has determined that they have been de-identified. All other patient-level healthcare data and information will be considered non-public. OSHPD will disclose non-public patient-level healthcare data and information ONLY when certain conditions have been met. For a copy of OSHPD's policy on the release of patient-level data please see Appendix A - Policy on the Disclosure of Patient-Level Healthcare Data and Information.

Modifications and Variant Action Reports:

Some facilities have applied for and been granted "modifications" to standard inpatient 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 B - Data Exceptions and Modifications for a listing of all non-compliant facilities and those with approved modifications and their affected variables.

Changes to Reporting of Disposition:

The National Uniform Billing Committee has made changes to the reporting of Patient Discharge Status Codes (reported to OSHPD as "Disposition") beginning on 04/01/08. Although these changes are not yet reflected in regulation, OSHPD is accommodating the reporting of these new definitions. Only two codes are affected, a new code, 70, has been added and an existing code, 05, has changed definition. Beginning with the second quarter 2008 encounter data, Code 05 is defined as "discharged or transferred to a designated cancer center of children's hospital". The old definition "discharged or transferred to another type of healthcare institution not elsewhere coded" is now represented by a new code, 70.

The Capen vs. Shewry Decision:

In the case Capen vs. Shewry, dated 09/19/2007, it was the opinion of the court that the California Department of Public Health (CDPH) Licensing and Certification does not have the authority to issue licenses to physician-owned surgical clinics.

In an opinion filed on February 8, 2007, the California Court of Appeals, Third Appellate District, interpreted California clinic licensing law pursuant to Section 1200, et seq. of the California Health and Safety Code, that certain types of clinics and surgical clinics are eligible for licensure by CDPH. The Statute defines "surgical clinics" to exclude clinics that are owned and operated by one or more physicians, but expressly provides that physicians or dentists may, at their option, apply for licensure. CDPH had interpreted the Statute as excluding from mandatory licensure only clinics in which all of the physicians are owners, and requiring licensure of physician-owned clinics in which non-owner physicians practice. CDPH had also licensed physician-owned clinics that voluntarily requested it.

However, on September 19, 2007, the Third District Court of Appeals issued its decision in the Capen vs. Shewry lawsuit holding that all clinics that are owned by a physician or group of physicians are excluded from licensure by CDPH. According to the decision, physician-owned

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

clinics are subject to licensure by the Medical Board of California, which licenses certain "outpatient surgery settings" that use anesthesia.

CDPH has interpreted the decision as stripping it of the authority to license or regulate any physician-owned surgical clinic, including the authority to issue licenses that physicians request voluntarily.

Importing Notes:

There are several fields that although they appear to contain numeric data, should be treated as text. This is particularly important when working with diagnosis and procedure codes. These fields are comprised of ICD-9-CM (diagnosis) and CPT (procedure) codes. Diagnosis and procedure codes are stored without decimals and many contain leading zeros. For example, the ICD-9-CM code for Salmonella Gastroenteritis is "003.0" (implied decimal following the third digit from the left). If it is not formatted as text, the leading zeros may be dropped and the code will appear as an invalid diagnosis code of "30".

File 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 patient-level datasets, a header row identifying each data element is provided in the position of the first record. The SAS dataset was created using SAS Version 9.2 for Windows.

The attributes for each data field is provided on the following pages.

Emergency Department and Ambulatory Surgery Data

January-June 2009
File Documentation – IPA File

File Documentation

Facility 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. A list of facility numbers and their names and number of encounters are provided in Appendix C - Emergency Department and Appendix D - Ambulatory Surgery.
Variable Type: Character
Variable Length: 6

Facility County

Field Name: fac_co
Definition: The county where the reporting facility is located.

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

Variable Type: Character
Variable Length: 2

Facility ZIP Code

Field Name: faczip
Definition: The ZIP Code where the reporting facility is located.
Variable Type: Character
Variable Length: 5

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

License Type

Field Name: lic_type
Definition: The license type of the reporting facility. For Ambulatory Surgery data, this variable can be used to distinguish between freestanding ambulatory surgery centers and hospital-based ambulatory surgery.
C = Clinic
H = Hospital
Variable Type: Character
Variable Length: 1

Record Linkage Number

Field Name: rln
Definition: A unique 9-digit alphanumeric value that results from the encryption of the patient's Social Security Number. If the Social Security Number is invalid or blank or unknown, then the RLN is assigned a value of 9-dashes "-----".
Variable Type: Character
Variable Length: 9

Date of Birth

Field Name: brthdate
Definition: Patient's modified date of birth. The modified date of birth reflects defaults applied to invalid values reported by facilities. If the reported month or day is invalid, they are defaulted to "01". If the year is invalid, then the date of birth is set to null.
Variable Type: Numeric
Variable Length: 8 (MMDDYY10.)

Age in Days (at service date)

Field Name: agdyserv
Definition: Age of the patient (in days) at time of service. This is based on the reported service date and patient's date of birth and only available for patients who are less than 365 days old. When the date of admission and the date of birth are the same, age in days is set to "1". If the date of birth is unknown or invalid or the patient is greater than 364 days old, the age in days is set to "0".
Variable Type: Numeric
Variable Length: 8

Age in Years (at service date)

Field Name: agyrserv
Definition: Age of the patient (in years) at time of service. This is based on the reported service date and patient's date of birth. If the date of birth is unknown or invalid, the age in years is set to "0".
Variable Type: Numeric
Variable Length: 8

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

Age Group - Pivot Table

Field Name: pivot
Definition: Age category based on the patient's age at time of service in 10-year increments.

00 = unknown age	06 = 40-49 years
01 = Under 1 year	07 = 50-59 years
02 = 1-9 years	08 = 60-69 years
03 = 10-19 years	09 = 70-79 years
04 = 20-29 years	10 = 80 + years
05 = 30-39 years	

Variable Type: Character
Variable Length: 2

Age Group - Perspectives 65

Field Name: pers65
Definition: Age range category based on the patient's age at time of service, used for producing age adjusted rates and used to create tables in the California Perspectives for Healthcare publication:
www.oshpd.ca.gov/HID/Perspectives/index.html.

00 = unknown age
01 = 0-4 years
02 = 5-14 years
03 = 15-44 years
04 = 45-64 years
05 = 65+ years

Variable Type: Character
Variable Length: 1

Age Group - Perspectives 60

Field Name: pers60
Definition: Age range category based on the patient's age at time of service, used to create tables in the California Perspectives for Healthcare publication:
www.oshpd.ca.gov/HID/Perspectives/index.html.

0 = unknown age
1 = 0-14 years
2 = 15-29 years
3 = 30-44 years
4 = 45-59 years
5 = 60+ years

Variable Type: Character
Variable Length: 1

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

Gender

Field Name: SEX

Definition: Gender of the patient at time of service. "Unknown" includes undetermined sex, congenital abnormalities that obscure sex identification, and sex change operations, including any procedure related to a sex change operation (e.g., hysterectomy, mastectomy) and that the patient's gender was not available from the medical record. Reported invalid and missing values for sex were defaulted to "I".

M = Male

F = Female

U = Unknown

I = Invalid

Variable Type: Character

Variable Length: 1

Ethnicity

Field Name: eth

Definition: Ethnicity (self-reported) of the patient. If the patient's ethnicity is not recorded in the patient's medical record, or the patient could not or would not declare ethnicity, it was reported as "Unknown" (code 99). Reported invalid and missing values for ethnicity were defaulted to "00". Detailed definitions of Race and Ethnicity are provided in Appendix G.

E1 = Hispanic

E2 = Non-Hispanic

99 = Unknown

00 = Invalid/Blank

Variable Type: Character

Variable Length: 2

Race

Field Name: RACE

Definition: Patient's racial background (self reported). If the patient's race is not recorded in the patient's medical record, or the patient could not or would not declare race, it was reported as "Unknown" (code 99). Reported invalid and missing values for race were defaulted to "00". Detailed definitions of Race and Ethnicity are provided in Appendix G.

R1 = American Indian/Alaskan Native

R2 = Asian

R3 = Black/African American

R4 = Native Hawaiian/Other Pacific Islander

R5 = White

R9 = Other Race

99 = Unknown

00 = Invalid/Blank

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

Variable Type: Character

Variable Length: 2

Race Group – Normalized

Field Name: race_grp

Definition: The normalized race group for a patient based on a combination (merged) of their reported race and ethnicity. If a patient's ethnicity is "Hispanic" then the race group is coded as "3 – Hispanic". For example, white/Hispanic is assigned to code "3 – Hispanic". For all other values of ethnicity race group is assigned the same category (white, black etc.) as the reported race. For example, white/non-hispanic is assigned to code "1 – White". Reported unknown and invalid values are defaulted to "0".

- 1 = White
- 2 = Black
- 3 = Hispanic
- 4 = Asian/Pacific Islander
- 5 = Native American/Eskimo/Aleut
- 6 = Other
- 0 = Unknown/Invalid/Blank

Variable Type: Character

Variable Length: 1

Principal Language Spoken

Field Name: pls

Definition: The language the patient prefers to be used in communicating with those in the health care community. A child's language can be the language of the parent or caretaker used for communicating with the physician on the child's behalf and may change based on the language preference of the adult accompanying the child.

- | | | |
|-----------------|-------------------------|-------------------|
| 1 = English | 2 = Arabic | 3 = Armenian |
| 4 = Chinese | 5 = French | 6 = French Creole |
| 7 = German | 8 = Greek | 9 = Gujarathi |
| 10 = Hebrew | 11 = Hindi | 12 = Hungarian |
| 13 = Italian | 14 = Japanese | 15 = Korean |
| 16 = Laotian | 17 = Miao | 18 = Cambodian |
| 19 = Navajo | 20 = Persian | 21 = Polish |
| 22 = Portuguese | 23 = Russian | 24 = Croatian |
| 25 = Spanish | 26 = Tagalog | 27 = Thai |
| 28 = Urdu | 29 = Vietnamese | 30 = Yiddish |
| 31 = Unknown | 32 = Hmong | 33 = Mon-Khmer |
| 34 = Serbian | 36 = Gujarati | 997 = Invalid |
| 998 = Blank | 1000 = "write-in value" | |

Variable Type: Character

Variable Length: 4

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

Principal Language Spoken – Write-in Text

Field Name: pls_txt
Definition: The text version of the language the patient prefers to be used in communicating with those in the healthcare community (see full definition above). This includes languages not on the list but added by the reporting facility (e.g., American Sign Language). The write-in languages are assigned a code of 1000.
Variable Type: Character
Variable Length: 24

Patient ZIP Code

Field Name: PATZIP
Definition: The patient's 5-digit ZIP Code of residence. If the reported ZIP Code is invalid or if the ZIP Code is unknown, it is assigned a value of 99999.
Variable Type: Character
Variable Length: 5

Patient County

Field Name: patco
Definition: The patient's county of residence. OSHPD assigns the county of residence based on the patient's reported ZIP Code. Because ZIP Codes can cross county boundaries, OSHPD assigns the county with the greatest population in the respective ZIP Code. Invalid, blank, unknown ZIP Codes and patients residing outside of California are assigned a county code value of 00.

01 = Alameda	21 = Marin	41 = San Mateo
02 = Alpine	22 = Mariposa	42 = Santa Barbara
03 = Amador	23 = Mendocino	43 = Santa Clara
04 = Butte	24 = Merced	44 = Santa Cruz
05 = Calaveras	25 = Modoc	45 = Shasta
06 = Colusa	26 = Mono	46 = Sierra
07 = Contra Costa	27 = Monterey	47 = Siskiyou
08 = Del Norte	28 = Napa	48 = Solano
09 = El Dorado	29 = Nevada	49 = Sonoma
10 = Fresno	30 = Orange	50 = Stanislaus
11 = Glenn	31 = Placer	51 = Sutter
12 = Humboldt	32 = Plumas	52 = Tehama
13 = Imperial	33 = Riverside	53 = Trinity
14 = Inyo	34 = Sacramento	54 = Tulare
15 = Kern	35 = San Benito	55 = Tuolumne
16 = Kings	36 = San Bernardino	56 = Ventura
17 = Lake	37 = San Diego	57 = Yolo
18 = Lassen	38 = San Francisco	58 = Yuba
19 = Los Angeles	39 = San Joaquin	00 = Not a California county
20 = Madera	40 = San Luis Obispo	

Variable Type: Character
Variable Length: 2

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

Service Date

Field Name: serv_dt

Definition: The service date is the start of care provided to the patient in the emergency department or ambulatory surgery, whichever occurred first. If the reported service date is blank or invalid (such as February 31) and is not corrected by the reporting facility after it is identified by OSHPD as an error, the entire encounter record was deleted in accordance with Health and Safety Code Section 97248.

Variable Type: Number

Variable Length: 8 (MMDDYY10)

Service Day of the Week

Field Name: serv_d

Definition: The day of the week service was provided to the patient in the emergency department or ambulatory surgery, whichever occurred first. If the reported service date is blank or invalid (such as February 31) and is not corrected by the reporting facility after it is identified by OSHPD as an error, the entire encounter record was deleted in accordance with Health and Safety Code Section 97248.

1 = Sunday	5 = Thursday
2 = Monday	6 = Friday
3 = Tuesday	7 = Saturday
4 = Wednesday	

Variable Type: Character

Variable Length: 1

Service Month

Field Name: serv_m

Definition: The month service was provided to the patient in the emergency department or ambulatory surgery, whichever occurred first. If the reported service date is blank or invalid (such as February 31) and is not corrected by the reporting facility after it is identified by OSHPD as an error, the entire encounter record was deleted in accordance with Health and Safety Code Section 97248.

1 = January	7 = July
2 = February	8 = August
3 = March	9 = September
4 = April	10 = October
5 = May	11 = November
6 = June	12 = December

Variable Type: Character

Variable Length: 2

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

Service Quarter

Field Name: serv_q
Definition: The calendar quarter when service was provided to the patient. This was based on the service date. The service date is the start of care date provided in the emergency department or ambulatory surgery, whichever occurred first.
1 = January - March
2 = April - May
3 = June - August
4 = September - December
Variable Type: Character
Variable Length: 1

Service Year

Field Name: serv_y
Definition: The year service was provided to the patient.
Variable Type: Character
Variable Length: 4

Patient Type

Field Name: pat_type
Definition: The type of facility where a particular patient encounter occurred.
A = Ambulatory Surgery
E = Emergency Department
Variable Type: Character
Variable Length: 1

Expected Source of Payment

Field Name: payer
Definition: The type of entity or organization expected to pay the greatest share of the patient's bill. For a complete list of definitions for these payers, see Appendix E - Expected Source of Payment Definitions. Reported invalid and missing values for expected source of payment were defaulted to "99".
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

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

HM = Health Maintenance Organization
MA = Medicare Part A
MB = Medicare Part B
MC = Medicaid (California's Medi-Cal program)
OF = Other Federal Program
TV = Title V
VA = Veterans Affairs Plan
WC = Workers' Compensation Health Claim
00 = Other
99 = Invalid/Unknown

Variable Type: Character

Variable Length: 2

Disposition

Field Name: dispn

Definition: The consequent arrangement or event ending a patient's encounter in the reporting facility. Beginning on 4/1/2008, The National Uniform Billing Committee has made changes to the reporting of this element. Although these changes are not yet reflected in regulation, OSHPD is accommodating the reporting of these new definitions. Only two codes are affected, a new code, 70, has been added and an existing code, 05, has changed definition. For detailed definitions, see Appendix F - Disposition Definitions. For various scenarios, facilities are instructed to refer to the National Uniform Billing Committee's (NUBC) Web site or manual on Frequently Asked Questions for this data element. Reported invalid and missing values for disposition were defaulted to "99".

01 = Discharged to home of self care (routine discharge)

02 = Discharged/Transferred to a short-term general care hospital for inpatient care

03 = Discharged/Transferred to a skilled nursing facility (SNF) with Medicare certification in anticipation of covered skilled care

04 = Discharged/Transferred to an intermediate care facility (ICF)

05 = **Before 4/1/08** - Discharged/Transferred to another type of institution not defined elsewhere on this code list

05 = **After 4/1/08** - Discharged/Transferred to a designated cancer center of children's hospital

06 = Discharged/Transferred home under the care of organized home health service organization in anticipation of covered skilled care

07 = Left against medical advice or discontinued care

20 = Expired

21 = Discharged/Transferred to court/law enforcement (only in 4th quarter)

43 = Discharged/Transferred to a federal healthcare 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

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

- 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)
- 70 = **After 4/1/08** - Discharged/Transferred to another type of institution not defined elsewhere on this code list
- 00 = Other
- 99 = Invalid/Blank

Variable Type: Character

Variable Length: 2

External Cause of Injury - Principal E-Code

Field Name: ec_prin

Definition: The external cause of injury or poisoning or adverse effect code (E800-E999) which describes the mechanism that resulted in the most severe injury, poisoning, or adverse effect related to the admission. An E-Code is to be reported on the record for the first episode of care reportable to OSHPD during which the injury, poisoning, and/or adverse effect was diagnosed and/or treated. If a patient was first diagnosed in a doctor's office and then sent to an ED or AS facility, the E-Code was reported on the ED or AS record. If the E-Code has been previously reported on a discharge or encounter, the E-Code will not be reported again on the encounter record. They are coded according to the ICD-9-CM. E870-E879 for misadventures and abnormal reactions are not required for reporting.

Variable Type: Character (implied decimal after the 4th character from the left)

Variable Length: 7

External Cause of Injury - Other E-Code (up to 4)

Field Name(s): ec1 – ec4

Definition: The additional external cause of injury or poisoning or adverse effect codes (E800-E999) that completely describe the mechanisms that contributed to, or the causal events surrounding, any injury, poisoning, or adverse effect. Up to 4 other E-Codes should be included for the first reportable episode of care during which only the injury, poisoning, or adverse effect was diagnosed and/or treated. If a patient was diagnosed in a doctor's office and then sent to an ED or AS facility, the E-Code was reported on the ED or AS record. If the E-Code has been previously reported on a discharge or encounter, the E-Code will not be reported again on the encounter record. They are coded according to the ICD-9-CM. E870-E879 for misadventures and abnormal reactions are not required for reporting.

Variable Type: Character (implied decimal after the 4th character from the left)

Variable Length: 7

Emergency Department and Ambulatory Surgery Data

January-June 2009 File Documentation – IPA File

Principal Diagnosis

Field Name: dx_prin
Definition: The condition, problem, or other reason established to be the chief cause of the encounter. Diagnoses are coded according to the ICD-9-CM. If the reporting principal diagnosis code is blank or invalid and is not corrected by the reporting facility after it is identified by OSHPD as an error, the principal diagnosis was defaulted to 799.9, in accordance with Health and Safety Code Section 97248.
Variable Type: Character (implied decimal after the 3rd character from the left)
Variable Length: 7

Other Diagnoses (up to 24)

Field Name(s): odx1-odx24
Definition: All 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 are coded according to the ICD-9-CM.
Variable Type: Character (implied decimal after the 3rd character from the left)
Variable Length: 7

Principal Procedure

Field Name: pr_prin
Definition: The procedure that is surgical in nature, or carries a procedural risk, or carries an anesthetic risk and is most closely related to the principal diagnosis, as the chief reason for the encounter. Procedures are coded according to the Current Procedural Terminology (CPT-4). Category II CPT-4 codes and modifiers are not accepted by OSHPD. For more information on the risks and cancelled surgeries, see the California Emergency Department and Ambulatory Surgery Data Reporting Manual (<http://www.oshpd.ca.gov/HID/MIRCal/EDASManual.html>). The procedure date is assumed to be the same as the service date.
Variable Type: Character
Variable Length: 5

Other Procedures (up to 20)

Field Name(s): opr1-opr20
Definition: All other procedures, related to the encounter, which are surgical in nature, carry a procedural risk, or carry an anesthetic risk. Procedures are coded according to the Current Procedural Terminology (CPT-4). Category II CPT-4 codes and modifiers are not accepted by OSHPD. For more information on the risks and cancelled surgeries, see the California Emergency Department and Ambulatory Surgery Data Reporting Manual (<http://www.oshpd.ca.gov/HID/MIRCal/EDASManual.html>). The procedure date is assumed to be the same as the service date.
Variable Type: Character
Variable Length: 5

To : All Interested Parties

Date : Revised
December 11, 2008

From : David M. Carlisle, M.D., Ph.D.
Director, OSHPD



Subject: Policy on the Disclosure of Patient Level Healthcare Data and Information
Policy # 05 - 18

Policy

It is the policy of the Office of Statewide Health Planning and Development (Office) to respect the privacy of individuals by protecting the confidentiality of all patient level healthcare data and information that it collects, uses, and disseminates. Accordingly, the Office will carefully evaluate all requests for disclosure of patient level healthcare data and information and will ensure that all disclosures comply with applicable laws and regulations.

The Office may disclose patient level healthcare data and information to the general public only if the Office has determined that they have been de-identified. All other patient level healthcare data and information will be considered non-public. The Office may restrict the use of patient level healthcare data and information disclosed to the general public and may prohibit the re-release of the data and information at the patient level.

Unless specifically provided for by law, the Office will not disclose patient level healthcare data and information for the purpose of identifying or contacting individuals or to obtain medical information about specific individuals.

The Office will not disclose non-public patient level healthcare data and information unless the following conditions have been met:

- The Office has analyzed the risks of identification or linkage of the data and information to individuals.
- Disclosure of the data and information is limited to only those data and information that are the least confidential and most relevant and necessary to accomplish the objectives for which they are requested.
- Use of the data and information will be limited to that described in the request.

- The data and information will be protected from unauthorized use or disclosure.
- The disclosure is permitted under current laws and regulations, including the Information Practices Act of 1977, and the policies of the California Health and Human Services Agency.
- The California Health and Human Services Agency's Committee for the Protection of Human Subjects has approved the project for which the data and information are requested. If the data and information have been requested pursuant to Health and Safety Code §128766, approval of the Committee will only be required if the data and information are requested for research.
- The Office's Deputy Director, Healthcare Information Division approves the disclosure.
- The Office's Privacy Officer approves the disclosure.

The Office reserves the right to withhold disclosure of any data or information or recover any data and information previously disclosed.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'010856'	Kaiser Fdn Hosp - Oakland Campus	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full Compliance by January 1, 2010.
'010856'	Kaiser Fdn Hosp - Oakland Campus	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'010856'	Kaiser Fdn Hosp - Oakland Campus	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'010856'	Kaiser Fdn Hosp - Oakland Campus	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'010856'	Kaiser Fdn Hosp - Oakland Campus	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'010856'	Kaiser Fdn Hosp - Oakland Campus	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'010856'	Kaiser Fdn Hosp - Oakland Campus	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'010856'	Kaiser Fdn Hosp - Oakland Campus	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by January 1, 2010.
'010856'	Kaiser Fdn Hosp - Oakland Campus	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by January 1, 2010.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'014022'	Surgery Ctr. of Alta Bates Summit Med. Ctr., LLC, The	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'014038'	Mission Valley Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'014078'	Tri Valley Outpatient Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by April 1, 2009.
'014125'	Fremont Ambulatory Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'014157'	Webster Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Will in the future.
'014159'	Eye MD Laser and Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'044153'	Chico Surgery Center, LP	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by July 1, 2009.
'044158'	North Valley Endoscopy Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'074091'	Sequoia Surgical Pavilion	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'074093'	Kaiser Fdn Hosp - Richmond Campus	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full compliance by January 1, 2010.
'074093'	Kaiser Fdn Hosp - Richmond Campus	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'074093'	Kaiser Fdn Hosp - Richmond Campus	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'074093'	Kaiser Fdn Hosp - Richmond Campus	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'074093'	Kaiser Fdn Hosp - Richmond Campus	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'074093'	Kaiser Fdn Hosp - Richmond Campus	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'074093'	Kaiser Fdn Hosp - Richmond Campus	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'074093'	Kaiser Fdn Hosp - Richmond Campus	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by January 1, 2010.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'074093'	Kaiser Fdn Hosp - Richmond Campus	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by January 1, 2010.
'094021'	El Dorado Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by April 1, 2009.
'104062'	Kaiser Fdn Hosp - Fresno	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full compliance by January 1, 2010.
'104062'	Kaiser Fdn Hosp - Fresno	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'104062'	Kaiser Fdn Hosp - Fresno	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'104062'	Kaiser Fdn Hosp - Fresno	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'104062'	Kaiser Fdn Hosp - Fresno	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'104062'	Kaiser Fdn Hosp - Fresno	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'104062'	Kaiser Fdn Hosp - Fresno	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'104062'	Kaiser Fdn Hosp - Fresno	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by January 1, 2010.
'104062'	Kaiser Fdn Hosp - Fresno	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by January 1, 2010.
'105032'	Regional Hand Center of Central California	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'154012'	Physicians Plaza Surgical Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'154075'	Southwest Surgical Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'154098'	CBCC Pain Medicine and Surgery Center, Inc.	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by early May 2009.
'190883'	Whittier Hospital Medical Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'194005'	San Fernando Valley Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/15/2009.
'194152'	San Gabriel Valley Surgical Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 5/1/2009.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'194285'	Endoscopy Center of Southern California	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'194300'	Antelope Valley Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'194595'	Greater Long Beach Endoscopy Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 3/13/09.
'194597'	Surgery Center of Santa Monica	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'194602'	Camden Surgery Center of Beverly Hills	Principal Language Spoken	Facility not collecting PLS properly (6.5% unknown) due to not asking those patients to declare. NOTE: Capen facility has chosen to not continue after this report period.
'196069'	Kerlan-Jobe Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 2nd quarter 2009."
'196106'	Coast Surgery Center of South Bay	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by May 7, 2009.
'196309'	Pacific Endo-Surgical Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by May 7, 2009.
'196349'	The Center for Ambulatory Surgical Treatment	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'196433'	United Surgery Medical Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'210992'	Kaiser Fdn Hosp - San Rafael	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full Compliance by January 1, 2010.
'210992'	Kaiser Fdn Hosp - San Rafael	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'210992'	Kaiser Fdn Hosp - San Rafael	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'210992'	Kaiser Fdn Hosp - San Rafael	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'210992'	Kaiser Fdn Hosp - San Rafael	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'210992'	Kaiser Fdn Hosp - San Rafael	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'210992'	Kaiser Fdn Hosp - San Rafael	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'210992'	Kaiser Fdn Hosp - San Rafael	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by January 1, 2010.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'210992'	Kaiser Fdn Hosp - San Rafael	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by January 1, 2010.
'214036'	Marin Specialty Surgery Center	Principal Language Spoken	Facility not collecting PLS properly (high percentage of unknown). Full compliance by 10/1/09.
'214038'	Novato Endoscopy Center, LLC	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'304130'	La Veta Surgical Ctr., An Affiliate of Healthsouth	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'304264'	Newport Coast Surgery Center, Inc.	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 6/1/09.
'304300'	Orange Coast Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'304412'	Reagan Street Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 5/12/2009.
'314031'	Roseville Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'320859'	Eastern Plumas Hosp-Portola Campus	Ethnicity	Facility lost the Ethnicity data and cannot get it back, will be in compliance by 7/1/09.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'320859'	Eastern Plumas Hosp-Portola Campus	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'331288'	Palo Verde Hospital	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 1/1/2010.
'334092'	Glenwood Surgical Center, L P	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 3/16/2009.
'340913'	Kaiser Fdn Hosp - Sacramento/Roseville - Morse	Principal Language Spoken	All values reported for Principal Language Spoken are accurate except for those reported values of unknown. The unknown reported represent blanks or information not obtained from their patients. Kaiser Permanente updated their source system with unknown in-lieu of leaving them blank.
'341608'	Sutter River City Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by March 20, 2009
'342344'	Kaiser Fdn Hosp - South Sacramento	Principal Language Spoken	All values reported for Principal Language Spoken are accurate except for those reported values of unknown. The unknown reported represent blanks or information not obtained from their patients. Kaiser Permanente updated their source system with unknown in-lieu of leaving them blank.
'344015'	Fort Sutter Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'344023'	Eye Surgery Center of Northern California, The	Principal Language Spoken	Facility not collecting PLS properly. Patients were inaccurately captured and grouped into "Unknown". Full compliance by August 2009
'344066'	Sutter Alhambra Surgery Center, L.P.	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'344129'	Folsom Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by May 8, 2009 .
'361343'	St. Mary Regional Medical Center	Principal Language Spoken	Data inaccurately reported. The majority of the facilities population speaks either English or Spanish and everyone else was coded unknown.
'362041'	HI-Desert Medical Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'364061'	Starpoint Health, Inc.	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'364263'	Benefit Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'371705'	Grossmont Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'374074'	Centre for Surgery of Encinitas	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'374088'	University Ambulatory Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'374108'	Healthsouth North Coast Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by late March.
'374147'	Healthsouth Rancho Bernardo Surgery Center	Principal External Cause of Injury	Facility not capturing E-Codes properly in compliance by the Apr-Jun 2009 data.
'374147'	Healthsouth Rancho Bernardo Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by late March.
'374149'	San Diego Endoscopy Center, A Partnership	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'374233'	Oasis Healthsouth Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'374243'	Coast Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'374288'	La Jolla Orthopedic Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'374407'	Scripps Encinitas Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 5/11/09.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'380857'	Kaiser Fdn Hosp - GEARY (S.F.)	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full compliance by October 1, 2009.
'380857'	Kaiser Fdn Hosp - GEARY (S.F.)	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by October 1, 2009.
'380857'	Kaiser Fdn Hosp - GEARY (S.F.)	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by October 1, 2009.
'380857'	Kaiser Fdn Hosp - GEARY (S.F.)	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by October 1, 2009.
'380857'	Kaiser Fdn Hosp - GEARY (S.F.)	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by October 1, 2009.
'380857'	Kaiser Fdn Hosp - GEARY (S.F.)	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by October 1, 2009.
'380857'	Kaiser Fdn Hosp - GEARY (S.F.)	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by October 1, 2009.
'380857'	Kaiser Fdn Hosp - GEARY (S.F.)	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by October 1, 2009.
'380857'	Kaiser Fdn Hosp - GEARY (S.F.)	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by October 1, 2009.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'384012'	Presidio Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'384171'	San Francisco Endoscopy Center, LLC	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'384195'	Golden Gate Endoscopy Center, L.P.	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'384199'	Eye Surgery Center of San Francisco, L.P.	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'394009'	Kaiser Fdn Hosp - Manteca	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full compliance by April 1, 2009.
'394009'	Kaiser Fdn Hosp - Manteca	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by April 1, 2009.
'394009'	Kaiser Fdn Hosp - Manteca	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by April 1, 2009.
'394009'	Kaiser Fdn Hosp - Manteca	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by April 1, 2009.
'394009'	Kaiser Fdn Hosp - Manteca	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by April 1, 2009.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'394009'	Kaiser Fdn Hosp - Manteca	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by April 1, 2009.
'394009'	Kaiser Fdn Hosp - Manteca	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by April 1, 2009.
'394009'	Kaiser Fdn Hosp - Manteca	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by April 1, 2009.
'394009'	Kaiser Fdn Hosp - Manteca	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by April 1, 2009.
'394069'	Stockton Endoscopy Center, LLC	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'394088'	Children's Dental Surgery Center	Ethnicity	Facility not capturing Ethnicity but will begin doing so and will be in compliance by 7/1/09.
'394088'	Children's Dental Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'394088'	Children's Dental Surgery Center	Race	Facility not collecting PLS properly. Full compliance by 7/1/09.
'410804'	Kaiser Fdn Hosp - Redwood City	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full compliance by January 1, 2010.
'410804'	Kaiser Fdn Hosp - Redwood City	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'410804'	Kaiser Fdn Hosp - Redwood City	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'410804'	Kaiser Fdn Hosp - Redwood City	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'410804'	Kaiser Fdn Hosp - Redwood City	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'410804'	Kaiser Fdn Hosp - Redwood City	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'410804'	Kaiser Fdn Hosp - Redwood City	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'410804'	Kaiser Fdn Hosp - Redwood City	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by January 1, 2010.
'410804'	Kaiser Fdn Hosp - Redwood City	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by January 1, 2010.
'410806'	Kaiser Fdn Hosp - South San Francisco	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full compliance by July 1, 2009.
'410806'	Kaiser Fdn Hosp - South San Francisco	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by July 1, 2009.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'410806'	Kaiser Fdn Hosp - South San Francisco	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by July 1, 2009.
'410806'	Kaiser Fdn Hosp - South San Francisco	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by July 1, 2009.
'410806'	Kaiser Fdn Hosp - South San Francisco	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by July 1, 2009.
'410806'	Kaiser Fdn Hosp - South San Francisco	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by July 1, 2009.
'410806'	Kaiser Fdn Hosp - South San Francisco	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by July 1, 2009.
'410806'	Kaiser Fdn Hosp - South San Francisco	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by July 1, 2009.
'410806'	Kaiser Fdn Hosp - South San Francisco	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by July 1, 2009.
'410817'	Seton Medical Center	Principal Language Spoken	Modification request - Seton's MedSeries4 registration system only had 15 selections for PLS and the system does not support a free-text language field. If the language was not in the system, the registrars entered "OTH/other" and this defaulted to "unknown" for OSHPD reporting. Full compliance by 4/27/2009.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'414063'	Mid-Peninsula Endoscopy Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'424045'	Premier Surgery Center of Santa Barbara	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'424049'	Summit Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'424060'	Plaza Surgery Center, L.P.	Ethnicity	Facility not capturing Ethnicity (99.5% unknown) but will begin doing so and will be in compliance by 7/1/09.
'424060'	Plaza Surgery Center, L.P.	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'424061'	Santa Barbara Endoscopy Center, LLC	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'430763'	El Camino Hospital	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 4/1/09.
'431506'	Kaiser Fdn Hosp - San Jose	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full compliance by January 1, 2010.
'431506'	Kaiser Fdn Hosp - San Jose	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'431506'	Kaiser Fdn Hosp - San Jose	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'431506'	Kaiser Fdn Hosp - San Jose	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'431506'	Kaiser Fdn Hosp - San Jose	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'431506'	Kaiser Fdn Hosp - San Jose	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'431506'	Kaiser Fdn Hosp - San Jose	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'431506'	Kaiser Fdn Hosp - San Jose	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by January 1, 2010.
'431506'	Kaiser Fdn Hosp - San Jose	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by January 1, 2010.
'434153'	Kaiser Fdn Hosp - Santa Clara	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full compliance by October 1, 2009.
'434153'	Kaiser Fdn Hosp - Santa Clara	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by October 1, 2009.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'434153'	Kaiser Fdn Hosp - Santa Clara	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by October 1, 2009.
'434153'	Kaiser Fdn Hosp - Santa Clara	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by October 1, 2009.
'434153'	Kaiser Fdn Hosp - Santa Clara	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by October 1, 2009.
'434153'	Kaiser Fdn Hosp - Santa Clara	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by October 1, 2009.
'434153'	Kaiser Fdn Hosp - Santa Clara	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by October 1, 2009.
'434153'	Kaiser Fdn Hosp - Santa Clara	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by October 1, 2009.
'434153'	Kaiser Fdn Hosp - Santa Clara	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by October 1, 2009.
'434169'	Peninsula Eye Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'434170'	Bay Area Surgical Group	Principal Language Spoken	Facility not collecting PLS however would begin collecting on 7/1/09.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'450936'	Mayers Memorial Hospital	Principal Language Spoken	Facility not collecting PLS properly. When registering patients many defaults to English. Changes to correct this problem will be taken.
'454011'	Surgery Center of Northern California	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'454040'	Court Street Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'454042'	Redding Surgery Center, LP	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'454047'	Mercy Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'480989'	Kaiser Fdn Hosp - Rehab Ctr. - Vallejo	Disposition of Patient	Request for a modification not to correct Patient Disposition "Other". Full compliance by January 1, 2010.
'480989'	Kaiser Fdn Hosp - Rehab Ctr. - Vallejo	Other Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'480989'	Kaiser Fdn Hosp - Rehab Ctr. - Vallejo	Other External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance is expected by January 1, 2010.
'480989'	Kaiser Fdn Hosp - Rehab Ctr. - Vallejo	Other Procedure(s)	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'480989'	Kaiser Fdn Hosp - Rehab Ctr. - Vallejo	Principal Diagnosis	Request for a modification to report 1st Other Diagnoses as Principal and the use of 799.9 as Principal Diagnosis when no Other Diagnoses is available. Full compliance by January 1, 2010.
'480989'	Kaiser Fdn Hosp - Rehab Ctr. - Vallejo	Principal External Cause of Injury	Request for a modification to report 1st Other E-Code as Principal. Full compliance by January 1, 2010.
'480989'	Kaiser Fdn Hosp - Rehab Ctr. - Vallejo	Principal Procedure	Request for a modification to report 1st Other Procedure as Principal. Full compliance by January 1, 2010.
'480989'	Kaiser Fdn Hosp - Rehab Ctr. - Vallejo	Sex	Request for a modification for Sex "Unknown" (over reported). Full compliance by January 1, 2010.
'480989'	Kaiser Fdn Hosp - Rehab Ctr. - Vallejo	ZIP Code	Request for a modification not to correct ZIP Code "Unknown" (over reported). Full compliance by January 1, 2010.
'504047'	Northern California Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by June 1, 2009.
'514021'	Sutter North Procedure Center	Principal Language Spoken	Facility not collecting PLS properly on 72% of patients because the ASC relies on the Sutter North Medical Foundation registration and reporting system (IDX). This system was not set up to collect the data elements required by OSHPD for ASCs since it is a physician office registration system. Therefore the data was only collected on new patients being registered by the ASC that had not been previously registered in IDX and cannot be recreated for the patients that were not queried at the time of service.

Appendix B
Data Exceptions and Modifications
Ambulatory Surgery Center and Emergency Department

Facility Number	Facility Name	Data Element	Notes
'514032'	Sutter North Surgery Center	Principal Language Spoken	Facility not collecting PLS properly on 72% of patients because the ASC relies on the Sutter North Medical Foundation registration and reporting system (IDX). This system was not set up to collect the data elements required by OSHPD for ASCs since it is a physician office registration system. Therefore the data was only collected on new patients being registered by the ASC that had not been previously registered in IDX and cannot be recreated for the patients that were not queried at the time of service.
'544027'	Cypress Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by April-June report period.
'564133'	Ventura Endoscopy Center, LLC	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by 7/1/09.
'564136'	St. John's Outpatient Surgery Center	Principal Language Spoken	Facility not collecting PLS properly. Full compliance by May 8, 2009.

Appendix C
Emergency Department Encounters by Facility
January - June 2009

Facility Number	Facility Name	Encounters
106301098	AHMC ANAHEIM REGIONAL MEDICAL CENTER	17,414
106010846	ALAMEDA CO MED CTR - HIGHLAND CAMPUS	35,433
106010735	ALAMEDA HOSPITAL	6,194
106190017	ALHAMBRA HOSPITAL	4,115
106010739	ALTA BATES SUMMIT MED CTR-ALTA BATES CAMPUS	17,684
106010937	ALTA BATES SUMMIT MED CTR-SUMMIT CAMPUS-HAWTHORNE	15,468
106370652	ALVARADO HOSPITAL	10,105
106301097	ANAHEIM GENERAL HOSPITAL	3,947
106190034	ANTELOPE VALLEY HOSPITAL	48,101
106364231	ARROWHEAD REGIONAL MEDICAL CENTER	55,002
106400466	ARROYO GRANDE COMMUNITY HOSPITAL	9,884
106154101	BAKERSFIELD HEART HOSPITAL	2,792
106150722	BAKERSFIELD MEMORIAL HOSPITAL- 34TH STREET	21,401
106184008	BANNER LASSEN MEDICAL CENTER	4,740
106361105	BARSTOW COMMUNITY HOSPITAL	10,799
106090793	BARTON MEMORIAL HOSPITAL	8,064
106361110	BEAR VALLEY COMMUNITY HOSPITAL	5,007
106190066	BELLFLOWER MEDICAL CENTER	4,710
106190081	BEVERLY HOSPITAL	12,457
106040802	BIGGS GRIDLEY MEMORIAL HOSPITAL	3,703
106190110	BROTMAN MEDICAL CENTER	9,056
106190125	CALIFORNIA HOSPITAL MEDICAL CENTER - LOS ANGELES	24,051
106380929	CALIFORNIA PACIFIC MED CTR-PACIFIC CAMPUS	21,101
106380964	CALIFORNIA PACIFIC MEDICAL CENTER - ST. LUKE'S CAMPUS	13,218
106190045	CATALINA ISLAND MEDICAL CENTER	577
106190555	CEDARS SINAI MEDICAL CENTER	27,200
106190148	CENTINELA HOSPITAL MEDICAL CENTER	23,438
106160787	CENTRAL VALLEY GENERAL HOSPITAL	9,151
106301140	CHAPMAN MEDICAL CENTER	4,810
106010776	CHILDRENS HOSPITAL AND RESEARCH CTR AT OAKLAND	26,094
106304113	CHILDREN'S HOSPITAL AT MISSION	8,508
106204019	CHILDREN'S HOSPITAL CENTRAL CALIFORNIA	32,047
106190170	CHILDREN'S HOSPITAL OF LOS ANGELES	32,741
106300032	CHILDREN'S HOSPITAL OF ORANGE COUNTY	27,305
106382715	CHINESE HOSPITAL	2,222
106361144	CHINO VALLEY MEDICAL CENTER	15,850
106190413	CITRUS VALLEY MEDICAL CENTER - IC CAMPUS	6,018
106190636	CITRUS VALLEY MEDICAL CENTER - QV CAMPUS	19,794
106100005	CLOVIS COMMUNITY MEDICAL CENTER	13,127
106100697	COALINGA REGIONAL MEDICAL CENTER	4,691
106301258	COASTAL COMMUNITIES HOSPITAL	10,514
106190766	COAST PLAZA DOCTORS HOSPITAL	4,918
106361458	COLORADO RIVER MEDICAL CENTER	5,612

Appendix C
Emergency Department Encounters by Facility
January - June 2009

Facility Number	Facility Name	Encounters
106060870	COLUSA REGIONAL MEDICAL CENTER	2,665
106190197	COMMUNITY AND MISSION HSP OF HNTG PK - SLAUSON	12,955
106270744	COMMUNITY HOSPITAL MONTEREY PENINSULA	20,063
106190475	COMMUNITY HOSPITAL OF LONG BEACH	9,924
106361323	COMMUNITY HOSPITAL OF SAN BERNARDINO	18,930
106560473	COMMUNITY MEMORIAL HOSPITAL-SAN BUENAVENTURA	14,072
106100717	COMMUNITY REGIONAL MEDICAL CENTER-FRESNO	41,899
106070924	CONTRA COSTA REGIONAL MEDICAL CENTER	27,880
106160702	CORCORAN DISTRICT HOSPITAL	3,225
106331152	CORONA REGIONAL MEDICAL CENTER-MAIN	19,086
106390846	DAMERON HOSPITAL	14,561
106150706	DELANO REGIONAL MEDICAL CENTER	9,652
106331164	DESERT REGIONAL MEDICAL CENTER	26,210
106364144	DESERT VALLEY HOSPITAL	12,298
106392287	DOCTORS HOSPITAL OF MANTECA	10,790
106500852	DOCTORS MEDICAL CENTER	32,156
106070904	DOCTORS MEDICAL CENTER - SAN PABLO	17,714
106440755	DOMINICAN HOSPITAL-SANTA CRUZ/SOQUEL	17,486
106190243	DOWNEY REGIONAL MEDICAL CENTER	21,478
106320859	EASTERN PLUMAS HOSPITAL-PORTOLA CAMPUS	1,578
106190256	EAST LOS ANGELES DOCTORS HOSPITAL	8,208
106190328	EAST VALLEY HOSPITAL MEDICAL CENTER	1,572
106010805	EDEN MEDICAL CENTER	13,511
106331168	EISENHOWER MEDICAL CENTER	21,440
106430763	EL CAMINO HOSPITAL	16,823
106430743	EL CAMINO HOSPITAL LOS GATOS	2,532
106130699	EL CENTRO REGIONAL MEDICAL CENTER	20,803
106500867	EMANUEL MEDICAL CENTER, INC	27,530
106190280	ENCINO HOSPITAL MEDICAL CENTER	4,106
106040962	ENLOE MEDICAL CENTER- ESPLANADE CAMPUS	14,318
106474007	FAIRCHILD MEDICAL CENTER	5,444
106370705	FALLBROOK HOSPITAL DISTRICT	4,550
106040875	FEATHER RIVER HOSPITAL	7,679
106190298	FOOTHILL PRESBYTERIAN HOSPITAL-JOHNSTON MEMORIAL	10,121
106301175	FOUNTAIN VALLEY RGNL HOSP AND MED CTR - EUCLID	13,992
106230949	FRANK R HOWARD MEMORIAL HOSPITAL	4,551
106400480	FRENCH HOSPITAL MEDICAL CENTER	7,263
106301283	GARDEN GROVE HOSPITAL AND MEDICAL CENTER	11,360
106190315	GARFIELD MEDICAL CENTER	7,876
106270777	GEORGE L MEE MEMORIAL HOSPITAL	5,032
106190323	GLENDALE ADVENTIST MEDICAL CENTER - WILSON TERRACE	14,095
106190522	GLENDALE MEMORIAL HOSPITAL AND HEALTH CENTER	11,322
106110889	GLENN MEDICAL CENTER	2,573

Appendix C
Emergency Department Encounters by Facility
January - June 2009

Facility Number	Facility Name	Encounters
106420483	GOLETA VALLEY COTTAGE HOSPITAL	7,285
106190392	GOOD SAMARITAN HOSPITAL-LOS ANGELES	12,483
106430779	GOOD SAMARITAN HOSPITAL-SAN JOSE	19,682
106190352	GREATER EL MONTE COMMUNITY HOSPITAL	7,522
106370714	GROSSMONT HOSPITAL	33,707
106160725	HANFORD COMMUNITY MEDICAL CENTER	30,894
106350784	HAZEL HAWKINS MEMORIAL HOSPITAL	7,374
106490964	HEALDSBURG DISTRICT HOSPITAL	4,299
106331194	HEMET VALLEY MEDICAL CENTER	15,737
106190949	HENRY MAYO NEWHALL MEMORIAL HOSPITAL	18,942
106362041	HI-DESERT MEDICAL CENTER	8,654
106304045	HOAG HOSPITAL IRVINE	280
106301205	HOAG MEMORIAL HOSPITAL PRESBYTERIAN	28,634
106190382	HOLLYWOOD PRESBYTERIAN MEDICAL CENTER	13,612
106301209	HUNTINGTON BEACH HOSPITAL	7,520
106190400	HUNTINGTON MEMORIAL HOSPITAL	22,198
106121031	JEROLD PHELPS COMMUNITY HOSPITAL	1,291
106220733	JOHN C FREMONT HEALTHCARE DISTRICT	2,285
106331216	JOHN F KENNEDY MEMORIAL HOSPITAL	19,005
106071018	JOHN MUIR MEDICAL CENTER-CONCORD CAMPUS	20,654
106070988	JOHN MUIR MEDICAL CENTER-WALNUT CREEK CAMPUS	18,895
106301132	KAISER FND HOSP - ANAHEIM	32,058
106196035	KAISER FND HOSP - BALDWIN PARK	31,408
106190430	KAISER FND HOSP - BELLFLOWER	40,255
106361223	KAISER FND HOSP - FONTANA	37,839
106104062	KAISER FND HOSP - FRESNO	10,080
106190431	KAISER FND HOSP - HARBOR CITY	24,037
106010858	KAISER FND HOSP - HAYWARD	30,018
106334048	KAISER FND HOSPITAL - MORENO VALLEY	12,262
106394009	KAISER FND HOSP-MANTECA	22,010
106010856	KAISER FND HOSP - OAKLAND CAMPUS	31,842
106190432	KAISER FND HOSP - PANORAMA CITY	20,855
106410804	KAISER FND HOSP - REDWOOD CITY	10,213
106480989	KAISER FND HOSP - REHABILITATION CENTER VALLEJO	17,864
106334025	KAISER FND HOSP - RIVERSIDE	16,487
106340913	KAISER FND HOSP - SACRAMENTO/ROSEVILLE-MORSE	55,863
106370730	KAISER FND HOSP - SAN DIEGO	39,771
106380857	KAISER FND HOSP - SAN FRANCISCO	11,256
106431506	KAISER FND HOSP - SAN JOSE	14,679
106210992	KAISER FND HOSP - SAN RAFAEL	10,627
106434153	KAISER FND HOSP - SANTA CLARA	22,735
106494019	KAISER FND HOSP - SANTA ROSA	14,114
106342344	KAISER FND HOSP - SOUTH SACRAMENTO	33,529

Appendix C
Emergency Department Encounters by Facility
January - June 2009

Facility Number	Facility Name	Encounters
106410806	KAISER FND HOSP - SOUTH SAN FRANCISCO	14,039
106190429	KAISER FND HOSP - SUNSET	29,150
106070990	KAISER FND HOSP - WALNUT CREEK	15,250
106190434	KAISER FND HOSP - WEST LA	28,198
106191450	KAISER FND HOSP - WOODLAND HILLS	16,122
106074097	KAISER FOUND HSP-ANTIOCH	9,722
106540734	KAWEAH DELTA MEDICAL CENTER	31,083
106150736	KERN MEDICAL CENTER	20,784
106150737	KERN VALLEY HEALTHCARE DISTRICT	3,365
106191227	LAC/HARBOR-UCLA MEDICAL CENTER	30,167
106191228	LAC+USC MEDICAL CENTER	46,744
106190240	LAKEWOOD REGIONAL MEDICAL CENTER	15,009
106190455	LANCASTER COMMUNITY HOSPITAL	9,611
106301234	LA PALMA INTERCOMMUNITY HOSPITAL	5,785
106390923	LODI MEMORIAL HOSPITAL	9,697
106361246	LOMA LINDA UNIVERSITY MEDICAL CENTER	22,368
106420491	LOMPOC VALLEY MEDICAL CENTER	8,113
106190525	LONG BEACH MEMORIAL MEDICAL CENTER	30,237
106301248	LOS ALAMITOS MEDICAL CENTER	11,984
106190198	LOS ANGELES COMMUNITY HOSPITAL	4,109
106191231	LOS ANGELES COUNTY OLIVE VIEW-UCLA MEDICAL CENTER	21,278
106190854	LOS ANGELES METROPOLITAN MEDICAL CENTER	3,207
106560492	LOS ROBLES HOSPITAL & MEDICAL CENTER	12,895
106201281	MADERA COMMUNITY HOSPITAL	20,564
106121002	MAD RIVER COMMUNITY HOSPITAL	7,402
106260011	MAMMOTH HOSPITAL	4,340
106420493	MARIAN MEDICAL CENTER	24,045
106190500	MARINA DEL REY HOSPITAL	9,544
106211006	MARIN GENERAL HOSPITAL	14,748
106050932	MARK TWAIN ST. JOSEPH'S HOSPITAL	4,568
106090933	MARSHALL MEDICAL CENTER (1-RH)	9,341
106450936	MAYERS MEMORIAL HOSPITAL	1,889
106240924	MEMORIAL HOSPITAL LOS BANOS	11,445
106500939	MEMORIAL HOSPITAL MEDICAL CENTER - MODESTO	31,067
106190521	MEMORIAL HOSPITAL OF GARDENA	12,703
106231013	MENDOCINO COAST DISTRICT HOSPITAL	4,298
106334018	MENIFEE VALLEY MEDICAL CENTER	7,727
106340947	MERCY GENERAL HOSPITAL	14,235
106150761	MERCY HOSPITAL - BAKERSFIELD	23,349
106344029	MERCY HOSPITAL - FOLSOM	11,327
106450949	MERCY MEDICAL CENTER	23,955
106240942	MERCY MEDICAL CENTER MERCED-COMMUNITY CAMPUS	23,946
106470871	MERCY MEDICAL CENTER MT. SHASTA	3,414

Appendix C Emergency Department Encounters by Facility January - June 2009

Facility Number	Facility Name	Encounters
106340950	MERCY SAN JUAN HOSPITAL	26,351
106340951	METHODIST HOSPITAL OF SACRAMENTO	21,675
106190529	METHODIST HOSPITAL OF SOUTHERN CALIFORNIA	15,855
106190524	MISSION COMMUNITY HOSPITAL - PANORAMA CAMPUS	6,433
106301337	MISSION HOSPITAL LAGUNA BEACH	4,581
106301262	MISSION HOSPITAL REGIONAL MEDICAL CENTER	14,358
106250956	MODOC MEDICAL CENTER	1,603
106361166	MONTCLAIR HOSPITAL MEDICAL CENTER	7,911
106190547	MONTEREY PARK HOSPITAL	4,945
106361266	MOUNTAINS COMMUNITY HOSPITAL	3,062
106274043	NATIVIDAD MEDICAL CENTER	19,402
106481357	NORTH BAY MEDICAL CENTER	16,517
106484001	NORTH BAY VACAVALLEY HOSPITAL	10,884
106141273	NORTHERN INYO HOSPITAL	3,593
106190568	NORTHRIDGE HOSPITAL MEDICAL CENTER	16,829
106190570	NORWALK COMMUNITY HOSPITAL	3,368
106214034	NOVATO COMMUNITY HOSPITAL	7,487
106500967	OAK VALLEY DISTRICT HOSPITAL (2-RH)	8,729
106430837	O'CONNOR HOSPITAL - SAN JOSE	22,597
106560501	OJAI VALLEY COMMUNITY HOSPITAL	3,155
106190534	OLYMPIA MEDICAL CENTER	7,726
106300225	ORANGE COAST MEMORIAL MEDICAL CENTER	8,627
106040937	OROVILLE HOSPITAL	11,318
106190696	PACIFICA HOSPITAL OF THE VALLEY	7,060
106190587	PACIFIC HOSPITAL OF LONG BEACH	4,808
106491338	PALM DRIVE HOSPITAL	3,607
106370755	PALOMAR MEDICAL CENTER	23,787
106331288	PALO VERDE HOSPITAL	4,724
106370759	PARADISE VALLEY HOSPITAL	13,523
106331293	PARKVIEW COMMUNITY HOSPITAL MEDICAL CENTER	17,566
106410852	PENINSULA MEDICAL CENTER	17,323
106491001	PETALUMA VALLEY HOSPITAL	7,412
106130760	PIONEERS MEMORIAL HOSPITAL	19,713
106301297	PLACENTIA LINDA HOSPITAL	9,529
106320986	PLUMAS DISTRICT HOSPITAL	2,222
106370977	POMERADO HOSPITAL	11,643
106190630	POMONA VALLEY HOSPITAL MEDICAL CENTER	33,321
106190631	PRESBYTERIAN INTERCOMMUNITY HOSPITAL	27,863
106190385	PROVIDENCE HOLY CROSS MEDICAL CENTER	29,760
106190680	PROVIDENCE LITTLE COMPANY OF MARY MC - SAN PEDRO	14,057
106190470	PROVIDENCE LITTLE COMPANY OF MARY MC - TORRANCE	23,797
106190758	PROVIDENCE SAINT JOSEPH MEDICAL CENTER	22,756
106190517	PROVIDENCE TARZANA MEDICAL CENTER	11,776

Appendix C
Emergency Department Encounters by Facility
January - June 2009

Facility Number	Facility Name	Encounters
106281047	QUEEN OF THE VALLEY HOSPITAL - NAPA	12,911
106370673	RADY CHILDREN'S HOSPITAL - SAN DIEGO	32,723
106361308	REDLANDS COMMUNITY HOSPITAL	15,533
106121051	REDWOOD MEMORIAL HOSPITAL	5,914
106430705	REGIONAL MEDICAL OF SAN JOSE	26,677
106580996	RIDEOUT MEMORIAL HOSPITAL	25,129
106150782	RIDGECREST REGIONAL HOSPITAL	9,472
106331312	RIVERSIDE COMMUNITY HOSPITAL	34,814
106334487	RIVERSIDE COUNTY REGIONAL MEDICAL CENTER	39,241
106190796	RONALD REAGAN UCLA MEDICAL CENTER	15,465
106301317	SADDLEBACK MEMORIAL MEDICAL CENTER	19,650
106270875	SALINAS VALLEY MEMORIAL HOSPITAL	18,845
106361318	SAN ANTONIO COMMUNITY HOSPITAL	28,860
106190673	SAN DIMAS COMMUNITY HOSPITAL	5,248
106380939	SAN FRANCISCO GENERAL HOSPITAL	19,998
106190200	SAN GABRIEL VALLEY MEDICAL CENTER	10,003
106331326	SAN GORGONIO MEMORIAL HOSPITAL	11,616
106150788	SAN JOAQUIN COMMUNITY HOSPITAL	19,144
106391010	SAN JOAQUIN GENERAL HOSPITAL	21,243
106013619	SAN LEANDRO HOSPITAL	11,880
106410782	SAN MATEO MEDICAL CENTER	16,140
106074017	SAN RAMON REGIONAL MEDICAL CENTER	7,280
106420514	SANTA BARBARA COTTAGE HOSPITAL	13,594
106430883	SANTA CLARA VALLEY MEDICAL CENTER	30,436
106190687	SANTA MONICA - UCLA MEDICAL CENTER & ORTHOPAEDIC HOSPITAL	14,136
106491064	SANTA ROSA MEMORIAL HOSPITAL-MONTGOMERY	14,302
106420522	SANTA YNEZ VALLEY COTTAGE HOSPITAL	2,611
106371394	SCRIPPS MEMORIAL HOSPITAL - ENCINITAS	14,988
106370771	SCRIPPS MEMORIAL HOSPITAL - LA JOLLA	11,601
106370744	SCRIPPS MERCY HOSPITAL	33,685
106321016	SENECA HEALTHCARE DISTRICT	1,410
106410891	SEQUOIA HOSPITAL	9,435
106410817	SETON MEDICAL CENTER	11,025
106410828	SETON MEDICAL CENTER - COASTSIDE	1,864
106370875	SHARP CHULA VISTA MEDICAL CENTER	21,299
106370689	SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER	5,904
106370694	SHARP MEMORIAL HOSPITAL	19,836
106450940	SHASTA REGIONAL MEDICAL CENTER	11,065
106190708	SHERMAN OAKS HOSPITAL	7,524
106100797	SIERRA KINGS DISTRICT HOSPITAL	7,844
106291023	SIERRA NEVADA MEMORIAL HOSPITAL	12,044
106540798	SIERRA VIEW DISTRICT HOSPITAL	18,876
106400524	SIERRA VISTA REGIONAL MEDICAL CENTER	9,103

Appendix C Emergency Department Encounters by Facility January - June 2009

Facility Number	Facility Name	Encounters
106560525	SIMI VALLEY HOSPITAL AND HEALTH CARE SVCS-SYCAMORE	11,123
106491076	SONOMA VALLEY HOSPITAL	3,815
106554011	SONORA REGIONAL MEDICAL CENTER - GREENLEY	11,463
106141338	SOUTHERN INYO HOSPITAL	750
106334068	SOUTHWEST HEALTHCARE SYSTEM-MURRIETA	31,606
106100899	ST. AGNES MEDICAL CENTER	29,754
106430905	STANFORD HOSPITAL	18,889
106361339	ST. BERNARDINE MEDICAL CENTER	22,843
106521041	ST. ELIZABETH COMMUNITY HOSPITAL	15,024
106190754	ST. FRANCIS MEDICAL CENTER	28,782
106380960	ST. FRANCIS MEMORIAL HOSPITAL	12,711
106281078	ST. HELENA HOSPITAL	2,288
106171049	ST. HELENA HOSPITAL - CLEARLAKE	7,116
106190756	ST. JOHN'S HEALTH CENTER	11,172
106560508	ST. JOHN'S PLEASANT VALLEY HOSPITAL	7,203
106560529	ST. JOHN'S REGIONAL MEDICAL CENTER	19,789
106121080	ST. JOSEPH HOSPITAL - EUREKA	10,118
106301340	ST. JOSEPH HOSPITAL - ORANGE	22,517
106391042	ST. JOSEPH'S MEDICAL CENTER OF STOCKTON	20,366
106301342	ST. JUDE MEDICAL CENTER	22,391
106434138	ST. LOUISE REGIONAL HOSPITAL	13,349
106190053	ST. MARY MEDICAL CENTER	18,607
106361343	ST. MARY REGIONAL MEDICAL CENTER	28,918
106380965	ST. MARY'S MEDICAL CENTER, SAN FRANCISCO	7,728
106010967	ST. ROSE HOSPITAL	16,724
106190762	ST. VINCENT MEDICAL CENTER	4,051
106250955	SURPRISE VALLEY COMMUNITY HOSPITAL	182
106034002	SUTTER AMADOR HOSPITAL	7,815
106310791	SUTTER AUBURN FAITH HOSPITAL	10,390
106084001	SUTTER COAST HOSPITAL	9,667
106574010	SUTTER DAVIS HOSPITAL	9,905
106070934	SUTTER DELTA MEDICAL CENTER	23,349
106341051	SUTTER GENERAL HOSPITAL	21,024
106171395	SUTTER LAKESIDE HOSPITAL	8,614
106490919	SUTTER MEDICAL CENTER OF SANTA ROSA	11,578
106341052	SUTTER MEMORIAL HOSPITAL	13,613
106311000	SUTTER ROSEVILLE MEDICAL CENTER	27,970
106481094	SUTTER SOLANO MEDICAL CENTER	15,368
106391056	SUTTER TRACY COMMUNITY HOSPITAL	16,053
106291053	TAHOE FOREST HOSPITAL	5,202
106150808	TEHACHAPI HOSPITAL	5,079
106190422	TORRANCE MEMORIAL MEDICAL CENTER	24,785
106370780	TRI-CITY MEDICAL CENTER	28,293

Appendix C
Emergency Department Encounters by Facility
January - June 2009

Facility Number	Facility Name	Encounters
106190159	TRI-CITY REGIONAL MEDICAL CENTER	3,337
106531059	TRINITY HOSPITAL	1,959
106540816	TULARE DISTRICT HOSPITAL	15,047
106400548	TWIN CITIES COMMUNITY HOSPITAL	14,155
106381154	UCSF MEDICAL CENTER	13,971
106231396	UKIAH VALLEY MEDICAL CENTER/HOSPITAL DRIVE	11,820
106341006	UNIVERSITY OF CALIFORNIA DAVIS MEDICAL CENTER	21,298
106301279	UNIVERSITY OF CALIFORNIA IRVINE MEDICAL CENTER	13,791
106370782	UNIVERSITY OF CALIF-SAN DIEGO MEDICAL CENTER	26,004
106014050	VALLEYCARE MEDICAL CENTER	12,416
106190812	VALLEY PRESBYTERIAN HOSPITAL	24,142
106560481	VENTURA COUNTY MEDICAL CENTER	21,479
106190818	VERDUGO HILLS HOSPITAL	7,681
106361370	VICTOR VALLEY COMMUNITY HOSPITAL	15,032
106010987	WASHINGTON HOSPITAL - FREMONT	21,035
106444013	WATSONVILLE COMMUNITY HOSPITAL	14,815
106301379	WEST ANAHEIM MEDICAL CENTER	11,965
106301188	WESTERN MEDICAL CENTER HOSPITAL - ANAHEIM	7,375
106301566	WESTERN MEDICAL CENTER - SANTA ANA	9,474
106190859	WEST HILLS HOSPITAL AND MEDICAL CENTER	14,326
106190878	WHITE MEMORIAL MEDICAL CENTER	18,837
106190883	WHITTIER HOSPITAL MEDICAL CENTER	9,832
106571086	WOODLAND MEMORIAL HOSPITAL	9,343

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
306244032	ADVANCED ENDOSCOPY CENTER	Clinic	823
306274063	ADVANCED MEDICAL SURGERY CENTER	Clinic	633
306304093	AESTHETICARE OUTPATIENT SURGERY CENTER	Clinic	123
106301098	AHMC ANAHEIM REGIONAL MEDICAL CENTER	Hospital	2,154
106010846	ALAMEDA CO MED CTR - HIGHLAND CAMPUS	Hospital	1,849
106010735	ALAMEDA HOSPITAL	Hospital	2,245
106190017	ALHAMBRA HOSPITAL	Hospital	785
306196247	ALLCARE AMBULATORY SURGERY CENTER	Clinic	597
306154035	ALLIANCE SURGERY CENTER	Clinic	1,003
106010739	ALTA BATES SUMMIT MED CTR-ALTA BATES CAMPUS	Hospital	3,513
106010937	ALTA BATES SUMMIT MED CTR-SUMMIT CAMPUS-HAWTHORNE	Hospital	2,390
106370652	ALVARADO HOSPITAL	Hospital	3,919
306034003	AMADOR SURGERY CENTER	Clinic	935
306374139	AMBULATORY CARE SURGERY CENTER	Clinic	78
306394061	AMBULATORY SURGERY CENTER OF STOCKTON	Clinic	1,702
306194175	AMBULATORY SURGICAL CENTER OF SOUTHERN CALIFORNIA	Clinic	1,779
106301097	ANAHEIM GENERAL HOSPITAL	Hospital	319
106190034	ANTELOPE VALLEY HOSPITAL	Hospital	3,305
306194300	ANTELOPE VALLEY SURGERY CENTER	Clinic	1,366
306454039	APOGEE OUT PATIENT SURGERY CENTER	Clinic	1,709
306334106	ARLINGTON PODIATRY SURGERY CENTER	Clinic	293
106364231	ARROWHEAD REGIONAL MEDICAL CENTER	Hospital	2,841
106400466	ARROYO GRANDE COMMUNITY HOSPITAL	Hospital	399
306564012	ASPEN OUTPATIENT CENTER	Clinic	692
106154101	BAKERSFIELD HEART HOSPITAL	Hospital	888
106150722	BAKERSFIELD MEMORIAL HOSPITAL- 34TH STREET	Hospital	3,728
106184008	BANNER LASSEN MEDICAL CENTER	Hospital	490
106361105	BARSTOW COMMUNITY HOSPITAL	Hospital	603
106090793	BARTON MEMORIAL HOSPITAL	Hospital	1,617
306434170	BAY AREA SURGICAL GROUP	Clinic	866
306014174	BAY SURGERY CENTER	Clinic	870
306196821	BEACH DISTRICT SURGERY CENTER, L.P.	Clinic	1,409
106361110	BEAR VALLEY COMMUNITY HOSPITAL	Hospital	95
106190066	BELLFLOWER MEDICAL CENTER	Hospital	1,095
306364263	BENEFIT SURGERY CENTER	Clinic	685
306196049	BEVERLY HILLS CTR FOR ARTHROSCOPIC AND OUTPT SURGERY	Clinic	395
106190081	BEVERLY HOSPITAL	Hospital	1,910
106040802	BIGGS GRIDLEY MEMORIAL HOSPITAL	Hospital	186
306074127	BRENTWOOD SURGERY CENTER - BRENTWOOD	Clinic	935
106190110	BROTMAN MEDICAL CENTER	Hospital	997
306074056	CALIFORNIA EYE CLINIC	Clinic	246
106190125	CALIFORNIA HOSPITAL MEDICAL CENTER - LOS ANGELES	Hospital	1,470
106380929	CALIFORNIA PACIFIC MED CTR-PACIFIC CAMPUS	Hospital	10,622

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
106380964	CALIFORNIA PACIFIC MEDICAL CENTER - ST. LUKE'S CAMPUS	Hospital	1,403
306194602	CAMDEN SURGERY CENTER OF BEVERLY HILLS	Clinic	92
306244030	CASTLE SURGICENTER, PARTNERSHIP	Clinic	2,299
306154098	CBCC PAIN MEDICINE AND SURGERY CENTER, INC.	Clinic	1,313
106190555	CEDARS SINAI MEDICAL CENTER	Hospital	11,911
306374087	CENTER FOR ENDOSCOPY	Clinic	2,413
106190148	CENTINELA HOSPITAL MEDICAL CENTER	Hospital	712
306444019	CENTRAL COAST SURGERY CENTER	Clinic	1,206
106160787	CENTRAL VALLEY GENERAL HOSPITAL	Hospital	413
306374074	CENTRE FOR SURGERY OF ENCINITAS	Clinic	1,592
306564037	CHANNEL ISLANDS SURGICENTER	Clinic	3,770
106301140	CHAPMAN MEDICAL CENTER	Hospital	801
306044153	CHICO SURGERY CENTER, LP	Clinic	730
306394088	CHILDREN'S DENTAL SURGERY CENTER	Clinic	111
106010776	CHILDRENS HOSPITAL AND RESEARCH CTR AT OAKLAND	Hospital	2,932
106304113	CHILDREN'S HOSPITAL AT MISSION	Hospital	202
106204019	CHILDREN'S HOSPITAL CENTRAL CALIFORNIA	Hospital	3,177
106190170	CHILDREN'S HOSPITAL OF LOS ANGELES	Hospital	5,099
106300032	CHILDREN'S HOSPITAL OF ORANGE COUNTY	Hospital	3,945
106382715	CHINESE HOSPITAL	Hospital	2,464
106361144	CHINO VALLEY MEDICAL CENTER	Hospital	543
106190413	CITRUS VALLEY MEDICAL CENTER - IC CAMPUS	Hospital	1,721
106190636	CITRUS VALLEY MEDICAL CENTER - QV CAMPUS	Hospital	2,419
106190176	CITY OF HOPE HELFORD CLINICAL RESEARCH HOSPITAL	Hospital	1,485
106100005	CLOVIS COMMUNITY MEDICAL CENTER	Hospital	6,174
106301258	COASTAL COMMUNITIES HOSPITAL	Hospital	1,440
106190766	COAST PLAZA DOCTORS HOSPITAL	Hospital	410
306374243	COAST SURGERY CENTER	Clinic	1,835
306196106	COAST SURGERY CENTER OF SOUTH BAY	Clinic	2,098
106361458	COLORADO RIVER MEDICAL CENTER	Hospital	97
106060870	COLUSA REGIONAL MEDICAL CENTER	Hospital	218
106190197	COMMUNITY AND MISSION HSP OF HNTG PK - SLAUSON	Hospital	456
106270744	COMMUNITY HOSPITAL MONTEREY PENINSULA	Hospital	2,485
106190475	COMMUNITY HOSPITAL OF LONG BEACH	Hospital	323
106361323	COMMUNITY HOSPITAL OF SAN BERNARDINO	Hospital	1,001
106560473	COMMUNITY MEMORIAL HOSPITAL-SAN BUENAVENTURA	Hospital	4,690
306105036	COMMUNITY OUTPATIENT SURGERY CENTER	Clinic	532
106100717	COMMUNITY REGIONAL MEDICAL CENTER-FRESNO	Hospital	5,439
106070924	CONTRA COSTA REGIONAL MEDICAL CENTER	Hospital	1,834
106160702	CORCORAN DISTRICT HOSPITAL	Hospital	377
106331152	CORONA REGIONAL MEDICAL CENTER-MAIN	Hospital	1,269
306454040	COURT STREET SURGERY CENTER	Clinic	2,396
306304225	CROWN VALLEY SURGICENTER	Clinic	1,260

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
306424050	CYPRESS AMBULATORY SURGERY CENTER	Clinic	1,138
306544027	CYPRESS SURGERY CENTER	Clinic	1,289
106390846	DAMERON HOSPITAL	Hospital	1,443
306574016	DAVIS SURGERY CENTER	Clinic	934
106150706	DELANO REGIONAL MEDICAL CENTER	Hospital	1,137
306374276	DEL MAR SURGERY CENTER	Clinic	668
306194815	DEL REY SURGERY CENTER	Clinic	23
106331164	DESERT REGIONAL MEDICAL CENTER	Hospital	5,404
106364144	DESERT VALLEY HOSPITAL	Hospital	769
306014180	DIALYSIS ACCESS CENTER, INC.	Clinic	825
306196568	DIAMOND BAR SURGERY CENTER	Clinic	564
106392287	DOCTORS HOSPITAL OF MANTECA	Hospital	2,327
106190857	DOCTORS HOSPITAL OF WEST COVINA, INC	Hospital	312
106500852	DOCTORS MEDICAL CENTER	Hospital	4,223
106070904	DOCTORS MEDICAL CENTER - SAN PABLO	Hospital	1,173
106440755	DOMINICAN HOSPITAL-SANTA CRUZ/SOQUEL	Hospital	1,716
106190243	DOWNEY REGIONAL MEDICAL CENTER	Hospital	3,487
106196168	EARL AND LORRAINE MILLER CHILDRENS HOSPITAL	Hospital	2,017
306014015	EAST BAY MEDICAL SURGICAL CENTER, L.P.	Clinic	503
106320859	EASTERN PLUMAS HOSPITAL-PORTOLA CAMPUS	Hospital	307
106190256	EAST LOS ANGELES DOCTORS HOSPITAL	Hospital	538
106190328	EAST VALLEY HOSPITAL MEDICAL CENTER	Hospital	187
106010805	EDEN MEDICAL CENTER	Hospital	1,140
106331168	EISENHOWER MEDICAL CENTER	Hospital	3,316
106430763	EL CAMINO HOSPITAL	Hospital	2,530
106430743	EL CAMINO HOSPITAL LOS GATOS	Hospital	879
306434045	EL CAMINO SURGERY CENTER	Clinic	2,638
106130699	EL CENTRO REGIONAL MEDICAL CENTER	Hospital	1,819
306094021	EL DORADO SURGERY CENTER	Clinic	1,828
306334440	EL MIRADOR SURGICAL CENTER	Clinic	2,553
106500867	EMANUEL MEDICAL CENTER, INC	Hospital	1,629
106190280	ENCINO HOSPITAL MEDICAL CENTER	Hospital	105
306374181	ENDOSCOPY CENTER OF CHULA VISTA	Clinic	1,877
306194285	ENDOSCOPY CENTER OF SOUTHERN CALIFORNIA	Clinic	2,002
106040962	ENLOE MEDICAL CENTER- ESPLANADE CAMPUS	Hospital	4,106
306074030	EYE CENTER OF NORTHERN CALIFORNIA SURGICENTER	Clinic	11
306014159	EYE MD LASER AND SURGERY CENTER	Clinic	1,023
306344023	EYE SURGERY CENTER OF NORTHERN CALIFORNIA, THE	Clinic	491
306384199	EYE SURGERY CENTER OF SAN FRANCISCO, L.P.	Clinic	1,462
306374159	EYE SURGERY CENTER OF SOUTHERN CALIFORNIA, INC	Clinic	352
106474007	FAIRCHILD MEDICAL CENTER	Hospital	893
106370705	FALLBROOK HOSPITAL DISTRICT	Hospital	964
106040875	FEATHER RIVER HOSPITAL	Hospital	2,472

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
306344130	FOLSOM SIERRA ENDOSCOPY CENTER L.P.	Clinic	819
306344129	FOLSOM SURGERY CENTER	Clinic	1,842
306364104	FOOTHILL AMBULATORY SURGERY CENTER	Clinic	187
106190298	FOOTHILL PRESBYTERIAN HOSPITAL-JOHNSTON MEMORIAL	Hospital	1,733
306196552	FOOTHILL SURGERY CENTER	Clinic	1,174
306344015	FORT SUTTER SURGERY CENTER	Clinic	5,535
106301175	FOUNTAIN VALLEY RGNL HOSP AND MED CTR - EUCLID	Hospital	5,603
306196195	FOUR SEASONS SURGERY CENTER OF ENCINO	Clinic	48
306304287	FOUR SEASONS SURGERY CENTERS OF ANAHEIM	Clinic	115
306301540	FOUR SEASONS SURGERY CENTERS OF HUNTINGTON BEACH	Clinic	72
306364282	FOUR SEASONS SURGERY CENTERS OF ONTARIO	Clinic	3,228
106230949	FRANK R HOWARD MEMORIAL HOSPITAL	Hospital	324
306014125	FREMONT AMBULATORY SURGERY CENTER	Clinic	3,576
106510882	FREMONT MEDICAL CENTER	Hospital	3,360
306014165	FREMONT SURGERY CENTER-NORTH	Clinic	1,437
106400480	FRENCH HOSPITAL MEDICAL CENTER	Hospital	2,549
306105047	FRESNO DENTAL SURGERY CENTER	Clinic	2,197
306105006	FRESNO ENDOSCOPY CENTER	Clinic	857
106105029	FRESNO HEART AND SURGICAL HOSPITAL	Hospital	1,480
106104047	FRESNO SURGICAL HOSPITAL	Hospital	2,960
306404039	GALILEO SURGERY CENTER	Clinic	1,468
106301283	GARDEN GROVE HOSPITAL AND MEDICAL CENTER	Hospital	1,080
106190315	GARFIELD MEDICAL CENTER	Hospital	2,519
306304141	GASTRODIAGNOSTIC, A MEDICAL GROUP	Clinic	1,861
106270777	GEORGE L MEE MEMORIAL HOSPITAL	Hospital	239
106190323	GLENDALE ADVENTIST MEDICAL CENTER - WILSON TERRACE	Hospital	2,806
106190522	GLENDALE MEMORIAL HOSPITAL AND HEALTH CENTER	Hospital	2,504
106110889	GLENN MEDICAL CENTER	Hospital	196
306334092	GLENWOOD SURGICAL CENTER, L P	Clinic	3,270
306384195	GOLDEN GATE ENDOSCOPY CENTER, L.P.	Clinic	2,169
306334062	GOLDEN TRIANGLE SURGI-CENTER	Clinic	1,428
106420483	GOLETA VALLEY COTTAGE HOSPITAL	Hospital	722
106150775	GOOD SAMARITAN HOSPITAL-BAKERSFIELD	Hospital	32
106190392	GOOD SAMARITAN HOSPITAL-LOS ANGELES	Hospital	3,863
106430779	GOOD SAMARITAN HOSPITAL-SAN JOSE	Hospital	3,937
106190352	GREATER EL MONTE COMMUNITY HOSPITAL	Hospital	277
306194595	GREATER LONG BEACH ENDOSCOPY CENTER	Clinic	3,501
106370714	GROSSMONT HOSPITAL	Hospital	5,512
306371705	GROSSMONT SURGERY CENTER	Clinic	3,044
106160725	HANFORD COMMUNITY MEDICAL CENTER	Hospital	4,796
306234027	HARRY B. MATOSSIAN, M.D. ENDOSCOPY CENTER	Clinic	751
306196051	HARVARD SURGERY CENTER	Clinic	54
106350784	HAZEL HAWKINS MEMORIAL HOSPITAL	Hospital	850

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
106490964	HEALDSBURG DISTRICT HOSPITAL	Hospital	596
306374108	HEALTHSOUTH NORTH COAST SURGERY CENTER	Clinic	874
306374147	HEALTHSOUTH RANCHO BERNARDO SURGERY CENTER	Clinic	1,826
306404006	HEALTHSOUTH SURGERY CENTER	Clinic	876
306334562	HEMET ENDOSCOPY CENTER	Clinic	668
106331194	HEMET VALLEY MEDICAL CENTER	Hospital	700
106190949	HENRY MAYO NEWHALL MEMORIAL HOSPITAL	Hospital	2,330
106362041	HI-DESERT MEDICAL CENTER	Hospital	581
306364139	HI DESERT SURGERY CENTER	Clinic	130
306364095	HIGH DESERT ENDOSCOPY	Clinic	773
306196511	HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CTR.	Clinic	865
106304045	HOAG HOSPITAL IRVINE	Hospital	46
106301205	HOAG MEMORIAL HOSPITAL PRESBYTERIAN	Hospital	11,474
106190380	HOLLYWOOD COMMUNITY HOSPITAL OF HOLLYWOOD	Hospital	29
106190382	HOLLYWOOD PRESBYTERIAN MEDICAL CENTER	Hospital	3,058
106301209	HUNTINGTON BEACH HOSPITAL	Hospital	115
106190400	HUNTINGTON MEMORIAL HOSPITAL	Hospital	3,558
306194069	HUNTINGTON OUTPATIENT SURGERY CENTER	Clinic	2,063
306334578	INDIO SURGERY CENTER INC.	Clinic	784
306334076	INLAND SURGERY CENTER	Clinic	249
306334539	INLAND SURGERY CENTER MURRIETA	Clinic	277
306304197	IRVINE MULTI-SPECIALITY SURGICAL CARE	Clinic	937
306194997	JIN H. SUH, M.D., MEDICAL OFFICE	Clinic	554
106220733	JOHN C FREMONT HEALTHCARE DISTRICT	Hospital	61
106331216	JOHN F KENNEDY MEMORIAL HOSPITAL	Hospital	3,294
106071018	JOHN MUIR MEDICAL CENTER-CONCORD CAMPUS	Hospital	2,452
106070988	JOHN MUIR MEDICAL CENTER-WALNUT CREEK CAMPUS	Hospital	1,441
106301132	KAISER FND HOSP - ANAHEIM	Hospital	6,060
106196035	KAISER FND HOSP - BALDWIN PARK	Hospital	7,518
106190430	KAISER FND HOSP - BELLFLOWER	Hospital	4,401
106361223	KAISER FND HOSP - FONTANA	Hospital	10,951
106104062	KAISER FND HOSP - FRESNO	Hospital	4,852
106190431	KAISER FND HOSP - HARBOR CITY	Hospital	3,926
106010858	KAISER FND HOSP - HAYWARD	Hospital	4,799
106334048	KAISER FND HOSPITAL - MORENO VALLEY	Hospital	953
106394009	KAISER FND HOSP-MANTECA	Hospital	3,032
106010856	KAISER FND HOSP - OAKLAND CAMPUS	Hospital	3,416
106190432	KAISER FND HOSP - PANORAMA CITY	Hospital	3,530
106410804	KAISER FND HOSP - REDWOOD CITY	Hospital	2,386
106480989	KAISER FND HOSP - REHABILITATION CENTER VALLEJO	Hospital	4,218
106334025	KAISER FND HOSP - RIVERSIDE	Hospital	2,839
106340913	KAISER FND HOSP - SACRAMENTO/ROSEVILLE-MORSE	Hospital	11,146
106370730	KAISER FND HOSP - SAN DIEGO	Hospital	8,260

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
106380857	KAISER FND HOSP - SAN FRANCISCO	Hospital	5,970
106431506	KAISER FND HOSP - SAN JOSE	Hospital	4,094
106210992	KAISER FND HOSP - SAN RAFAEL	Hospital	1,716
106434153	KAISER FND HOSP - SANTA CLARA	Hospital	7,097
106494019	KAISER FND HOSP - SANTA ROSA	Hospital	4,217
106342344	KAISER FND HOSP - SOUTH SACRAMENTO	Hospital	4,414
106410806	KAISER FND HOSP - SOUTH SAN FRANCISCO	Hospital	1,586
106190429	KAISER FND HOSP - SUNSET	Hospital	8,082
106070990	KAISER FND HOSP - WALNUT CREEK	Hospital	4,215
106190434	KAISER FND HOSP - WEST LA	Hospital	3,503
106191450	KAISER FND HOSP - WOODLAND HILLS	Hospital	2,597
106074097	KAISER FOUND HSP-ANTIOCH	Hospital	2,058
106540734	KAWEAH DELTA MEDICAL CENTER	Hospital	3,019
306196069	KERLAN-JOBE SURGERY CENTER	Clinic	1,638
106150736	KERN MEDICAL CENTER	Hospital	1,933
106150737	KERN VALLEY HEALTHCARE DISTRICT	Hospital	261
106191227	LAC/HARBOR-UCLA MEDICAL CENTER	Hospital	2,514
106191306	LAC/RANCHO LOS AMIGOS NATIONAL REHAB CENTER	Hospital	310
106191228	LAC+USC MEDICAL CENTER	Hospital	1,790
306374288	LA JOLLA ORTHOPEDIC SURGERY CENTER	Clinic	2,410
106190240	LAKESWOOD REGIONAL MEDICAL CENTER	Hospital	2,821
106190455	LANCASTER COMMUNITY HOSPITAL	Hospital	718
106301234	LA PALMA INTERCOMMUNITY HOSPITAL	Hospital	324
306304130	LA VETA SURGICAL CTR., AN AFFILIATE OF HEALTHSOUTH	Clinic	2,320
106390923	LODI MEMORIAL HOSPITAL	Hospital	1,760
306364023	LOMA LINDA AMBULATORY SURGICAL CENTER	Clinic	19
106361246	LOMA LINDA UNIVERSITY MEDICAL CENTER	Hospital	11,460
106420491	LOMPOC VALLEY MEDICAL CENTER	Hospital	1,327
106190525	LONG BEACH MEMORIAL MEDICAL CENTER	Hospital	3,937
106301248	LOS ALAMITOS MEDICAL CENTER	Hospital	3,786
306304315	LOS ALAMITOS SURGERY CENTER	Clinic	330
106190198	LOS ANGELES COMMUNITY HOSPITAL	Hospital	113
106191231	LOS ANGELES COUNTY OLIVE VIEW-UCLA MEDICAL CENTER	Hospital	1,941
306196045	LOS ANGELES ENDOSCOPY CENTER	Clinic	569
106190854	LOS ANGELES METROPOLITAN MEDICAL CENTER	Hospital	354
306196071	LOS ANGELES SURGICAL CENTER	Clinic	1,005
106560492	LOS ROBLES HOSPITAL & MEDICAL CENTER	Hospital	2,136
106434040	LUCILE SALTER PACKARD CHILDREN'S HOSP. AT STANFORD	Hospital	2,386
106201281	MADERA COMMUNITY HOSPITAL	Hospital	1,191
106121002	MAD RIVER COMMUNITY HOSPITAL	Hospital	3,108
306334129	MAGNOLIA PLASTIC SURGERY CENTER	Clinic	205
306304279	MAGNOLIA SURGERY CENTER	Clinic	1,346
106260011	MAMMOTH HOSPITAL	Hospital	336

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
106420493	MARIAN MEDICAL CENTER	Hospital	1,708
106190500	MARINA DEL REY HOSPITAL	Hospital	1,681
106211006	MARIN GENERAL HOSPITAL	Hospital	2,762
306214036	MARIN SPECIALTY SURGERY CENTER	Clinic	2,032
106050932	MARK TWAIN ST. JOSEPH'S HOSPITAL	Hospital	509
106090933	MARSHALL MEDICAL CENTER (1-RH)	Hospital	1,670
306197103	MARTIN LUTHER KING JR. AMBULATORY SURGERY CENTER	Clinic	1,185
106450936	MAYERS MEMORIAL HOSPITAL	Hospital	255
306544007	MEDICAL ARTS AMBULATORY SURGERY CENTER	Clinic	241
106240924	MEMORIAL HOSPITAL LOS BANOS	Hospital	381
106500939	MEMORIAL HOSPITAL MEDICAL CENTER - MODESTO	Hospital	7,235
106190521	MEMORIAL HOSPITAL OF GARDENA	Hospital	1,140
106231013	MENDOCINO COAST DISTRICT HOSPITAL	Hospital	918
106334018	MENIFEE VALLEY MEDICAL CENTER	Hospital	347
106414018	MENLO PARK SURGICAL HOSPITAL	Hospital	1,225
106340947	MERCY GENERAL HOSPITAL	Hospital	6,299
106150761	MERCY HOSPITAL - BAKERSFIELD	Hospital	2,874
106344029	MERCY HOSPITAL - FOLSOM	Hospital	1,285
106450949	MERCY MEDICAL CENTER	Hospital	2,715
106240942	MERCY MEDICAL CENTER MERCED-COMMUNITY CAMPUS	Hospital	807
106240948	MERCY MEDICAL CENTER MERCED-DOMINICAN CAMPUS	Hospital	1,213
106470871	MERCY MEDICAL CENTER MT. SHASTA	Hospital	1,111
106340950	MERCY SAN JUAN HOSPITAL	Hospital	4,845
306454047	MERCY SURGERY CENTER	Clinic	1,749
306304219	MESA SURGICENTER	Clinic	44
106340951	METHODIST HOSPITAL OF SACRAMENTO	Hospital	3,198
106190529	METHODIST HOSPITAL OF SOUTHERN CALIFORNIA	Hospital	1,515
306344118	MICHAEL J. FAZIO, MD. SURGERY CENTER	Clinic	477
306414063	MID-PENINSULA ENDOSCOPY CENTER	Clinic	2,857
306304286	MILE SQUARE SURGERY CENTER, INC.	Clinic	1,521
106190681	MIRACLE MILE MEDICAL CENTER	Hospital	328
306334529	MIRAGE ENDOSCOPY CENTER L.P.	Clinic	3,632
106190524	MISSION COMMUNITY HOSPITAL - PANORAMA CAMPUS	Hospital	570
106301337	MISSION HOSPITAL LAGUNA BEACH	Hospital	1,560
106301262	MISSION HOSPITAL REGIONAL MEDICAL CENTER	Hospital	1,964
306014038	MISSION VALLEY SURGERY CENTRE	Clinic	157
106190541	MONROVIA MEMORIAL HOSPITAL	Hospital	100
106361166	MONTCLAIR HOSPITAL MEDICAL CENTER	Hospital	226
106190547	MONTEREY PARK HOSPITAL	Hospital	1,174
306274033	MONTEREY PENINSULA SURGERY CENTER	Clinic	1,892
306274073	MONTEREY PENINSULA SURGERY CENTER RYAN RANCH	Clinic	2,220
106190552	MOTION PICTURE AND TELEVISION HOSPITAL	Hospital	2,160
106361266	MOUNTAINS COMMUNITY HOSPITAL	Hospital	242

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
306364140	MOUNTAIN VIEW SURGERY CENTER AND MEDICAL CLINIC	Clinic	2,374
306074121	MOUNT DIABLO SURGERY CENTER	Clinic	860
306194286	M/S SURGERY CENTER	Clinic	883
106274043	NATIVIDAD MEDICAL CENTER	Hospital	1,267
306544071	NATRAJ SURGERY CENTER, INC.	Clinic	67
306304166	NEWPORT BEACH ORANGE COAST ENDOSCOPY CENTER	Clinic	2,337
306304110	NEWPORT BEACH SURGERY CENTER	Clinic	3,135
306304264	NEWPORT COAST SURGERY CENTER, L.P.	Clinic	1,924
106301357	NEWPORT SPECIALTY HOSPITAL	Hospital	178
106281297	N M HOLDERMAN MEMORIAL HOSPITAL (VET'S HOME OF CAL)	Hospital	129
306304083	NORTH ANAHEIM SURGICENTER	Clinic	1,637
106481357	NORTH BAY MEDICAL CENTER	Hospital	743
106484001	NORTH BAY VACAVALLEY HOSPITAL	Hospital	68
306434171	NORTHERN CALIFORNIA KIDNEY STONE CENTER	Clinic	179
306504047	NORTHERN CALIFORNIA SURGERY CENTER	Clinic	1,836
106141273	NORTHERN INYO HOSPITAL	Hospital	592
106190568	NORTHRIDGE HOSPITAL MEDICAL CENTER	Hospital	3,790
306044158	NORTH VALLEY ENDOSCOPY CENTER	Clinic	1,404
106190570	NORWALK COMMUNITY HOSPITAL	Hospital	10
106214034	NOVATO COMMUNITY HOSPITAL	Hospital	584
306214038	NOVATO ENDOSCOPY CENTER, LLC	Clinic	1,066
306334520	OAKS SURGERY CENTER, THE	Clinic	3,486
306196664	OAK TREE ASC	Clinic	641
106500967	OAK VALLEY DISTRICT HOSPITAL (2-RH)	Hospital	711
306374233	OASIS HEALTHSOUTH SURGERY CENTER	Clinic	829
106430837	O'CONNOR HOSPITAL - SAN JOSE	Hospital	3,054
106560501	OJAI VALLEY COMMUNITY HOSPITAL	Hospital	348
106190534	OLYMPIA MEDICAL CENTER	Hospital	1,866
306014080	OPTIMA OPHTHALMIC MEDICAL ASSOCIATES, INC.	Clinic	480
106300225	ORANGE COAST MEMORIAL MEDICAL CENTER	Hospital	5,637
306304300	ORANGE COAST SURGERY CENTER	Clinic	163
106040937	OROVILLE HOSPITAL	Hospital	2,453
306374383	OTAY LAKES SURGERY CENTER, LLC	Clinic	940
106190696	PACIFICA HOSPITAL OF THE VALLEY	Hospital	297
106190307	PACIFIC ALLIANCE MEDICAL CENTER, INC.	Hospital	808
306154095	PACIFIC COAST SURGICAL CENTER NO.7	Clinic	771
306196309	PACIFIC ENDO-SURGICAL CENTER	Clinic	2,246
306364125	PACIFIC EYE INSTITUTE	Clinic	2,378
106190587	PACIFIC HOSPITAL OF LONG BEACH	Hospital	1,050
306374264	PACIFIC SURGICAL INSTITUTE OF PAIN MANAGEMENT	Clinic	300
106491338	PALM DRIVE HOSPITAL	Hospital	701
306434191	PALO ALTO MED. FDN. - CAMINO DIVISION SURGICENTER	Clinic	6,995
106370755	PALOMAR MEDICAL CENTER	Hospital	3,298

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
106331288	PALO VERDE HOSPITAL	Hospital	344
106370759	PARADISE VALLEY HOSPITAL	Hospital	660
106331293	PARKVIEW COMMUNITY HOSPITAL MEDICAL CENTER	Hospital	850
306196204	PASADENA SURGERY CENTER	Clinic	468
106454013	PATIENTS' HOSPITAL OF REDDING	Hospital	334
306434169	PENINSULA EYE SURGERY CENTER	Clinic	2,193
106410852	PENINSULA MEDICAL CENTER	Hospital	4,603
306414101	PENINSULA PROCEDURE CENTER, LP	Clinic	1,646
106491001	PETALUMA VALLEY HOSPITAL	Hospital	1,275
306154012	PHYSICIANS PLAZA SURGICAL CENTER	Clinic	2,144
106130760	PIONEERS MEMORIAL HOSPITAL	Hospital	1,392
106301297	PLACENTIA LINDA HOSPITAL	Hospital	2,854
306424060	PLAZA SURGERY CENTER, L.P.	Clinic	652
306564047	PLAZA SURGICAL CENTER, INC.	Clinic	57
106320986	PLUMAS DISTRICT HOSPITAL	Hospital	378
106370977	POMERADO HOSPITAL	Hospital	1,809
106190630	POMONA VALLEY HOSPITAL MEDICAL CENTER	Hospital	5,425
306404047	POSADA AMBULATORY SURGERY CENTER	Clinic	571
306374077	PREMIERE SURGERY CENTER, INC	Clinic	479
306364253	PREMIER OUTPATIENT SURGERY CENTER, INC.	Clinic	1,380
306424045	PREMIER SURGERY CENTER OF SANTA BARBARA	Clinic	825
106190631	PRESBYTERIAN INTERCOMMUNITY HOSPITAL	Hospital	7,457
306384012	PRESIDIO SURGERY CENTER	Clinic	2,789
306304291	PROCEDURE CENTER OF IRVINE	Clinic	126
306344134	PROCEDURE CENTER OF SOUTH SACRAMENTO	Clinic	1,534
306014219	PROCEDURE SUITES, FREMONT CENTER	Clinic	1,153
106370787	PROMISE HOSPITAL OF SAN DIEGO	Hospital	530
106190385	PROVIDENCE HOLY CROSS MEDICAL CENTER	Hospital	2,360
106190680	PROVIDENCE LITTLE COMPANY OF MARY MC - SAN PEDRO	Hospital	1,341
106190470	PROVIDENCE LITTLE COMPANY OF MARY MC - TORRANCE	Hospital	4,160
106190758	PROVIDENCE SAINT JOSEPH MEDICAL CENTER	Hospital	4,699
106190517	PROVIDENCE TARZANA MEDICAL CENTER	Hospital	2,947
106281047	QUEEN OF THE VALLEY HOSPITAL - NAPA	Hospital	4,119
106370673	RADY CHILDREN'S HOSPITAL - SAN DIEGO	Hospital	7,097
306334612	RANCHO MIRAGE SURGERY CENTER	Clinic	171
106364188	RANCHO SPECIALTY HOSPITAL	Hospital	293
306304412	REAGAN STREET SURGERY CENTER	Clinic	3,093
306454042	REDDING SURGERY CENTER, LP	Clinic	431
106361308	REDLANDS COMMUNITY HOSPITAL	Hospital	2,259
306364122	REDLANDS DENTAL SURGERY CENTER	Clinic	1,418
306494103	REDWOOD EMPIRE SURGERY CENTER, INC.	Clinic	871
106121051	REDWOOD MEMORIAL HOSPITAL	Hospital	1,172
306105032	REGIONAL HAND CENTER OF CENTRAL CALIFORNIA	Clinic	620

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
106430705	REGIONAL MEDICAL OF SAN JOSE	Hospital	4,137
306196171	REGIONAL VALLEY SURGERY CENTER	Clinic	772
106580996	RIDEOUT MEMORIAL HOSPITAL	Hospital	3,001
106150782	RIDGECREST REGIONAL HOSPITAL	Hospital	622
106331312	RIVERSIDE COMMUNITY HOSPITAL	Hospital	3,882
106334487	RIVERSIDE COUNTY REGIONAL MEDICAL CENTER	Hospital	2,331
106190796	RONALD REAGAN UCLA MEDICAL CENTER	Hospital	14,560
306314031	ROSEVILLE SURGERY CENTER	Clinic	876
106301317	SADDLEBACK MEMORIAL MEDICAL CENTER	Hospital	4,811
306504055	SALIDA SURGERY CENTER	Clinic	1,511
306274026	SALINAS SURGERY CENTER	Clinic	758
106270875	SALINAS VALLEY MEMORIAL HOSPITAL	Hospital	1,157
106361318	SAN ANTONIO COMMUNITY HOSPITAL	Hospital	4,622
306374389	SAN DIEGO CENTER FOR REPRODUCTIVE SURGERY	Clinic	100
306374149	SAN DIEGO ENDOSCOPY CENTER, A PARTNERSHIP	Clinic	1,822
306370838	SAN DIEGO OUTPATIENT SURGICAL CENTER	Clinic	1,035
106190673	SAN DIMAS COMMUNITY HOSPITAL	Hospital	689
306194005	SAN FERNANDO VALLEY SURGERY CENTER	Clinic	2,168
306384171	SAN FRANCISCO ENDOSCOPY CENTER, LLC	Clinic	3,862
106380939	SAN FRANCISCO GENERAL HOSPITAL	Hospital	4,521
306384172	SAN FRANCISCO SURGERY CENTER	Clinic	682
106190200	SAN GABRIEL VALLEY MEDICAL CENTER	Hospital	1,856
306194152	SAN GABRIEL VALLEY SURGICAL CENTER	Clinic	2,338
106331326	SAN GORGONIO MEMORIAL HOSPITAL	Hospital	493
106150788	SAN JOAQUIN COMMUNITY HOSPITAL	Hospital	4,649
106391010	SAN JOAQUIN GENERAL HOSPITAL	Hospital	1,466
306434201	SAN JOSE DENTAL SURGERY CENTER	Clinic	447
306434112	SAN JOSE MEDICAL GROUP ENDOSCOPY SUITE	Clinic	1,260
106013619	SAN LEANDRO HOSPITAL	Hospital	583
306014035	SAN LEANDRO SURGERY CENTER	Clinic	1,865
106410782	SAN MATEO MEDICAL CENTER	Hospital	1,288
306074099	SAN RAMON ENDOSCOPY CENTER, INC.	Clinic	2,333
106074017	SAN RAMON REGIONAL MEDICAL CENTER	Hospital	3,087
306074107	SAN RAMON SURGERY CENTER	Clinic	749
106420514	SANTA BARBARA COTTAGE HOSPITAL	Hospital	3,640
306424061	SANTA BARBARA ENDOSCOPY CENTER, LLC	Clinic	1,021
306424051	SANTA BARBARA SURGICAL CENTER, L.P.	Clinic	2,956
106430883	SANTA CLARA VALLEY MEDICAL CENTER	Hospital	5,057
306424057	SANTA MARIA DIGESTIVE DIAGNOSTIC CENTER	Clinic	3,099
106190687	SANTA MONICA - UCLA MEDICAL CENTER & ORTHOPAEDIC HOSPITAL	Hospital	1,753
106491064	SANTA ROSA MEMORIAL HOSPITAL-MONTGOMERY	Hospital	2,941
106420522	SANTA YNEZ VALLEY COTTAGE HOSPITAL	Hospital	352
306564118	SAXON SURGICAL CENTER, INC.	Clinic	417

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
306374407	SCRIPPS ENCINITAS SURGERY CENTER	Clinic	1,716
106371256	SCRIPPS GREEN HOSPITAL	Hospital	7,883
106371394	SCRIPPS MEMORIAL HOSPITAL - ENCINITAS	Hospital	3,033
106370771	SCRIPPS MEMORIAL HOSPITAL - LA JOLLA	Hospital	5,274
106370744	SCRIPPS MERCY HOSPITAL	Hospital	6,264
306374339	SCRIPPS MERCY SURGERY PAVILION	Clinic	2,638
106321016	SENECA HEALTHCARE DISTRICT	Hospital	285
106410891	SEQUOIA HOSPITAL	Hospital	1,885
306074091	SEQUOIA SURGICAL PAVILION	Clinic	3,675
106410817	SETON MEDICAL CENTER	Hospital	5,051
106370875	SHARP CHULA VISTA MEDICAL CENTER	Hospital	2,750
106370689	SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER	Hospital	580
106370695	SHARP MARY BIRCH HOSPITAL FOR WOMEN AND NEWBORNS	Hospital	1,215
106370694	SHARP MEMORIAL HOSPITAL	Hospital	8,468
106450940	SHASTA REGIONAL MEDICAL CENTER	Hospital	1,442
306424069	SHEPARD EYE CENTER MEDICAL GROUP	Clinic	1,080
106190708	SHERMAN OAKS HOSPITAL	Hospital	313
306196174	SHERMAN OAKS SURGERY CENTER	Clinic	190
106344114	SHRINERS HOSPITALS FOR CHILDREN NORTHERN CALIF.	Hospital	468
306294018	SIERRA AMBULATORY SURGERY CENTER, LLC	Clinic	844
106100797	SIERRA KINGS DISTRICT HOSPITAL	Hospital	285
106291023	SIERRA NEVADA MEMORIAL HOSPITAL	Hospital	607
106540798	SIERRA VIEW DISTRICT HOSPITAL	Hospital	2,388
106400524	SIERRA VISTA REGIONAL MEDICAL CENTER	Hospital	1,498
106190661	SILVER LAKE MEDICAL CENTER-DOWNTOWN CAMPUS	Hospital	326
306564154	SIMI SURGERY CENTER, INC.	Clinic	1,123
106560525	SIMI VALLEY HOSPITAL AND HEALTH CARE SVCS-SYCAMORE	Hospital	406
306044162	SKYWAY SURGERY CENTER	Clinic	2,269
306194960	SOLIS SURGICAL ARTS CENTER	Clinic	131
106491076	SONOMA VALLEY HOSPITAL	Hospital	1,057
306554001	SONORA EYE SURGERY CENTER	Clinic	792
106554011	SONORA REGIONAL MEDICAL CENTER - GREENLEY	Hospital	2,513
306554017	SONORA SURGERY CENTER	Clinic	889
306434114	SOUTH BAY ENDOSCOPY CENTER, A MEDICAL CORPORATION	Clinic	1,005
306194737	SOUTHERN CALIFORNIA SURGERY CENTER	Clinic	380
306314033	SOUTH PLACER SURGERY CENTER, L.P.	Clinic	1,512
106334068	SOUTHWEST HEALTHCARE SYSTEM-MURRIETA	Hospital	1,279
306154075	SOUTHWEST SURGICAL CENTER	Clinic	1,329
306564107	SPANISH HILLS SURGERY CENTER, LLC	Clinic	1,573
106100899	ST. AGNES MEDICAL CENTER	Hospital	7,810
106430905	STANFORD HOSPITAL	Hospital	12,226
106504038	STANISLAUS SURGICAL HOSPITAL	Hospital	5,553
306364061	STARPOINT HEALTH, INC.	Clinic	127

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
106361339	ST. BERNARDINE MEDICAL CENTER	Hospital	3,547
106521041	ST. ELIZABETH COMMUNITY HOSPITAL	Hospital	1,481
106190754	ST. FRANCIS MEDICAL CENTER	Hospital	2,198
106380960	ST. FRANCIS MEMORIAL HOSPITAL	Hospital	1,291
106281078	ST. HELENA HOSPITAL	Hospital	1,783
106171049	ST. HELENA HOSPITAL - CLEARLAKE	Hospital	716
106190756	ST. JOHN'S HEALTH CENTER	Hospital	4,304
306564136	ST. JOHN'S OUTPATIENT SURGERY CENTER	Clinic	940
106560508	ST. JOHN'S PLEASANT VALLEY HOSPITAL	Hospital	1,397
106560529	ST. JOHN'S REGIONAL MEDICAL CENTER	Hospital	2,408
106121080	ST. JOSEPH HOSPITAL - EUREKA	Hospital	3,751
106301340	ST. JOSEPH HOSPITAL - ORANGE	Hospital	10,832
106391042	ST. JOSEPH'S MEDICAL CENTER OF STOCKTON	Hospital	1,819
306304190	ST. JOSEPH SURGERY AND LASER CENTER, INC.	Clinic	247
106301342	ST. JUDE MEDICAL CENTER	Hospital	11,133
106434138	ST. LOUISE REGIONAL HOSPITAL	Hospital	1,001
106190053	ST. MARY MEDICAL CENTER	Hospital	1,407
106361343	ST. MARY REGIONAL MEDICAL CENTER	Hospital	2,234
106380965	ST. MARY'S MEDICAL CENTER, SAN FRANCISCO	Hospital	2,481
306394069	STOCKTON ENDOSCOPY CENTER, LLC	Clinic	1,654
106010967	ST. ROSE HOSPITAL	Hospital	1,358
106190762	ST. VINCENT MEDICAL CENTER	Hospital	2,989
306196550	SUMMIT SURGERY CENTER	Clinic	1,141
306424049	SUMMIT SURGERY CENTER	Clinic	945
306105021	SUMMIT SURGICAL	Clinic	3,790
306431040	SURGECENTER OF PALO ALTO	Clinic	5,461
306196216	SURGERY CENTER OF LONG BEACH	Clinic	2,167
306454011	SURGERY CENTER OF NORTHERN CALIFORNIA	Clinic	954
306194597	SURGERY CENTER OF SANTA MONICA	Clinic	1,061
306014022	SURGERY CTR. OF ALTA BATES SUMMIT MED. CTR, LLC, THE	Clinic	1,443
306374162	SURGICAL EYE CARE CENTER	Clinic	598
306164016	SURGITEK OUTPATIENT CENTER, INC.	Clinic	700
306344066	SUTTER ALHAMBRA SURGERY CENTER, L.P.	Clinic	1,841
106034002	SUTTER AMADOR HOSPITAL	Hospital	935
106310791	SUTTER AUBURN FAITH HOSPITAL	Hospital	1,996
306314010	SUTTER AUBURN SURGERY CENTER	Clinic	920
106084001	SUTTER COAST HOSPITAL	Hospital	2,104
106574010	SUTTER DAVIS HOSPITAL	Hospital	2,545
106070934	SUTTER DELTA MEDICAL CENTER	Hospital	1,814
306484045	SUTTER FAIRFIELD SURGERY CENTER	Clinic	2,873
106341051	SUTTER GENERAL HOSPITAL	Hospital	3,940
106171395	SUTTER LAKESIDE HOSPITAL	Hospital	1,838
106444012	SUTTER MATERNITY AND SURGERY CENTER OF SANTA CRUZ	Hospital	3,965

Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009

Facility Number	Facility Name	Facility Type	Encounters
106490919	SUTTER MEDICAL CENTER OF SANTA ROSA	Hospital	2,600
106341052	SUTTER MEMORIAL HOSPITAL	Hospital	4,173
306514021	SUTTER NORTH PROCEDURE CENTER	Clinic	911
306514032	SUTTER NORTH SURGERY CENTER	Clinic	2,178
306341608	SUTTER RIVER CITY SURGERY CENTER	Clinic	2,093
106311000	SUTTER ROSEVILLE MEDICAL CENTER	Hospital	3,539
106481094	SUTTER SOLANO MEDICAL CENTER	Hospital	1,492
106514030	SUTTER SURGICAL HOSPITAL-NORTH VALLEY	Hospital	65
106391056	SUTTER TRACY COMMUNITY HOSPITAL	Hospital	2,090
306504054	SYLVAN SURGERY CENTER, INC.	Clinic	413
106291053	TAHOE FOREST HOSPITAL	Hospital	894
306196175	TARZANA SURGERY CENTER, INC.	Clinic	270
306154104	TEHACHAPI SURGERY CENTER, INC.	Clinic	323
106190784	TEMPLE COMMUNITY HOSPITAL	Hospital	1,903
306404065	TEMPLETON SURGERY CENTER LLC	Clinic	716
306196349	THE CENTER FOR AMBULATORY SURGICAL TREATMENT	Clinic	1,464
306564072	THOUSAND OAKS ENDOSCOPY CENTER	Clinic	1,988
106564121	THOUSAND OAKS SURGICAL HOSPITAL	Hospital	1,589
106190422	TORRANCE MEMORIAL MEDICAL CENTER	Hospital	10,788
306196262	TORRANCE SURGERY CENTER, L.P.	Clinic	1,933
306074098	TRESANTI MEDICAL CORPORATION, THE	Clinic	1,060
106370780	TRI-CITY MEDICAL CENTER	Hospital	4,347
106190159	TRI-CITY REGIONAL MEDICAL CENTER	Hospital	2,114
106531059	TRINITY HOSPITAL	Hospital	274
306014078	TRIVALLEY OUTPATIENT SURGERY CENTER	Clinic	447
306564022	T SURGERY CENTER	Clinic	1,036
106540816	TULARE DISTRICT HOSPITAL	Hospital	1,759
106400548	TWIN CITIES COMMUNITY HOSPITAL	Hospital	1,623
106381154	UCSF MEDICAL CENTER	Hospital	15,996
106231396	UKIAH VALLEY MEDICAL CENTER/HOSPITAL DRIVE	Hospital	2,231
306196433	UNITED SURGERY MEDICAL CENTER	Clinic	86
306374088	UNIVERSITY AMBULATORY SURGERY CENTER	Clinic	614
106341006	UNIVERSITY OF CALIFORNIA DAVIS MEDICAL CENTER	Hospital	11,534
106301279	UNIVERSITY OF CALIFORNIA IRVINE MEDICAL CENTER	Hospital	5,655
106370782	UNIVERSITY OF CALIF-SAN DIEGO MEDICAL CENTER	Hospital	10,995
306244035	UNIVERSITY SURGERY CENTER	Clinic	2,399
306364019	UPLAND OUTPATIENT SURGICAL CENTER	Clinic	923
106191216	USC KENNETH NORRIS, JR. CANCER HOSPITAL	Hospital	3,825
106194219	USC UNIVERSITY HOSPITAL	Hospital	4,142
306194235	VALENCIA OUTPATIENT SURGICAL CENTER	Clinic	1,293
106014050	VALLEYCARE MEDICAL CENTER	Hospital	3,756
106190812	VALLEY PRESBYTERIAN HOSPITAL	Hospital	2,452
306274052	VANTAGE SURGERY CENTER	Clinic	1,125

**Appendix D
Ambulatory Surgery Encounters by Facility
January - June 2009**

Facility Number	Facility Name	Facility Type	Encounters
106560481	VENTURA COUNTY MEDICAL CENTER	Hospital	2,295
306564133	VENTURA ENDOSCOPY CENTER, LLC	Clinic	2,938
106190818	VERDUGO HILLS HOSPITAL	Hospital	2,167
106361370	VICTOR VALLEY COMMUNITY HOSPITAL	Hospital	1,913
306544016	VISALIA CENTER FOR AMBULATORY MEDICINE AND SURGERY	Clinic	2,034
306104040	VISION CARE SURGERY CENTER	Clinic	3,487
106190049	VISTA HOSPITAL OF SAN GABRIEL VALLEY	Hospital	48
106190196	VISTA HOSPITAL OF SOUTH BAY	Hospital	191
306304135	VISTA SURGICAL CENTER, INC.	Clinic	281
106010987	WASHINGTON HOSPITAL - FREMONT	Hospital	1,440
106444013	WATSONVILLE COMMUNITY HOSPITAL	Hospital	1,103
306014157	WEBSTER SURGERY CENTER	Clinic	1,465
106301379	WEST ANAHEIM MEDICAL CENTER	Hospital	75
106301188	WESTERN MEDICAL CENTER HOSPITAL - ANAHEIM	Hospital	703
106301566	WESTERN MEDICAL CENTER - SANTA ANA	Hospital	2,282
106190859	WEST HILLS HOSPITAL AND MEDICAL CENTER	Hospital	1,247
106190878	WHITE MEMORIAL MEDICAL CENTER	Hospital	3,029
106190883	WHITTIER HOSPITAL MEDICAL CENTER	Hospital	830
306364239	WIKA ENDOSCOPY CENTER	Clinic	962
106571086	WOODLAND MEMORIAL HOSPITAL	Hospital	3,418

Appendix E

Expected Source of Payment Definitions

January – June 2009

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.

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

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.

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

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

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

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

Blue Cross/Blue Shield – Includes only BC/BS Fee for Service payments.

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

Commercial Insurance Company – Includes payments from insurance carriers on a Fee for Services basis; excludes PPO, POS, and EPO payments.

Disability – Payments resulting from disability coverage.

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

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.

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

Medi-Cal – (Medicaid). 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.

Other Federal Program – Federal programs not covered by any other category.

Appendix E

Expected Source of Payment Definitions

January – June 2009

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

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

Workers' Compensation Health Claim – Includes payments from Workers' Compensation Health Claim insurance.

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.

Appendix F

Disposition Definitions

January – June 2009

01 Discharged to home of self care (routine discharge):

This category includes patients discharged to home directly after treatment (including the homeless and those receiving non-home health or non-hospice care services, such as services by a durable medical equipment (DME) supplier or services related to home oxygen), a home environment (e.g. half-way house, group home, community care facility, foster care, women's shelter), a Residential Care facility, court, a correctional institution, and law enforcement custody. This category also includes various types of facilities that provide supportive and custodial care. These facilities are licensed by the California Department of Social Services and are not considered to be health facilities. The facilities are referred to by a variety of terms (e.g., board and care, residential care facilities for the elderly). This category is used to indicate discharge to a location not licensed as a medical facility by the Department of Health Services, such as Mental Health Rehabilitation Centers (MHRC). This category DOES NOT include patients sent to home health care or to home with hospice care.

02 Discharged/Transferred to a short-term general care hospital or inpatient care:

This category includes patients discharged or transferred to inpatient hospital care. This category DOES NOT include patients discharged or transferred to physical medicine rehabilitation facilities, or rehabilitation distinct part of a hospital, or psychiatric facilities, or psychiatric distinct part unit of a hospital.

03 Discharged/Transferred to a skilled nursing facility with Medicare certification in anticipation of covered skilled care:

This category includes patients discharged or transferred to: SNF facility or skilled nursing distinct part of a hospital that provides supportive and nursing care to patients whose primary need is for skilled nursing care on an extended basis; SNF certified by Medicare; Rehabilitation unit in a SNF; Institute for Mental Disease (IMD), if licensed by California Department of Health Services as SNFs. If IMD is not licensed by the California Department of Health Services as SNF, this may be reported as Federal health care facility. This category DOES NOT include patients discharged or transferred to facilities with a Medicare approved skilled nursing swing bed.

04 Discharged/Transferred to an intermediate care facility (ICF):

This category includes patients discharged or transferred to: Intermediate care facility or a distinct part of a hospital or SNF that provides inpatient care to ambulatory or non-ambulatory patients who have recurring need for skilled nursing supervision and need supportive care, but who do not require availability of continuous nursing care; non-certified SNFs; and skilled nursing level of care in the state designated assisted living facilities.

05 (before 4/1/08) Discharged/Transferred to another type of institution not defined elsewhere on this list:

This category includes patients discharged or transferred to a health care institution not otherwise mentioned in one of the categories described above. Included in this category are patients discharged to Urgent Care or Chemical Dependency care. After 4/1/08 these patients would be coded as "70".

Appendix F

Disposition Definitions

January – June 2009

05 (on and after 4/1/08) Discharged/Transferred to a designated cancer center or children's hospital:

Beginning with encounters on 4/1/08 this category includes patients discharged or transferred to either a designated cancer center or children's hospital. Transfers to non-designated cancer hospitals are coded under short-term general care hospital or inpatient care (02). For a list of designated cancer centers link to: [National Cancer Institute Designated Cancer Centers](#). Prior to 4/1/08 this category included patients discharged or transferred to another type of institution not defined elsewhere (code 70 beginning 4/1/08).

06 Discharged/Transferred home under the care of organized home health service organization in anticipation of covered skilled care:

This category includes patients discharged or transferred to home with healthcare services from an organized home health service organization where the provided services are at a level less intensive than health facility requirements. Services under an organized home health service organization may include nursing care, respiratory/inhalation therapy, electrocardiology, physical therapy, occupational therapy, and recreational therapy. Also included in this category are discharges and transfers to home with a written home health plan of care for home health care services. This category DOES NOT include discharges or transfers to home with hospice services.

07 Left against medical advice or discontinued care:

This category includes patients who left against medical advice (AMA) or who discontinued care. If a patient did not see a provider, the encounter was not reported to OSHPD.

20 Died/Expired:

This category includes all episodes of care that resulted in death before patient left the facility.

21 Discharged/Transferred to Court/Law Enforcement:

This category includes patients discharged or transferred to Court/Law Enforcement. (Occurred only in the fourth quarter of 2009)

43 Discharged/Transferred to a federal health care facility:

This category includes patients discharged or transferred to federal government owned health care facilities such as Veterans Administration hospitals, Department of Defense hospitals, Public Health Services hospitals, and Institutes for Mental Disease (IMD), not licensed by the California Department of Health Services as SNF.

50 Discharged home with hospice care:

This category includes patients discharged or transferred to home with hospice care. A hospice program is a centrally administered program of palliative and support services which provide psychological, social and spiritual care for dying persons and their families, focusing on pain and symptom control for the patient. This category DOES NOT include discharges or transfers to home or home health services.

51 Discharged to a medical facility with hospice care:

This category includes patients discharged or transferred to any medical facility for hospice care only. A hospice program is a centrally administered program of palliative and support services

Appendix F

Disposition Definitions

January – June 2009

which provide psychological, social and spiritual care for dying persons and their families, focusing on pain and symptom control for the patient.

61 Discharged/Transferred to a hospital-based Medicare approved swing bed:

This category includes patients discharged or transferred to a SNF level of care within the hospital's Medicare approved swing bed arrangement.

62 Discharged/Transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part unit of a hospital:

This category includes patients discharged or transferred to a rehabilitation facility or to a rehabilitation distinct part of a hospital.

63 Discharged/Transferred to a Medicare certified long-term care hospital (LTCH):

This category includes patients discharged or transferred to a long-term care hospital that provides acute inpatient care with an average length of stay greater than 25 days. This category DOES NOT include discharges and transfers to SNF facility certified by Medicare or ICF facility or SNF facility certified by Medicaid (Medi-Cal).

64 Discharged/Transferred to a nursing facility certified under Medicaid (Medi-Cal), but not certified under Medicare:

This category includes patients discharged or transferred to a SNF level of care within the hospital's non-Medicare approved swing bed arrangement; skilled nursing bed for the Medi-Cal Subacute Care Program, skilled nursing bed for the Medi-Cal Transitional Care Program, skilled nursing bed in a Congregate Living Health Facility licensed by California Department of Health Services, and Institute for Mental Disease (IMD), if licensed by California Department of Health Services as SNF. If IMD is not licensed by California Department of Health Services as SNF, it may be reported as a federal health care facility.

65 Discharged/Transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital:

This category includes patients discharged or transferred to a psychiatric facility or to a psychiatric distinct part of a hospital.

66 Discharged/Transferred to a critical access hospital (CAH):

This category includes patients discharged or transferred to a hospital designated as a Critical Access Hospital.

70 (on and after 4/1/08) Discharged/Transferred to another type of institution not defined elsewhere on this list:

Beginning with encounters on 4/1/08, this category includes patients discharged or transferred to a health care institution not otherwise mentioned in one of the categories described above. Included in this category are patients discharged to Urgent Care or Chemical Dependency care. Prior to 4/1/08 patients in this category would be coded as "05".

00 Other:

This category does not include health care institutions which would be otherwise categorized in above.

Appendix G

Race and Ethnicity Definitions

January – June 2009

Race and Ethnicity data is most accurate when the patients are asked to identify their own race and ethnicity. Self-identification may include the use of a form displaying race/ethnicity choices. Because data quality deteriorates when assumptions are based on the patient's or a family member's name, physical appearance, place of birth, or primary language, hospitals are instructed to code Race and Ethnicity as "Unknown" if the patient or family member is unable or unwilling to declare. The parents declare the ethnicity and race of a newborn. If the parent(s) is unable or unwilling to declare the newborn's race, it is appropriate for the facility reporting to OSHPD to report the ethnicity and race of the mother for that of the newborn. Multiracial patients may choose any one of the categories that is at least partially accurate (including "other"). For more discussion and examples of coding guidelines, see the California Emergency Department and Ambulatory Surgery Data Reporting Manual at <http://www.oshpd.ca.gov/HID/MIRCal/EDASManual.html>.

Race

R1 - American Indian or Alaska Native: A person having origins in or who identifies with any of the original peoples of North and South 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, Micronesian, Mariana Islander, New Hebrides, Palauan, Papua New Guinean, Pohnpeian, 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.

R6 - Other Race: Any possible options not covered in the above categories. This category includes patients who cite more than one race.

Appendix G

Race and Ethnicity Definitions

January – June 2009

99 - Unknown: Includes patients who cannot or will not declare their ethnicity. Unknown is also used as a default for reported invalid and blank values of ethnicity. (Combine definitions “99” and “00” for Non-public documentation).

Ethnicity

Hispanic origin or descent is not to be confused with race. A person of Hispanic origin may be of any race.

E1 - Hispanic: A person who identifies with or is of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin. This may include the following groups: Andalusian, Argentinian, Asturian, Balearic Islander, Bolivian, Castilian, Catalan, Canarian, Chicano, Chilean, Columbian, Costa Rican, Criollo, Dominican, Ecuadorian, Gallego, Guatemalan, Honduran, La Raza, Latin American, Mexican American, Mexican American Indian, Mexicano, Nicaraguan, Panamanian, Paraguayan, Peruvian, Salvadorian, Spaniard, Spanish Basque, Uruguayan, Valencian, and Venezuelan. A person of Hispanic origin may be of any race.

E2 - Non-Hispanic: A person who identifies with a culture or origin other than Hispanic.

99 - Unknown: Includes patients who cannot or will not declare their ethnicity. Unknown is also used as a default for reported invalid and blank values of ethnicity.

Appendix H

Principal Language Spoken

January - June 2009

ID	Description
38	Amharic
2	Arabic
3	Armenian
58	Cantonese (Yue Chinese)
4	Chinese
41	Mandarin
6	French Creole
1	English
5	French
7	German
8	Greek
36	Gujarati
10	Hebrew
11	Hindi
32	Hmong (Miao)
12	Hungarian
44	Ilocano (Iloko)
45	Indonesian
13	Italian
46	Mien (lu Mien)
14	Japanese
48	Cambodian / Mon-Khmer
15	Korean
47	Lao
19	Navajo

ID	Description
49	Panjabi (Punjabi)
20	Persian
50	Farsi
21	Polish
22	Portuguese
23	Russian
42	Croatian
52	Serbian
51	Samoan
25	Spanish
53	Swahili
54	Telugu
26	Tagalog
27	Thai
55	Tonga
56	Ukrainian
28	Urdu
29	Vietnamese
30	Yiddish
57	Yoruba
1000	Other (see text field for specified language)
31	Unknown
997	Invalid code reported (defaulted to 997)
998	No language reported (blank)

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
EMERGENCY DEPARTMENT DATA RECORD
MANUAL ABSTRACT REPORTING FORM**

Effective with encounters occurring on or after January 1, 2009

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, and 97267)

FACILITY ID NUMBER <input style="width:100%; height: 20px;" type="text"/>	ABSTRACT RECORD NUMBER (Optional) <input style="width:100%; height: 20px;" type="text"/>			
DATE OF BIRTH <input style="width:100%; height: 20px;" type="text"/> <i>Month Day Year (4-digit)</i>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 5px;"> SEX F Female M Male U Unknown <input style="width: 20px; height: 20px;" type="checkbox"/> </td> <td style="width:33%; padding: 5px;"> 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 <input style="width: 20px; height: 20px;" type="checkbox"/> </td> <td style="width:33%; padding: 5px;"> ETHNICITY E1 Hispanic or Latino E2 Non-Hispanic or Non-Latino 99 Unknown <input style="width: 20px; height: 20px;" type="checkbox"/> </td> </tr> </table>	SEX F Female M Male U Unknown <input style="width: 20px; height: 20px;" type="checkbox"/>	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 <input style="width: 20px; height: 20px;" type="checkbox"/>	ETHNICITY E1 Hispanic or Latino E2 Non-Hispanic or Non-Latino 99 Unknown <input style="width: 20px; height: 20px;" type="checkbox"/>
SEX F Female M Male U Unknown <input style="width: 20px; height: 20px;" type="checkbox"/>	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 <input style="width: 20px; height: 20px;" type="checkbox"/>	ETHNICITY E1 Hispanic or Latino E2 Non-Hispanic or Non-Latino 99 Unknown <input style="width: 20px; height: 20px;" type="checkbox"/>		
ZIP CODE <input style="width:100%; height: 20px;" type="text"/> <i>99999 = Unknown</i>	PATIENT'S SOCIAL SECURITY NUMBER <input style="width:100%; height: 20px;" type="text"/> Report 000000001 (Unknown) if not recorded in the patient's medical record			
SERVICE DATE <input style="width:100%; height: 20px;" type="text"/> <i>Month Day Year (4-digit)</i>				

PRINCIPAL LANGUAGE SPOKEN

Enter only one 3-digit value in the space provided.

Or, if patient's Principal Language Spoken is not included in the list, then enter language spoken, up to 24 alpha characters.

- | | |
|-------------------|--------------------------|
| ENG English | LAO Laotian |
| ARA Arabic | HMN Miao, Hmong |
| ARM Armenian | KHM Mon-Khmer, Cambodian |
| CHI Chinese | NAV Navajo |
| FRE French | PER Persian |
| CPF French Creole | POL Polish |
| GER German | POR Portuguese |
| GRE Greek | RUS Russian |
| GUJ Gujarathi | SCR Serbo-Croatian |
| HEB Hebrew | SPA Spanish |
| HIN Hindi | TGL Tagalog |
| HUN Hungarian | THA Thai |
| ITA Italian | URD Urdu |
| JPN Japanese | VIE Vietnamese |
| KOR Korean | YID Yiddish |
| | 999 Unknown |

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
EMERGENCY DEPARTMENT DATA RECORD
MANUAL ABSTRACT REPORTING FORM**

Effective with encounters occurring on or after January 1, 2009

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, and 97267)

EXPECTED SOURCE OF PAYMENT

--	--

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

DISPOSITION OF PATIENT

--	--

- 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

PRINCIPAL DIAGNOSIS

ICD-9-CM CODE

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

OTHER DIAGNOSES

ICD-9-CM CODE

- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|----|---|--|--|--|--|--|--|--|--|----|---|--|--|--|--|--|--|--|--|----|---|--|--|--|--|--|--|--|--|
| a. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | i. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | q. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | j. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | r. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | k. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | s. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| d. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | l. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | t. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| e. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | m. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | u. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| f. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | n. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | v. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| g. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | o. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | w. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| h. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | p. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | x. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
AMBULATORY SURGERY DATA RECORD
MANUAL ABSTRACT REPORTING FORM**

Effective with encounters occurring on or after January 1, 2009

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, and 97267)

EXPECTED SOURCE OF PAYMENT

--	--

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

DISPOSITION OF PATIENT

--	--

- 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

PRINCIPAL DIAGNOSIS

ICD-9-CM CODE

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

OTHER DIAGNOSES

ICD-9-CM CODE

- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|----|---|--|--|--|--|--|--|--|--|----|---|--|--|--|--|--|--|--|--|----|---|--|--|--|--|--|--|--|--|
| a. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | i. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | q. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | j. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | r. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | k. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | s. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| d. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | l. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | t. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| e. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | m. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | u. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| f. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | n. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | v. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| g. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | o. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | w. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| h. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | p. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | x. | <table border="1"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
AMBULATORY SURGERY DATA RECORD
MANUAL ABSTRACT REPORTING FORM

Effective with encounters occurring on or after January 1, 2009

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, and 97267)

PRINCIPAL EXTERNAL CAUSE OF INJURY E-CODE
ICD-9-CM CODE

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

OTHER EXTERNAL CAUSE OF INJURY E-CODES
ICD-9-CM CODE

a.

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

b.

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

c.

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

d.

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

PRINCIPAL PROCEDURE
CPT-4 CODE

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

OTHER PROCEDURES
CPT-4 CODE

a.

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

b.

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

c.

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

d.

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

e.

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

f.

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

g.

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

h.

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

i.

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

j.

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

k.

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

l.

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

m.

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

n.

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

o.

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

p.

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

q.

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

r.

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

s.

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

t.

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

**Appendix K
County Names and Codes
January – June 2009**

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		
25	Modoc		
26	Mono		
27	Monterey		
28	Napa		
29	Nevada		
30	Orange		
31	Placer		
32	Plumas		
33	Riverside		
34	Sacramento		
35	San Benito		