



## Office of Statewide Health Planning and Development

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OFFICE OF  
ADMINISTRATIVE LAW

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## Statement of Explanation for Section 100 Filing

Pursuant to Section 100 of Title 1 of the California Code of Regulations, Office of Statewide Health Planning and Development (OSHPD) is making "Changes without regulatory effect" to Section 97232 of the Article 8 Patient Data Reporting Requirements, Chapter 10, Division 7, of Title 22, of the California Code of Regulations.

The changes apply to patient-level data reporting which is accomplished by means of an online reporting system called MIRCal (Medical Information Reporting for California).

Health and Safety Code Section 128735 requires that California hospitals file a Hospital Discharge Abstract Data Record with OSHPD for each patient discharged.

The statute enumerates the data elements that must be included in each record.

The Expected Source of Payment (ESOP) data element, Section 97232, consists of three parts: Payer Category, Type of Coverage and, if a Managed Care Knox-Keene health plan or a Medi-Cal County Organized Health System is reported, the Plan Code number identifying the plan must also be included.

OSHPD obtains the names and plan code numbers of the plans from the Department of Managed Health Care, the licensing entity. The number of plans licensed to operate in California is subject to change. This regulatory update deletes the names of ten obsolete plans that are no longer licensed, adds two newly licensed plans, changes three existing plan names to newer licensed names, and reorganizes plan names to maintain the alphabetical order of listed plans.

These changes are without regulatory effect because the requirement to report ESOP is unchanged: the list of licensed plans is being updated to remain current.

These changes impose no new regulatory burdens and do not materially alter any of the requirements or responsibilities imposed on reporting organizations by these regulations.