

**FORMAT and FILE SPECIFICATIONS
for
ONLINE TRANSMISSION:
EMERGENCY CARE and AMBULATORY SURGERY DATA**

**Effective with encounters occurring on or after
January 1, 2019**

Version 2.1
Revised July 2019

ED and AS FORMAT AND FILE SPECIFICATIONS FOR ONLINE TRANSMISSION

Effective with encounters occurring on and after January 1, 2019

SUMMARY OF CHANGES

Title Page

Removed 'MIRCal' from Title
Changed Version Number from '2.0' to '2.1'
Changed Revision Date from May 1, 2017 to July 2019
Removed MIRCal logo

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Standard Record Format

Removed "All fields are left-justified and padded with spaces on the right"

Additional Requirements

Removed 'if zipped, submit the zipped file with a ".zip" extension'

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Ethnicity

Codes: Updated 'E1 = Hispanic or Latino' to 'E1 = Hispanic or Latino Ethnicity'

Disposition of Patient

Removed "New disposition codes 69 and 81 through 95, and changes to existing codes are effective with encounters on and after January 1, 2015"

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Expected Source of Payment

Codes: Updated 'Health Maintenance Organization' to 'Health Maintenance Organization (HMO)'

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STANDARD RECORD FORMAT

Deviation from the format will not be accepted

- One reporting facility and report period per file
- Standard ASCII character coding
- Record length 583 characters followed by a carriage return and line feed

ADDITIONAL requirements

- No packed or binary data
- No Null Values
- The data file must be a text file with the extension of ".txt"

**ED and AS FORMAT AND FILE SPECIFICATIONS
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Standard Record Format

Data Element	Start	End	Type & Size¹	
Facility Identification Number	1	6	N	(6)
Abstract Record Number (Optional)	7	18	A/N	(12)
Patient's Social Security Number	19	27	N	(9)
ZIP Code	28	32	A/N	(5)
Date of Birth	33	40	N	(8)
Sex	41	41	A	(1)
Race	42	51	A/N	(10)
Ethnicity	52	53	A/N	(2)
Service Date	54	65	N	(12)
<i>Not In Use</i>	66	78	X	(13)
Disposition of Patient	79	80	N	(2)
Expected Source of Payment	81	83	A/N	(3)
Principal Diagnosis	84	90	A/N	(7)
Other Diagnoses	91	258	A/N	(168)
External Causes of Morbidity	259	342	A/N	(84)
Principal Procedure	343	347	A/N	(5)
Other Procedures	348	467	A/N	(120)
Preferred Language Spoken	468	491	A/N	(24)
Total Charges	492	499	N	(8)
<i>Not In Use</i>	500	583	X	(84)

Footnotes are on the next page

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FOOTNOTES

¹Type & Size indicates data type and field length (in parentheses). Data type is defined as:

A = Alpha

N = Numeric

A/N = Alphanumeric

X = Unused

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FACILITY IDENTIFICATION NUMBER

Record Position: 1 through 6
Data Length: 6
Data Type: Numeric

Codes: Facility Identification Number (the unique facility number assigned by OSHPD)
This field is required for each record

ABSTRACT RECORD NUMBER (OPTIONAL)

Record Position: 7 through 18
Data Length: 12
Data Type: Alphanumeric

Codes: If not reported, the default value is all spaces

PATIENT'S SOCIAL SECURITY NUMBER

Record Position: 19 through 27
Data Length: 9
Data Type: Numeric

Codes: Enter the full 9-digit SSN including zeroes
DO NOT use hyphens
Enter 000000001 (Unknown) if the SSN is not recorded in the patient's medical record

ZIP CODE

Record Position: 28 through 32
Data Length: 5
Data Type: Alphanumeric

Codes: 5-digit ZIP Code

XXXXX = Unknown
YYYYY = Persons who do not reside in the U.S.
ZZZZZ = Homeless

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DATE OF BIRTH

Record Position: 33 through 40
Data Length: 8
Data Type: Numeric

Codes: 9999 99 99
Year Month Day

Special Instructions: Single-digit months and days must include a preceding zero
The transmittal process will populate the database field by moving the first 4 digits to the end of the field
EXAMPLE: Field in File equals 20040301
Database value will contain 03012004
The database value represents the date format mmdccyy

SEX

Record Position: 41
Data Length: 1
Data Type: Alpha

Codes: M Male
F Female
U Unknown

RACE

Record Position: 42 through 51
Maximum of 5 Race codes
Data Length: 10
Data Type: Alphanumeric

Codes: 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

Special Instructions: Fill from the left-most position and **DO NOT** skip fields

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ETHNICITY

Record Position: 52 through 53
Data Length: 2
Data Type: Alphanumeric

Codes: E1 Hispanic or Latino Ethnicity
E2 Non Hispanic or Latino Ethnicity
99 Unknown

SERVICE DATE

Record Position: 54 through 65
Data Length: 12
Data Type: Numeric

Codes: 9999 99 99
Year Month Day

Special Instructions: Single-digit months and days must include a preceding zero
The transmittal process will populate the database field by moving the first 4 digits to the end

EXAMPLE: Field in File equals 20040301
Database value will contain 03012004
The database value represents the date format mmdccyy

Date must be left-justified and space-filled

NOT IN USE

Record Position: 66 through 78
Data Length: 13
Data Type: Unused
Codes: Space-filled

DISPOSITION OF PATIENT

Record Position: 79 through 80
Data Length: 2
Data Type: Alphanumeric

Codes: 01 Discharged to home or self care (routine discharge)
02 Discharged/transferred to a short term general hospital for inpatient care

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DISPOSITION OF PATIENT (continued)

- Codes:
- 03 Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation of skilled care
 - 04 Discharged/transferred to a facility that provides custodial or supportive care (includes Intermediate Care Facility)
 - 05 Discharged/transferred to a designated cancer center or children's hospital
 - 06 Discharged/transferred to home under care of an 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
 - 43 Discharged/transferred to a federal health care facility
 - 50 Hospice - Home
 - 51 Hospice - Medical facility (certified) providing hospice level of 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 units 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)
 - 69 Discharged/transferred to a designated Disaster Alternative Care Site
 - 70 Discharged/transferred to another type of health care institution not defined elsewhere in this code list
 - 81 Discharged to home or self care with a planned acute care hospital inpatient readmission
 - 82 Discharged/transferred to a short term general hospital for inpatient care with a planned acute care hospital inpatient readmission
 - 83 Discharged/transferred to a skilled nursing facility (SNF) with Medicare certification with a planned acute care hospital inpatient readmission

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DISPOSITION OF PATIENT (continued)

- Codes:
- 84 Discharged/transferred to a facility that provides custodial or supportive care (includes Intermediate Care Facility) with a planned acute care hospital inpatient readmission
 - 85 Discharged/transferred to a designated cancer center or children's hospital with a planned acute care hospital inpatient readmission
 - 86 Discharged/transferred to home under care of organized home health service organization with a planned acute care hospital inpatient readmission
 - 87 Discharged/Transferred to court/law enforcement with a planned acute care hospital inpatient readmission
 - 88 Discharged/transferred to a federal health care facility with a planned acute care hospital inpatient readmission
 - 89 Discharged/transferred to a hospital-based Medicare approved swing bed with a planned acute care hospital inpatient readmission
 - 90 Discharged/transferred to an inpatient rehabilitation facility (IRF) including rehabilitation distinct part units of a hospital with a planned acute care hospital inpatient readmission
 - 91 Discharged/transferred to a Medicare certified long term care hospital (LTCH) with a planned acute care hospital inpatient readmission
 - 92 Discharged/transferred to a nursing facility certified under Medicaid (Medi-Cal) but not certified under Medicare with a planned acute care hospital inpatient readmission
 - 93 Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital with a planned acute care hospital inpatient readmission
 - 94 Discharged/transferred to a critical access hospital (CAH) with a planned acute care hospital inpatient readmission
 - 95 Discharged/transferred to another type of health care institution not defined elsewhere in this code list with a planned acute care hospital inpatient readmission
 - 00 Other

Special Instructions: Single digit values must include a preceding zero

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EXPECTED SOURCE OF PAYMENT

Record Position: 81 through 83
Data Length: 3
Data Type: Alphanumeric

Codes:

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

Special Instructions: Code must be left-justified and space-filled

PRINCIPAL DIAGNOSIS

Record Position: 84 through 90
Data Length: 7
Data Type: Alphanumeric

Codes: ICD-10-CM code set

Special Instructions: Code must be left-justified and space-filled
Do not include the decimal point in the data file

OTHER DIAGNOSES

Record Position: For each Other Diagnosis code:
91-97; 98-104; 105-111; 112-118; 119-125; 126-132; 133-139; 140-146; 147-153; 154-160; 161-167; 168-174; 175-181; 182-188; 189-195; 196-202; 203-209; 210-216; 217-223; 224-230; 231-237; 238-244; 245-251; and 252-258

Maximum of 24 Other Diagnoses codes, ending in position 258

Data Length: 7
Data Type: Alphanumeric

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OTHER DIAGNOSES (continued)

Codes:	ICD-10-CM code set
Special Instructions:	Codes must be left-justified and space-filled Fill from the left-most position and DO NOT skip fields Do not include the decimal point in the data file When there are no Other Diagnoses, the default value is all spaces Do not include External Cause codes in Other Diagnoses fields

EXTERNAL CAUSES OF MORBIDITY

Record Position:	For each External Cause of Morbidity code: 259-265; 266-272; 273-279; 280-286; 287-293; 294-300; 301-307; 308-314; 315-321; 322-328; 329-335; and 336-342
	Maximum of 12 External Cause codes, ending in position 342
Data Length:	7
Data Type:	Alphanumeric
Codes:	ICD-10-CM code set
Special Instructions:	Codes must be left-justified and space-filled Fill from the left-most position and DO NOT skip fields Do not include the decimal point in the data file When there are no Other External Cause codes, the default value is all spaces

PRINCIPAL PROCEDURE

Record Position:	343 through 347
Data Length:	5
Data Type:	Alphanumeric
Codes:	CPT-4 code set (Current Procedural Terminology, 4 th Edition)
Special Instructions:	When there is no Principal Procedure, the default value is all spaces

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OTHER PROCEDURES

Record Position:	For each Other Procedure code: 348-352; 353-357; 358-362; 363-367; 368-372; 373-377; 378-382; 383-387; 388-392; 393-397; 398-402; 403-407; 408-412; 413-417; 418-422; 423-427; 428-432; 433-437; 438-442; 443-447; 448-452; 453-457; 458-462; and 463- 467
	Maximum of 24 Other Procedure codes, ending in position 467
Data Length:	5
Data Type:	Alphanumeric
Codes:	CPT-4 code set (Current Procedural Terminology, 4 th Edition)
Special Instructions:	Fill from the left-most position and DO NOT skip fields When there are no Other Procedures, the default value is all spaces

PREFERRED LANGUAGE SPOKEN

Record Position:	468 through 491
Data Length:	24
Data Type:	Alphanumeric
Codes:	Refer to Section 97267, of the California ED and AS Data Reporting Manual
Special Instructions:	This is a free-text field Enter one 3-character PLS code listed in Section 97267 of the ED & AS Reporting Manual If the Preferred Language Spoken is not one of the codes listed enter the full name of the language, up to 24 characters 3-character PLS Codes from the ISO 639-2 Code List are also accepted

TOTAL CHARGES

Record Position:	492 through 499
Data Length:	8
Data Type:	Numeric
Codes:	Whole dollars only—no cents Code 99999999 for Total Charges exceeding 8 positions
Special Instructions:	Total Charges must be right-justified, zero-filled, and unsigned The default value is all zeroes

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NOT IN USE

Record Position:	500 through 583
Data Length:	84
Data Type:	Unused
Codes:	Space-filled