

**Email notice sent to hospital data reporting contacts on
December 10, 2013**

The updated specifications manual for **2014** reporting is now posted on the ADHS website here: <http://www.azdhs.gov/plan/crr/ddr/hospal/index.htm>

Since the release of the first 2014 manual in July, there have been two substantial changes to the 2014 specifications:

- 1) **Physician Reporting:** Following release of the physician reporting specification changes in the prior 2014 manual, this office received a significant number of complaints and concerns regarding the difficulty and burden of implementing those changes. In response to those concerns, we have searched for and found other means of addressing the issue of license number redundancy in Arizona. As a result, the specifications for physician reporting in 2014 will not change, but will remain the same as current (2013) requirements.

- 2) **Race and Ethnicity Reporting:** In response to the Meaningful Use standards, the reporting of Patient Race and Ethnicity in the Arizona state data will now be as two separate data elements. See Section C-16 of the state reporting manual for details. **Changes to your state report extract programming will be required to meet the new specifications.**

Regarding ICD-10-CM

The 2014-02 reporting period encompasses the national implementation of ICD-10-CM on October 1, 2014. The State of Arizona *will* transition to ICD-10-CM for hospital data reporting effective with all discharges occurring on or after October 1, 2014.

The Department has received inquiries regarding non-HIPAA covered entities that may not transition to ICD-10 on October 1, 2014. The Arizona statute that mandates hospital data reporting requires that hospital discharge data reporting substantially follow the federal Health and Human Services Title 18 (Medicare) and Title 19 (Medicaid) billing requirements. Therefore, all discharges occurring on/after October 1, 2014 must be reported with ICD-10 coding. **ICD-9-CM codes will *not* be accepted on discharges on or after the ICD-10-CM implementation date.**

Due to the timeframes of state reporting, the 2014-02 reporting period will have three months under ICD-9-CM and three months under ICD-10-CM.

When reporting 2014-02 data, the preferred method is that you report both ICD-9-CM (July - September discharges) and ICD-10-CM (October - December discharges) in a

single file (one file for Inpatient and one file for Emergency Department discharges, as appropriate), with the field *ICD_Version_Indicator* populated with “9” (for ICD-9) or “0” (for ICD-10). Please note that any individual record containing both ICD-9 and ICD-10 codes will be rejected. All records with a discharge date on or after October 1, 2014 must be appropriately coded with ICD-10-CM codes.

If your hospital has any issues or concerns regarding the submission of a single IP and/or ED file for the entire six-month 2014-02 reporting period, please contact ADHS for assistance.