Montana Hospital Association Guidelines

Purpose	The purpose of this document is to provide: • Montana Hospital Association Guidelines. • Detail submission of inpatient and outpatient data elements (Montana Data Specs). • Montana Outpatient Revenue Code Categories. • Counting Methods for inpatient and outpatient cases.
Montana Hospital Association	• The data collected are extremely useful for the MHA's Advocacy and Representation purposes. • COMPdata provides MHA members access to comparative reports that are used for market share analysis, strategic planning, quality and clinical improvement, physician analysis, and financial/charge comparisons. • All inpatient data and outpatient data elements as listed on Montana Data Specs. • All data should conform to UB-04 coding requirements. • Meeting your States or Association minimum compliance % of data loaded is 90%.
Montana Data Specs and File Format	Montana Data Specs and File Format: • MT File Format
Inpatient Data Elements Specs Definitions	COMPdata is collecting Inpatient data according to Montana Hospital Association guidelines. The UB bill types for original inpatient submission will be 110, 111, and 121. **If the patient was admitted as an *inpatient* as a result of an outpatient service, the patient is considered an *inpatient* admission.**

Outpatient Data Elements Specs	Montana Hospital outpatient submission requirements are for **Outpatient Surgical (OS), Outpatient Observation Care (OC), Emergency Department (ED), and Imaging (IM)**. The UB bill types for original outpatient submission will be 130, 131, 430, 431, 730, 731, 781, 830, 831, 850, and 851.

- **Outpatient Surgical (OS)** – cases with surgical procedure data are to be reported according to, generally, those that were conducted in a surgical suite or invasive procedure suite, based on a specific outpatient revenue code category range. The patient record must contain one of the specified revenue codes to specific revenue code range to qualify for inclusion in our Outpatient OS database. Patients are considered to be outpatient surgical cases if they received surgical services, but were not considered an inpatient. Included are patients with surgical services who stayed in Observation but were not designated as inpatient.

- **Observation Care (OC)** – cases with data in Revenue Code 0762. All Bill Types remain the same. The Revenue Code units should be reported in hours only. The patient record must contain Revenue Code 0762 to qualify for inclusion in our Outpatient OC database.

- **Emergency Department (ED)** – cases with data in Revenue Code series 045X or 068X submitted on a patient record. All Bill Types remain the same. The patient record must contain one of these Revenue Codes to qualify for inclusion in our Outpatient ED database.

- **Imaging Services (IM)** – patient record must contain one revenue code from the revenue code range specified on the outpatient revenue code category list to qualify case for imaging.

If the patient was admitted as an *inpatient* as a result of an outpatient service, the patient is considered an *inpatient* admission

Montana Outpatient Revenue Code Category:

Montana Outpatient Categories by Revenue Code Eff. 10/01/12
Outpatient Surgery
036X – Operating Room Services
0481 – Cardiac Cath Lab
049X – Ambulatory Surgical Care
0511 – Pain Management
0723 – Circumcision
075X – GI Services (endo/colo suite, etc.)
079X – Extra-Corporeal Shock Wave Therapy (formerly Lithotripsy)
Observation Care
0762 – Observation Room
Emergency Department
045X – Emergency Room
068X – Trauma Response
Imaging
032X – Radiology Diagnostic
0340, 0341, 0343, 0349 – Nuclear Medicine
035X – CT Scan
040X – Other Imaging Services
0483 – Echocardiogram Sonography
061X - MRI

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Counting Method	Facilities must report a Monthly Case Count figure for each inpatient and outpatient service category, which represents the patient volume for those services for any given month.

Data Coordinators must provide separate monthly case counts for each of the following:

<u>Inpatient:</u>
- Claims and encounter data pertaining to each inpatient discharged.
- Numeric number count of all inpatient cases.

<u>Outpatient Surgery (OS):</u>
- Information relating to any patient treated with an ambulatory surgical procedure within any of the general types of surgeries.
- Claims and encounter data pertaining to case data for each emergency department (ED) visit (wherever care is administered), and each observation (OC), and each Imaging (IM) case.
- Numeric number count of all outpatient cases as defined by the revenue code category list.

<u>Outpatient Revenue Hierarchy Counting Method:</u>

- Each outpatient case is counted ONLY ONCE.
- Revenue code counting hierarchy is listed in the table below from left to right.
- The first should include all Outpatient Surgical (OS) cases, as calculated previously, regardless of whether they include ED, OC, or IM services.
- The second count should include all Outpatient Observation Care (OC) records, regardless of whether they also contain Emergency Department.
- The third count should include all Emergency Department (ED) or Imaging (IM) records or that contain no OS or OC services.
- The fourth count should include all Imaging (IM) records that contain no OS, OC, or ED, IM counts are for patients who have Imaging Services ONLY.

Revenue Code Categories	Revenue Code Counting Hierarchy			
	OS	OC	ED	IM
OS	X			
OS & OC	X			
OS & ED	X			
OS & IM	X			
OS & OC & ED & IM	X			
OC		X		
OC & ED		X		
OC & IM		X		
OC & ED & IM		X		
ED			X	
ED & IM			X	
IM				X