

HDSS Bulletin

Issue 220: 26 March 2019

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Global update

220.1 Circulars

The following private hospital circulars have been released since the publication of HDSS Bulletin 219.

PHI circular	Subject
68/18	Pilot Projects
69/18	Eligibility of services for private health insurance general treatment benefits where they include elements of excluded natural therapies
70/18	2019 Private Health Insurance Premium Round Announcement
71/18	Private Health Insurance (Reforms) Amendment Rules 2018
72/18	Private Health Insurance (Benefit Requirements) Amendment Rules 2018 (No.6)
73/18	Changes to Second-Tier Eligible Hospitals
74/18	Administrative Changes to Second-Tier Hospital Applications
75/18	Circumstances where multiple procedures (including non-clinically necessary treatments) are provided in a single episode of care
76/18	Prostheses List – Critical Dates for March 2019
77/18	Hospital Declarations

PHI circular	Subject
01/19	Private Health Insurance Reform Data Collection – Request for Comment
02/19	Eligibility of "prehabilitation" services for private health insurance benefits
03/19	New Approved Form for Transfer Certificate
04/19	Hospital Declarations
05/19	Hospital Declarations and Second Tier Update
06/19	Private Health Insurance (Benefits Requirements) Amendment Rules 2019 (No.1)01/19
07/19	Prostheses List - Key Dates for November 2019
08/19	Private Health Insurance - Rebate Adjustment Factor Effective 1 April 2019
09/19	March 2019 Prostheses List – Benefit Changes
10/19	March 2019 Prostheses List – Delay in publication
11/19	Private Health Insurance (Accreditation) Amendment Rules 2019
12/19	Hospital Declarations and second tier update
13/19	March 2019 Prostheses List
14/19	Hospital Declarations
15/19	Amendment to March 2019 Prostheses List
16/19	Second-Tier Transitional Arrangements: Extended Eligibility
17/19	Hospital Declaration and Second-Tier Updates
18/19	Cessation of support for old AR-DRG versions
19/19	Nursing Home Type Patient Contribution Rates and Minimum Benefits as at 20 March 2019
20/19	Private Health Insurance Reform Data Collection

Use the following link to access 2019 circulars

<http://www.health.gov.au/internet/main/publishing.nsf/Content/health-phicirculars2019-index1>

No hospital circulars have been released since the publication of HDSS Bulletin 219. Hospital circulars are available at: <https://www2.health.vic.gov.au/about/news-and-events/hospitalcirculars>

220.2 New private hospitals/day procedure centres

The following new private hospitals/day procedure centres have been added to our reference file. An updated version of the reference file will be published later.

Campus code	Name	Effective from
7000	New Age Dental	1/10/2018
7230	Clinic of Cosmetic Medicine	1/10/2018
7430	The Hader Clinic	1/10/2018
7320	Nunyara Centre	1/01/2019

220.3 Updated postcode locality reference file

The following postcode locality combinations have been added to our reference file. An updated version of our reference file will be published later.

Postcode	Locality
2879	SUNSET STRIP
3364	JOYCES CREEK
5607	TIATUKIA
4300	SPRING MOUNTAIN
0873	CONNELLAN
2747	CADDENS

Victorian Admitted Episodes Dataset (VAED)

220.4 Update to Intention to Re-Admit, VAED manual 2019–20

From 1 July 2019 health services can report an intention to re-admit for patients transferred to another hospital campus. For example, a patient transferred to another hospital campus for a procedure (overnight stay) with re-admission planned to this campus the following day and booking arranged, would be reported with Separation Mode T *Transfer* and Intention to Re-Admit 1 *Re-admission planned to this hospital within 28 days and booking arranged*.

Following a help desk query, the following dot point has been added to Section 3 of VAED manual 2019–20 to provide clarification.

Intention to Re-Admit

Reporting guide

1, 2, 3 and 4 Re-admission planned

Includes:

- Re-admission is planned to this or another acute hospital within 28 days with or without a booking.
- Patient transferred (Separation Mode T), and re-admission is planned to this or another acute hospital within 28 days.
- Antenatal patient whose dates or medical condition indicate the birth could be within 28 days.

Excludes:

Separation Modes S, D, Z or G (use code 0 Not applicable).

Victorian Emergency Minimum Dataset (VEMD)

220.5 Addendum to Specification for revisions to VEMD for 1 July 2019

From 1 July 2019, new Departure Status codes will be available for telehealth presentations and transfers to a Mental Health and AOD Hub Short Stay Unit. Changes to the following validations were omitted from the Specification for revisions to VEMD for 1 July 2019.

E230 Departure Status invalid (change to function only)

E242 Referred to on Departure and Departure Status combination invalid (change to function only)

The Departure Status and Referred to on Departure business rules table has been updated in the specifications document.

Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH)

220.6 Correction of Specifications for revisions to VINAH for 1 July 2019 – Summary tables

A correction has been made to the Summary tables in the Specifications for revisions to VINAH for 1 July 2019. The Episode Care Plan Documented Date was shown to have removed HEN and VHS from the list of programs reporting to VINAH when it should have removed HEN and TPN.

Original table

PROGRAMS REPORTING TO VINAH														
DATA ELEMENT	FCP	HARP	HBPCCT	HEN	Medi-Hotel	OP	PAC	Palliative Care	RIR	SACS	TCP	TPN	VHS	VRSS
Episode Care Plan Documented Date	Y	Y		✗			Y		Y	Y	Y	Y	✗	Y

Updated table

PROGRAMS REPORTING TO VINAH														
DATA ELEMENT	FCP	HARP	HBPCCT	HEN	Medi-Hotel	OP	PAC	Palliative Care	RIR	SACS	TCP	TPN	VHS	VRSS
Episode Care Plan Documented Date	Y	Y		✗			Y		Y	Y	Y	✗	Y	Y

220.7 Correction of Specifications for revisions to VINAH for 1 July 2019 – Observation Bound Data Element

A correction has been made to Observation Bound Data Element in the Specifications for revisions to VINAH for 1 July 2019. The HL7 positions for referrals are now shown for Observation Bound Data Element since Referral In Outcome is now captured in the OBX segment of a Referral In message.

Definition A code that identifies the data element being transmitted in the HL7 observation code field.

Location	Transmission protocol	HL7 Submission
	Episode (insert)	PPP_PCB (OBX\OBX.3\CE.3)
	Episode (update)	PPP_PCC (OBX\OBX.3\CE.3)
	Episode (delete)	PPP_PCD (OBX\OBX.3\CE.3)
	Referral In (insert)	RRI_I12 (OBX\OBX.3\CE.3)
	Referral In (update)	RRI_I13 (OBX\OBX.3\CE.3)
	Referral In (delete)	RRI_I14 (OBX\OBX.3\CE.3)

A correction has also been made to Observation Bound Data Element in the code list. The new code for Referral In Outcome was missing from the list and is now included.

Data Element Name	Code Set Identifier	Code Set Type	Code	Descriptor	Reportable Requirements
Observation Bound Data Element	HL70396	Code Set	HL70283	Referral In Outcome	Reportable as of 01/07/2019

220.8 Addendum to Specification for revisions to VINAH for 1 July 2019

A number of health services and software vendors have commented that there are significant difficulties in implementing the changes to Referral In Outcome before 1 July 2019. To mitigate these issues, the following is an interim reporting guide for 2019–20:

- The reporting of multiple Referral In Outcome / Referral In Outcome Date will be optional for 2019–20, and mandatory for 2020–21. The change of Referral In Outcome to the new HL7 segment will remain, along with Referral In Outcome Date.
- For health services that are unable to track the changes to Referral In Outcome, it will be acceptable to report only the most recent change to Referral In Outcome/Referral In Outcome Date to the new HL7 position. The date reported should be a time stamp of when the Referral In Outcome was changed in the software system. Each update to the Referral In Outcome / Referral In Outcome Date can 'overwrite' the previous entry reported to VINAH.
- For referrals accepted 1 July 2019 onwards, if the Referral In Outcome Date is not provided a validation E371 will trigger as follows; 'E371 Data Element Referral In Outcome Date is mandatory but no value was supplied'
- For referrals accepted prior 1 July 2019, a Referral In Outcome Date is not required unless the Referral in Outcome has been updated to a new value. If a Referral In Outcome value has changed and no Referral In Outcome Date is reported, a validation E455 will trigger as follows; Referral In Outcome has changed but no Referral In Outcome Date was supplied.

These measures are in place in order to aid health services in transitioning to the new changes to Referral In Outcome for 2019–20. It is expected that all health services/vendors will be able to report timestamped audit trails of changes to the Referral In Outcome by 2020–21.

Contact details

The Data Collections unit manages several Victorian health data collections including:

- Victorian Admitted Episodes Dataset (VAED)
- Victorian Emergency Minimum Dataset (VEMD)
- Elective Surgery Information System (ESIS)
- Agency Information Management System (AIMS)
- Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH)
- F1 data collections (technical support)

The HDSS Bulletin is produced at intervals to provide:

- answers to common questions recently directed to the HDSS help desk
- communication regarding the implementation of revisions to data collection specifications, including notification of amendments to specified data collection reference tables
- feedback on selected data quality studies undertaken
- information on upcoming events

HDSS website	HDSS website
HDSS help desk (including standard reconciliation report requests)	
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Other data requests	
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To receive this publication in an accessible format phone (03) 9096 8595, using the National Relay Service 13 36 77 if required, or email HDSS.helpdesk@dhhs.vic.gov.au

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Available at [HDSS Bulletins](#)