

APPENDIX L

Validation changes

Changes between 2023-2024 and 2024-2025 collection periods

V1.0



Appendix L Validation changes

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Non-morbidity validation updates

The below changes to validations will come into effect for the Queensland Hospital Admitted Patient Data Collection (QHAPDC) from 1 July 2024.

Please refer the *2024-2025 Appendix L Validation Messages Explained* document for QHAPDC.

For queries regarding these amendments, please contact the QHAPDC team at QHIPSMail@health.qld.gov.au

Amendments

Validation Code	Type	Validation Description	Details of Change
H874	FTL	The Standard unit code has been reported as . This is invalid for a residential mental health care episode.	Validation logic has been updated to remove standard unit code of PYSD and PYRY. A Residential Health Care Facility should not report a standard unit code of PYSD or PYRY.
H875	FTL	The Standard unit code has been reported as . This can only be reported by residential mental health care facilities.	Validation logic has been updated to remove standard unit code PYSD and PYRY. A standard unit code of PYSA, PYSY or PYRY should only be reported by a Residential Health Care Facility.
H881	FTL	Account class is GPMLSSD or GPEMRC General public mental health long staying same day, but the reporting facility is not a residential mental health care facility.	Validation logic has been updated to include account class code of GPEMRC.
H439	FTL	Chargeable status is 1 Public or Account class code reflects public, but Funding source is not 01 Health service budget (not covered elsewhere), 10 Other hospital or public authority or 11 Health service budget (no charge raised due to hospital decision).	Updated message description to improve readability.
H494	FTL	The Transferring from facility (extended source code) is invalid or identifies a facility that has a closed date which is before the admission date.	Updated message description to include the check for invalid facilities that may be reported.
H495	FTL	The Transferring to facility code is invalid or identifies a facility that has a closed date which is before the Discharge date.	Updated message description to include the check for invalid facilities that may be reported.

Validation Code	Type	Validation Description	Details of Change
H894	FTL	The patient sex has been reported as X. Please confirm Sex and Gender (if applicable).	Update to message description and resolution text.
H136	FTL	The Diagnosis Related Group (DRG) cannot be derived due to data errors. Please review all validation errors for this episode.	Update to message description and resolution text.
H703	FTL	The Multidisciplinary care plan flag is missing for SNAP episode.	Update to message description and resolution text.
H705	FTL	The Proposed principal referral service code is missing or invalid for SNAP episode.	Update to message description and resolution text.

New Validations

Validation Code	Type	Validation Description	Details
H954	FTL	The patient's reported first given name is not a true name. Please advise.	New validation to identify blank spaces or tab characters that have been included in the patient's first given name.
H955	FTL	The patient's reported second given name is not a true name. Please advise.	New validation to identify blank spaces or tab characters that have been included in the patient's second given name.
H956	FTL	The patient's reported surname is not a true name. Please advise.	New validation to identify blank spaces or tab characters that have been included in the patient's surname.
H953	FTL	The Account class been reported as GPE. This is invalid for a residential mental health care episode.	A Residential Health Care Facility should not report an account class of General Public Eligible (GPE).

End-dated Validations

Validation Code	Type	Validation Description	Details of Change
H370	FTL	Patient admitted/transferred to a SNAP ward but facility did not have a designated SNAP unit as at .	The QHAPDC no longer maintains a list of facilities that have a designated SNAP ward.
H546	FTL	This episode could not be allocated a SNAP v4 class due to an error occurring within SNAP episode ().	From 01 July 2024 Healthcare Purchasing and Funding Branch (HPFB) will fund SNAP activity using AN-SNAP v5 instead of v4. SSB will continue to derive both v4 and v5 of the AN-SNAP class.

Morbidity validation updates

ICD-10-AM/ACHI Code Twelfth Edition updates

The below changes to morbidity validations will come into effect for the Queensland Hospital Admitted Patient Data Collection (QHAPDC) from 1 July 2024.

All new and amended validations have been included in QHAPDC Manual 2024/2025 Appendix L Validation Messages Explained (<https://www.health.qld.gov.au/hsu/collections/qhapdc>).

For queries regarding these amendments, please contact the Data Quality Team at dataquality@health.qld.gov.au.

Amendments

Validation Code	Type	Validation Description	Details of Change
H550	FTL	Code is only valid for patients between and . This patient is .	Removal of 0 to 1 years age range requirement for A74.0 <i>Chlamydial conjunctivitis</i> .
H565	FTL	Code must be provided with a code in the range .	<ul style="list-style-type: none"> Removal of combination requirement of O70.0 <i>First degree perineal laceration during delivery</i> with 90485-00 <i>Other suture of current obstetric laceration or rupture without perineal involvement</i>, 90472-00 <i>Episiotomy</i>, 90479-00 <i>Suture of current obstetric laceration of vagina</i>. Removal of combination requirement of O70.1 <i>Second degree perineal laceration during delivery</i> with 90485-00 <i>Other suture of current obstetric laceration or rupture without perineal involvement</i> and 90472-00 <i>Episiotomy</i>. Removal of combination requirement of O70.2 <i>Third degree perineal laceration during delivery</i> with 90472-00 <i>Episiotomy</i>.
H565	FTL	Code must be provided with a code in the range .	Removal of combination requirement of 90482-00 <i>Manual removal of placenta</i> with Z37.0 <i>Single live birth</i> and Z37.9 <i>Outcome of delivery, unspecified</i> .
H820	FTL	Code must be accompanied by a code in the range .	<p>Addition of space between vertical bars to have visibility of code identifier in message description.</p> <p>Addition of O09.5 combination requirement when O04-O07 <i>Pregnancy with abortive outcome</i> is assigned with O80-O84 <i>Delivery</i>.</p>

			O09.3 <i>Duration of pregnancy 20–25 completed weeks</i> , O09.4 <i>26–33 completed weeks</i> or O09.5 <i>34–36 completed weeks</i> must be assigned when O04-O07 <i>Pregnancy with abortive outcome</i> is assigned with O80-O84 <i>Delivery</i> .
H561	FTL	Code must be immediately preceded by a code in the range .	Addition of combination requirement of U93 <i>Extended spectrum beta-lactamase [ESBL] producing organism with Z16.- Resistance to other antimicrobials</i> range.
H565	FTL	Code must be provided with a code in the range .	Removal of combination requirement of O85 <i>Puerperal Sepsis</i> with A41.9 <i>Sepsis, Unspecified</i> .
H565	FTL/ WRN	Code must be provided with a code in the range .	Removal of T81.2 <i>Accidental puncture and laceration during a procedure, not elsewhere classified</i> from ICDSEQ H565 validation.
H614	FTL/ WRN	Code does not match diagnosis site code. Please review excludes notes.	Addition of T81.2 <i>Accidental puncture and laceration during a procedure, not elsewhere classified</i> to ICD H614 validation as <i>Warning</i> message category.
H565	FTL	Code must be provided with a code in the range .	Addition of combination requirement of Z32.2 <i>Initiation of medical abortion</i> with 35677-03 <i>Fetotoxic management for removal of ectopic pregnancy</i> .
H684	WRN	The Smoking status has been reported as 1 <i>Current smoker</i> within the last 30 days, but the morbidity coding does not include; .	Amendment from <i>Fatal</i> to <i>Warning</i> message category. Addition of combination requirement of F17.1 <i>Mental and behavioural disorders due to use of tobacco, harmful use</i> with Smoking status 1 <i>Reported as a current smoker within the last 30 days</i> .
H890	FTL/ WRN	Diagnosis code should have a Condition onset flag of 2 <i>Condition arose during the episode of care</i>	Amendment to <i>Warning</i> message category and addition of combination requirement of Condition onset flag (COF) of 2 <i>Condition arose during the episode of care</i> with <ul style="list-style-type: none"> • Z53.0 <i>Procedure not carried out because of contraindication</i> • Z53.1 <i>Procedure not carried out because of patient's decision for reasons of belief or group pressure</i> • Z53.2 <i>Procedure not carried out because of patient's decision for other and unspecified reasons</i> • Z53.8 <i>Procedure not carried out for other reasons</i>

			<ul style="list-style-type: none"> • Z53.9 Procedure not carried out, unspecified reason.
H55	FTL	Code is not valid or is the wrong ICD-10-AM/ACHI version for this episode.	Removal of 88000-03 [8888] Provisional use of 88000-03 [8888] [Personalised external aortic root support] from this validation.
H655	FTL	Code must have a Condition onset flag of 1 Condition present on admission to the episode of care.	Removal of P03 Fetus and newborn affected by other complications of labour and delivery and P10-P15 Birth trauma ranges from ICD H655
H890	FTL/ WRN	Diagnosis code should have a Condition onset flag of 2 Condition arose during the episode of care.	Removal of P10-P15 Birth trauma ranges from ICD H890 validations.
H565	FTL	Code must be provided with a code in the range .	Removal of combination requirement in ICDSEQ H565 of O80-O84 Delivery with Z37 Outcome of Delivery.
H559	FTL / WRN	Code is a rare code. Please confirm and provide details of the documentation that supports assignment of this rare code.	Update of message description.
H826	WRN / FTL	Code has been assigned. Please confirm.	Update to resolution text.

New Validations

Validation Code	Type	Validation Description	Details of Change
H951	FTL	Code with Source of referral should have a Condition onset flag of .	<p>Creation of ICD H951 validation for P03 and P10-P15 combination requirement of:</p> <ul style="list-style-type: none"> • COF 2 <i>Condition arose during the episode of care when SoR is 09 Born in hospital</i> • COF 1 <i>Condition present on admission to the episode of care when SoR is not 09 Born in hospital.</i>
H952	FTL	Code must be provided with a code in the range but not with and .	<p>Creation of ICD H952 validation for combination requirement of O80 to O84 <i>Delivery</i> ranges with Z37 <i>Outcome of Delivery</i> range, unless episode of care has the following codes:</p> <p>O04 <i>Medical abortion</i> range with <i>Duration of pregnancy</i> codes:</p> <ul style="list-style-type: none"> • O09.0 <i>Less than 5 completed weeks</i> • O09.1 <i>5 -13 completed weeks</i> • O09.2 <i>14-19 completed weeks.</i>