

Appendix A

Table A-1

**Verification of Discharge Disposition Code
Pre-Policy Change Period**

<u>EPISODE FILE</u>	<u>DISCHARGE DISPOSITION CODE</u>				
	<u>PPS-Exempt</u>	<u>Home Health</u>	<u>SNF</u>	<u>Non-PAC Transfer</u>	<u>Total</u>
PPS-Exempt	67,084	378	6,128	13,473	87,063
Total %	12.2%	0.1%	1.1%	2.5%	15.9%
Column %	69.4	0.8	3.0	6.8	
Row %	77.1	0.4	7.0	15.5	
Home Health	610	31,012	771	25,782	58,175
Total %	0.1	5.7	0.1	4.7	10.6
Column %	0.6	63.0	0.4	12.9	
Row %	1.0	53.3	1.3	44.3	
SNF	14,471	1,094	159,824	26,628	202,017
Total %	2.6	0.2	29.2	4.9	36.9
Column %	15.0	2.2	78.8	13.4	
Row %	7.2	0.5	79.1	13.2	
Non-PAC Transfer	14,529	16,744	36,180	133,260	200,713
Total %	2.7	3.1	6.6	24.3	36.6
Column %	15.0	34.0	17.8	66.9	
Row %	7.2	8.3	18.0	66.4	
Total	96,694	49,228	202,903	199,143	547,968
Total %	17.6	9.0	37.0	36.3	100.0

NOTES:

Pre-policy change period includes all claims from 10/1/97-9/30/98.

Discharge destination codes include '3' for PPS-Exempt, '5' for SNF and '6' for HHA.

Episode-level file created by linking PPS patient and discharge date with PAC patient and date of admission or visit.

PPS-exempt includes rehabilitation, psychiatric, children's, cancer or other specialty hospitals and units.

Non-PAC transfers include PPS discharges without same-day PAC readmission or within 3-day HH visit.

SOURCE: MedPAR, 1997-1998; Home Health SAF, 1997-1999; and Inpatient SAF, 1999.

Table A-2

**Verification of Discharge Disposition Code
Post-Policy Change Period**

<u>EPISODE FILE</u>	<u>DISCHARGE DISPOSITION CODE</u>				
	<u>PPS-Exempt</u>	<u>Home Health</u>	<u>SNF</u>	<u>Non-PAC Transfer</u>	<u>Total</u>
PPS-Exempt	66,406	344	5,434	10,319	82,503
<i>Total %</i>	<i>13.6%</i>	<i>0.1%</i>	<i>1.1%</i>	<i>2.1%</i>	<i>16.9%</i>
<i>Column %</i>	<i>72.2</i>	<i>0.7</i>	<i>3.0</i>	<i>6.1</i>	
<i>Row %</i>	<i>80.5</i>	<i>0.4</i>	<i>6.6</i>	<i>12.5</i>	
Home Health	609	30,665	579	16,420	48,273
<i>Total %</i>	<i>0.1</i>	<i>6.3</i>	<i>0.1</i>	<i>3.4</i>	<i>9.9</i>
<i>Column %</i>	<i>0.7</i>	<i>62.7</i>	<i>0.3</i>	<i>9.7</i>	
<i>Row %</i>	<i>1.3</i>	<i>63.5</i>	<i>1.2</i>	<i>34.0</i>	
SNF	10,162	677	141,855	17,199	169,893
<i>Total %</i>	<i>2.1</i>	<i>0.1</i>	<i>29.1</i>	<i>3.5</i>	<i>34.8</i>
<i>Column %</i>	<i>11.1</i>	<i>1.4</i>	<i>79.4</i>	<i>10.2</i>	
<i>Row %</i>	<i>6.0</i>	<i>0.4</i>	<i>83.5</i>	<i>10.1</i>	
Non-PAC Transfer	14,768	17,203	30,744	124,487	187,202
<i>Total %</i>	<i>3.0</i>	<i>3.5</i>	<i>6.3</i>	<i>25.5</i>	<i>38.4</i>
<i>Column %</i>	<i>16.1</i>	<i>35.2</i>	<i>17.2</i>	<i>73.9</i>	
<i>Row %</i>	<i>7.9</i>	<i>9.2</i>	<i>16.4</i>	<i>66.5</i>	
Total	91,945	48,889	178,612	168,425	487,871
<i>Total %</i>	<i>18.8</i>	<i>10.0</i>	<i>36.6</i>	<i>34.5</i>	<i>100.0</i>

NOTES:

Post-policy change period includes all claims from 10/1/98-3/31/99.

Discharge destination codes include '3' for PPS-Exempt, '5' for SNF and '6' for HHA.

Episode-level file created by linking PPS patient and discharge date with PAC patient and date of admission or visit.

PPS-exempt includes rehabilitation, psychiatric, children's, cancer or other specialty hospitals and units.

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SOURCE: MedPAR, 1997-1998; Home Health SAF, 1997-1999; and Inpatient SAF, 1999.

