

# APPENDIX L

## Validation changes

Changes between 2020-2021 and 2021-2022 collection periods

V0.1



## Appendix L Validation changes

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For more information contact: Statistical Services and Integration Unit, Statistical Services Branch, Department of Health, GPO Box 48, Brisbane QLD 4001, email [QHIPSMAIL@health.qld.gov.au](mailto:QHIPSMAIL@health.qld.gov.au).

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## Amendments

Validation Code	Type	Validation Description	Details of Change
H285	Fatal	This episode is a duplicate of an episode already sent with patient ID   episode ID  , facility unique ID   and start date  . This episode has not been loaded.	The validation type has been changed from Warning to Fatal.
H437	Warning	Contract role is A Contracting hospital and Contract type is 2 ABA, but this patient has either been transferred from or transferred to hospital B.	The validation type has been changed from Fatal to Warning.
H493	Fatal	The Standard ward code has been reported as HOME, but care type is not 01 Acute, 05 Newborn, 09 Geriatric Evaluation and Management, 11 Maintenance, 12 Mental Health, 20 Rehabilitation, or 30 Palliative.	The validation has been updated to include care type 12 Mental Health.
H550	Fatal	Code    is only valid for patients between   and  . This patient is  .	<p>The validation has been updated to incorporate:</p> <ul style="list-style-type: none"> <li>Codes in the range E09, E11-E14 <i>Intermediate hyperglycaemia and diabetes mellitus</i> validation age range added for 10 years or less.</li> <li>I10 <i>Essential (primary) hypertension</i> age range amended from 15 – 124 years to 8 - 124 years. Validation severity amended from Warning to Fatal.</li> <li>Z97.5 <i>Presence of contraceptive device</i> age range amended from 15 – 124 years to 10 - 60 years.</li> </ul>
H552	Fatal	For code    the patient should be  . This patient is  .	<p>Sex validation requirement has been removed from a number of neoplasm and morphology codes.</p> <p>The codes related to this validation can be viewed on the Corporate Reference Data System (CRDS):  <a href="https://oascrasprod.health.qld.gov.au:8890/pls/crd_prd/f?p=144:ICD_DS::CLEAR:NO:ICD_DS:P16_SEARCH_TYPE:R">https://oascrasprod.health.qld.gov.au:8890/pls/crd_prd/f?p=144:ICD_DS::CLEAR:NO:ICD_DS:P16_SEARCH_TYPE:R</a></p>

Validation Code	Type	Validation Description	Details of Change
H559	Fatal	Code    is a rare code. Please confirm.	The validation severity amended from Warning to Fatal for A81.0 <i>Creutzfeldt-Jakob disease</i> .
H562	Fatal	Code    must be preceded by a code in the range  .	The validation has been amended to include D47.1 <i>Chronic myeloproliferative disease</i> as a valid companion code that can be assigned with M9966/3 <i>Myeloid neoplasms with PDGFRB rearrangement</i> .
H565	Warning and Fatal	Code    must be provided with a code in the range  .	<p>The validation has been updated to incorporate:</p> <ul style="list-style-type: none"> <li>• Addition of valid companion codes that can be assigned with N08.0* <i>Glomerular disorders in infections and parasitic diseases classified elsewhere</i> to include: <ul style="list-style-type: none"> <li>- codes in the range A41.5- <i>Sepsis due to other and unspecified Gram-negative organisms</i></li> <li>- A41.8 <i>Other specified sepsis</i></li> <li>- A41.9 <i>Sepsis, unspecified</i>.</li> </ul> </li> <li>• Implementation of requirement for O85 <i>Puerperal sepsis</i> to be assigned with valid companion code(s): <ul style="list-style-type: none"> <li>- Identified Chapter 1 ICD-10-AM codes as per Index (please see CRDS)</li> <li>- Codes in the range B95 – B97 <i>Bacterial, viral and other infectious agents</i></li> <li>- N71.0 – N71.9 <i>Inflammatory disease of uterus, except cervix</i></li> <li>- N73.3 <i>Female acute pelvic peritonitis</i></li> <li>- N73.5 <i>Female pelvic peritonitis, unspecified</i>.</li> </ul> </li> <li>• Addition of valid companion codes that can be assigned with Block [239] <i>Procedures for ectropion or entropion</i> to include Q10.3 <i>Other congenital malformations of eyelid</i>.</li> <li>• Amendment to refine the valid companion codes that can be assigned with 38393-00 [653] <i>Insertion of cardiac defibrillator generator</i>.</li> </ul>

Validation Code	Type	Validation Description	Details of Change
			<ul style="list-style-type: none"> <li>- Addition of valid companion code 38390-00 [649] <i>Insertion of patches for cardiac defibrillator.</i></li> <li>- Removal of 38368-00 [648] <i>Insertion of permanent transvenous electrode into left ventricle for cardiac pacemaker</i></li> <li>- Removal of 38350-00 [648] <i>Insertion of permanent transvenous electrode into other heart chamber(s) for cardiac pacemaker</i></li> <li>- Removal of 38473-00 [649] <i>Insertion of permanent epicardial electrode for cardiac pacemaker via subxyphoid approach</i></li> <li>- Removal of 38470-00 [649] <i>Insertion of permanent epicardial electrode for cardiac pacemaker via thoracotomy or sternotomy</i></li> <li>- Removal of 38654-00 [649] <i>Insertion of permanent left ventricular electrode for cardiac pacemaker via thoracotomy or sternotomy.</i></li> </ul>
H570	Fatal	Code    cannot be provided with codes in the range  .	<p>The validation has been updated to incorporate:</p> <ul style="list-style-type: none"> <li>• Codes in the range J03 <i>Acute tonsillitis</i> should not be assigned with: <ul style="list-style-type: none"> <li>- J02.0 <i>Streptococcal pharyngitis</i></li> <li>- J02.8 <i>Acute pharyngitis due to other specified organisms</i></li> <li>- J02.9 <i>Acute pharyngitis, unspecified</i></li> <li>- J36 <i>Peritonsillar abscess.</i></li> </ul> </li> <li>• Codes in the range J01 <i>Acute sinusitis</i> should not be assigned with codes in the range J32 <i>Chronic sinusitis.</i></li> <li>• K90.4 <i>Malabsorption due to intolerance, not elsewhere classified</i> should not be assigned with:</li> </ul>

Validation Code	Type	Validation Description	Details of Change
			<ul style="list-style-type: none"> <li>- K90.0 <i>Coeliac disease</i></li> <li>- E73.0 <i>Congenital lactase deficiency</i></li> <li>- E73.1 <i>Secondary lactase deficiency</i></li> <li>- E73.8 <i>Other lactose intolerance</i></li> <li>- E73.9 <i>Lactose intolerance, unspecified.</i></li>   <li>• Z30.5 <i>Surveillance of contraceptive device</i> should not be assigned with Z30.1 <i>Insertion of contraceptive device.</i></li>   <li>• O61.8 <i>Other failed induction of labour</i> and O61.9 <i>Failed induction of labour, unspecified</i> should not be assigned with: <ul style="list-style-type: none"> <li>- 90465-00 [1334] <i>Medical induction of labour, oxytocin</i></li> <li>- 90465-01 [1334] <i>Medical induction of labour, prostaglandin</i></li> <li>- 90465-02 [1334] <i>Other medical induction of labour</i></li> <li>- 90465-03 [1334] <i>Surgical induction of labour by artificial rupture of membranes [ARM]</i></li> <li>- 90465-04 [1334] <i>Other surgical induction of labour</i></li> <li>- 90465-05 [1334] <i>Medical and surgical induction of labour.</i></li> </ul> </li>   <li>• 90465-03 [1334] <i>Surgical induction of labour by artificial rupture of membranes [ARM]</i> should not be assigned with: <ul style="list-style-type: none"> <li>- 90465-00 [1334] <i>Medical induction of labour, oxytocin</i></li> <li>- 90465-01 [1334] <i>Medical induction of labour, prostaglandin</i></li> <li>- 90465-02 [1334] <i>Other medical induction of labour.</i></li> </ul> </li>   <li>• 90465-04 [1334] <i>Other surgical induction of labour</i> should not be assigned with:</li> </ul>

Validation Code	Type	Validation Description	Details of Change
			<ul style="list-style-type: none"> <li>- 90465-00 [1334] <i>Medical induction of labour, oxytocin</i></li> <li>- 90465-01 [1334] <i>Medical induction of labour, prostaglandin</i></li> <li>- 90465-02 [1334] <i>Other medical induction of labour.</i></li> <li>• 90465-05 [1334] <i>Medical and surgical induction of labour</i> should not be assigned with: <ul style="list-style-type: none"> <li>- 90465-00 [1334] <i>Medical induction of labour, oxytocin</i></li> <li>- 90465-01 [1334] <i>Medical induction of labour, prostaglandin</i></li> <li>- 90465-02 [1334] <i>Other medical induction of labour</i></li> <li>- 90465-03 [1334] <i>Surgical induction of labour by artificial rupture of membranes [ARM]</i></li> <li>- 90465-04 [1334] <i>Other surgical induction of labour.</i></li> </ul> </li> <li>• 90466-00 [1335] <i>Medical augmentation after onset of labour</i> should not be assigned with 90466-01 [1335] <i>Surgical augmentation of labour.</i></li> <li>• 90466-02 [1335] <i>Medical and surgical augmentation of labour</i> should not be assigned with 90466-00 [1335] <i>Medical augmentation after onset of labour</i> or 90466-01 [1335] <i>Surgical augmentation of labour.</i></li> </ul>
H586	Fatal	Code    cannot be performed at facility  . Please review and amend data.	The validation has been amended to enable procedures that are performed via a contract can be performed at the contracted facility without triggering this validation.
H614	Fatal	Code    does not match diagnosis site code. Please review excludes notes.	<p>The validation has been updated to incorporate:</p> <ul style="list-style-type: none"> <li>• Amendment to refine the valid companion codes that can be assigned with 47528-01 [1486] <i>Open reduction of fracture of femur.</i> <ul style="list-style-type: none"> <li>- Addition of M96.6 <i>Fracture of bone following insertion of</i></li> </ul> </li> </ul>



Validation Code	Type	Validation Description	Details of Change
			<p><i>orthopaedic implant, joint prosthesis, or bone plate</i></p> <ul style="list-style-type: none"> <li>- Removal of T85.88 <i>Other complications of internal prosthetic device, implant and graft, not elsewhere classified</i></li> <li>- Removal of T85.6 <i>Mechanical complication of internal prosthetic devices, implants and grafts, not elsewhere classified.</i></li> </ul>
H655	Fatal	Code   must have a Condition onset flag of 1 Condition present on admission to the episode of care.	The validation severity amended from Warning to Fatal for E11.9 <i>Type 2 diabetes mellitus without complication.</i>
H683	Fatal	The Smoking status has been reported as 2 Not a smoker or 9 Not reported, but the morbidity coding includes  .	The validation has been updated to incorporate codes: <ul style="list-style-type: none"> <li>• F17.1 <i>Mental and behavioural disorders due to use of tobacco, harmful use</i></li> <li>• F17.2 <i>Mental and behavioural disorders due to use of tobacco, dependence syndrome</i></li> <li>• F17.3 <i>Mental and behavioural disorders due to use of tobacco, withdrawal state.</i></li> </ul>
H911	Fatal	<p>Procedure normally not coded assigned for multiday episode of care. Please review  .</p> <p>Note: The message for this validation has changed from 'Pharmacotherapy assigned for multi day stay' to 'Procedure normally not coded assigned for multiday episode of care. Please review  .'</p>	<p>The validation has been amended to include multiple interventions normally not coded for overnight episodes of care as described in Australian Coding Standards 0042 <i>Procedures normally not coded.</i> The codes added to the current validation include:</p> <ul style="list-style-type: none"> <li>• 92057-00 [1857] <i>Telemetry</i></li> <li>• 96096-00 [1871] <i>Oral nutritional support</i></li> <li>• 96196-19 [1920] <i>Intra-arterial administration of pharmacological agent, other and unspecified pharmacological agent</i></li> <li>• 96197-19 [1920] <i>Intramuscular administration of pharmacological</i></li> </ul>

Validation Code	Type	Validation Description	Details of Change
			<p><i>agent, other and unspecified pharmacological agent</i></p> <ul style="list-style-type: none"> <li>• 96198-19 [1920] <i>Intrathecal administration of pharmacological agent, other and unspecified pharmacological agent</i></li> <li>• 96200-19 [1920] <i>Subcutaneous administration of pharmacological agent, other and unspecified pharmacological agent</i></li> <li>• 96201-19 [1920] <i>Intracavitary administration of pharmacological agent, other and unspecified pharmacological agent</i></li> <li>• 96202-19 [1920] <i>Enteral administration of pharmacological agent, other and unspecified pharmacological agent</i></li> <li>• 96203-19 [1920] <i>Oral administration of pharmacological agent, other and unspecified pharmacological agent</i></li> <li>• 96205-19 [1920] <i>Other administration of pharmacological agent, other and unspecified pharmacological agent</i></li> <li>• 96206-19 [1920] <i>Unspecified administration of pharmacological agent, other and unspecified pharmacological agent.</i></li> </ul>

## New Validations

Validation Code	Type	Validation Description	Details of Change
H928	Warning	An involuntary mental health legal status has been reported for this episode. Please confirm.	New validation checks the mental health legal status reported for the private facility episode. Please confirm if correct or amend as appropriate.

Validation Code	Type	Validation Description	Details of Change
H933	Fatal	Newborn weight < 1000 gm with non specific principal diagnosis. Please confirm.	<p>New validation flags newborn episodes of care where:</p> <ul style="list-style-type: none"> <li>• birth weight of less than 1000 grams</li> <li>• age is less than 14 days</li> <li>• principal diagnosis is not: <ul style="list-style-type: none"> <li>- P07.01 <i>Extremely low birth weight 499g or less</i></li> <li>- P07.02 <i>Extremely low birth weight 500-749g</i></li> <li>- P07.03 <i>Extremely low birth weight 750-999g</i></li> <li>- P07.21 <i>Extreme immaturity, less than 24 completed weeks</i></li> <li>- P07.22 <i>Extreme immaturity, 24 or more completed weeks but less than 28 completed weeks</i></li> <li>- P07.30 <i>Preterm infant, unspecified</i></li> <li>- P07.31 <i>Preterm infant, 28 or more completed weeks but less than 32 completed weeks.</i></li> </ul> </li> <li>• Source of referral is not 24 Admitted patient transferred from other hospital or 09 Born in hospital, or Mode of separation is not 05 Died in hospital or 16 Hospital Transfer.</li> </ul>
H934	Fatal	Overlapping episodes of care. Please confirm discharge date/time for admitted episode of care 1 and admission date/time for admitted episode of care 2.	<p>This validation flags public facility episodes of care at the same facility where episode 1 has the exact same discharge date/time as the start date/time for episode 2.</p> <p>Validation requirements:</p> <ul style="list-style-type: none"> <li>• Public facilities only</li> <li>• Same facility for both episodes of care</li> <li>• Episode 1 date/time of discharge is the same as Episode 2 admission date/time.</li> <li>• Episode 1 Mode of separation is equal to 06 Episode change and/or Episode 2 Source of referral is equal to 06 Episode change.</li> </ul>

Validation Code	Type	Validation Description	Details of Change
			This validation relates to previous Overlapping report data queries.

## Deletions

Validation Code	Type	Validation Description	Details of Change