

APPENDIX L

Validation changes

Changes between 2024-2025 and 2025-2026 collection periods

V1.0



Appendix L Validation changes

Published by the State of Queensland (Queensland Health), July 2025



This document is licensed under a Creative Commons Attribution 3.0 Australia licence. To view a copy of this licence, visit creativecommons.org/licenses/by/3.0/au

© State of Queensland (Queensland Health) 2025

You are free to copy, communicate and adapt the work, as long as you attribute the State of Queensland (Queensland Health).

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

An electronic version of this document is available at <https://www.health.qld.gov.au/hsu/collections/ghapdc>

Disclaimer: The content presented in this publication is distributed by the Queensland Government as an information source only. The State of Queensland makes no statements, representations or warranties about the accuracy, completeness or reliability of any information contained in this publication. The State of Queensland disclaims all responsibility and all liability (including without limitation for liability in negligence) for all expenses, losses, damages and costs you might incur as a result of the information being inaccurate or incomplete in any way, and for any reason reliance was placed on such information.

Table of Contents

Non-morbidity validation updates	4
Amendments	4
New Validations.....	4
End-dated Validations.....	5
Morbidity validation updates.....	6
ICD-10-AM/ACHI Code updates	6
Amendments	6
New Validations.....	8
End-dated Validations.....	9
ICD-10-AM/ACHI Code Thirteenth Edition updates.....	10
Amendments	10
New Validations.....	12

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 2025.

Please refer the *2025-2026 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
H954	FTL	The patient's reported first given name contains a blank space or tab characters at the beginning or end of the name. Please advise.	Update to validation description to assist with resolution of validation.
H955	FTL	The patient's reported second given name contains a blank space or tab characters at the beginning or end of the name. Please advise.	Update to validation description to assist with resolution of validation.
H956	FTL	The patient's reported surname contains a blank space or tab characters at the beginning or end of the name. Please advise.	Update to validation description to assist with resolution of validation.

New Validations

Validation Code	Type	Validation Description	Details of Change
H960	FTL	The (Suburb/Postcode/State) is null. Please provide details.	This validation will generate if the suburb, postcode or state id is blank.
H962	FTL	The source of referral emergency department or outpatient department (this hospital) is not suitable for a residential mental health care facility that does not have an emergency department or outpatient department. Please adjust source of referral to indicate if the patient was transferred from a hospital.	This validation will generate for residential mental health care facilities where the source of referral has been recorded as emergency department or outpatient department and the residential mental health care facility does not have an emergency department or outpatient department.

End-dated Validations

Validation Code	Type	Validation Description	Details of Change

Morbidity validation updates

ICD-10-AM/ACHI Code updates

The below changes to morbidity validations will come into effect for the Queensland Hospital Admitted Patient Data Collection (QHAPDC) from 1 July 2025.

All new and amended validations have been included in QHAPDC Manual 2025/2026 Appendix L Validation Messages Explained (<https://www.health.qld.gov.au/hsu/collections/ghapdc>).

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
H564	FTL	Code must be followed by a code in the range .	<p>Correction of codes required following assignment of L23.0-L23.9 <i>Allergic contact dermatitis</i>.</p> <p>Valid code combinations for codes in the range L23.0 to L23.9 <i>Allergic contact dermatitis</i> are required or the validation will generate.</p> <p>L23 codes must be followed with an external cause code Y37.0 to Y37.9 and also followed by a place of occurrence code Y92.0 to Y92.9.</p>
H565	FTL	Code must be provided with a code in the range .	<p>Correction of codes required following assignment of codes in blocks:</p> <p>[1334] <i>Medical or surgical induction of labour</i>, and [1335] <i>Medical or surgical augmentation of labour</i>.</p> <p>Valid code combinations for codes in the above blocks are required or the validation will generate.</p> <p>These codes must be assigned with: Codes between ICD O10 and O99, Z34.0 to Z34.9 <i>Supervision of normal pregnancy</i>, or Z35.0 – Z35.9 <i>Supervision of high-risk pregnancy</i>.</p>
H565	WRN	Code must be provided with a code in the range .	<p>Correction of code required following assignment of O85 <i>Puerperal sepsis</i>.</p> <p>Valid code combinations for code O85 <i>Puerperal sepsis</i> are required or the validation will generate.</p>

			<p>This code must be assigned with a code from A00–B99 <i>Certain infectious and parasitic diseases</i> excluding A41.9 <i>Sepsis, unspecified</i>.</p> <p>This validation also changed from a Fatal to Warning message category.</p>
H565	FTL	Code must be provided with a code in the range .	<p>Correction of code required following assignment of Z48.8 <i>Other specified surgical follow-up care</i>.</p> <p>A valid code combination for code Z48.8 <i>Other specified surgical follow-up care</i> is required or the validation will generate.</p> <p>This code must be assigned with an additional code for the condition that required surgery.</p>
H911	FTL	Intervention normally not coded assigned for multiday episode of care. Please review .	<p>This validation generates if specified codes are assigned in a multi-day episode of care. Additional criteria added.</p> <p>The validation will generate only when specified codes are <i>not</i> assigned in an episode with:</p> <ul style="list-style-type: none"> • care type 12 Mental Health • neonates age less than 28 days old • diagnosis codes C00–D48 <i>Neoplasms</i> • diagnosis codes O00–O99 <i>Pregnancy, childbirth and the puerperium</i> • diagnosis codes O00–O08 <i>Pregnancy with abortive outcome</i> • an ICD code from block [1920] <i>Cerebral anaesthesia</i>.
H932	FTL	Code with Condition onset flag should be accompanied by a code in the range .	<p>Addition of valid combination code for codes: O61.0 <i>Failed medical induction of labour</i>, and O61.1 <i>Failed surgical induction of labour</i> with Condition onset flag (COF) of 2.</p> <p>90465-05 <i>Medical and Surgical Induction of labour</i> added as a valid combination code.</p>
H565	FTL	Code must be provided with a code in the range .	<p>Addition of valid combination codes for code: Z51.0 <i>Radiotherapy session</i>.</p> <p>A valid code combination for code Z51.0 <i>Radiotherapy session</i> is required or the validation will generate.</p>

			All codes in block: [1795] <i>Administration of a therapeutic dose of unsealed radioisotope</i> added as valid combination codes.
H839	WRN	Care type must be accompanied with a code in the range .	Care type 20 Rehabilitation care must be accompanied by an additional diagnosis code in the range: Z50.0 – Z50.1 or Z50.4 – Z50.9 <i>Care involving use of rehabilitation procedures.</i> Care type 30 Palliative must be accompanied by ICD code Z51.5 <i>Palliative care.</i> This validation changed from a Fatal to Warning message category.

New Validations

Validation Code	Type	Validation Description	Details of Change
H961	WRN	Code O099 has been assigned. Please provide the duration of this pregnancy or confirm the duration is unspecified.	The validation will generate each time code O09.9 <i>Unspecified duration of pregnancy</i> is assigned for the duration of the pregnancy to be provided or confirmation the duration of pregnancy is unspecified.
H964	FTL	Code has been specified as type Principal Diagnosis (PD), it can only accompany code as type Other Diagnosis(OD).	The validation will generate if codes: Z49.1 <i>Extracorporeal Dialysis</i> Z49.2 <i>Other Dialysis</i> Z49.3 <i>Dialysis follow up care</i> (new code) when the code identifier is Principal diagnosis (PD) and coded with codes between N181 and N189 <i>Chronic Kidney Disease.</i>
H965	WRN	The Condition onset flag is invalid for diagnosis code .	The validation will generate if code: O73.0 <i>Retained Placenta</i> Has a valid Condition Onset Flag (COF) range between 2 and 2 when O73.0 <i>Retained Placenta</i> has a code identifier of Principal Diagnosis (PD).
H969	FTL	For residential mental health care, the principal diagnosis is usually mental health related. Please check and confirm principal diagnosis.	The validation will generate if facility type: <ul style="list-style-type: none"> • Public Residential Mental Health Service Facility • Community Care Unit, or • Public Residential Mental Health Service Facility

			<ul style="list-style-type: none"> • Step Up Step Down Unit, or • Public Residential Mental Health Service Facility • Youth Residential Unit <p>does not have a principal diagnosis that is a mental health condition (MHDIAG) code.</p>
--	--	--	---

End-dated Validations

Validation Code	Type	Validation Description	Details of Change
H570	FTL	Code cannot be provided with codes in the range .	<p>Codes Z49.1 <i>Extracorporeal Dialysis</i> Z49.2 <i>Other Dialysis</i> are incompatible with codes between N181 and N189 <i>Chronic Kidney Disease</i>.</p> <p>This validation was end-dated and a new validation H964 created to add further specificity.</p>
H648	FTL	The Condition onset flag is invalid for diagnosis code .	<p>Code O85 <i>Retained Placenta</i> Condition onset flag valid range</p> <p>This validation was end-dated and a new validation H965 created to add further specificity.</p>
H826	WRN	Code has been assigned. Please confirm	<p>Code O09.9 <i>Unspecified duration of pregnancy</i> Confirmation of code</p> <p>This validation was end-dated and a new validation H961 created to add further specificity.</p>

ICD-10-AM/ACHI Code Thirteenth Edition updates

The below changes to morbidity validations will come into effect for the Queensland Hospital Admitted Patient Data Collection (QHAPDC) from 1 July 2025.

All new and amended validations have been included in QHAPDC Manual 2025/2026 Appendix L Validation Messages Explained (<https://www.health.qld.gov.au/hsu/collections/ghapdc>).

Amendments

Validation Code	Type	Validation Description	Details of Change
H847	FTL	Code cannot have a Condition onset flag of 9.	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H429	FTL	The principal diagnosis code should be immediately followed by an External cause code.	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H431	FTL	The External cause code relating to the principal diagnosis must be immediately followed by a Place of occurrence code	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H650	WRN	Other diagnosis code has a Condition onset flag of 2 Condition arose during the episode of care but no External cause codes have a Condition onset flag of 2.	The validation has been updated to incorporate new ICD-10-AM/ICD-10-AM/ACHI codes.
H550	FTL	Code is only valid for patients between and . This patient is .	The validation has been updated to incorporate valid age ranges for ICD-10-AM/ACHI codes.
H551	FTL	Code is not valid for patients between and . This patient is .	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H552	FTL	For code the patient should be . This patient is .	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H558	FTL	Combination of and is not valid.	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H655	FTL	Code must have a Condition onset flag of 1 Condition present on admission to the episode of care.	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.

H890	WRN	Diagnosis code should have a Condition onset flag of 2 Condition arose during the episode of care.	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H678	FTL	Code OD must be accompanied by a code in the range Z530 – Z539.	The validation has been updated to incorporate a new ICD-10-AM/ACHI code and remove codes that are no longer valid.
H562	FTL/WRN	Code must be preceded by a code in the range .	The validation has been updated to incorporate new ICD-10-AM/ACHI codes. For some codes the type has changed from a Fatal to Warning message category.
H570	FTL	Code cannot be provided with codes in the range .	The validation has been updated to incorporate a new ICD-10-AM/ACHI code.
H648	FTL	The Condition onset flag is invalid for diagnosis code .	The validation has been updated to incorporate a new ICD-10-AM/ACHI code.
H564	FTL/WRN	Code must be followed by a code in the range .	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid. For some codes the type has changed from a Fatal to Warning message category.
H561	FTL	Code must be immediately preceded by a code in the range .	The validation has been updated to incorporate a new ICD-10-AM/ACHI code and remove codes that are no longer valid.
H611	FTL	An episode with Care type of must have a diagnosis .	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H694	FTL	Incorrect principal diagnosis for organ donor with Care type 01 Acute.	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H889	WRN	Principal diagnosis code is an unexpected code for Care type 11 Maintenance care episodes of care.	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.
H555	FTL	Code is only valid for Care type(s) .	The validation has been updated to incorporate new ICD-10-AM/ACHI codes and remove codes that are no longer valid.

Note: Each validation can have several ICD codes added or removed according to ICD-10-AM Thirteenth Edition changes.

New Validations

Validation Code	Type	Validation Description	Details of Change
H966	WRN	Diagnosis cluster identifier is not valid with . Please confirm.	Diagnosis Cluster Identifier (DCID) The validation will generate when U78-U88 is not with DCID value 0.
H967	WRN	Diagnosis cluster identifier is a reserved value and not valid. Please confirm.	Diagnosis Cluster Identifier (DCID) The validation will generate any time DCID values between 1-7 are assigned.
H968	WRN	Diagnosis cluster identifier is not valid. Please confirm.	Diagnosis Cluster Identifier (DCID) The validation will generate when the assigned DCID values do not match the DCID domain within the Corporate Reference Data System (CRDS).