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# IP Detail Reports

## MiPCT Dashboard

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## About the IP Detail Reports

Each row in the IP Detail Report includes detailed information about an individual inpatient visit for a participating patient during the **most recent six months** of complete data available. The date range is included in the report header. Each line entry contains patient identification information, diagnosis details, and admission/discharge details.

There are two types of IP Detail Reports:

- **IP Detail Report** – This report provides detailed information for each inpatient visit broken out by Practice.  
File format: <PO Name>\_<Practice Name>\_IP\_Detail\_YYYY\_MM.xls
- **PO IP Detail Report** – This report provides the same detailed information as the IP Detail Report, but for all patients in the PO.  
File format: <PO Name>\_IP\_Detail\_All\_Practices\_YYYY\_MM.xls

## Location

You can view and print the IP Detail Reports from the *Download PO Reports* page. It is included in the <PO Name>\_Reports\_YYYY\_MM.zip file.

For additional information, see the PO Reports chapter in the [MiPCT Dashboards and Reports – User Guide](#).

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The screenshot shows a spreadsheet titled "IP Detail Report Most Recent 6 months (October 2014 - March 2015)". The columns are labeled as follows:

- Column A (Yellow):** Attributed Practice Unit Name
- Column B (Green):** Attributed Practice Unit Name
- Other Columns:** Payer Specific Member ID, Member First Name, Member Last Name, Member Date of Birth, Age, Gender, Payer, Attributed Physician NPI, Attributed Physician Name, Attributed Practice Unit ID, Admit Date, Discharge Date, Total Length of Stay, Facility Name, Admit Source, Admit Type, Discharge Disposition.

Four rows of data are visible, showing patient information and visit details.

## A: Patient Identification Information

The first 11 columns provide patient identification information.

You can click the up/down arrows (▲▼) next to most headings to sort the list/report based on that heading. The sort arrows display when you hover the pointer over the heading name on the report.

## B: IP Visit Information

The following table provides information about some of the IP visit-related columns:

Column Heading	Description
Admit Date	Admission date of the inpatient stay
Discharge Date	Discharge date of the inpatient stay
Total Length of Stay	Length of stay from admission date to discharge date
Facility Name	The name of the inpatient facility
Admit Source	The source of the referral for the inpatient admission
Admit Type	The type of inpatient admission (for example, "Emergency")
Discharge Disposition	The status of the patient when discharged (for example, "Discharged to Home")

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Principal Diagnosis Code	Principal Diagnosis Description	Diagnosis 1 Code	Diagnosis 1 Description	Diagnosis 2 Code	Diagnosis 2 Description	Diagnosis 3 Code	Diagnosis 3 Description	Diagnosis 4 Code	Diagnosis 4 Description	Diagnosis 5 Code	Diagnosis 5 Description	Diagnosis 6 Code	Diagnosis 6 Description	Diagnosis 7 Code	Diagnosis 7 Description	ACSC Flag	Readmission within 30 days	New Discharge from last report
29670	schizoaffective disorder, unspecified state	29670	Schizoaffective disorder, unspecified state	2449	hypothyroidism, unspecified acquired hypothyroidism	2724	other and unspecified hyperlipidemia	2930	delirium due to conditions classified elsewhere	59654	neurogenic bladder, not otherwise specified	5990	urinary tract infection, site not specified	3013	explosive personality disorder	0	0	1
0389	unspecified septicemia	0389	unspecified septicemia	34830	encephalopathy, unspecified	51884	acute and chronic respiratory failure	78552	septic shock	78559	other shock without mention of trauma	5990	urinary tract infection, site not specified	33819	other acute pain	0	0	1
0389	unspecified septicemia acute upper respiratory infections of unspecified site	0389	unspecified septicemia acute upper respiratory infections of unspecified site	262	other severe protein-calorie malnutrition	51884	acute and chronic respiratory failure need for prophylactic vaccination and inoculation against	5845	acute kidney failure with lesion of tubular necrosis	78552	septic shock	49121	obstructive chronic bronchitis with (acute) exacerbation	486	pneumonia, organism unspecified	0	0	1
4669	asthma, unspecified	4669	asthma, unspecified	78607	wheezing	V0461	other and unspecified hyperlipidemia	78609	other dyspnea and respiratory abnormality							0	0	1
8244	bimalleolar fracture, closed bipolar disorder, most	8244	bimalleolar fracture, closed most recent episode	2720	pure hypercholesterolemia	2724	other and unspecified hyperlipidemia	4019	unspecified essential hypertension	42789	other specified cardiac dysrhythmias, other related acting	8240	fracture of medial malleolus, closed acute upper	84500	unspecified site of ankle sprain unspecified	0	0	1

## C: Diagnosis Information

The following table provides information about diagnosis-related columns:

Column Heading	Description
Principal Diagnosis Code	The primary ICD-9 diagnosis code determined to be chiefly responsible for inpatient admission.
Principal Diagnosis Description	The primary ICD-9 diagnosis description determined to be chiefly responsible for inpatient admission.
Diagnosis 1 – 7 Codes	First – Seventh ICD-9 diagnosis codes (as applicable)
Diagnosis 1 – 7 Descriptions	First – Seventh ICD-9 diagnosis descriptions (as applicable)
Readmission within 30 Days	Indicates if this inpatient admission was within 30 days of a previous inpatient admission.
New Discharge From Last Report	Indicates if the inpatient admission was not included in the last released report.