



## HEALTH SYSTEM MATRIX VERSION 8.0 DATA DICTIONARY

### A. TIME AND PERSON IDENTIFIERS

DATA ELEMENT	DESCRIPTION
<b>Time Identifier</b>	
FISCAL_YEAR	Fiscal Year (runs from April 1st to March 31st of next calendar year). The Health System Matrix (HSM) presents a summary by patient and by fiscal year (based on information reported to the Ministry for publicly funded services). Note, hospital services have been counted for the year they occurred, and not by year of discharge which is the usual practice. Information is available from 2002/03 through 2015/16.
<b>Person Identifiers</b>	
PHN	Merged Personal Health Number (PHN) - it uniquely identifies an individual across MOH databases - sensitive, identifiable element. Note: a person can have multiple PHNs, because of this in certain cases (e.g. linkage to non-merged/raw PHN sources) merged PHN has to be used together with all other PHNs attributed to a person. HSM contains all PHNs attributed to a person and they can be provided when needed. The standard procedure is to only release the Study specific anonymized patient study ID, based on PHN/merged PHNs.
PHN_ALTERNATIVE_LIST	List of alternative Personal Health Numbers (if exist) associated with the same person because some people have several PHNs. This list does not include merged PHN which is a real PHN number used to uniquely identify a person in MOH databases. Merged and alternative PHNs need to be used together when linking HSM data to PHNs that were not merged using standard MOH process. The standard procedure is to only release the Study specific anonymized patient study ID, based on PHN/merged PHNs.

### B. INFORMATION ABOUT THE BC RESIDENT

DATA ELEMENT	DESCRIPTION
<b>Demographics</b>	
AGE_GROUP_5YR	5 year age group (0, 1-4, 5-9, 10-14, 15-19, etc.), based on end of fiscal year.
AGE_GROUP_BM	5 year age groups with the 15-19 age group split between child/youth (15-17) and adult (18-19), based on end of fiscal year.
AGE_GROUP_BROAD_BM	Broad age group (0-17, 18-49, 50-64, 65-74, 75+), based on end of fiscal year.
GENDER	Gender
Forward Sortation Area of usual residence (FSA)	First 3 digits of postal code of usual residence, based on Health Ideas Client Roster database. Last/best address in fiscal year.
POSTAL_CODE	Postal Code of usual residence, based on Health Ideas Client Roster database. Last/best address in fiscal year.
LHA	Local Health Area of usual residence, based on Health Ideas Client Roster database. There are 89 LHAs in BC. <a href="http://www.bcstats.gov.bc.ca/statisticsbysubject/geography/referencemaps/Health.aspx">http://www.bcstats.gov.bc.ca/statisticsbysubject/geography/referencemaps/Health.aspx</a>
HSDA	Health Service Delivery Area of usual residence, based on Health Ideas Client Roster database. There are 16 health services delivery areas in BC. <a href="http://www.bcstats.gov.bc.ca/statisticsbysubject/geography/referencemaps/Health.aspx">http://www.bcstats.gov.bc.ca/statisticsbysubject/geography/referencemaps/Health.aspx</a>

## B. INFORMATION ABOUT THE BC RESIDENT (CONT'D)

DATA ELEMENT	DESCRIPTION
HA	Health Authority of usual residence, based on Health Ideas Client Roster database. There are 5 health authorities that serve geographic regions in BC: Northern, Interior, Vancouver Island, Vancouver Coastal and Fraser Health. <a href="http://www.bcstats.gov.bc.ca/statisticsbysubject/geography/referencemaps/Health.aspx">http://www.bcstats.gov.bc.ca/statisticsbysubject/geography/referencemaps/Health.aspx</a>
BORN_IN_PERIOD_FLG	Born during the fiscal year flag, based on Health Ideas Client Roster database.
DIED_IN_PERIOD_FLG	Died during the fiscal year flag, based on Health Ideas Client Roster database.
DAYS_ALIVE	Days alive in a fiscal year, calculated based on birth date and/or death date in fiscal year.

## C. HEALTH CHARACTERISTICS

DATA ELEMENT	DESCRIPTION
<p><b>Population Segments (Overlapping)</b> Population segmentation by health status, developed specifically for the Health System Matrix, assigns BC residents to population segments that represent their health care needs in the fiscal year based on diagnoses or use of specific services over multiple or single years depending on definition. People can meet the criteria for one or more of the 14 population segments (which can cause population segments to overlap if a person qualifies for more than one).</p>	
PS01	<p><b>Non User</b> BC residents who did not use publicly funded health services included in Health System Matrix.</p>
PS02	<p><b>Healthy</b> BC residents with no health condition or one minor acute/chronic condition, as defined by CIHI's population grouping methodology*. This population segment also requires that residents were not hospitalized in the fiscal year. For residents without this CIHI information available, assignment to this population segment was determined if there was no hospitalization or specialist visit in the fiscal year. <i>* Use of the Population Grouping Methodology licensed by the Canadian Institute for Health Information. Adapted for use in British Columbia by the BC Ministry of Health with permission.</i></p>
PS03	<p><b>Minor Conditions</b> BC residents who qualify for minor acute/chronic health profile groups and have two or more health conditions without hospitalization or fewer than two health conditions with hospitalization, or who qualify for non-major (other) mental health profile group as defined by CIHI's population grouping methodology*. For residents without this CIHI information available, assignment to this population segment was determined if there was no hospitalization in the fiscal year but at least one specialist visit. <i>* Use of the Population Grouping Methodology licensed by the Canadian Institute for Health Information. Adapted for use in British Columbia by the BC Ministry of Health with permission.</i></p>
PS04	<p><b>Moderate or Major Conditions</b> BC residents with moderate or major health conditions, as defined by CIHI's population grouping methodology.* For residents without this CIHI information available, assignment to this population segment was determined if there was a hospitalization in the fiscal year (within BC or out-of-province). <i>* Use of the Population Grouping Methodology licensed by the Canadian Institute for Health Information. Adapted for use in British Columbia by the BC Ministry of Health with permission.</i></p>
PS05	<p><b>Low Chronic Conditions</b> BC residents with one or more low complex chronic conditions (asthma, mood / anxiety disorder including depression, diabetes, epilepsy, hypertension, osteoarthritis, or osteoporosis), as defined by the Chronic Disease Registries.</p>

## C. HEALTH CHARACTERISTICS (CONT'D)

DATA ELEMENT	DESCRIPTION
PS06	<p><b>Medium Chronic Conditions</b>            BC residents with one or more medium chronic conditions (angina, COPD, multiple sclerosis, Parkinson's, pre-dialysis chronic kidney disease, or rheumatoid arthritis), or have had a major cardiac event or intervention (CABG, AMI, PTCA), or have a specific combination of chronic conditions (diabetes &amp; mood / anxiety disorder, osteoarthritis &amp; hypertension, osteoporosis &amp; hypertension, osteoporosis &amp; osteoarthritis), as defined by the Chronic Disease Registries.</p>
PS07	<p><b>Severe Mental Health &amp; Substance Use</b>            BC residents who were hospitalized with a specific range of conditions recorded as the Most Responsible Diagnosis in the hospital abstract for mental health conditions such as schizophrenia, mood disorders, drug addiction, etc. in the last 5 fiscal years; or received methadone treatment in the fiscal year; or used PharmaNet Plan G in the fiscal year.</p>
PS08	<p><b>Maternity &amp; Healthy Newborns</b>            BC residents who received maternity or obstetric services from a physician or a midwife (MSP fee-for-service billings) or a hospital (DAD) in the fiscal year or were identified by CIHI's population grouping methodology* as pregnant or a healthy newborn.</p> <p><i>* Use of the Population Grouping Methodology licensed by the Canadian Institute for Health Information. Adapted for use in British Columbia by the BC Ministry of Health with permission.</i></p>
PS09	<p><b>Frail In Community</b>            BC residents who live in the community and receive professional home care services or publicly funded services to assist with activities of daily living. The following services reported in the Continuing Care Data Warehouse and/or the Home and Community Care Minimum Reporting Requirements Data Warehouse are used to identify this population:</p> <ol style="list-style-type: none"> <li>1. Professional home care services provided by the health authorities and delivered to clients in the community by registered nurses and rehabilitation therapists.</li> <li>2. Home support services that provide personal assistance with the activities of daily living to seniors and adults with disabilities living in their homes, such as bathing, dressing, grooming and, in some cases, light household tasks that help maintain a safe and supportive home. These services include CSIL (Choice in Supports for Independent Living) which is a program in which the client can independently manage their publicly funded home support services.</li> <li>3. Adult Day programs for seniors and adults with disabilities that assist with daily activities or give clients a chance to be more involved in their community. They include personal care services, therapeutic recreation, social activities, and caregiver respite.</li> <li>4. Assisted living residences provide housing and a range of supportive services for seniors and people with disabilities, including personalized assistance with activities of daily living.</li> <li>5. Case Management services.</li> <li>6. Short-term residential care including transitional care, convalescent care (usually following a hospitalization), and respite care.</li> </ol> <p>For children age 18 and under, the Ministry of Children and Family Development provides community-based, family-style care for severely handicapped children age 18 or under who would otherwise become reliant on institutional care. The Frail in Community population segment identifies these children and youth through registration in the PharmaCare At Home Program of the Ministry of Children and Family Development (Plan F).</p>
PS10	<p><b>High Chronic w/o Frailty</b>            BC residents who do not receive support services from health authorities for activities of daily living and who have one or more high chronic conditions (Alzheimer's, dementia, cystic fibrosis, heart failure, or organ transplant), had stroke or are on dialysis, or have a specific combination of chronic conditions (AMI &amp; pre-dialysis chronic kidney disease, angina &amp; COPD, diabetes &amp; hypertension &amp; osteoarthritis), as defined by the Chronic Disease Registries.</p>

## C. HEALTH CHARACTERISTICS (CONT'D)

DATA ELEMENT	DESCRIPTION
PS11	<p><b>High Chronic with Frailty</b> BC residents who do receive selected support services from health authorities for activities of daily living and who have one or more high chronic conditions (Alzheimer's, dementia, cystic fibrosis, heart failure, or organ transplant), had stroke or are on dialysis, or have a specific combination of chronic conditions (AMI &amp; pre-dialysis chronic kidney disease, angina &amp; COPD, diabetes &amp; hypertension &amp; osteoarthritis), as defined by the Chronic Disease Registries.</p>
PS12	<p><b>Cancer</b> BC residents with cancer identified via administrative data using a similar approach as the Ministry's chronic disease registries. Specifically, the Matrix assigns people to this population segment if during the current or previous fiscal year they had specific malignant diagnoses recorded on at least two physicians' MSP fee-for-service billings within 365 days or at least one hospitalization.</p> <p>It is important to note that the people undergoing active treatment for cancer would be more comprehensively identified using the cancer registry maintained by the BC Cancer Agency. However, the Ministry does not have access to this cancer registry.</p>
PS13	<p><b>Frail in Residential Care</b> BC residents in residential care facilities that provide 24-hour nursing care and assistance with activities of daily living. These residents are identified as follows:</p> <ol style="list-style-type: none"> <li>1. Registered with PharmaCare's Plan B (which covers prescription drugs for Permanent Residents of Licensed Residential Care Facilities) or</li> <li>2. Long-term residential care clients (as reported by Health Authorities to Continuing Care Data Warehouse and the Home and Community Care Minimum Reporting Requirements Data Warehouse).</li> </ol>
PS14	<p><b>End Of Life</b> BC residents who received palliative care services from physicians (based on physicians' MSP fee-for-service billings for palliative care), were hospitalized specifically for palliative care, received palliative services from health authority's home and community care programs, were registered in PharmaNet's BC Palliative Care Benefits Program (Plan P), or were identified as palliative by the CIHI population grouping methodology.*</p> <p><i>* Use of the Population Grouping Methodology licensed by the Canadian Institute for Health Information. Adapted for use in British Columbia by the BC Ministry of Health with permission.</i></p>
<p><b>Previous Fiscal Year's Population Segments (Overlapping)</b> Useful for examining change in health status from year to year</p>	
PS01_LAST_YEAR	Belonged to 'Non User' population segment in the previous fiscal year.
PS02_LAST_YEAR	Belonged to 'Healthy' population segment in the previous fiscal year.
PS03_LAST_YEAR	Belonged to 'Minor Conditions' population segment in the previous fiscal year.
PS04_LAST_YEAR	Belonged to 'Moderate or Major Conditions' population segment in the previous fiscal year.
PS05_LAST_YEAR	Belonged to 'Low Chronic Conditions' population segment in the previous fiscal year.
PS06_LAST_YEAR	Belonged to 'Medium Chronic Conditions' population segment in the previous fiscal year.
PS07_LAST_YEAR	Belonged to 'Severe Mental Health & Substance Use' population segment in the previous fiscal year.
PS08_LAST_YEAR	Belonged to 'Maternity & Healthy Newborns' population segment in the previous fiscal year.
PS09_LAST_YEAR	Belonged to 'Frail In Community' population segment in the previous fiscal year.
PS10_LAST_YEAR	Belonged to 'High Chronic w/o Frailty' population segment in the previous fiscal year.
PS11_LAST_YEAR	Belonged to 'High Chronic with Frailty' population segment in the previous fiscal year.
PS12_LAST_YEAR	Belonged to 'Cancer' population segment in the previous fiscal year.

## C. HEALTH CHARACTERISTICS (CONT'D)

DATA ELEMENT	DESCRIPTION
PS13_LAST_YEAR	Belonged to 'Frail in Residential Care' population segment in the previous fiscal year.
PS14_LAST_YEAR	Belonged to 'End Of Life' population segment in the previous fiscal year.
<b>Population Segment (Unique)</b> The population segment that represents each BC resident's 'highest' need for health care in the year based on a pre-set priority order from population segment 01 (non-user) to 14 (end of life), with 14 being the highest priority.	
POP_SEGMENT	<b>Unique Population Segment</b> If the person meets the criteria for more than one population segment at the end of the fiscal year, then they are assigned to the unique population segment that represents their highest need for care (numbering system indicates priority, with 14 being the highest priority)
<b>Previous Fiscal Year's Population Segment (Unique)</b>	
POP_SEGMENT_LAST_YEAR	Previous fiscal year's unique population segment
<b>GP Attachment</b>	
ATTACHED_PRACTICE	Attachment to GP Group Flag. A single group of GP physicians have provided more than 50% of the person's care. If the person had less than 5 GP contacts in year, then attachment algorithm goes back in time accumulating GP visits, until there are enough visits to determine attachment. Attachment to GP Practice is calculated by the Ministry's Primary Care program.
ATTACHED_GP	Attachment to GP Flag. A single GP has provided more than 50% of the person's care. If the person had less than 5 GP contacts in year, then attachment algorithm goes back in time accumulating GP visits, until there are enough visits to determine attachment. Attachment to GP is calculated by the Ministry's Primary Care program.
<b>Chronic Conditions</b> The Ministry's Chronic Condition Management Registries identify people who have had specific pattern of chronic conditions diagnoses recorded in physician MSP fee for service billings, or hospitalizations, or have used specific prescription drugs, in the current or ANY previous years. Once added, they are not removed; the exception is episodic registries that remove people after certain period of inactivity. Chronic Condition Management Registries are based on national definitions established by Public Health Agency of Canada except for cystic fibrosis. More information on chronic conditions can be found from the Chronic Disease Registry available here: <a href="http://www2.gov.bc.ca/assets/gov/health/forms/5452save.pdf">http://www2.gov.bc.ca/assets/gov/health/forms/5452save.pdf</a>	
CYSTIC_FIBROSIS	Chronic Condition flag - Cystic Fibrosis
ALZHEIMER_DEMENTIA	Chronic Condition Registry entry date - Alzheimer/Dementia
AMI	Chronic Condition Registry entry date - Acute Myocardial Infarction (Heart Attack)
ANGINA	Chronic Condition Registry entry date - Angina
ASTHMA	Chronic Condition Registry entry date - Asthma
CABG	Chronic Condition Registry entry date - Coronary Artery Bypass Graft (Cardiac Intervention)
CKD	Chronic Condition Registry entry date - Chronic Kidney Disease
COPD	Chronic Condition Registry entry date - COPD (Chronic obstructive pulmonary disease)
CORONARY_ANGIOGRAM	Chronic Condition Registry entry date - Angiography (Cardiac Intervention)
DIABETES	Chronic Condition Registry entry date - Diabetes
DIALYSIS	Chronic Condition Registry entry date - Dialysis
EPILEPSY	Chronic Condition Registry entry date - Epilepsy

### C. HEALTH CHARACTERISTICS (CONT'D)

DATA ELEMENT	DESCRIPTION
HEART_FAILURE	Chronic Condition Registry entry date - Heart Failure
HYPERTENSION	Chronic Condition Registry entry date - Hypertension
IHD	Chronic Condition Registry entry date - Ischemic Heart Disease
MS	Chronic Condition Registry entry date - Multiple Sclerosis
OSTEOARTHRITIS	Chronic Condition Registry entry date - Osteoarthritis
OSTEOPOROSIS	Chronic Condition Registry entry date - Osteoporosis
PARKINSON	Chronic Condition Registry entry date - Parkinson
PTCA	Chronic Condition Registry entry date - Percutaneous Transluminal Coronary or PCI (Cardiac Intervention)
RHEUMATOID_ARTHRITIS	Chronic Condition Registry entry date - Rheumatoid Arthritis
TRANSPLANT_KIDNEY	Chronic Condition Registry entry date - Kidney Transplant
TRANSPLANT_ALL_DAD	Chronic Condition Registry entry date - All Major Transplants from DAD
STROKE	Chronic Condition Registry entry date - Stroke
DEPRESSION_EPISODIC	Chronic Condition Registry entry date - Episodic Depression
MOOD_ANX_EPISODIC	Chronic Condition Registry entry date - Episodic Mood and Anxiety Disorder
<b>Adjusted Clinical Groups (ACGs)</b>	
ACG	Adjusted Clinical Groups from the Johns Hopkins ACG Case-Mix System
<b>Residential Care Indicators</b>	
RC_LONG	Long term residential care flag. Indicates that the person was a long term publicly funded residential care client. People who have RC days and who do not have this flag are people who only used short term residential care. (People in Frail in Care population who do not have RC days are people who use privately paid residential care in a licensed facility).
RC_TYPE	Type of residential care: long term (permanent) care - publicly funded in extended care associated with a hospital, publicly funded in a stand-alone facility, privately paid in a stand-alone facility; and short term convalescent and transitional care.
<b>Medication Use Indicators</b>	
PRESCRIPTIONS_TOTAL	Total number of prescriptions received
N_MEDICATIONS	Number of unique medications prescribed
DRUG_DAYS_CUMULATIVE	Number of cumulative drug days (e.g. 3 different drugs prescribed for 5 days concurrently will result in $3 \times 5 = 15$ drug days)

## D. INFORMATION BY BROAD CATEGORY OF SERVICES

DATA ELEMENT	DESCRIPTION
<b>Cost by Broad Category of Services</b> All costs (publicly funded expenditures) are estimates except for those based exclusively on PharmaNet and MSP fee for service paid billings (APP/Shadow billings costs from MSP are estimates as well), use with caution.	
HSM_RES_CARE_TOTAL_COST	Total cost of residential care that includes HCC cost, MSP/APP cost, and PharmaCare and estimate of Rx costs for people in RC facilities associated with hospitals.
HSM_ED_TOTAL_COST	Total cost of emergency department care, includes MSP, APP estimate, NACRS estimate of physician cost, and estimated facility costs (NACRS data is available from 2012/13 fiscal year).
HSM_LAB_TOTAL_COSTS	Total MSP/APP laboratory cost estimate
HSM_DIAGNOSTIC_TOTAL_COST	Total MSP/APP diagnostic cost estimate
HSM_HOSPITAL_TOTAL_COST	Total hospital cost estimate, excluding physician fees
HSM_HCC_COMMUNITY_TOTAL_COST	Total Home & Community Care cost estimate excluding residential care cost (SL22 ADS, CSIL, AL, CM, HS, plus SL01 home nursing and SL20 home rehab)
HSM_PHARMACARE_PAID_TOTAL_COST	PharmaCare publicly paid cost excluding Residential Care Rx cost.
HSM_PHYSICIAN_CARE_TOTAL_COST	MSP/APP physician and midwife cost estimate excluding emergency cost, laboratory cost, diagnostic cost, and residential care cost
HSM_TOTAL_COST	Total cost estimate (MSP rural retention costs are excluded).

## E. INFORMATION BY SERVICE LINE (ALL TYPES OF SERVICES AND MEASURES COMBINED)

DATA ELEMENT	DESCRIPTION
<b>Cost by Combined Service Lines</b> All costs (publicly funded expenditures) are estimates except for those based exclusively on PharmaNet and MSP fee for service paid billings (APP/Shadow billings costs from MSP are estimates as well), use with caution. Costs are uniquely allocated to a single service line (no double counting).	
SL01_COST	Service Line 01 - Primary Health Care cost, All data sources
SL02_COST	Service Line 02 - Obstetrics cost, All data sources
SL03_COST	Service Line 03 - Gynaecology, excluding Oncology cost, All data sources
SL04_COST	Service Line 04 - Mental Health & Substance Use cost, All data sources
SL05_COST	Service Line 05 - Medical Specialists cost, All data sources
SL06_COST	Service Line 06 - Oncology cost, All data sources
SL07_COST	Service Line 07 - Emergency cost, All data sources
SL08_COST	Service Line 08 - In Hospital Medical cost, All data sources
SL09_COST	Service Line 09 - Ambulatory Surgical cost, All data sources
SL10_COST	Service Line 10 - Inpatient Elective Surgical cost, All data sources
SL11_COST	Service Line 11 - Transplant Surgery cost, All data sources
SL12_COST	Service Line 12 - In Patient Trauma and Emergency Surgery cost, All data sources
SL13_COST	Service Line 13 - Palliative Care cost, All data sources

## E. INFORMATION BY SERVICE LINE (ALL TYPES OF SERVICES AND MEASURES COMBINED) (CONT'D)

DATA ELEMENT	DESCRIPTION
SL14_COST	Service Line 14 - Pathology/Laboratory cost, All data sources
SL15_COST	Service Line 15 - Diagnostics cost, All data sources
SL16_COST	Service Line 16 - Ambulatory Support Therapies (Dialysis) cost, All data sources
SL17_COST	Service Line 17 - Pharmaceuticals cost, All data sources
SL18_COST	Service Line 18 - Anaesthesia cost, All data sources
SL19_COST	Service Line 19 - Hospital Outpatients cost, All data sources
SL20_COST	Service Line 20 - Physical medicine and Rehabilitation cost, All data sources
SL22_COST	Service Line 22 - Community Supports for Daily Living cost, All data sources
SL24_COST	Service Line 24 - Residential Care cost, All data sources
SL25_COST	Service Line 25 - Paediatrics cost, All data sources
SL30_COST	Service Line 30 - Surgery cost, All data sources
SL31_COST	Service Line 31 - Out-of-province billings for medical service provided to BC residents, cost, All data sources
SL99_COST	Service Line 99 - Other, Physicians cost, All data sources

## F. INFORMATION BY SERVICE LINE AND TYPE OF SERVICE/MEASURE

DATA ELEMENT	DESCRIPTION
<p><b>Cost by Service Lines and Type of Service/Measure</b>            All costs (publicly funded expenditures) are estimates except for those based exclusively on PharmaNet and MSP fee for service paid billings (APP/Shadow billings costs from MSP are estimates as well), use with caution. Costs are uniquely allocated to a single service line (no double counting).</p>	
SL01_MSP_COST	Service Line 01 - Primary Health Care cost, Medical Service Plan and APP shadow billing
SL01_HCN_VISITS_COST	Service Line 01 - Primary Health Care cost - Professional Services (Home Nursing Care, Community Rehabilitation, and Other)
SL02_MSP_COST	Service Line 02 - Obstetrics cost, Medical Service Plan and APP shadow billing
SL02_DAD_COST	Service Line 02 - Obstetrics cost, Hospital
SL03_MSP_COST	Service Line 03 - Gynaecology, excluding Oncology cost, Medical Service Plan and APP shadow billing
SL03_DAD_COST	Service Line 03 - Gynaecology, excluding Oncology cost, Hospital
SL04_MSP_COST	Service Line 04 - Mental Health & Substance Use cost, Medical Service Plan and APP shadow billing
SL04_DAD_COST	Service Line 04 - Mental Health & Substance Use cost, Hospital
SL04_PCMH_COST	Service Line 04 - Mental Health & Substance Use cost, PharmaCare paid
SL04_PNMH_COST	Service Line 04 - Mental Health & Substance Use cost, PharmaNet claimed
SL05_MSP_COST	Service Line 05 - Medical Specialists cost, Medical Service Plan and APP shadow billing
SL06_MSP_COST	Service Line 06 - Oncology cost, Medical Service Plan and APP shadow billing
SL06_DAD_COST	Service Line 06 - Oncology cost, Hospital



## F. INFORMATION BY SERVICE LINE AND TYPE OF SERVICE/MEASURE (CONT'D)

DATA ELEMENT	DESCRIPTION
SL07_ED_COST	Service Line 07 - Emergency cost, Medical Service Plan, APP shadow billing, and NACRS, includes physician and facility costs
SL08_DAD_COST	Service Line 08 - In Hospital Medical cost, Hospital
SL09_DAD_COST	Service Line 09 - Ambulatory Surgical cost, Hospital
SL10_DAD_COST	Service Line 10 - Inpatient Elective Surgical cost, Hospital
SL11_MSP_COST	Service Line 11 - Transplant Surgery cost, Medical Service Plan and APP shadow billing
SL11_DAD_COST	Service Line 11 - Transplant Surgery cost, Hospital
SL12_DAD_COST	Service Line 12 - In Patient Trauma and Emergency Surgery cost, Hospital
SL13_MSP_COST	Service Line 13 - Palliative Care cost, Medical Service Plan and APP shadow billing
SL13_DAD_COST	Service Line 13 - Palliative Care cost, Hospital
SL13_PCPA_COST	Service Line 13 - Palliative Care cost, PharmaCare paid
SL13_PNPA_COST	Service Line 13 - Palliative Care cost, PharmaNet claimed
SL14_MSP_COST	Service Line 14 - Pathology/Laboratory cost, Medical Service Plan and APP shadow billing
SL15_MSP_COST	Service Line 15 - Diagnostics cost, Medical Service Plan and APP shadow billing
SL16_MSP_COST	Service Line 16 - Ambulatory Support Therapies (Dialysis) cost, Medical Service Plan and APP shadow billing
SL16_DAD_COST	Service Line 16 - Ambulatory Support Therapies (Dialysis) cost, Hospital
SL17_PC_COST	Service Line 17 - Pharmaceuticals cost, PharmaCare paid
SL17_PN_COST	Service Line 17 - Pharmaceuticals cost, PharmaNet claimed
SL18_MSP_COST	Service Line 18 - Anaesthesia cost, Medical Service Plan and APP shadow billing
SL19_MSP_COST	Service Line 19 - Hospital Outpatients cost, Medical Service Plan and APP shadow billing
SL20_MSP_COST	Service Line 20 - Physical medicine and Rehabilitation cost, Medical Service Plan and APP shadow billing
SL20_DAD_COST	Service Line 20 - Physical medicine and Rehabilitation cost, Hospital
SL20_REHAB_OTHER_VISITS_COST	Service Line 20 - Physical medicine and Rehabilitation cost, Home & Community Care (Rehab and other professional services)
SL22_AL_DAYS_COST	Service Line 22 - Community Supports for Daily Living cost, Assisted Living
SL22_HS_HOURS_COST	Service Line 22 - Community Supports for Daily Living cost, Home Support
SL22_CSIL_HOURS_COST	Service Line 22 - Community Supports for Daily Living cost, Choice in Supports for Independent Living
SL22_ADS_DAYS_COST	Service Line 22 - Community Supports for Daily Living cost, Adult Day Services
SL22_CM_VISITS_COST	Service Line 22 - Community Supports for Daily Living cost, Case Management
SL24_MSP_COST	Service Line 24 - Residential Care cost, Medical Service Plan and APP shadow billing
SL24_PCRC_COST	Service Line 24 - Residential Care cost, PharmaCare paid

## F. INFORMATION BY SERVICE LINE AND TYPE OF SERVICE/MEASURE (CONT'D)

DATA ELEMENT	DESCRIPTION
SL24_PNRC_COST	Service Line 24 - Residential Care cost, PharmaNet claimed
SL24_RC_DAYS_COST	Service Line 24 - Residential Care cost, Residential Care
SL24_PC_B_EST_COST	Service Line 24 - Residential Care cost, Estimated PharmaCare plan B (residential care) amount for residential care patient in extended facilities (hospitals)
SL25_MSP_COST	Service Line 25 - Paediatrics cost, Medical Service Plan and APP shadow billing
SL25_DAD_COST	Service Line 25 - Paediatrics cost, Hospital
SL30_MSP_COST	Service Line 30 - Surgery cost, Medical Service Plan and APP shadow billing
SL31_MSP_COST	Service Line 31 - Out-of-province billings for medical service provided to BC residents, cost
SL99_MSP_COST	Service Line 99 - Other, Physicians cost, Medical Service Plan and APP shadow billing
<b>Utilization by Service Lines and Type of Service/Measure</b>	
SL01_MSP_ENC	Service Line 01 - Primary Health Care, MSP and APP shadow billing encounters
SL01_HCN_VISITS	Service Line 01 - Primary Health Care visits - Professional Services (Home Nursing Care, Community Rehabilitation, and Other)
SL02_MSP_ENC	Service Line 02 - Obstetrics, MSP and APP shadow billing encounters
SL02_DAD_ADJ_TDAY	Service Line 02 - Obstetrics total hospital days
SL02_DAD_ADJ_ARDA	Service Line 02 - Obstetrics acute rehab days
SL02_DAD_ADJ_ALCD	Service Line 02 - Obstetrics alternative level of care days
SL02_DAD_ADJ_ICUD	Service Line 02 - Obstetrics intensive care unit days
SL02_DAD_ADJ_CAS	Service Line 02 - Obstetrics number of inpatient cases
SL02_DAD_ADJ_RI	Service Line 02 - Obstetrics inpatient resource intensity weights
SL03_MSP_ENC	Service Line 03 - Gynaecology, excluding Oncology, MSP and APP shadow billing encounters
SL03_DAD_ADJ_TDAY	Service Line 03 - Gynaecology, excluding Oncology total hospital days
SL03_DAD_ADJ_ARDA	Service Line 03 - Gynaecology, excluding Oncology acute rehab days
SL03_DAD_ADJ_ALCD	Service Line 03 - Gynaecology, excluding Oncology alternative level of care days
SL03_DAD_ADJ_ICUD	Service Line 03 - Gynaecology, excluding Oncology intensive care unit days
SL03_DAD_ADJ_CAS_DS	Service Line 03 - Gynaecology, excluding Oncology number of outpatient cases
SL03_DAD_ADJ_CAS_IP	Service Line 03 - Gynaecology, excluding Oncology number of inpatient cases
SL03_DAD_ADJ_RI_DS	Service Line 03 - Gynaecology, excluding Oncology outpatient resource intensity weights
SL03_DAD_ADJ_RI_IP	Service Line 03 - Gynaecology, excluding Oncology inpatient resource intensity weights
SL04_MSP_ENC	Service Line 04 - Mental Health & Substance Use, MSP and APP shadow billing encounters
SL04_DAD_ADJ_TDAY	Service Line 04 - Mental Health & Substance Use total hospital days
SL04_DAD_ADJ_ARDA	Service Line 04 - Mental Health & Substance Use acute rehab days
SL04_DAD_ADJ_ALCD	Service Line 04 - Mental Health & Substance Use alternative level of care days

## F. INFORMATION BY SERVICE LINE AND TYPE OF SERVICE/MEASURE (CONT'D)

DATA ELEMENT	DESCRIPTION
SL04_DAD_ADJ_ICUDAYS	Service Line 04 - Mental Health & Substance Use intensive care unit days
SL04_DAD_ADJ_CASES_DS	Service Line 04 - Mental Health & Substance Use number of outpatient cases
SL04_DAD_ADJ_CASES_IP	Service Line 04 - Mental Health & Substance Use number of inpatient cases
SL04_DAD_ADJ_RIWS_DS	Service Line 04 - Mental Health & Substance Use outpatient resource intensity weights
SL04_DAD_ADJ_RIWS_IP	Service Line 04 - Mental Health & Substance Use inpatient resource intensity weights
SL05_MSP_ENC	Service Line 05 - Medical Specialists, MSP and APP shadow billing encounters
SL06_MSP_ENC	Service Line 06 - Oncology, MSP and APP shadow billing encounters
SL06_DAD_ADJ_TDAY	Service Line 06 - Oncology total hospital days
SL06_DAD_ADJ_ARDDAYS	Service Line 06 - Oncology acute rehab days
SL06_DAD_ADJ_ALCDAYS	Service Line 06 - Oncology alternative level of care days
SL06_DAD_ADJ_ICUDAYS	Service Line 06 - Oncology intensive care unit days
SL06_DAD_ADJ_CASES_DS	Service Line 06 - Oncology number of outpatient cases
SL06_DAD_ADJ_CASES_IP	Service Line 06 - Oncology number of inpatient cases
SL06_DAD_ADJ_RIWS_DS	Service Line 06 - Oncology outpatient resource intensity weights
SL06_DAD_ADJ_RIWS_IP	Service Line 06 - Oncology inpatient resource intensity weights
SL07_ED_ENC	Service Line 07 - Emergency, MSP,APP shadow billing, and NACRS encounters
SL08_DAD_ADJ_TDAY	Service Line 08 - In Hospital Medical total hospital days
SL08_DAD_ADJ_ARDDAYS	Service Line 08 - In Hospital Medical acute rehab days
SL08_DAD_ADJ_ALCDAYS	Service Line 08 - In Hospital Medical alternative level of care days
SL08_DAD_ADJ_ICUDAYS	Service Line 08 - In Hospital Medical intensive care unit days
SL08_DAD_ADJ_CASES_IP	Service Line 08 - In Hospital Medical number of inpatient cases
SL08_DAD_ADJ_RIWS_IP	Service Line 08 - In Hospital Medical inpatient resource intensity weights
SL09_DAD_ADJ_CASES_DS	Service Line 09 - Ambulatory Surgical number of outpatient cases
SL09_DAD_ADJ_RIWS_DS	Service Line 09 - Ambulatory Surgical outpatient resource intensity weights
SL10_DAD_ADJ_TDAY	Service Line 10 - Inpatient Elective Surgical total hospital days
SL10_DAD_ADJ_ARDDAYS	Service Line 10 - Inpatient Elective Surgical acute rehab days
SL10_DAD_ADJ_ALCDAYS	Service Line 10 - Inpatient Elective Surgical alternative level of care days
SL10_DAD_ADJ_ICUDAYS	Service Line 10 - Inpatient Elective Surgical intensive care unit days
SL10_DAD_ADJ_CASES_IP	Service Line 10 - Inpatient Elective Surgical number of inpatient cases
SL10_DAD_ADJ_RIWS_IP	Service Line 10 - Inpatient Elective Surgical inpatient resource intensity weights
SL11_MSP_ENC	Service Line 11 - Transplant Surgery, MSP and APP shadow billing encounters

## F. INFORMATION BY SERVICE LINE AND TYPE OF SERVICE/MEASURE (CONT'D)

DATA ELEMENT	DESCRIPTION
SL11_DAD_ADJ_TDAY	Service Line 11 - Transplant Surgery total hospital days
SL11_DAD_ADJ_ARDAY	Service Line 11 - Transplant Surgery acute rehab days
SL11_DAD_ADJ_ALCDAY	Service Line 11 - Transplant Surgery alternative level of care days
SL11_DAD_ADJ_ICUDAY	Service Line 11 - Transplant Surgery intensive care unit days
SL11_DAD_ADJ_CASES_IP	Service Line 11 - Transplant Surgery number of inpatient cases
SL11_DAD_ADJ_RIWS_IP	Service Line 11 - Transplant Surgery inpatient resource intensity weights
SL12_DAD_ADJ_TDAY	Service Line 12 - In Patient Trauma and Emergency Surgery total hospital days
SL12_DAD_ADJ_ARDAY	Service Line 12 - In Patient Trauma and Emergency Surgery acute rehab days
SL12_DAD_ADJ_ALCDAY	Service Line 12 - In Patient Trauma and Emergency Surgery alternative level of care days
SL12_DAD_ADJ_ICUDAY	Service Line 12 - In Patient Trauma and Emergency Surgery intensive care unit days
SL12_DAD_ADJ_CASES_IP	Service Line 12 - In Patient Trauma and Emergency Surgery number of inpatient cases
SL12_DAD_ADJ_RIWS_IP	Service Line 12 - In Patient Trauma and Emergency Surgery inpatient resource intensity weights
SL13_MSP_ENC	Service Line 13 - Palliative Care, MSP and APP shadow billing encounters
SL13_DAD_ADJ_TDAY	Service Line 13 - Palliative Care total hospital days
SL13_DAD_ADJ_ARDAY	Service Line 13 - Palliative Care acute rehab days
SL13_DAD_ADJ_ALCDAY	Service Line 13 - Palliative Care alternative level of care days
SL13_DAD_ADJ_ICUDAY	Service Line 13 - Palliative Care intensive care unit days
SL13_DAD_ADJ_CASES_IP	Service Line 13 - Palliative Care number of inpatient cases
SL13_DAD_ADJ_RIWS_IP	Service Line 13 - Palliative Care inpatient resource intensity weights
SL14_MSP_ENC	Service Line 14 - Pathology/Laboratory, MSP and APP shadow billing encounters
SL15_MSP_ENC	Service Line 15 - Diagnostics, MSP and APP shadow billing encounters
SL16_MSP_ENC	Service Line 16 - Ambulatory Support Therapies (Dialysis), MSP and APP shadow billing encounters
SL16_DAD_ADJ_TDAY	Service Line 16 - Ambulatory Support Therapies (Dialysis) total hospital days
SL16_DAD_ADJ_ARDAY	Service Line 16 - Ambulatory Support Therapies (Dialysis) acute rehab days
SL16_DAD_ADJ_ALCDAY	Service Line 16 - Ambulatory Support Therapies (Dialysis) alternative level of care days
SL16_DAD_ADJ_ICUDAY	Service Line 16 - Ambulatory Support Therapies (Dialysis) intensive care unit days
SL16_DAD_ADJ_CASES_DS	Service Line 16 - Ambulatory Support Therapies (Dialysis) number of outpatient cases
SL16_DAD_ADJ_CASES_IP	Service Line 16 - Ambulatory Support Therapies (Dialysis) number of inpatient cases
SL16_DAD_ADJ_RIWS_DS	Service Line 16 - Ambulatory Support Therapies (Dialysis) outpatient resource intensity weights
SL16_DAD_ADJ_RIWS_IP	Service Line 16 - Ambulatory Support Therapies (Dialysis) inpatient resource intensity weights
SL18_MSP_ENC	Service Line 18 - Anaesthesia, MSP and APP shadow billing encounters

## F. INFORMATION BY SERVICE LINE AND TYPE OF SERVICE/MEASURE (CONT'D)

DATA ELEMENT	DESCRIPTION
SL19_MSP_ENC	Service Line 19 - Hospital Outpatients, MSP and APP shadow billing encounters
SL20_MSP_ENC	Service Line 20 - Physical medicine and Rehabilitation, MSP and APP shadow billing encounters
SL20_DAD_ADJ_TDAY	Service Line 20 - Physical medicine and Rehabilitation total hospital days
SL20_DAD_ADJ_ARDA	Service Line 20 - Physical medicine and Rehabilitation acute rehab days
SL20_DAD_ADJ_ALCD	Service Line 20 - Physical medicine and Rehabilitation alternative level of care days
SL20_DAD_ADJ_ICUD	Service Line 20 - Physical medicine and Rehabilitation intensive care unit days
SL20_DAD_ADJ_CASE	Service Line 20 - Physical medicine and Rehabilitation number of inpatient cases
SL20_DAD_ADJ_RIWS	Service Line 20 - Physical medicine and Rehabilitation inpatient resource intensity weights
SL20_REHAB_OTHER_V	Service Line 20 - Physical medicine and Rehabilitation visits, Home & Community Care (Rehab and other professional services)
SL22_AL_DAYS	Service Line 22 - Community Supports for Daily Living days, Assisted Living
SL22_HS_HOURS	Service Line 22 - Community Supports for Daily Living hours, Home Support
SL22_CSIL_HOURS	Service Line 22 - Community Supports for Daily Living hours, Choice in Supports for Independent Living
SL22_ADS_DAYS	Service Line 22 - Community Supports for Daily Living days, Adult Day Services
SL22_CM_VISITS	Service Line 22 - Community Supports for Daily Living visits, Case Management
SL24_MSP_ENC	Service Line 24 - Residential Care, MSP and APP shadow billing encounters
SL24_RC_DAYS	Service Line 24 - Residential Care days, Residential Care
SL25_MSP_ENC	Service Line 25 - Paediatrics, MSP and APP shadow billing encounters
SL25_DAD_ADJ_TDAY	Service Line 25 - Paediatrics total hospital days
SL25_DAD_ADJ_ARDA	Service Line 25 - Paediatrics acute rehab days
SL25_DAD_ADJ_ALCD	Service Line 25 - Paediatrics alternative level of care days
SL25_DAD_ADJ_ICUD	Service Line 25 - Paediatrics intensive care unit days
SL25_DAD_ADJ_CASE	Service Line 25 - Paediatrics number of inpatient cases
SL25_DAD_ADJ_RIWS	Service Line 25 - Paediatrics inpatient resource intensity weights
SL30_MSP_ENC	Service Line 30 - Surgery, MSP and APP shadow billing encounters
SL31_MSP_ENC	Service Line 31 - Out-of-province medical services provided to BC residents, encounters
SL99_MSP_ENC	Service Line 99 - Other, Physicians, MSP and APP shadow billing encounters
SL25_DAD_ADJ_CASE	Service Line 25 - Paediatrics number of inpatient cases
SL25_DAD_ADJ_RIWS	Service Line 25 - Paediatrics inpatient resource intensity weights
SL30_MSP_ENC	Service Line 30 - Surgery, MSP and APP shadow billing encounters
SL31_MSP_ENC	Service Line 31 - Out-of-province medical services provided to BC residents, encounters
SL99_MSP_ENC	Service Line 99 - Other, Physicians, MSP and APP shadow billing encounters

## G. MSP PHYSICIAN INFORMATION

DATA ELEMENT	DESCRIPTION
<b>General Physician Information</b>	
Information relevant to GPs and specialists.	
MSP_DOC_COUNT	Number of unique physicians seen by a patient
<b>GP Information</b>	
All costs (publicly funded expenditures) are estimate, use with caution.	
MSP_GP_IN_OFFICE_COST	GP in-office cost
MSP_GP_IN_OFFICE_VIS	GP in-office visits
MSP_GP_IN_OFFICE_COUNT	Number of unique GPs visited in office
MSP_GP_OUT_OF_OFFICE_COST	GP out-of-office cost
MSP_GP_OUT_OF_OFFICE_VIS	GP out-of-office visits
MSP_GP_HOMEVIS_COST	GP home visit cost
MSP_GP_HOMEVIS_VIS	GP home visits
MSP_GP_HOSPLVIS_COST	GP hospital visit cost
MSP_GP_HOSPLVIS_VIS	GP hospital visits
MSP_GP_LTCVIS_COST	GP long term care facility visit cost
MSP_GP_LTCVIS_VIS	GP long term care facility visits
MSP_GP_PALVIS_COST	GP palliative visit cost
MSP_GP_PALVIS_VIS	GP palliative visits
MSP_GP_EMVIS_COST	GP emergency visit cost
MSP_GP_EMVIS_VIS	GP emergency visits
MSP_GP_COST	GP cost
MSP_GP_ENC	GP encounters
<b>Specialist Information</b>	
All costs (publicly funded expenditures) are estimate, use with caution.	
MSP_MEDICAL_COST	Medical specialty cost
MSP_MEDICAL_ENC	Medical specialty encounters
MSP_SURGICAL_COST	Surgical specialty cost
MSP_SURGICAL_ENC	Surgical specialty encounters
MSP_DIAGNOSTIC_COST	Diagnostic specialty cost
MSP_DIAGNOSTIC_ENC	Diagnostic specialty encounters
MSP_OTHER_SPEC_COST	Medical Microbiology and Medical Genetics specialty cost
MSP_OTHER_SPEC_ENC	Medical Microbiology and Medical Genetics specialty encounters