

NM Department of Health HIDD Electronic Record Layout				Required?
Effective: Reporting 2019 data				
NOTE: The file has fixed width data columns and must be padded with spaces to provide the full record length of 2,120 (last position ending on space 2,121).				Note that all elements are required as available by facilities.
Data Set Name: HIDD (New Mexico Hospital Inpatient Discharge Data)				
Data Fields = 268				
Record Length = 2,121				
Data Element and Position	Start Location	Number denotes field length limit	Data Type	
1 New Mexico State License Number, left justified	1	8	Character	X
2 Medicare Provider Number, left justified	9	6	Character	X
3 Provider zip code (5 or 9 digits), left justified	15	9	Numeric	X
4 Admission hour (military time)	24	4	Numeric	X
5 Patient Admission Date (mmddyyyy)	28	8	Numeric	X
6 Point of Origin (1 to 9, A, D, E and F)	36	1	Character	X
7 Type of Admission (1 to 4, 9)	37	1	Numeric	X
8 Patient EMS Ambulance Run Number, left justified	38	6	Character	If applicable
9 Traffic Crash Report Number, left justified	44	6	Character	If applicable
10 Accident State (two-digit code), left justified	50	2	Character	If applicable
11 Patient Medical Record Number, left justified	52	24	Character	X
12 Patient Medicaid ID Number	76	19	Character	If applicable
13 Patient Control Number, left justified	95	20	Character	X
14 Birth weight (grams)	115	6	Numeric	If applicable
15 Attending Physician NPI (assigned by Medicare)	121	10	Character	X
16 Operating Physician NPI (assigned by Medicare)	131	10	Character	If applicable
17 Discharge hour (military time)	141	4	Numeric	X
18 Patient Discharge Date (mmddyyyy)	145	8	Numeric	X
19 Patient Status (01 to 99)	153	2	Character	X
20 Primary Payer Category (1 to 10, 88), right justified	155	2	Numeric	X
21 Primary Payer Identification Name, left justified	157	25	Character	X
22 Primary Payer Type (1 to 3, 88), right justified	182	2	Numeric	X
23 Secondary Payer Category (1 to 10, 88), right justified	184	2	Numeric	If applicable
24 Secondary Payer Identification Name, left justified	186	25	Character	If applicable
25 Secondary Payer Type (1 to 3, 88), right justified	211	2	Numeric	If applicable
26 Tertiary Payer Category (1 to 10, 88), right justified	213	2	Numeric	If applicable
27 Tertiary Payer Identification Name, left justified	215	25	Character	If applicable
28 Tertiary Payer Type (1 to 3, 88), right justified	240	2	Numeric	If applicable
29 1st Condition Code, left justified	242	2	Character	X
30 2nd Condition Code, left justified	244	2	Character	If applicable
31 3rd Condition Code, left justified	246	2	Character	If applicable
32 4th Condition Code, left justified	248	2	Character	If applicable
33 5th Condition Code, left justified	250	2	Character	If applicable
34 6th Condition Code, left justified	252	2	Character	If applicable
35 7th Condition Code, left justified	254	2	Character	If applicable
36 8th Condition Code, left justified	256	2	Character	If applicable
37 9th Condition Code, left justified	258	2	Character	If applicable
38 10th Condition Code, left justified	260	2	Character	If applicable
39 11th Condition Code, left justified	262	2	Character	If applicable
40 1st Revenue Code, left justified	264	4	Character	X
41 1st Revenue Code Description, left justified	268	24	Character	X
42 1st Revenue Code Service Date (mmddyyyy), left justified	292	8	Character	X
43 1st Revenue Code Service Units, right justified	300	7	Numeric	X
44 1st Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	307	9	Numeric	X
45 1st Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	316	9	Numeric	X
46 2nd Revenue Code, left justified	325	4	Character	If applicable
47 2nd Revenue Code Description, left justified	329	24	Character	If applicable
48 2nd Revenue Code Service Date (mmddyyyy), left justified	353	8	Character	If applicable
49 2nd Revenue Code Service Units, right justified	361	7	Numeric	If applicable
50 2nd Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	368	9	Numeric	If applicable
51 2nd Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	377	9	Numeric	If applicable
52 3rd Revenue Code, left justified	386	4	Character	If applicable
53 3rd Revenue Code Description, left justified	390	24	Character	If applicable
54 3rd Revenue Code Service Date (mmddyyyy), left justified	414	8	Character	If applicable
55 3rd Revenue Code Service Units, right justified	422	7	Numeric	If applicable
56 3rd Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	429	9	Numeric	If applicable
57 3rd Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	438	9	Numeric	If applicable
58 4th Revenue Code, left justified	447	4	Character	If applicable
59 4th Revenue Code Description, left justified	451	24	Character	If applicable
60 4th Revenue Code Service Date (mmddyyyy), left justified	475	8	Character	If applicable
61 4th Revenue Code Service Units, right justified	483	7	Numeric	If applicable
62 4th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	490	9	Numeric	If applicable
63 4th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	499	9	Numeric	If applicable
64 5th Revenue Code, left justified	508	4	Character	If applicable
65 5th Revenue Code Description, left justified	512	24	Character	If applicable
66 5th Revenue Code Service Date (mmddyyyy), left justified	536	8	Character	If applicable
67 5th Revenue Code Service Units, right justified	544	7	Numeric	If applicable
68 5th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	551	9	Numeric	If applicable
69 5th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	560	9	Numeric	If applicable
70 6th Revenue Code, left justified	569	4	Character	If applicable
71 6th Revenue Code Description, left justified	573	24	Character	If applicable
72 6th Revenue Code Service Date (mmddyyyy), left justified	597	8	Character	If applicable
73 6th Revenue Code Service Units, right justified	605	7	Numeric	If applicable
74 6th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	612	9	Numeric	If applicable
75 6th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	621	9	Numeric	If applicable
76 7th Revenue Code, left justified	630	4	Character	If applicable
77 7th Revenue Code Description, left justified	634	24	Character	If applicable
78 7th Revenue Code Service Date (mmddyyyy), left justified	658	8	Character	If applicable
79 7th Revenue Code Service Units, right justified	666	7	Numeric	If applicable
80 7th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	673	9	Numeric	If applicable
81 7th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	682	9	Numeric	If applicable
82 8th Revenue Code, left justified	691	4	Character	If applicable
83 8th Revenue Code Description, left justified	695	24	Character	If applicable
84 8th Revenue Code Service Date (mmddyyyy), left justified	719	8	Character	If applicable
85 8th Revenue Code Service Units, right justified	727	7	Numeric	If applicable
86 8th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	734	9	Numeric	If applicable
87 8th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	743	9	Numeric	If applicable
88 9th Revenue Code, left justified	752	4	Character	If applicable
89 9th Revenue Code Description, left justified	756	24	Character	If applicable
90 9th Revenue Code Service Date (mmddyyyy), left justified	780	8	Character	If applicable
91 9th Revenue Code Service Units, right justified	788	7	Numeric	If applicable

NM Department of Health HIDD Electronic Record Layout					Required?
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Data Set Name: HIDD (New Mexico Hospital Inpatient Discharge Data)					
Data Fields = 268					
Record Length = 2,121					
92	9th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	795	9	Numeric	If applicable
93	9th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	804	9	Numeric	If applicable
94	10th Revenue Code, left justified	813	4	Character	If applicable
95	10th Revenue Code Description, left justified	817	24	Character	If applicable
96	10th Revenue Code Service Date (mmdyyyy), left justified	841	8	Character	If applicable
97	10th Revenue Code Service Units, right justified	849	7	Numeric	If applicable
98	10th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	856	9	Numeric	If applicable
99	10th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	865	9	Numeric	If applicable
100	11th Revenue Code, left justified	874	4	Character	If applicable
101	11th Revenue Code Description, left justified	878	24	Character	If applicable
102	11th Revenue Code Service Date (mmdyyyy), left justified	902	8	Character	If applicable
103	11th Revenue Code Service Units, right justified	910	7	Numeric	If applicable
104	11th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	917	9	Numeric	If applicable
105	11th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	926	9	Numeric	If applicable
106	12th Revenue Code, left justified	935	4	Character	If applicable
107	12th Revenue Code Description, left justified	939	24	Character	If applicable
108	12th Revenue Code Service Date (mmdyyyy), left justified	963	8	Character	If applicable
109	12th Revenue Code Service Units, right justified	971	7	Numeric	If applicable
110	12th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	978	9	Numeric	If applicable
111	12th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	987	9	Numeric	If applicable
112	13th Revenue Code, left justified	996	4	Character	If applicable
113	13th Revenue Code Description, left justified	1000	24	Character	If applicable
114	13th Revenue Code Service Date (mmdyyyy), left justified	1024	8	Character	If applicable
115	13th Revenue Code Service Units, right justified	1032	7	Numeric	If applicable
116	13th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1039	9	Numeric	If applicable
117	13th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1048	9	Numeric	If applicable
118	14th Revenue Code, left justified	1057	4	Character	If applicable
119	14th Revenue Code Description, left justified	1061	24	Character	If applicable
120	14th Revenue Code Service Date (mmdyyyy), left justified	1085	8	Character	If applicable
121	14th Revenue Code Service Units, right justified	1093	7	Numeric	If applicable
122	14th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1100	9	Numeric	If applicable
123	14th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1109	9	Numeric	If applicable
124	15th Revenue Code, left justified	1118	4	Character	If applicable
125	15th Revenue Code Description, left justified	1122	24	Character	If applicable
126	15th Revenue Code Service Date (mmdyyyy), left justified	1146	8	Character	If applicable
127	15th Revenue Code Service Units, right justified	1154	7	Numeric	If applicable
128	15th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1161	9	Numeric	If applicable
129	15th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1170	9	Numeric	If applicable
130	16th Revenue Code, left justified	1179	4	Character	If applicable
131	16th Revenue Code Description, left justified	1183	24	Character	If applicable
132	16th Revenue Code Service Date (mmdyyyy), left justified	1207	8	Character	If applicable
133	16th Revenue Code Service Units, right justified	1215	7	Numeric	If applicable
134	16th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1222	9	Numeric	If applicable
135	16th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1231	9	Numeric	If applicable
136	17th Revenue Code, left justified	1240	4	Character	If applicable
137	17th Revenue Code Description, left justified	1244	24	Character	If applicable
138	17th Revenue Code Service Date (mmdyyyy), left justified	1268	8	Character	If applicable
139	17th Revenue Code Service Units, right justified	1276	7	Numeric	If applicable
140	17th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1283	9	Numeric	If applicable
141	17th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1292	9	Numeric	If applicable
142	18th Revenue Code, left justified	1301	4	Character	If applicable
143	18th Revenue Code Description, left justified	1305	24	Character	If applicable
144	18th Revenue Code Service Date (mmdyyyy), left justified	1329	8	Character	If applicable
145	18th Revenue Code Service Units, right justified	1337	7	Numeric	If applicable
146	18th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1344	9	Numeric	If applicable
147	18th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1353	9	Numeric	If applicable
148	19th Revenue Code, left justified	1362	4	Character	If applicable
149	19th Revenue Code Description, left justified	1366	24	Character	If applicable
150	19th Revenue Code Service Date (mmdyyyy), left justified	1390	8	Character	If applicable
151	19th Revenue Code Service Units, right justified	1398	7	Numeric	If applicable
152	19th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1405	9	Numeric	If applicable
153	19th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1414	9	Numeric	If applicable
154	20th Revenue Code, left justified	1423	4	Character	If applicable
155	20th Revenue Code Description, left justified	1427	24	Character	If applicable
156	20th Revenue Code Service Date (mmdyyyy), left justified	1451	8	Character	If applicable
157	20th Revenue Code Service Units, right justified	1459	7	Numeric	If applicable
158	20th Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1466	9	Numeric	If applicable
159	20th Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1475	9	Numeric	If applicable
160	21st Revenue Code, left justified	1484	4	Character	If applicable
161	21st Revenue Code Description, left justified	1488	24	Character	If applicable
162	21st Revenue Code Service Date (mmdyyyy), left justified	1512	8	Character	If applicable
163	21st Revenue Code Service Units, right justified	1520	7	Numeric	If applicable
164	21st Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1527	9	Numeric	If applicable
165	21st Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1536	9	Numeric	If applicable
166	22nd Revenue Code, left justified	1545	4	Character	If applicable
167	22nd Revenue Code Description, left justified	1549	24	Character	If applicable
168	22nd Revenue Code Service Date (mmdyyyy), left justified	1573	8	Character	If applicable
169	22nd Revenue Code Service Units, right justified	1581	7	Numeric	If applicable
170	22nd Revenue Code Line Item Charges, right justified (rounded to nearest whole dollar)	1588	9	Numeric	If applicable
171	22nd Revenue Code non-covered Charges, right justified (rounded to nearest whole dollar)	1597	9	Numeric	If applicable
172	Patient First Name, left justified	1606	14	Character	X
173	Patient Last Name, left justified	1620	15	Character	X
174	Patient Middle Initial	1635	1	Character	X
175	Patient Social Security Number	1636	9	Numeric	X
176	Patient Street Address, left justified	1645	40	Character	X
177	Patient City, left justified	1685	30	Character	If Zip Not Provided
178	Patient County, left justified	1715	20	Character	As Available
179	Patient State, left justified	1735	2	Character	If Zip Not Provided
180	Patient Zip code (5 or 9 digits), left justified	1737	9	Numeric	X
181	Patient Date of Birth (mmdyyyy)	1746	8	Numeric	X
182	Patient Race - multiple (R1 to R7, R9)	1754	12	Character	X
183	Patient Ethnicity (E1, E2, E6, E7)	1766	2	Character	X
184	Patient Tribal Affiliation - up to five (T1 to T22, T100, T200, T300)	1768	20	Character	X

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Data Set Name: HIDD (New Mexico Hospital Inpatient Discharge Data)					
Data Fields = 268					
Record Length = 2,121					
185	Sex of Patient (M,F, U)	1788	1	Character	X
186	Patient phone number, left justified	1789	10	Character	X
187	Patient Admitting Diagnosis code, left justified	1799	8	Character	X
188	Patient Principal Diagnosis code, left justified	1807	8	Character	X
189	Patient 2nd Diagnosis code, left justified	1815	8	Character	If applicable
190	Patient 3rd Diagnosis code, left justified	1823	8	Character	If applicable
191	Patient 4th Diagnosis code, left justified	1831	8	Character	If applicable
192	Patient 5th Diagnosis code, left justified	1839	8	Character	If applicable
193	Patient 6th Diagnosis code, left justified	1847	8	Character	If applicable
194	Patient 7th Diagnosis code, left justified	1855	8	Character	If applicable
195	Patient 8th Diagnosis code, left justified	1863	8	Character	If applicable
196	Patient 9th Diagnosis code, left justified	1871	8	Character	If applicable
197	Patient 10th Diagnosis code, left justified	1879	8	Character	If applicable
198	Patient 11th Diagnosis code, left justified	1887	8	Character	If applicable
199	Patient 12th Diagnosis code, left justified	1895	8	Character	If applicable
200	Patient 13th Diagnosis code, left justified	1903	8	Character	If applicable
201	Patient 14th Diagnosis code, left justified	1911	8	Character	If applicable
202	Patient 15th Diagnosis code, left justified	1919	8	Character	If applicable
203	Patient 16th Diagnosis code, left justified	1927	8	Character	If applicable
204	Patient 17th Diagnosis code, left justified	1935	8	Character	If applicable
205	Patient 18th Diagnosis code, left justified	1943	8	Character	If applicable
206	Patient Admitting Diagnosis code qualifier (9, 0, 1), left justified	1951	1	Character	X
207	Patient Principal Diagnosis code qualifier (9, 0, 1), left justified	1952	1	Character	X
208	Patient 2nd Diagnosis code qualifier (9, 0, 1), left justified	1953	1	Character	If applicable
209	Patient 3rd Diagnosis code qualifier (9, 0, 1), left justified	1954	1	Character	If applicable
210	Patient 4th Diagnosis code qualifier (9, 0, 1), left justified	1955	1	Character	If applicable
211	Patient 5th Diagnosis code qualifier (9, 0, 1), left justified	1956	1	Character	If applicable
212	Patient 6th Diagnosis code qualifier (9, 0, 1), left justified	1957	1	Character	If applicable
213	Patient 7th Diagnosis code qualifier (9, 0, 1), left justified	1958	1	Character	If applicable
214	Patient 8th Diagnosis code qualifier (9, 0, 1), left justified	1959	1	Character	If applicable
215	Patient 9th Diagnosis code qualifier (9, 0, 1), left justified	1960	1	Character	If applicable
216	Patient 10th Diagnosis code qualifier (9, 0, 1), left justified	1961	1	Character	If applicable
217	Patient 11th Diagnosis code qualifier (9, 0, 1), left justified	1962	1	Character	If applicable
218	Patient 12th Diagnosis code qualifier (9, 0, 1), left justified	1963	1	Character	If applicable
219	Patient 13th Diagnosis code qualifier (9, 0, 1), left justified	1964	1	Character	If applicable
220	Patient 14th Diagnosis code qualifier (9, 0, 1), left justified	1965	1	Character	If applicable
221	Patient 15th Diagnosis code qualifier (9, 0, 1), left justified	1966	1	Character	If applicable
222	Patient 16th Diagnosis code qualifier (9, 0, 1), left justified	1967	1	Character	If applicable
223	Patient 17th Diagnosis code qualifier (9, 0, 1), left justified	1968	1	Character	If applicable
224	Patient 18th Diagnosis code qualifier (9, 0, 1), left justified	1969	1	Character	If applicable
225	1st E-Code, left justified, (required)	1970	10	Character	If Princ. Diag. indicates trauma or poisoning
226	2nd E-Code, left justified	1980	10	Character	If applicable
227	3rd E-Code, left justified	1990	10	Character	If applicable
228	Patient Admitting Diagnosis, Present on Admission, left justified	2000	1	Character	X
229	Patient Principal Diagnosis, Present on Admission, left justified	2001	1	Character	X
230	Patient 2nd Diagnosis, Present on Admission, left justified	2002	1	Character	X
231	Patient 3rd Diagnosis, Present on Admission, left justified	2003	1	Character	X
232	Patient 4th Diagnosis, Present on Admission, left justified	2004	1	Character	X
233	Patient 5th Diagnosis, Present on Admission, left justified	2005	1	Character	X
234	Patient 6th Diagnosis, Present on Admission, left justified	2006	1	Character	X
235	Patient 7th Diagnosis, Present on Admission, left justified	2007	1	Character	X
236	Patient 8th Diagnosis, Present on Admission, left justified	2008	1	Character	X
237	Patient 9th Diagnosis, Present on Admission, left justified	2009	1	Character	X
238	Patient 10th Diagnosis, Present on Admission, left justified	2010	1	Character	X
239	Patient 11th Diagnosis, Present on Admission, left justified	2011	1	Character	X
240	Patient 12th Diagnosis, Present on Admission, left justified	2012	1	Character	X
241	Patient 13th Diagnosis, Present on Admission, left justified	2013	1	Character	X
242	Patient 14th Diagnosis, Present on Admission, left justified	2014	1	Character	X
243	Patient 15th Diagnosis, Present on Admission, left justified	2015	1	Character	X
244	Patient 16th Diagnosis, Present on Admission, left justified	2016	1	Character	X
245	Patient 17th Diagnosis, Present on Admission, left justified	2017	1	Character	X
246	Patient 18th Diagnosis, Present on Admission, left justified	2018	1	Character	X
247	1st E-Code, Present on Admission, left justified	2019	1	Character	If Princ. Diag. indicates trauma or poisoning
248	2nd E-Code, left justified, Present on Admission, left justified	2020	1	Character	If applicable
249	3rd E-Code, left justified, Present on Admission, left justified	2021	1	Character	If applicable
250	Patient Diagnosis Related Group (DRG) Code	2022	3	Numeric	X
251	Patient Principal Procedure code, left justified	2025	7	Character	If applicable
252	Patient 2nd Procedure code, left justified	2032	7	Character	If applicable
253	Patient 3rd Procedure code, left justified	2039	7	Character	If applicable
254	Patient 4th Procedure code, left justified	2046	7	Character	If applicable
255	Patient 5th Procedure code, left justified	2053	7	Character	If applicable
256	Patient 6th Procedure code, left justified	2060	7	Character	If applicable
257	Patient Principal Procedure date (mmdyyyyy)	2067	8	Character	If applicable
258	Patient 2nd Procedure date (mmdyyyyy)	2075	8	Character	If applicable
259	Patient 3rd Procedure date (mmdyyyyy)	2083	8	Character	If applicable
260	Patient 4th Procedure date (mmdyyyyy)	2091	8	Character	If applicable
261	Patient 5th Procedure date (mmdyyyyy)	2099	8	Character	If applicable
262	Patient 6th Procedure date (mmdyyyyy)	2107	8	Character	If applicable
263	Patient Principal Procedure code qualifier (9, 0, 1), left justified	2115	1	Character	If applicable
264	Patient 2nd Procedure code qualifier (9, 0, 1), left justified	2116	1	Character	If applicable
265	Patient 3rd Procedure code qualifier (9, 0, 1), left justified	2117	1	Character	If applicable
266	Patient 4th Procedure code qualifier (9, 0, 1), left justified	2118	1	Character	If applicable
267	Patient 5th Procedure code qualifier (9, 0, 1), left justified	2119	1	Character	If applicable
268	Patient 6th Procedure code qualifier (9, 0, 1), left justified	2120	1	Character	If applicable
		2121			

REPORTING SCHEDULE

Reporting period	Report due to NMDOH	NMDOH Returns integrity and validation errors	Final corrected report due to NMDOH
January 1 - March 31	May 31	June 15	June 30

NM Department of Health HIDD Electronic Record Layout				Required?
Effective: Reporting 2019 data				
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Data Set Name: HIDD (New Mexico Hospital Inpatient Discharge Data)				
Data Fields = 268				
Record Length = 2,121				
April 1 - June 30	August 30	September 15	September 30	
July 1 - September 30	November 30	December 15	December 31	
October 1 - December 31	February 28 of the following year	March 15 of the following year	March 31 of the following year	