Hospital claims contain diagnostic and procedure codes, along with patient demographics, identification, dates, and charge/payment information. Dates are read as SAS dates, for convenient calculation of length of stay, age of patient, and analysis of data by month, quarter, or day of the week. Because of reporting requirements, it is important to produce readable reports for the physicians, providers, and others served by the Oklahoma Foundation for Peer Review.

Counts and percentages for the reports can be produced by TABULATE, FREQ, and the MEANS procedure, or by producing the counts in a DATA step.

Nearly 20000 ICD-9 procedure and diagnosis codes, 14000 physician names, and 200 hospital names are formatted in SAS Format files. These formats aid tremendously in producing reports.

The largest of these files contains ICD-9-CM diagnoses, and requires 1,824,256 bytes of disk storage (1). These are 5-character codes. The commands for creating these files on AOS/VS follow:

LIBNAME H 'UDD:ALAN';
PROC FORMAT DDNAME = H;
VALUE $DIAGS
 '001 '="CHOLERA"
 '0010 '="CHOLERA D/T VIB CHOLERAE"
 '0011 '="CHOLERA D/T VIB EL TOR"
 '0019 '="CHOLERA NOS"
 '002 '="TYPHOID/PARATYPHOID FEV"
 ... etc;

1. DHHS Publication No. (PHS) 80-1260
US Department of Health and Human
Service-Health Care Financing Administra-
tion, "The International Classification of Diseases, 9th Revision, Clinical Modification" (ICD-9-CM).