



SHPDA P.O. Box 303025 Montgomery, Alabama 36130-3025  
(334) 242-4109 Voice ; (334)242 4113 Fax  
Data Division

**State Health Planning and  
Development Agency  
(SHPDA)**

# Memo

**To:** Data Consumers  
**From:** Bradford L. Williams – Data/Planning Director *BW*  
**Date:** October 22, 2012  
**Re:** Patient Origin Survey Subscriptions

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The data division is pleased to once again offer a discounted price for the Patient Origin Survey (POS). As has been done previously, consumers desiring one year's worth of Patient Origin Data will be able to purchase a subscription covering January 2011, April 2011, July 2011, and October 2011 reports. New for this year, the Patient Origin Survey will not only cover a complete year's worth of discharges, but will also show the month of discharge of every patient. This will allow you to compare market share data on a month by month basis more accurately than ever before.

Normally, each dataset runs \$3,000.00 quarterly, for a total of \$12,000.00 for one year's worth of POS data. With the new discounted subscription, the entire year's datasets can be purchased for \$10,000.00, a savings of \$2,000.00 over purchasing each set individually. To purchase the POS survey data at the discounted rate, please complete the attached subscription form along with one Data Usage Agreement for each of the four report periods and remit them with full payment to our office. If you subscribe, you will automatically receive the new datasets as soon as the data has been processed and verified by SHPDA data division staff. An additional charge is required if the datasets are shipped via FedEx. If you already have a FedEx customer number and wish to be billed by them for shipping, a space is enclosed on the subscription form for your number.

Enclosures: as stated



**STATE HEALTH PLANNING AND DEVELOPMENT AGENCY  
100 NORTH UNION STREET, SUITE 870  
MONTGOMERY, ALABAMA 36104  
PHONE: (334) 242-4103 FAX: (334) 242-4113**

**Subscription Notice for Patient Origin Survey**

The Patient Origin Survey is published four times a year by the State Health Planning and Development Agency Data Division. It contains all inpatient discharges for hospitals in Alabama including the following fields:

- SHPDA Hospital ID Number
- Patient's Age
- Patient's Sex
- Patient's Race or National Origin
- Patient's City, County, State and Zip Code of residence
- Patient's Length of Stay
- Patient's Service Code
- Patient's DRG/CMG (Diagnosis Related Group/Case Mix Group)
- Patient's Payer Source
- Patient's Month and Year of Discharge

You may subscribe to the Patient Origin Survey by completing the form below and submitting a check made out to the State Health Planning and Development Agency (in U.S. dollars only).

**SUBSCRIPTION RATE is \$10,000 PER YEAR**

Rates are subject to change.

First Name/Last Name/Suffix: \_\_\_\_\_  
Company/Facility Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_ Fax Number (\_\_\_\_) \_\_\_\_\_  
Federal Express Billing Number: \_\_\_\_\_  
Date Completed: \_\_\_\_\_

Please return this completed form with your check for the amount above to:  
State Health Planning and Development Agency  
ATTN: Patient Origin Survey Subscription  
P.O. Box 303025  
Montgomery, Alabama 36130-3025