Title 10 DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Subtitle 37 HEALTH SERVICES COST REVIEW COMMISSION

Chapter 06 Submission of Hospital Discharge Data Set to the Commission

Authority: Health-General Article, §§19-207, 19-211, 19-212, 19-215, and 19-216, Annotated Code of Maryland

NOTICE OF FINAL ACTION

On February 5, 2014, the Health Services Cost Review Commission adopted amendments to Regulations .01 under COMAR 10.37.06 Submission of Hospital Discharge Data Set to the Commission. This action, which was proposed for adoption in 40:24 Md. R. 2041 (December 2, 2013), has been adopted as proposed.

Effective Date: March 3, 2014

JOHN M. COLMERS Chairman Health Services Cost Review Commission

.01 Collection and Submission of Data.

A. Effective [February 1, 2009] January 1, 2014, each hospital under the jurisdiction of the Health Services Cost Review Commission (Commission) shall submit the data elements as published in the Maryland Register and on the Commission's website [(http://www.hscrc.state.md.us)] (http://www.hscrc.maryland.gov) to the Commission within [60] 15 days following the last day of the [quarter] month during which the patient was discharged or died. The format for submission shall also be as published in the Maryland Register and on the Commission's website.

B. (text unchanged)

JOHN M. COLMERS Chairman

Health Services Cost Review Commission

Subtitle 37 HEALTH SERVICES COST REVIEW COMMISSION

10.37.06 Submission of Hospital Discharge Data Set to the Commission

Authority: Health-General Article, §§19-207, 19-211, 19-212, 19-215, and 19-216, Annotated Code of Maryland

Notice of Proposed Action

[13-386-P]

The Health Services Cost Review Commission proposes to amend Regulation .01 under COMAR 10.37.06 Submission of Hospital Discharge Data Set to the Commission. This action was considered and approved for promulgation by the Commission a a previou y announced open meeting held on October 9, 2013, notice of which was given pursuant to State Government Article, §10-506(c). Annotated Code of Maryland. If adopted, the proposed amendments would become effective on or about February 3, 2014.

Statement of Purpose

The purpose of this action is to submit monthly patient level inpatient discharge data in the manner and format prescribed by the Commission, and to enable the Commission to fully monitor population-based metrics and approved revenue under population-based payment models. Additionally, these proposed regulations are to be effective on January 1, 2014, since they represent an essential component in the development and implementation of new rate regulatory approaches and policies that encompass quality and clinical care improvement elements.

Comparison to Federal Standards

There is no corresponding federal standard to this proposed action.

Estimate of Economic Impact

I. Summary of Economic Impact. Hospitals will be required to submit inpatient data monthly, instead of quarterly. Monthly data submissions will improve HSCRC staff's ability to monitor population-based metrics (including readmissions and MHACs) as well as approved revenue under population-based models on an ongoing basis.

Revenue (R+/R-)

II. Types of Economic Impact.

Expenditure (E+/E-) Magnitude

A. On issuing agency:

Expenditure

(E+)

\$135,000

B. On other State agencies: NONE

C. On local governments:

NONE

Benefit (+)

Cost (-)

Magnitude

D. On regulated industries or trade groups:

Cost

(-)

Moderate

E. On other industries or

trade groups:

NONE

F. Direct and indirect effects

on public:

NONE

III. Assumptions. (Identified by Impact Letter and Number from Section II.)

- A. These regulations increase the number of required submissions from hospitals. The magnitude reflects the increase in the cost to the data vendor to process the additional submissions.
- D. The regulatory change accelerates the time for submission of monthly patient-level inpatient data submissions, from 45 days to 15 days, improving the ability of HSCRC staff to monitor, produce annual rate orders, and provide feedback to hospitals in a timely manner. This change is highly desired by the payer and provider community as they develop and implement care intervention strategies. Although many hospitals already produce their case mix data on a monthly basis for internal purposes, there may be a moderate economic impact on the hospitals to produce the monthly case mix data for the HSCRC.

Economic Impact on Small Businesses

The proposed action has minimal or no economic impact on small businesses.

Impact on Individuals with Disabilities

The proposed action has no impact on individuals with disabilities.

Opportunity for Public Comment

Comments may be sent to Diana Kemp, Regulations Coordinator, Health Services Cost Review Commission, 4160 Patterson Avenue, Baltimore, MD 21215, or call 410-764-2576, or email to diana.kemp@maryland.gov, or fax to 410-358-6217. Comments will be accepted through January 2, 2014. A public hearing has not been scheduled.

.01 Collection and Submission of Data.

- A. [Unless an exception or an extension has been granted under §C of this regulation] *Beginning on January 1, 2014*, each hospital under the jurisdiction of the Health Services Cost Review Commission shall submit to the Commission:
- (1) The data elements required by this chapter within [45] 15 days after the last day of the [quarter] month when the patient was discharged or died; and
 - (2) (text unchanged)
 - B. Submission Requirements.
- (1) The data elements submitted under §A(1) o this regulation shall be made in the form as published in the Maryland Register and on the Commission's website [(http://hscrc.state.md.us)] (http://hscrc.maryland.gov).
 - (2) (text unchanged)
 - C. D. (text unchanged)

JOHN M. COLMERS

Chairman

Health Services Cost Review Commission