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Date: January 28, 2013
To: Hospital Chief Financial Officers and Case Mix Liaisons
From: Claudine Williams, HSCRC
Subject: Revisions to the Inpatient and Outpatient Casemix Data Submission Requirements

The purpose of this memo is to describe revisions to the inpatient and outpatient case mix data submission requirements (as referenced in COMAR 10.37.06.01). These revisions are effective July 1, 2013 (for submissions of FY 2014 data, due in December 2013).

Background

In the spring of 2012, HSCRC staff met with MHA and representatives from acute, chronic and psychiatric hospitals, to discuss the transition to ICD-10. During these discussions, it became evident that the HSCRC should revise all the data submission requirements to accommodate the new ICD-10 diagnosis and procedure codes.

In addition, during the last legislative session, the Maryland Legislature required the HSCRC and MHCC to study the feasibility of including racial and ethnic performance data tracking in quality incentive programs. During the summer of 2012, the HSCRC convened a Health Disparities Workgroup that discussed the federal standards for collecting race and ethnicity information and recommended revisions to the race categories submitted by the hospitals to the HSCRC in the case mix data. The workgroup recommended three changes to the data submission requirements for race and ethnicity:

1. Add separate variables for each race category to accurately capture each component of the patient's race (i.e., White and Black, or Black and Asian, etc.).
2. Add a variable to capture the patient's ancestry or ethnic/country of origin, and
3. Add a variable to capture the patient's preferred spoken language for a health-related encounter.

Since it was necessary to revise the datasets to appropriately collect race and ethnicity data, as well adjust for ICD-10 coding, HSCRC staff identified this as an appropriate time to synchronize the inpatient, outpatient, chronic and psychiatric data to ensure consistency across datasets, where applicable.

Revisions to the Inpatient Case Mix Dataset

The HSCRC staff has revised the inpatient case mix data to include data elements to capture more granular race, language and country of origin information, psychiatric clinical information, as well as additional procedures and dates to accommodate the new ICD-10 coding.

The revisions to the inpatient data submission requirements are listed below and highlighted in red in the submission requirements:

1. Revision to Nature of Admission categories (item #7)
2. Revisions to the Source of Admission categories (item #8)
3. Removal of the Race variable (item #12)
4. Revisions to the Ethnicity categories (item #13)
5. Revisions to the Primary and Secondary Health Plan Payer categories (items #17-18)
6. Revisions to the Disposition of Patient categories (item #20)
7. Revisions to the Major Service and Special Care Unit Days categories (item #26)
8. Revisions to the Type of Daily Service categories (item #27)
9. Revisions to the Provider Specific Admission Source categories (item #76)
10. Revisions to the Provider Specific Discharge Disposition categories (item #77)

Data elements added to the inpatient dataset are listed below:

1. Addition of Nature Psychiatric Admission (item #38)
2. Addition of Professional Referral Flag (item #39)
3. Addition of ICD-9/ICD-10 Coding Flag (item #40)
4. Addition of separate race categories (items #100-107)
5. Addition of Country of Origin (item #108)
6. Addition of Preferred Spoken Language (item #109)
7. Addition of Minutes and Date of Physical Restraint Event 1-10 (items # 110.1-10)

8. Addition of Minutes and Date of Seclusion Event 1-10 (items # 111.1-10)
9. Addition of Medication Panel flag (item #112)
10. Addition of Constant Observation, 96 hours or greater flag (item #113)
11. Addition of Other Procedures 15-29 and dates (item #114-128)

Currently the inpatient data elements are arranged into 3 Record Types. There are some minor changes to these record types. To accommodate the additional data items, HSCRC added 4 additional record types. Please refer to the Inpatient Data Submission Elements and Format document for data submission instructions.

Revisions to the Outpatient Case Mix Dataset

The HSCRC staff has revised the outpatient case mix data to include data elements to capture more granular race, language and country of origin information, psychiatric clinical information, as well as additional diagnosis codes to accommodate the new ICD-10 coding. Another major change to the outpatient data set is the reduction of the medical record number length from 13 numbers to 11 numbers. This change facilitates HSCRC staff to more easily merge data from the inpatient and outpatient case mix datasets.

The revisions to the outpatient data submission requirements are listed below and highlighted in red in the submission requirements:

1. Reduction in length of Medical Record number (item #2)
2. Removal of the Race variable (item #11)
3. Revisions to the Ethnicity categories (item #12)
4. Revisions to the Primary and Secondary Health Plan Payer categories (items #16-17)
5. Revisions to the Major Service and Special Care Unit Days categories (item #25)
6. Revisions to the Type of Daily Service categories (item #26)
7. Revisions to the Provider Specific Admission Source categories (item #74)
8. Revisions to the Provider Specific Discharge Disposition categories (item #75)

Data elements added to the outpatient dataset are listed below:

1. Addition of ICD-9/ICD-10 Coding Flag (item #22)
2. Addition of Country of Origin (item #23)
3. Addition of separate race categories (items #24-31)

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4. Addition of Preferred Spoken Language (item #59)
5. Addition of Other Diagnosis 16-28 (item #61-73)
6. Addition of Nature Psychiatric Admission (item #76)
7. Addition of Professional Referral Flag (item #77)
8. Addition of Minutes and Date of Physical Restraint Event 1-5 (items # 78.1-5)
9. Addition of Minutes and Date of Seclusion Event 1-15 (items # 79.1-5)

Currently the outpatient data elements are arranged into 2 Record Types. There are some minor changes to these record types. To accommodate the additional data items, HSCRC added 1 additional record type. Please refer to the Outpatient Data Submission Elements and Format document for data submission instructions.

Transition to ICD-10

In preparation for the transition to ICD-10 (scheduled for October 2014), the HSCRC data processing vendor is prepared to work with hospitals to test discharge data that contain ICD-10 codes. As listed above, HSCRC has included a flag (ICD-9/ICD-10 Coding flag, item #22) to all datasets to distinguish if submitted codes are either ICD-9 or ICD-10. HSCRC staff will be providing guidance in the fall of 2013 to hospitals regarding the submission of ICD-10 data to the HSCRC's data processing vendor for testing.

Effective Date

These changes, described above, are effective for discharges/visits on or after July 1, 2013. This data for FY 2014 is due to the HSCRC in November 2013. While HSCRC staff is cognizant that this will require changes to hospitals' data collection and submission systems, please appreciate that federal and state legislation has prompted many of the additions and modifications. HSCRC staff will work with its data processing vendor to ensure that these changes will not prevent hospitals from submitting the data as outlined in the data production schedule.

Please contact me at Claudine.Williams@maryland.gov or Oscar Ibarra at Oscar.Ibarra@maryland.gov with any questions.