## CASE MIX UPDATES WEBINAR

Kathy Hines | *Director of Data Compliance* & Strategy February 16, 2017

> CHIA. center for health information

and analysis

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### Agenda



- 11:00 Welcome
- 11:05 FY17 Submission Guide Highlights
- 11:20 Focus on Emergency Department (ED) Boarding and Outpatient Observation
- 11:40 Source of Payment / Payer Code List
- 11:40 Timeline / Next Steps
- 11:45 Questions & Comments

# SUBMISSION GUIDE HIGHLIGHTS

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### **Submission Guide Changes**

Key Changes:	Files Types
Added Unique Patient Identifiers:	All
<ul> <li>Patient First/ Last Name (required when SSN is unknown),</li> </ul>	
Health Plan Member ID	
Updated Transfer Org ID guideline to include Intermediate Care Facilities	All
(ICFs)	
Updated Attending / Operating / Other Caregiver NPI edits	All
Updated Payer Source Codes /	All
Relieve dependency on single Payer Type value	
Added Service Line Item Charges	ED Only
Added additional Diagnosis Fields	OOD Only

## EMERGENCY DEPARTMENT USAGE

### CHANGES & REVISIONS FOR HOSPITAL INPATIENT AND HOSPITAL OUTPATIENT

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## New Field: Number of Hours in ED

For discharges with an admission source, revenue code (HIDD only) or ED flag denoting the patient came from the hospital's ED, CHIA is requesting the **number of hours** the patient was in the ED before the transfer to an inpatient bed or outpatient bed

Number of Hours in ED	9(3)	R/Z	103 105	<ul> <li>Must be present if Source of Admission is 'R' –</li> <li>Within hospital Emergency Room Transfer</li> </ul>	Note
				- Must be present if Revenue Codes 045x are used	
				- Must be present if ED Flag is set to 1 or 2.	

#### Comments:

CHIA is expecting the providers to report the number of hours in the ED; truncating any partial time. There is no rounding, either back or forward, just a whole number entry.

#### **Examples:**

Q1: If total time in the ED is 2 hours and 29 minutes what would you expect to see for total number of hours? A1: The entry is "2"

Q2: If total time in the ED is 2 hours and 30 minutes what would you expect to see? A2: The entry is "2"

Q3: If total time in the ED is 2 hours and 31 minutes what would you expect to see? A3: The entry is "2"

## **New Fields: ED Registration Date and Time**

For discharges with an admission source, revenue code (HIDD only) or ED flag denoting the patient came from the hospital's ED, CHIA is requesting the **ED registration date and time**.

Emergency	X(8)	L/B	106	- Must be present if Source of Admission is 'R' – Within	Note
Department			113	hospital Emergency Room Transfer.	
Registration Date				<ul> <li>Must be present if Revenue Codes 045x are used</li> <li>Must be present if ED Flag is set to 1 or 2.</li> </ul>	
				<ul> <li>Must be valid date format (CCYYMMDD).</li> <li>Must be less than or equal to ED Discharge Date.</li> </ul>	
Emergency Department Registration Time	9(4)	L/B	114 117	<ul> <li>Must be present if Source of Admission is 'R' – Within hospital Emergency Room Transfer.</li> <li>Must be present if Revenue Codes 045x are used</li> <li>Must be present if ED Flag is set to 1 or 2.</li> <li>Must be numeric.</li> <li>Must range from 0000 to 2359.</li> </ul>	Note

## **New Fields: ED Discharge Date and Time**

For discharges with an admission source, revenue code (HIDD only) or ED flag denoting the patient came from the hospital's ED, CHIA is requesting the **ED discharge date and time**.

Emergency	X(8)	L/B	118	-	Must be present if Source of Admission is 'R' – Within	Note
Department			125		hospital Emergency Room Transfer.	
Discharge Date				-	Must be present if Revenue Codes 045x are used	
				-	Must be present if ED Flag is set to 1 or 2.	
				-	Must be valid date format (CCYYMMDD).	
				-	Must be greater than or equal to Registration Date.	
Emergency	9(4)	L/B	126	-	Must be present if Source of Admission is 'R' – Within	Note
Department			129		hospital Emergency Room Transfer.	
Discharge Time				-	Must be numeric.	
				-	Must range from 0000 to 2359.	
				-	Must be greater than the registration time when the	
					discharge date and registration date are equal.	

## SOURCE OF PAYMENT / PAYER TYPE

## CHANGES & REVISIONS FOR HOSPITAL INPATIENT, EMERGENCY DEPARTMENT OR OBSERVATION DATA



## **Source of Payment / Payer Type Changes**

Propose Delay in Implementation of Payer Source Changes

- Codes in use in FY16 would remain in use until FY18
- HIDD Payer Type/Source edits modified to offer more flexibility

FY18 Source of Payment/Type

- Reflect updated codes
- Include additional 'Other' categories
- Include Payer Type in ED/OOD



### **Timeline / Next Steps:** Delayed Dates for Quarter 1 Submission

FY17 Case Mix Intake Process	Draft Timeline	Status
Provider Comment Period Ends	September 16, 2016	Ended
Administrative Bulletin and Guides Adopted	September 30, 2016	Complete
CHIA and Providers Update Systems	Fall 2016 – Spring 2017	In Progress
Provider Testing Period	Target – April / May 2017	On Target
Quarter 1 Submission (Delayed Due Date)	June 14 <sup>th</sup> , 2017	On Target
Quarter 2 Submission (No Change)	June 14 <sup>th</sup> , 2017	On Target



## Submission Guides Published to CHIA Website http://www.chiamass.gov/hospital-data-specification-manuals/

CHIA. HEALTH INFORMATION AND ANALYSIS CHIA DATA ABOUT CHIA								
MA APCD	Case Mix Data	Hospital and Other Provider Data	Information for Data Submitters	Public Records Request				
Hospital Case Mix Data Specifi	CHIA Data » Acute Hospital Case Mix Data » Information for Data Submitters: Acute Hospital Case Mix » Hospital Case Mix Data Specification Manuals Hospital Case Mix Data Specification Manuals							
	ecification Manuals provide detailed must follow when submitting Case		nat, data specifications, data elem	ent definitions, and quality				
CHIA has released both final an	d redline versions of FY17 Hospital I	Draft Case Mix Data Specifications	and Payer Sources Codes.					
Submission guides effective fro	m the quarterly submission of 10/1/	2014 - 12/31/2014 through the quar	terly submission of 6/1/2016 - 9/30	/2016 are also available below.				
	FY17 Final Hospital Case Mix Data Specifications Hospital Inpatient Discharge Data Specifications Octaber 2016 DDF   Word							
Hospital Emergency Department Data Specifications October 2016 PDF   Word								
Hospital Outpatient Observation Data Specifications October 2016 PDF   Word								
Transfer Organization ID (ORG I February 2017 Excel	D) List							
Payer Source Codes June 2016 Excel								

# **QUESTIONS & COMMENTS**

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## **Upcoming Activities:**

#### **Verification Reports:**

HIDD Interim Reports will be coming out within the next couple of weeks, followed by EDD.

These reports do not require any formal response but can be used to help ensure everyone is ontrack for clean deliverables prior to FY16 reporting for Case Mix.

CHIA Question (from the Provider Finance & Analysis team)

In reviewing 403 Cost Reports, a trend has been noticed where HIDD Discharges and ED Visits tend to count higher than what is totaled from their respective Case Mix filings.

The team is interested in Hospital input on reasoning that may justify the increases against the filed Case Mix data.

## **Follow-up Contacts**

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