

# Massachusetts Case Mix

## FY 2022 Hospital Emergency Department Visit Data

### RELEASE NOTES

#### Background

These release notes provide information for users of the FY 2022 Emergency Department Visit Data (EDD). The data includes emergency visits from Massachusetts acute care hospitals for the period of October 1, 2021 – September 30, 2022.

The Center for Health Information and Analysis (CHIA) has made minimal changes to the FY 2022 data structure/elements. Users of the data should consult the Fiscal Year 2022 Documentation Manual for further details.

#### Data Notes

- Steward Norwood Hospital (Org Id 41) temporarily closed on June 29, 2020 due to flooding and did not submit quarterly EDD files for FY 2022. This site is currently undergoing a complete renovation and rebuild.
- UMass Memorial Healthcare confirmed a data issue for their hospital sites (Org Id 71, 130, 131, 132, 133). All ED Visit Types are reported as “1-Emergency” in quarters 3 and 4. This is currently under investigation.

#### FY 2022 – Provider Specific Notes

Prior to releasing the Final FY 2022 EDD, CHIA provides the hospitals with a profile of the data submitted. Providers may resubmit data or provide written feedback to CHIA. Below is a summary of some of the key feedback received.

- Anna Jaques Hospital (Org Id 1):
  - Noted quarterly ED visit volume fluctuations are due to seasonal summer activity.
- Beth Israel Deaconess Medical Center - East Campus (Org Id 10):
  - Noted COVID-19 ED visit patterns were still disrupted in early FY 2022 resulting in increased Source of Visits reported as ‘M-Walk-In/Self Referral’.
  - Noted shifts in Patient Race between ‘Unknown’ and ‘Other’ related to changes in Federal reporting guidelines.
- Beth Israel Deaconess Hospital - Milton (Org Id 98):
  - Noted shifts in reporting of Patient Ethnicity are related to expansion of ethnicity categories and additional efforts to capture this data.
- Brigham and Women’s Faulkner Hospital (Org Id 59):
  - Noted variation in Type of Visit reported as ‘2-Urgent’ is a product of low volumes.
  - Noted the combination of inpatient capacity and an increase in ED observation patients resulted in patients spending >24 hours in ED.
- Cape Cod Hospital (Org Id 39):
  - Noted staff training on Type of Visit resulted in better reporting and a decline in ‘2-Urgent’ visits.
  - Noted EMR system conversion mapping resulted in Source of Visit category shifts.
  - Noted fluctuations in Patient Ethnicity are currently under investigation and will include staff training.
  - Noted incorrect reporting of Payer Type ‘H-Health Safety Net’ due to a mapping issue. The correct payer type volume is 1,217 not the 600 reported. Files were not able to be resubmitted prior to finalizing FY 2022 EDD.

- Emerson Hospital (Org Id 57):
  - Noted shifts in Source of Visit reporting are due to improved reporting in FY 2022.
  - Noted incorrect reporting of Patient Departure Status. There were 142 patient elopements in FY 2022, not the reported volume of 538. Files were not able to be resubmitted prior to finalizing FY 2022 EDD.
- Fairview Hospital (Org Id 8):
  - Noted significant increase in FY 2022 ED visit volumes resulted in an increase of patient elopements.
- Falmouth Hospital (Org Id 40):
  - Noted staff training on Type of Visit resulted in better reporting and a decline in '2-Urgent' visits.
  - Noted EMR system conversion mapping resulted in Source of Visit category shifts.
  - Noted fluctuations in Patient Ethnicity are currently under investigation and will include staff training.
  - Noted incorrect reporting of Payer Type 'H-Health Safety Net' due to a mapping issue. The correct payer type volume is 422 not the 138 reported. Files were not able to be resubmitted prior to finalizing FY 2022 EDD.
- Harrington Memorial Hospital (Org Id 68):
  - Noted shifts in Patient Departure Status reflect EMR enhancements as well as staff retraining to accurately capture this data.
  - Noted patients' refusal to provide SSNs to registration staff resulted in an increase of 'Unknown' reporting.
- Holyoke Medical Center (Org Id 77):
  - Noted discrepancies in Type of Visit reported as '2-Urgent' due to incorrect reporting at Registration related to an EMR system upgrade. Staff training has been completed to better reflect the level of patients coming through the ED.
  - Noted increased reporting of 'Unknown' Patient Ethnicity due to patient elopements from long ED wait times.
- Lawrence General Hospital (Org Id 83):
  - Noted Registration staff training will be a focus area in FY 2023 to capture better reporting of Type of Visit, Source of Visit, Mode of Transport and Homeless status. Fluctuations in these data elements are currently under investigation.
  - Noted increased volume of patients departing the ED against medical advice (AMA) related to long wait times.
- Martha's Vineyard Hospital (Org Id 88):
  - Noted quarterly ED volume fluctuations are due to seasonal population.
  - Noted increased Source of Visits reported as '0-Information Not Available' due to lack of overnight Registration staff and a learning curve for new RN employees with arriving patients. Staff training has been completed.
- Milford Regional Medical Center (Org Id 97):
  - Noted shifts in Source of Visit, Hispanic Indicator and Mode of Transport are a result of capturing more precise information during registration.
  - Noted increased reporting of patient elopements due to long ED wait times.
- South Shore Hospital (Org Id 122):
  - Noted decreased volume of patients being transferred from the ED is related to a decline in COVID-19 cases and the hospital's need to leverage beds at other facilities.
  - Noted improved reporting of Number of Hours in ED related to patient flow to other levels of care including patient movement, the realignment of bed capacity and the opening of additional adult Medical Surgical areas and an ED Psychiatric unit.
  - Noted patients' refusal to provide SSNs to registration staff resulted in an increase of 'Unknown' reporting.
- Steward Hospitals:
  - Noted Homeless status is being captured effective March 2023.
  - Noted Payer Type "1-Self Pay" is overstated in FY 2022 and "H-Health Safety Net" is understated due to insurance plan updates. Files were not able to be resubmitted prior to finalizing FY 2022 EDD.

The following hospitals resubmitted data prior to finalizing the FY 2022 EDD release available in May 2023.

- Athol Hospital (Org Id 2) and Heywood Hospital (Org Id 73) resubmitted quarter 1 to correct source of visit and service line item codes.
- Berkshire Medical Center (Org Id 7) and Fairview Hospital (Org Id 8) resubmitted quarter 1 to correct Hispanic indicator.
- Cambridge Health Alliance - Cambridge Campus (Org Id 27) resubmitted all quarters to correct zip codes.
- Falmouth Hospital (Org Id 40) resubmitted quarter 1 to include 69 missing ED patient records and to correct DNR status and homeless indicator.
- Lowell General Hospital (Org Id 85), Lowell General Hospital - Saints Campus (Org Id 115), MelroseWakefield Hospital (Org Id 141) and Tufts Medical Center (Org Id 104) resubmitted quarters 3 and 4 to correct source of visit and patient departure status.
- Massachusetts General Hospital (Org Id 91) resubmitted quarter 1 to correct patient ethnicity.
- MetroWest Medical Center - Framingham Campus (Org Id 49) and Saint Vincent Hospital (Org Id 127) resubmitted all quarters to correct ED discharge time.
- North Shore Medical Center - Salem Campus (Org Id 116) resubmitted quarter 1 to correct ED registered date/time and ED discharge date/time.
- Steward Carney Hospital (Org Id 42) resubmitted quarter 4 to correct patient ethnicity codes reported as 100% unknown.

## End User Support

Data documentation for Case Mix data releases can be accessed at <http://www.chiamass.gov/case-mix-data/>. For more information about specific data elements, facility reporting, or other questions about the data, please contact CHIA by emailing [CaseMix.data@chiamass.gov](mailto:CaseMix.data@chiamass.gov).