HCAI Department of Health Care Access and Information

Patient Data Section
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Quick Notes

Issue 68

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IP Inpatient Discharges | ED Emergency Department | AS Ambulatory Surgery

Publicly Available Data Products

HCAI produces datasets and data products from a variety of sources. The following sources of health care data may be of interest to you and your facility:

Open Data Portal

The Open Data Portal (ODP) is an initiative that was launched by the California Health and Human Services Agency (CalHHS) to provide public access to non-confidential health and human services data. HCAI patient level data is included in Inpatient (IP), Emergency Department (ED), and Ambulatory Surgery (AS) "pivot profiles." These Excel files include number of visits, expected payer, discharge disposition, age groups, sex, preferred language spoken, race groups, and principal diagnosis groups. The data can be summarized statewide or for a specific hospital, county, service level, teaching status, etc. It is hoped that the data that can be found on the ODP will "*spark innovation, promote research and economic opportunities, engage public participation in government, increase transparency, and inform decision-making.*" *

Facility Finder

The facility finder allows you to see certain information about California hospitals, clinics, hospices, and long-term care facilities. Searching for a facility will return location and contact information, total revenues and payor mix, average length of stay, current licensing, building safety data, and current construction projects.

HCAI Data Visualizations

HCAI creates visualizations and other data- based products from the information it manages. These products provide context to make data more useful and meaningful. The visualizations include data on subjects that are as diverse as cancer surgeries, health care construction costs, hospital fair pricing policies, market share areas, and prescription drug price increases.

*data.chhs.ca.gov/about

NEW: Duplicate Record Warning Edit

The identification of duplicate records in the ED and AS data is a new feature in SIERA. The Duplicate Records Edit Program evaluates data for possible duplicate records in a report period by comparing data elements between each record reported. There are two edits in the Duplicate Edit Program: DW01, which looks for records where all data elements are the same, and DW02, which uses the same criteria but excludes total charges. A full description of the new edits can be found in the ED & AS Edit Flag Description Guide. Currently these are warning flags but may become critical flags in the future. If your Edit Summary indicates possible duplicates, please review the report, and make corrections as needed.

Regulatory Update

The Patient Data Section submitted a nonsubstantive Section 100 regulatory proposal to the Office of Administrative Law that was approved on December 14, 2023. The approved changes were made to remove obsolete regulatory language and update form numbers for three forms cited in regulation, including the User Account Administrator Agreement. All updated forms have an August 2023 revision date. See HCAI's Laws and Regulations page for details.

ED/AS Reporting Reminders:

What Constitutes an Encounter?

For HCAI ED and AS data reporting, an encounter is defined as "*a face-to-face contact between an outpatient and a provider,*" where a provider *"has primary responsibility for assessing and treating the condition of the patient at a given contact and exercises independent judgment in the care of the patient."* Telemedicine does not meet this definition of a face-to-face encounter.

AS Data records must meet the additional criteria of having at least one significant ambulatory surgery procedure which was carried out on an outpatient basis. See additional information about the definition of an ambulatory surgery suite here.

Reporting ED to AS or AS to ED Transfers

Imagine that an ED patient is sent to the same facility's AS for an emergency cardiac procedure. There are three different ways that a facility may report this scenario:

- The patient's ED and AS encounters may be reported as one combined record in the ED data.
- The patient's ED and AS encounters may be reported as one combined record in the AS data.
- The patient's ED and AS encounters may be reported separately.

In this example and other similar scenarios, it may be preferable to report an encounter as a combined record in the ED data, especially in cases of an accident, trauma, or those that resulted in death, since AS patients are usually presumed ambulatory before and after an AS procedure. The same three reporting options listed above also apply to an AS patient who is transferred to the same facility's ED.

ICD-10-PCS code Z53.21

Past ED data shows a significant number of records reported with ICD-10 diagnosis code Z53.21. These records may not meet the definition of an encounter since Z53.21 means *"procedure and treatment not carried out due to patient leaving prior to being seen by health care provider."* To review your ED data for records with Z53.21 reported as a Principal or Other Diagnosis, you may generate a Selected Data Element Report and review the records to determine if they represent a reportable encounter, or if they should not be reported.

Patient Address Guidance on Reporting US Territories

The Patient Address data element has been updated to accept the reporting of US territories in either the State or Country fields. In conjunction with reporting a US territory, the ZIP Code shall be reported using the unique code assigned to the specific geographic area by the United States Postal Service. ZIP Code value YYYYY is to be used if the patient resides outside of the US and its territories.

What's New

The following resources have been updated on our website:

- Inpatient Reporting Manual
- ED & AS Reporting Manual
- Inpatient Edit Flag Description Guide
- ED & AS Edit Flag Description Guide
- Inpatient Report Periods with Due Dates 2024 Calendar
- ED & AS Report Periods with Due Dates 2024 Calendar