

**HPC**

New Mexico  
Health Policy  
Commission



# New Mexico's state reporting of Hospital Inpatient Discharge Data (HIDD)

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2011 NMHA Annual Meeting, September 28, 2011

# NM State data reporting (HIDD)

## Agenda

- The New Mexico Health Policy Commission (HPC)
- Health Information Systems Act
- HPC rule
- Hospital Inpatient Discharge Database (HIDD)
- Historical rule changes and outcomes
- Calendar year 2011 rule changes for race, ethnicity and tribes
- Status of compliance
- Lessons learned
- Usage of reported data

# NM Health Policy Commission (HPC) Act

## 9-7-11 NMSA 1978 New Mexico Health Policy Commission Act

- Created in 1991
- Nine commission members appointed by the governor
- **Provide a forum for the discussion of complex and controversial health policy and planning issues** and for the creative exploration of ideas, issues and problems surrounding health policy and planning, including the interrelations with education, the environment and economic well-being.
- **Obtain and evaluate information** from a broad spectrum of New Mexico's society to develop and monitor the implementation of the state's health policy.
- **Provide information and analysis on health issues.**

# Health Information Systems (HIS) Act Duties

24-14A NMSA 1978, Created in 1994

- Standardize the data collection process **in a uniform manner**
- Health Information Security
- Adopt and promulgate **rules** to assist in the collection of data
- Establish definitions, formats and other common information standards for core health data elements **using a standardized billing form (UB-04)** required by federal law.
- Develop and maintain health and health-related data inventories.
- Collect, analyze and make available health data (i.e. Surveillance, service area planning, etc.)
- Systematic approach to the collection and storage of health data for longitudinal, demographic and policy impact studies;

# Health Information Systems (HIS) Act Applicability

## § 24-14A-4

- A. **All data sources shall participate in the health information system.** Requests for health data under the Health Information System Act [[24-14A-1](#) NMSA 1978] from a member of a data source category shall, where reasonable and equitable, be made to all members of that data source category.
- B. Upon making any request for health data pursuant to the Health Information System Act, the commission shall provide reasonable **deadlines for compliance** and shall give notice that noncompliance may subject the person to a civil penalty pursuant to [Section 24-14A-10](#) NMSA 1978.
- C. To the extent possible, the health information system shall be established in a manner to **facilitate the exchange of information with other databases**, including those maintained by the Indian health service and various agencies of the federal government.

# Health Information Systems (HIS) Act Access

## § 24-14A-6

- A. Access to data in the health information system shall be provided in accordance with regulations adopted by the commission pursuant to the Health Information System Act [[24-14A-1](#) NMSA 1978].
- B. **A data provider may obtain data it has submitted to the system**, as well as aggregate data, but, except as provided in Subsections D and E of this section, it shall not have access to data submitted by another provider that is limited only to that provider. Except as provided in Subsections D and E of this section, in no event may a data provider obtain data regarding an individual patient except in instances where the data were originally submitted by the requesting provider. Prior to the release of any data, in any form, data sources shall be permitted the opportunity to verify the accuracy of the data pertaining to that data source. Data identified in writing as inaccurate shall be corrected prior to the data's release. Time limits shall be set for the submission and review of data by data sources, and penalties shall be established for failure to submit and review the data within the established time.
- C. Any person may obtain any **aggregate data**.
- D. Through a secure delivery or transmission process, the commission may **share with the department** record-level data that contain identifiable individual, provider or hospital information.
- E. Through a secure delivery or transmission process, the commission may share record-level data with **a federal agency that is authorized to collect, analyze or disseminate health information**. The commission shall remove identifiable individual or provider information from the record-level data prior to its disclosure to the federal agency. In providing hospital information under an agreement or arrangement with a federal agency, the commission shall ensure that any identifiable hospital information disclosed is necessary for the agency's authorized use and that its disclosure meets with state and federal privacy and confidentiality laws, rules and regulations.

# Health Information Systems (HIS) Act Violations

## § 24-14A-10

- A. **It is unlawful** for any person subject to the data reporting requirements of the Health Information System Act [24-14A-1 NMSA 1978] and the regulations adopted pursuant to that act **not to comply** with any of those requirements.
- B. A civil action may be brought in the name of the state alleging a violation of Subsection A of this section and a petition may be made to the district court for temporary or permanent injunctive relief. In any such action, if the court finds that a person has willfully violated Subsection A of this section, upon petition to the court there may be recovered on behalf of the state a civil **penalty not to exceed one thousand dollars (\$1,000)**.

# Data Reporting Requirements “HPC HIDD RULE”

## NMAC

### TITLE 7 CHAPTER 1 PART 4

### HEALTH HEALTH GENERAL PROVISIONS DATA REPORTING REQUIREMENTS FOR HEALTH CARE FACILITIES

- 7.1.4.1**      **ISSUING AGENCY:** New Mexico Health Policy Commission.
- 7.1.4.2**      **SCOPE:** This rule applies to all licensed inpatient and outpatient general and specialty health care facilities located within New Mexico.
- 7.1.4.3**      **STATUTORY AUTHORITY:** This rule is promulgated pursuant to Sections 24-14A-3D(5) and (6); 24-14A-5A through C; 24-14A-8A and B; and 24-14A-9 of the Health Information System Act, Section 24-14A-1 et seq. NMSA 1978.
- 7.1.4.4**      **DURATION:** Permanent.

# Data Reporting Requirements Schedule

- A. **Schedule for reporting:** Beginning with the first quarter of 2011 (January 1-March 31), all licensed nonfederal general and specialty inpatient health care facilities in New Mexico shall submit to the commission on a quarterly basis the data required by this rule, in accordance with the following schedule:

Reporting period	Report due to the commission	Commission returns integrity and validation errors	Final corrected report due to the commission
January 1 - March 31	June 30	July 31	August 30
April 1 - June 30	September 30	October 30	November 30
July 1 - September 30	December 31	January 30 of the following year	February 28 of the following year
October 1 - December 31	March 31 of the following year	April 30 of the following year	May 31 of the following year

# Data Reporting Requirements Exemptions and Penalties

- 7.1.4.12 REPORTING EXEMPTIONS:** Upon written application to the commission, the commission may grant a health care facility a temporary exemption, **not to exceed two reporting quarters**, from the schedule required by Subsection A of 7.1.4.10 NMAC. Temporary exemption from reporting does not excuse the health care facility from reporting the data from the exempted period. Upon resumption of the regular reporting schedule the health care facility shall promptly report data for the exempted period.
- 7.1.4.13 PENALTIES FOR RULE VIOLATION:** Failure to comply with any of the reporting requirements in this rule may result in injunctive relief and **a civil penalty not to exceed \$1,000 per violation**, as provided by the Health Information System Act, Section 24-14A-1 et seq. NMSA 1978.

# Hospital Inpatient Discharge Database (HIDD)

**New Mexico general and specialty hospitals** are annually required to report hospital inpatient discharge data to the HPC.

**Federal facilities are not required to report data to the HPC**; therefore, data from Indian Health Service facilities, military hospitals and Veteran's Administration (VA) Hospital are not included. However, the HPC is exploring ways to access HIS and VA Hospital data.

Hospital inpatient diagnoses and procedures reported by hospitals and contained in the database are currently coded using the **International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9 CM)**.

# Database statistics

- 38 General Hospitals
- 13 Specialty Hospitals
- ~ 200,000 Discharges per year

Excluded Records 2009 HIDD Report	
<b>Total Records Collected</b>	<b>212,871</b>
<b>Duplicates</b>	<b>450</b>
<b>Unknown Age</b>	<b>5</b>
<b>Unknown Gender</b>	<b>18</b>
<b>Out-of-State or Unknown Zip Codes</b>	<b>7,270</b>
<b>Invalid Diagnosis Code (Primary Diagnosis = 000.8)</b>	<b>43</b>
<b>Unknown Primary Diagnosis</b>	<b>844</b>
<b>Newborns</b>	<b>25,539</b>
<b>Not Inpatient</b>	<b>3,820</b>
<b>Remaining Records used in 2009 HIDD Reporting</b>	<b>174,882</b>

# Data Elements Collected]

## HPC Rule

- **Provider Data** (Hospital License, Medicare ID, Physician NPI)
- **Patient Data** (Demographics, residency, MRN, Unique Patient ID)
- **Stay Data** (Admin/Discharge dates. Point of origin, discharge status, charges).
- **Diagnoses** (ICD-9-CM, Dx, Ex, Present on Admission, MDC, DRG)
- **Procedures** (ICD-9-CM, Px, Procedure dates, Procedure Categories)
- **Payer Data** (Primary/Secondary payer categories, names)
- **Related Report Numbers** (Ambulance Run Number, Traffic Crash Number)

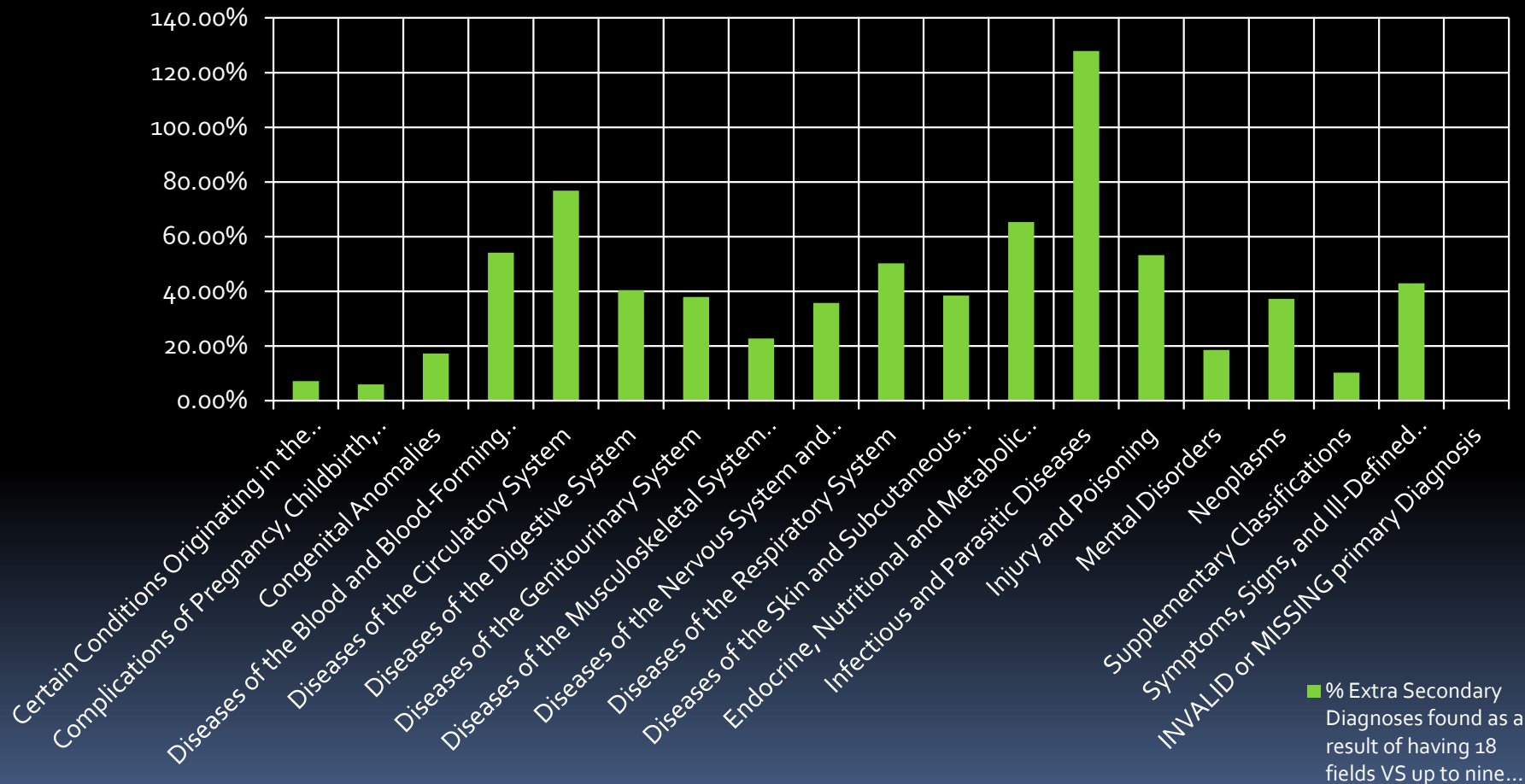
# Data Elements Collected]

## HPC Rule Definitions

- **Provider Data** (Hospital License, Medicare ID, Physician NPI)
- **Patient Data** (Demographics, residency, MRN, Unique Patient ID)
- **Stay Data** (Admin/Discharge dates. Point of origin, discharge status, charges).
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- **Related Report Numbers** (Ambulance Run Number, Traffic Crash Number)

# Outcomes of data requirements changes (Dx Coding)

## Secondary Diagnoses as a result of capturing 18 fields vs. 9 fields by CDC Major Diagnostic Categories - 2009



# Outcomes of introducing more external cause of injury codes (E-Codes)

	2009		2008		2007		2006	
	Count	%	Count	%	Count	%	Count	%
Total Records	200,639		227,610		210,476		195,473	
Injury Diagnoses	14,700	7.33%	18,397	8.08%	15,799	7.51%	14,143	7.24%
E-Codes	13,516	<b>91.95%</b>	13,927	<b>75.70%</b>	11,066	<b>70.04%</b>	10,018	<b>70.83%</b>
	Three E-Codes			One E-Code				

# Data Reporting Requirements Changes for 2011 (OMB-97)

- DD. **Patient race** means the classification(s) of a patient's stated race to include one or multiple reported classifications, coded as shown below. When reporting multiple classifications do not use spaces or delimiters. For example, if a patient states that he or she is both Asian and other the race field would be R1R9.
- (1) R1 - American Indian or Alaska Native.
  - (2) R2 - Asian (including Asian Indian, Chinese, Filipino, Japanese, Korean and Vietnamese).
  - (3) R3 - Black or African American.
  - (4) R4 - Native Hawaiian or Pacific Islander (including Chamorro and Samoan).
  - (5) R5 - White.
  - (6) R6 - declined.
  - (7) R7 - unknown.
  - (8) R9 - other race.
- EE. **Patient ethnicity** means the gross classification of a patient's stated ethnicity, coded as follows:
- (1) E1 - Hispanic or Latino;
  - (2) E2 - not Hispanic or Latino.
  - (3) E6 - declined.
  - (4) E7 - unknown.
- FF. **Patient tribal affiliation** means the classification(s) of patient's stated New Mexico tribal affiliation. Up to five reported affiliations can be reported, coded as shown below. When reporting multiple affiliations do not use spaces or delimiters. For example, if a patient states that he or she has affiliations with both Acoma pueblo and the Navajo nation the tribal affiliation field would be T1T10:

# Status of 2011 changes

2011 Total Records Q1	Ethnicity						Race										Tribal						
	E1 Hispanic	E2 Not of Hispanic	E6 Declined	E7 Unknown	Missing / Blank	Invalid	R1 American Indian	R2 Asian	R3 Black	R4 Native Hawaiian	R5 White	R7 Unknown	R9 Other Race	MULTIPLE	Missing / Blank	Invalid	T22 Zuni Pueblo	T100 Other Tribal	T200 Declined	T300 Unknown	Missing / Blank	Invalid	
																	1						
76	15	15		3	43					15	3	15				43		33				43	
669	276	67		18	308		21		3	43	18	276				308		361				308	
79	44	13		22			1	2		13	3	60								79			
668					668											668						668	
431	60	168		5	198		39	3	1	125	5	60				198		233				198	
3119	1797	1227		95			3	7	38	2951	95	25										3119	
1068	170			898			622	3	10	241	7	185								622		446	

## Issues with required changes

- Changes not implemented until mid-quarter
- Vendors not responsive
- Admissions to I.T. disconnect
- Alternative reporting vs. collections
  - Cross-walking
  - Categorizing as “other”

# Lessons learned

- Communication, Communication, Communication
  - I.T.
  - Admissions
  - Vendors
- Follow-ups and quality feedback

# NM Indicator based Information System (NM-IBIS)

Welcome to NM-IBIS -- New Mexico's Public Health Data Resource - Windows Internet Explorer provided by Department of Health

http://ibis.health.state.nm.us/home/welcome.html

Google

Welcome to NM-IBIS -- N... NM-IBIS - Query Result - Ne...

NEW MEXICO DEPARTMENT OF HEALTH

New Mexico's Indicator-Based Information System (NM-IBIS)

... Monitoring New Mexico's Health

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Welcome to NM-IBIS -- New Mexico's Public Health Data Resource

You are Here: [NM-IBIS](#) > [Home](#) > current page

Welcome to the State of New Mexico's, Department of Health Information System for Public Health (NM-IBIS). This system provides access to public health datasets and information on New Mexico's health status.

**Getting Started**

Use the four tabs at the top of the page to navigate to the content you are interested in. Under each tab is an introduction page, and a "Getting Started" page that describes the content in more detail.

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# NM Indicator based Information System (NM-IBIS)

NM-IBIS - Query Result - New Mexico Hospitalizations 1999-2008 - Crude Rates, Hospitalizations - Windows Internet Explorer pro

http://ibis.health.state.nm.us/query/result/hidd/HIDD/CrudeRate.html?GraphicName=None

Google

NM-IBIS - Query Result - ... X NM-IBIS - Query Result - Ne...



**Query Results for New Mexico Hospitalizations 1999-2008**

You are Here: [NM-IBIS](#) > [Dataset Queries](#) > [Hospitalizations Measures](#) > [Query Builder](#) > current page

**Query Criteria for the Crude Rates, Hospitalizations Per 10,000 Population Measure**

<b>First-listed Diagnosis Major Diagnostic Category Filter:</b>	17 Injury and Poisoning = '800 - 999'
<b>Single Years Filter:</b>	2008, 2007, 2006, 2005
<b>Data Grouped By:</b>	Single Years
<b>Data Chart:</b>	None

**Data List**

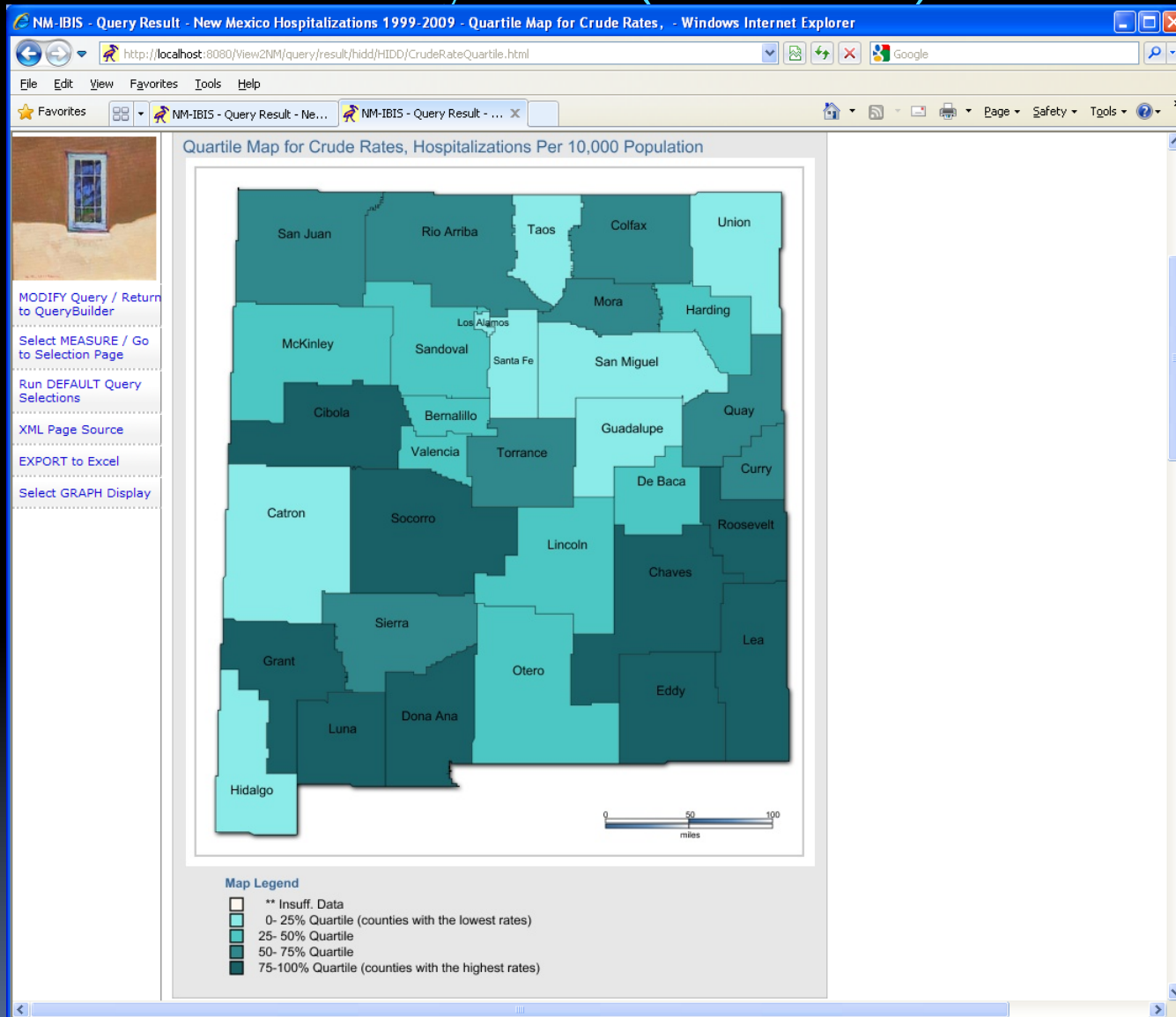
Single Years	Number of Hospitalizations	Number in the Population (person-years)	Crude Rates, Hospitalizations Per 10,000 Population	95% CI LL	95% CI UL
<b>Total</b>	55,345	8,113,105	68.2	67.6	68.8
<b>2005</b>	13,813	1,968,347	70.2	69	71.3
<b>2006</b>	13,683	2,010,787	68	66.9	69.2
<b>2007</b>	13,463	2,053,923	65.6	64.4	66.6
<b>2008</b>	14,386	2,080,048	69.2	68	70.3

Record Count: 5

**Data Notes**  
Currently, the hospital inpatient discharge dataset includes data from NON-FEDERAL HOSPITALS only. It does not include hospital discharges from Indian Health Service (IHS) facilities, which account for a large proportion of hospitalizations for New

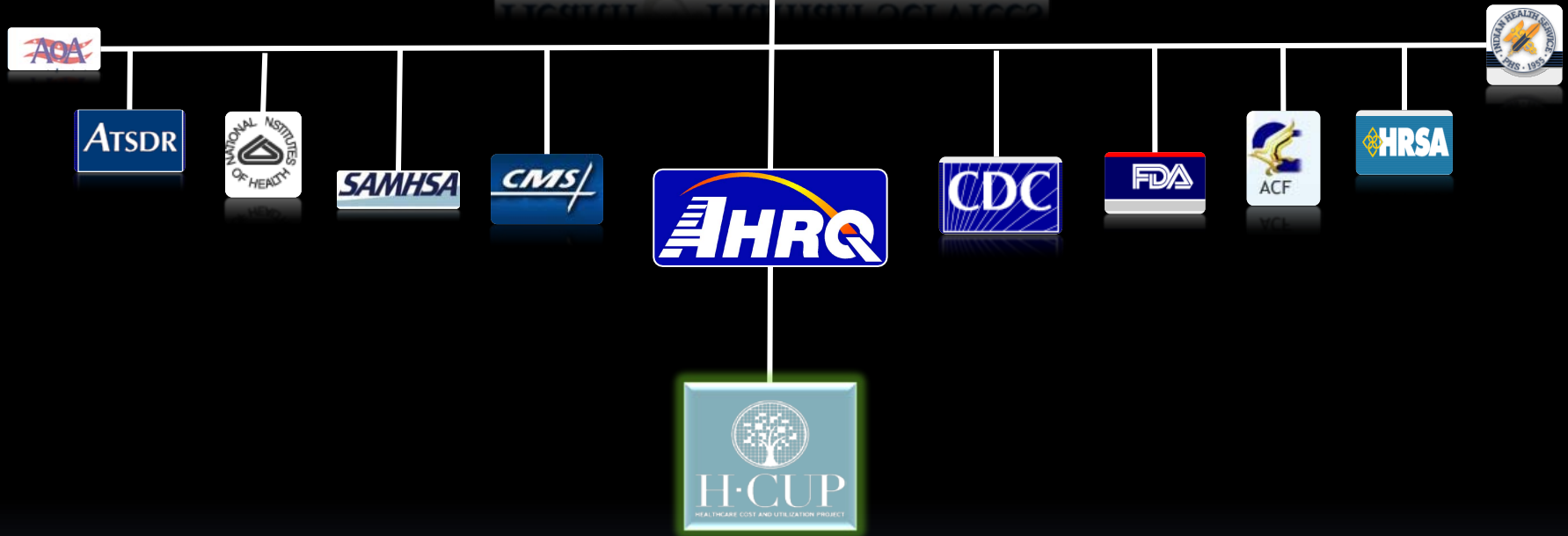
[MODIFY Query / Return to QueryBuilder](#)  
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# NM Indicator based Information System (NM-IBIS)



# Healthcare Cost and Utilization Project (HCUP)

United States Department of  
Health & Human Services



Source: Carol Stocks, RN, PhD Candidate  
Agency for Healthcare Research and Quality  
The 14th Annual HCUP Partners Meeting April 4-6,  
2011

# HCUP

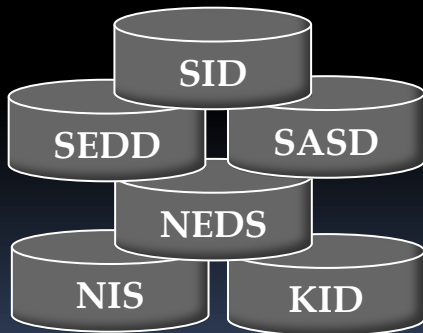


HCUP  
Databases

Research Tools

Research  
Publications

User Support



Source: Carol Stocks, RN, PhD Candidate  
Agency for Healthcare Research and Quality  
The 14th Annual HCUP Partners Meeting April 4-6,  
2011

# References

- New Mexico Health Policy Commission (HPC)
  - [http://nmhealth.org/HPC/ Admissions](http://nmhealth.org/HPC/Admissions)
- New Mexico's Indicator-Based Information System (IBIS)
  - <http://ibis.health.state.nm.us/home/Welcome.html>
- Healthcare Cost and Utilization Project (HCUP)
  - <http://www.hcup-us.ahrq.gov/>

## Contact Information

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# Questions

