

Quality and SPARCS Data

Where We Are - Where We Are Going?

Presented by:
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Agenda

- 1. Introduction to SPARCS
- 2. Amended Regulations
- 3. Submission Requirements
- 4. Compliance-Quality
- 5. NYS Health Profiles and Health Data NY



Introduction to SPARCS



What is SPARCS?

- Statewide Planning and Research Cooperative System (SPARCS)
 - Cooperation between the health care industry and government
- Been in existence over 35 years: established through statute in 1979
- Calendar Year Based Discharge/Visit Dataset
- All payer claim level detail on patient characteristics, diagnoses and treatments, services, and charges for hospital discharges, ambulatory surgery, emergency department, and hospital based outpatient service visits (or EODC) in New York State
- Public web link: http://www.health.ny.gov/statistics/sparcs/
 - SPARCS Operations Manual
 - Data Governance Policy and Procedures



Who Submits to SPARCS?

- Facilities licensed under Article 28 of the Public Health Law
- Freestanding ambulatory surgery centers (D&TC's)

Inpatient Services

Article 28

Outpatient Visits

- Emergency Department
- Ambulatory Surgery
 - Free-Standing Diagnostic & Treatment Center (D&TC)
 - Hospital Based
- Hospital Based Outpatient
 - EODC = Expanded Outpatient Data Collection



Where is SPARCS Located?

Bureau of Health Informatics

New Address:

Bureau of Health Informatics

Office of Quality and Patient Safety

NYS Department of Health

Corning Tower, Room 1970

Albany, New York 12237

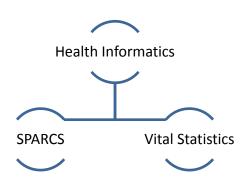
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E-mail: SPARCS.submissions@health.ny.gov (General Inquiries)

SPARCS.requests@health.state.ny.gov (Data Access)

BIO-INFO@health.ny.gov (Vital Statistics)



The Bureau of Health
Informatics supports the
Office of Quality and
Patient Safety objectives
of improving data
timeliness, accuracy,
integrity and accessibility,
inclusive of both the
Statewide Planning and
Research Cooperative
System (SPARCS) and
Vital Statistics (VS).

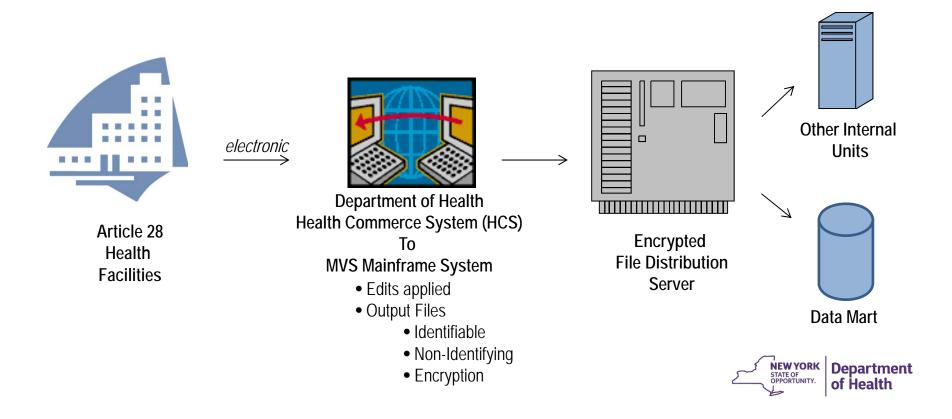


How is SPARCS Data Submitted?

- Health care facilities submit their SPARCS data in an electronic, computerreadable format through NYSDOH's secure electronic network: the Health Commerce System (HCS)
- All SPARCS data must be supported by documentation in the patient's medical and billing records



SPARCS Submission Process



Many Uses of SPARCS Data

- Financial, Rate Setting (e.g., APR-DRG SIWs)
- Developing and Evaluating Policy
- Epidemiology
- Health Planning/Resource Allocation
- Quality of Care Assessment
- Research
- Surveillance
- Utilization Review
- Geo-coding
- Linkages with other data sets, registries, etc.
- AHRQ Healthcare Cost and Utilization Project (HCUP)
- AHRQ Quality, Efficiency and Patient Safety Measures (i.e. IQI, PQI/PDIs, PSIs)
- 3M Efficiency Measures (i.e. PPVs, PPRs, PPCs)





Enabling Legislation and Regulations

- The enabling legislation and regulations for SPARCS are located under Section 2816 of the Public Health Law (PHL), Section 400.18 of Title 10 (Health) of the Official Compilation of Codes, Rules, and Regulations of the State of New York (NYCRR)
 - State Finance Law, Article 6, 97-x (hospital fees)
- SPARCS regulations were amended in September 2014.



On September 3, 2014, the new regulations for SPARCS were published in the NYS Register, thereby codifying them.

These new regulations were amendments to the original regulations in section 400.18 of Title 10 NYCRR.

The purpose of the new regulations were to

- delete obsolete language
- realign to current practice
- add new provisions



With the new regulations,

- The SPARCS Data Governance Policy and Procedure Manual (http://www.health.ny.gov/statistics/sparcs/training/docs/sparcs_dgc_manual.pdf) was released.
- The creation of the Data Governance Committee, which supersedes the Data Protection Review Board (DPRB), to review identifiable data requests.



Some of the provisions of the new regulations include:

- Health care facilities, or their vendor, must submit, on a monthly basis, data for all inpatient discharges and outpatient visits.
- At least 95 percent of data for all inpatient discharges and outpatient visits must be submitted within sixty (60) days from the end of the month of a patient's discharge or visit.
- 100 percent of data for all inpatient discharges and outpatient visits must be submitted within one hundred eighty (180) days from the end of the month of a patient's discharge or visit.



Some of the provisions of the new regulations include (con't):

- The SPARCS program may:
 - conduct an audit evaluating the quality of submitted SPARCS data
 - issue an audit report to a health care facility listing any inadequacies or inconsistencies in the data.
- Any health care facility so audited must submit corrected data to the SPARCS program within 90 days of the receipt of the audit report.



Submission Requirements



Submission Requirements

- 95% of the facility's SPARCS data must be submitted within 60 days following the end of the month of patient discharge/visit.
- 100% of the facility's SPARCS data is due within 180 days following the end of the month of the patient discharge/visit.
- SPARCS data must be submitted on a monthly basis.



Submission Requirements

The method of compliance is changing:

- Annual Reconciliation is being replaced with Quarterly Compliance.
 - Each quarter (Jan-Mar, Apr-Jun, etc) will have it's own reconciliation.





SPARCS, has been and continues to be committed to reliable data.

Consequently, questions about data quality are looked upon as positive steps to improve the data.

The more the data are used and scrutinized, the better it becomes.



As such, the new regulations contain provisions for compliance based on quality.

As mentioned previously, some of the provisions of the new regulations include:

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 - conduct an audit evaluating the quality of submitted SPARCS data
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With the new regulations, SPARCS Operations staff are developing a Quality Compliance Protocol.

This protocol will describe the process by which:

- SPARCS Operations staff monitor the quality of data from the facilities,
- How the facilities will be notified of issues and
- What measures can be enacted if those issues are not resolved.



In general terms, SPARCS Operations will

- Evaluate the quality of submitted SPARCS data
- Issue reports listing any inadequacies or inconsistencies in the data.
- Any health care facility that receives a data quality report finding will be required to submit corrected data to the SPARCS program within 90 days of the receipt of the report.
 - Currently the case for submission compliance.



- SPARCS will be reaching out to facilities to get their feedback on what should be included in the quality compliance protocol.
- SPARCS Operations staff work with facility contacts to help them determine the root cause of data quality issues and corrective actions undertaken.



Evaluation of the data will begin with verification of SPARCS data. This is accomplished by various methods:

- Obvious conflicts within the data:
 - All patients of a facility have a county of residence as 'unknown/homeless', while having a NYS zip code
 - All patients of a facility have a first source of payment as 'self-pay'
 - Duplicative records
 - Identical records except that the facility information matches that of a sister facility



- Duplicative records (con't)
 - Records for the
 - Same patient,
 - Seen on the same date and time,
 - Seen at the same facility,
 - For the same primary reason of care; however
 - An element of the Edit Key (Facility Indicator, Patient Control Number, Medical Record Number, and Statement Covers From and Thru Dates) has been modified; i.e. medical record number with an 'a' added to the end



Verification of SPARCS data is accomplished by various methods (con't):

- Comparing identical records between different data files
 - For those common data elements, the values should be identical
 - Examples of data used for comparative analysis include:
 - Institutional Cost Reports (ICRs)
 - Cardiac Group (CABG, PCU)
 - Cancer Registry
 - Trauma Registry
 - Vital Statistics (Birth and Death)
 - Medicaid



The first areas/data elements that SPARCS is planning to report on are:

- Source of Admission
- Source of Payment,
 - as well as comparing to Payment Typology
- Duplicative Records
- Valid Payer Identification Numbers



Enforcement:

For cases where inadequacies or inconsistencies are found in the data, reports listing those cases will be issued to the facilities in question.

Similar to the compliance reports currently issued for submissions.

For facilities that receive a data quality report finding, they must either:

- Report to the SPARCS program that the data in question truly reflects those discharges and patients, with documentation supporting that assertion, or
- Submit corrected data to the SPARCS program within 90 days of the receipt of the report.

Enforcement (con't):

SPARCS staff will work with facility contacts to help them determine the root cause of data quality issues and corrective actions needed to be undertaken.

Failure to comply will result in Statements of Deficiency issued, with possible fess and other actions levied.



NYS Health Profiles and Health Data NY



NYS Health Profiles

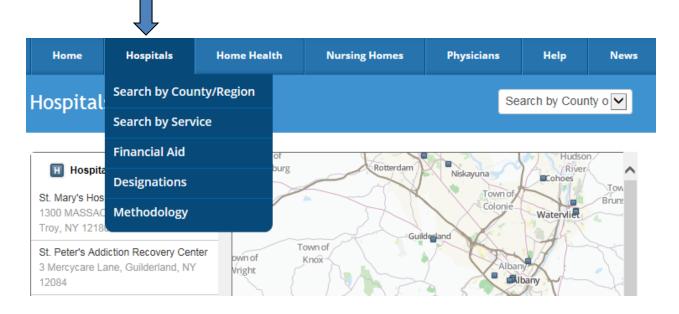
- Hospitals profile was officially launched on 9/16/14: http://profiles.health.ny.gov
- Highly-frequented area of the DOH website
- Key redesign improvements:
 - Central access to the four profiles
 - Utilizes modern web technologies
 - Improved presentation and consumer usability
 - Enhanced ability to quickly view, bookmark, search, and compare hospitals on selected measures





Hospital Profiles: Hospital Search

Search for hospitals by county/region, service, financial aid, or designations:

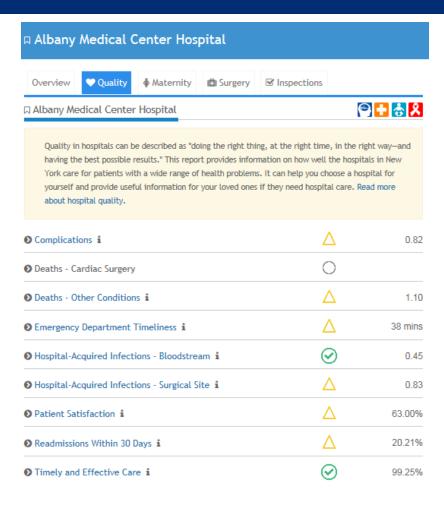




Hospital Quality

- Nine quality measure groups are presented
- New measures will be added over time
- Methodology page provides detailed explanations
- Source data files are being added to the Health Data NY open data portal:

https://health.data.ny.gov





Hospital Profiles

Hospital Profiles (con't)

Users of the site are encouraged to use this information to begin conversations with their doctor, hospital representatives, or other healthcare professionals about their condition(s) and available treatment options; as well as with family members, friends, and associates.

The site also provides information on such topics as "Choosing a Hospital" and Financial Aid".

Health Data NY

Health Data NY

Launch of https://health.data.ny.gov/ occurred 2 years ago.

Currently, SPARCS data for Inpatient Discharges, years 2009 to 2013, is available.

The site has both aggregated files and de-identified at the discharge level



Health Data NY

Additional data files on Health Data NY include:

- Median and Mean costs and charges by
 - APR-DRG and Severity of Illness
- For discharge level records, total charge and total cost
 - Total cost calculated using the Cost-to-Charge ratios



Health Data NY

Additional data files on Health Data NY include:

- Quality Measure data files
 - Prevention Quality Indicators (PQI/PDIs)
 - Inpatient Quality Indicators (IQIs)
 - Patient Safety Indicators (PSIs)
 - Potentially Preventable Complications (PPCs)
 - Potentially Preventable Readmissions (PPRs)
 - Potentially Preventable Visits (PPVs)



Contact Information

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