COVID-19 Data from Selected Hospitals in the National Hospital Care Survey

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Webinar Essentials

- To preserve confidentiality of hospitals in the sample, please use your first name only when identifying yourself in the webinar discussion today.

- When you are not speaking, please mute your phone to keep background noise to a minimum.

Webinar Overview

1. Overview of the National Hospital Care Survey (NHCS)
2. COVID-19 Hospital Dashboard
3. NHCS Participation
4. Question & Answer

Overview of the
National Hospital Care Survey (NHCS)

NHCS – Goal and Objectives

- **Goal:**
  - Provide reliable and timely healthcare utilization data for hospital-based settings.

- **Objectives:**
  - Provide national data for benchmarking.
  - Link episodes of care across hospital units as well as link to other data sources, including the National Death Index (NDI); Centers for Medicare & Medicaid Services (CMS) data such as the Master Beneficiary Summary File; and U.S. Department of Housing and Urban Development (HUD) data.

NHCS – Sample Design and Data Coverage

- **Sample Design:**
  - Hospitals are randomly selected and each hospital selected for the survey uniquely represents facilities of similar size, service type, and/or geographic location and cannot be replaced.
  - The 2020 NHCS sample consists of **608** non-institutional, non-federal hospitals with six or more staffed inpatient beds.
  - Participation is voluntary and there is no penalty for not participating.
- **Data coverage:**
  - All inpatient discharges and emergency department (ED) visits for up to a 12-month period.
  - Includes patient personally identifiable information (PII) so patient as well as encounter-level counts can be determined.

NHCS – Data Sources

- Electronic Health Records (EHRs)
  - For the 2020 NHCS, hospitals submitting EHR data to participate will need to transmit data using the format of the HL7 CDA® R2 Implementation Guide (IG): National Health Care Surveys, STU Release 1.2 – US Realm

- Uniform Bill (UB) -04 administrative claims

- State files

- Vizient

NHCS – Data Elements

UB-04:

- Patient PII
- Demographic information
- Encounter dates
- Diagnoses and procedures
- Revenue codes

EHR:

- Patient PII
- Demographic information
- Encounter dates
- Diagnoses and procedures
- Procedure outcomes
- Lab tests and results
- Medications
- Vital signs
- Clinical notes (for ED visits only)

NHCS – Participation Benefits

- Improve quality of health care and other health benchmarks
- Promoting Interoperability (formerly MU) credit
- Community Health Benefit
- Continuing Education Units credits
- Access to NCHS-created reports and analytic papers
- Payment of $500 for a test file and $500 for 12 months of data
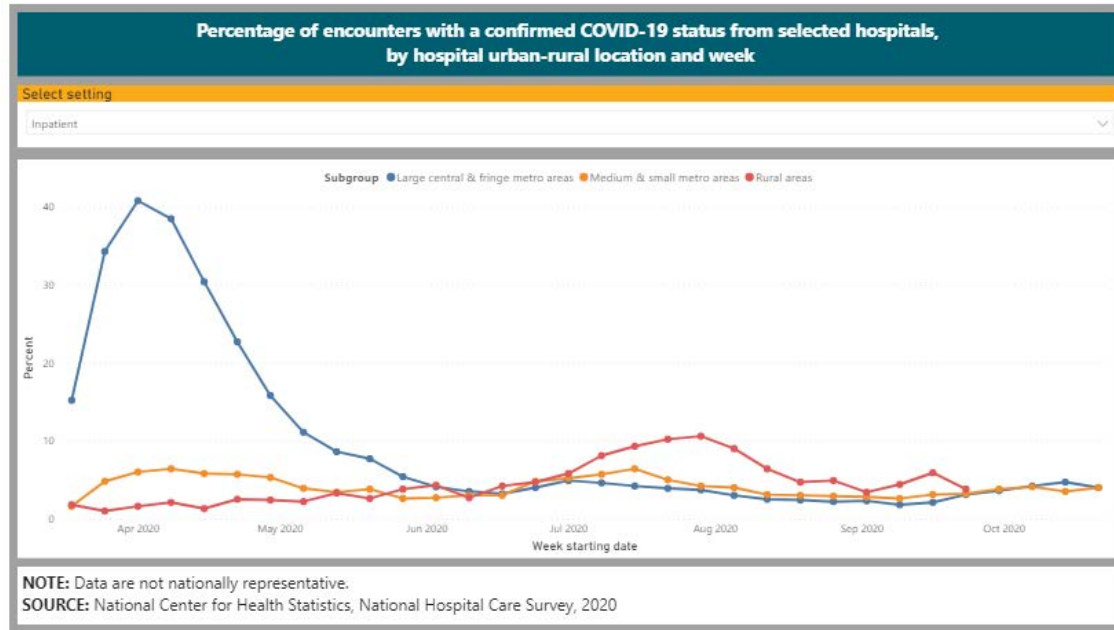- Access to your data via the Hospital Data Reporting Portal

COMING SOON

COVID-19 Dashboard

COVID-19 Dashboard Background

- **Data source:**
  - UB–04 administrative claims data from March 18, 2020 through October 27, 2020.
  - Data are from 56 hospitals that submitted inpatient data and 55 hospitals that submitted ED data.
- Data are preliminary, and results may change with subsequent releases.
- Monthly updates to the data file for the remaining months in 2020 and updates every two months to the data from 2021.
- The data are not nationally representative but can still provide insight on the impact of COVID-19 on various types of hospitals in the U.S. through a combination of indicators related to COVID-19 (e.g., length of inpatient stay, in-hospital mortality, and comorbidities).

NHCS COVID-19 Dashboard

https://www.cdc.gov/nchs/covid19/nhcs.htm

Percentage of encounters with a confirmed COVID-19 status from selected hospitals, by hospital urban-rural location and week

NOTE: Data are not nationally representative.
SOURCE: National Center for Health Statistics, National Hospital Care Survey, 2020

COVID-19 Data Shown From NHCS

- **COVID-19 hospital encounters** - includes the percentage of new confirmed COVID-19, suspected or potential COVID-19, and non-COVID-19 encounters by week among all ED or inpatient encounters over time. https://www.cdc.gov/nchs/covid19/nhcs/hospital-encounters-by-week.htm

- **COVID-19 in hospitals by urban-rural location**– includes the percentage of confirmed COVID-19 encounters over time among all ED or inpatient encounters, by urban-rural location of the hospital.

  https://www.cdc.gov/nchs/covid19/nhcs/hospital-encounters-by-urban-rural.htm

COVID-19 Data Shown From NHCS (cont'd…)

- **COVID-19 screenings at hospitals**– includes two sets of figures presented which show total COVID-19 screenings and results related to COVID-19 screenings by week.

  https://www.cdc.gov/nchs/covid19/nhcs/hospital-screenings-by-week.htm

- **Intubation or ventilator use** – includes the percentage of confirmed COVID-19 inpatient admissions that involved intubation or ventilator use for each week, by sex and age.

  https://www.cdc.gov/nchs/covid19/nhcs/intubation-ventilator-use.htm

COVID-19 Data Shown From NHCS (cont'd…)

- **In-hospital mortality** – includes three sets of figures which show results related to in-hospital mortality for confirmed COVID-19 encounters by week, average length of stay, and intubation or ventilator use among COVID-19 in-hospital deaths.

  https://www.cdc.gov/nchs/covid19/nhcs/hospital-mortality-by-week.htm

- **Co-occurrence of other respiratory illnesses** - includes the percentage of confirmed COVID-19 encounters by week where another respiratory illness is co-occurring.

  https://www.cdc.gov/nchs/covid19/nhcs/other-respiratory-illnesses.htm

Important Technical Notes

- Data are **<u>not</u>** nationally representative.

- A confirmed COVID-19 hospital encounter is defined as an any listed International Classification of Diseases, 10th Revision, Clinical Modification (ICD–10–CM) diagnosis code of B97.29 and/or U07.1.

  – Prior to April 1, 2020, CDC guidance stated to code a confirmed COVID-19 hospital encounter as B97.29. On April 1, 2020, the guidance changed to code confirmed COVID-19 hospital encounters as U07.1.

- Hospitalizations related to childbirth are included in the denominator for females and inpatient admissions for newborn encounters are excluded.

- Data represent encounters, not patients.

- Weeks with less than 30 encounters in the denominator are suppressed.

Summary of the NHCS COVID-19 Dashboard

- The NHCS data provided in this dashboard offer unique information on COVID-19 hospital encounters that is not available in other hospital reporting systems (e.g., COVID-19 related mortality or intubation **over time**).

- NHCS data from these hospitals can show results by a combination of indicators related to COVID-19 (e.g., length of inpatient stay, in-hospital mortality, comorbidities, and intubation or ventilator use).

- NHCS data allow for reporting on COVID-19 encounters and treatments within the hospital over time.

NHCS Participation

Why Participate in NHCS?

- Inform health policy and practice
  - Without your participation, there can be no nationally representative datasets.
  - The Nation's ability to address public health crises will be diminished unless we build the best data collection system now.
- Your hospital's participation in NHCS will contribute to a robust and timely dataset for COVID-19 hospital encounters, which is information needed to formulate impactful policy and public health response to the ongoing pandemic.

NHCS – Steps to Participate

1) Brief interview to determine eligibility

2) Electronic submission of data (EHR, claims, etc.)

- When you agree to participate, login credentials will be provided to you to facilitate submitting your data to the secure network.

3) Annual Hospital Interview

Question & Answer

Contact Information

- For more information about NHCS, please visit our website: https://www.cdc.gov/nchs/nhcs/index.htm.

- For questions, please contact:

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THANK YOU!!!