



National Hospital Care Survey (NHCS)



Overview

- What is the National Center for Health Statistics (NCHS)?
- What is the National Hospital Care Survey (NHCS)?
- What are we asking of you?

What is the National Center for Health Statistics?

We are the part of CDC, which monitors the health of the Nation by providing data on:

- Health care trends
- Health status of the population
- Impact of health policy decisions and programs



NCHS gathers data in many health care settings

- **Inpatient settings**

 - National Hospital Care Survey (NHCS) starting 2011**

- Ambulatory care settings

 - Emergency departments (EDs)
 - Outpatient departments in hospitals (OPDs)
 - Ambulatory surgery centers (ASCs)

- Doctors' offices

- Nursing homes

- Home health care agencies

- Hospices

- Residential care facilities

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**Starting in 2013,
these become
part of the NHCS**

NHCS Background

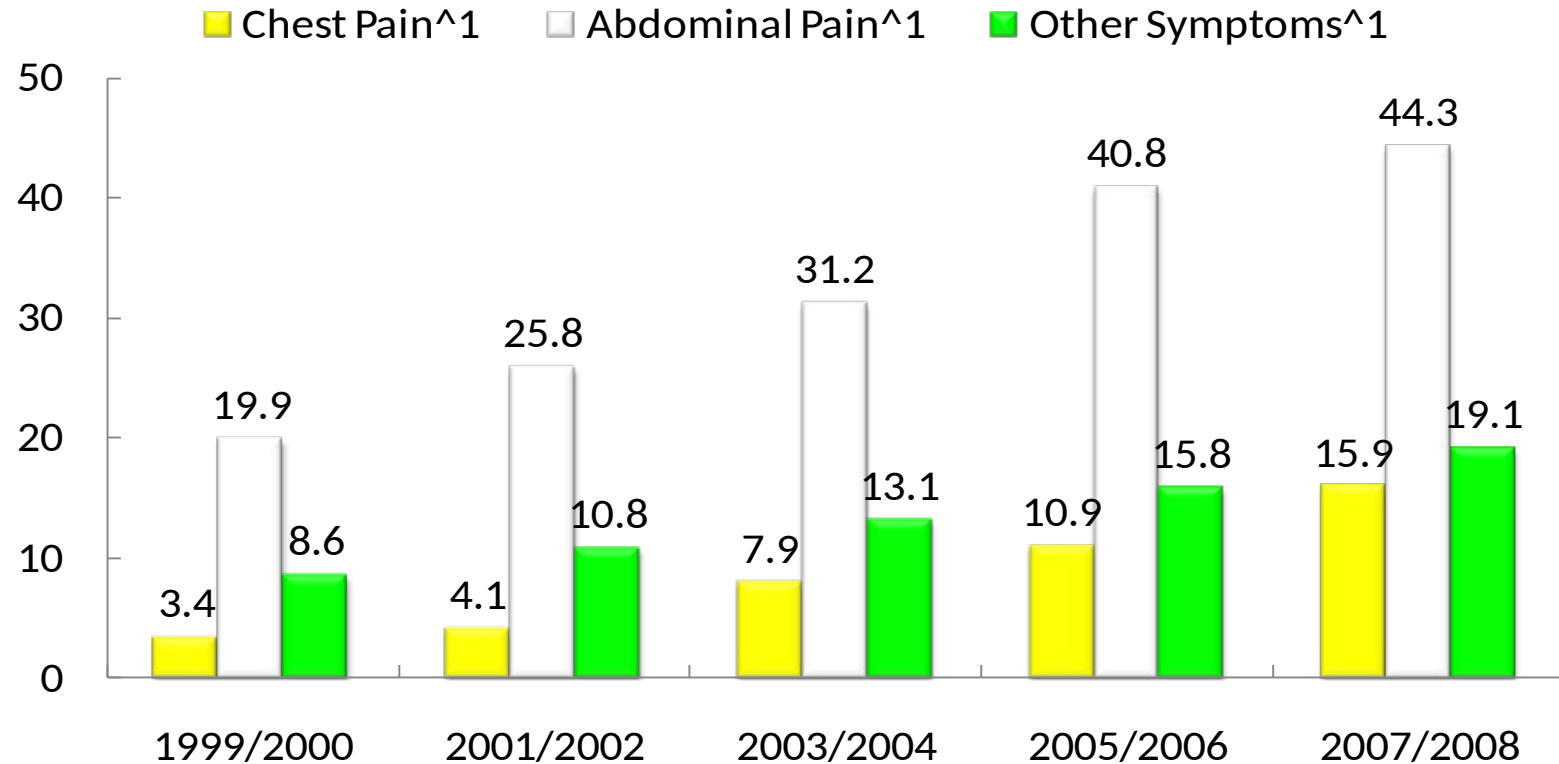
The National Hospital Care Survey integrates current hospital inpatient and ambulatory care surveys into one hospital care survey that includes:

- NHDS, the longest continuously fielded sample of inpatient care - annually since 1965
- NHAMCS surveying hospital EDs and OPDs since 1992, hospital ambulatory surgery locations since 2009, and freestanding surgery centers since 2010

What is the National Hospital Care Survey (NHCS)?

- Nationally representative sample of encounters in non-institutional, non-federal hospitals and freestanding ambulatory surgery centers.
- Collects information on inpatient discharges and visits to emergency (EDs), and outpatient departments (OPDs), and ambulatory surgery centers (ASCs).
- Serves as a valuable source of information for policymaking, health care researchers, academics, and the hospital industry.
- Information about NHCS can be found at
<http://www.cdc.gov/nchs/nhcs.htm>

Advanced medical imaging among non-injury emergency department visits for persons age 18 years and over: United States, 1999-2008.

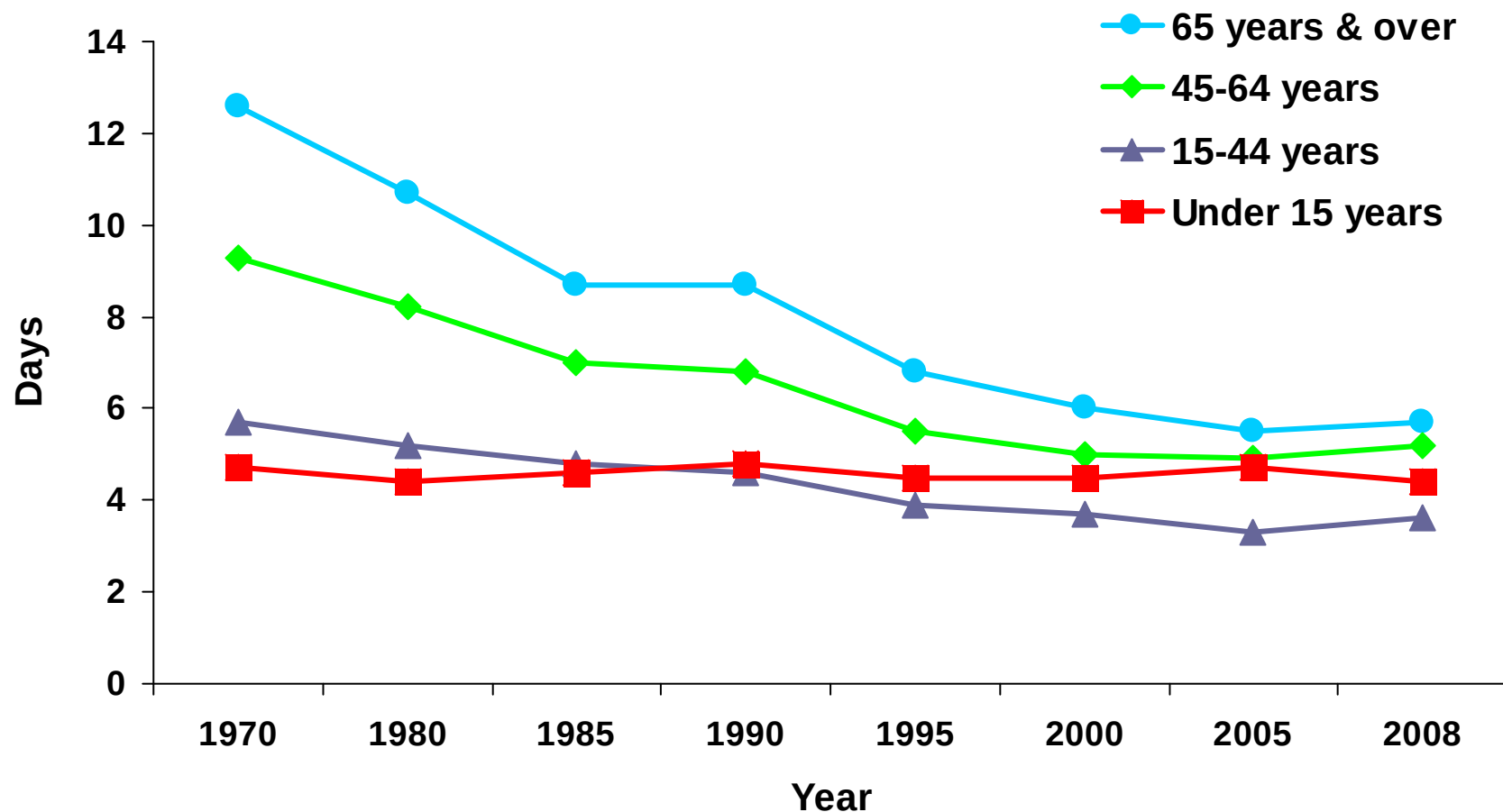


¹Trend is significant ($p < 0.05$).

NOTE: Figures are based on 2-year averages.

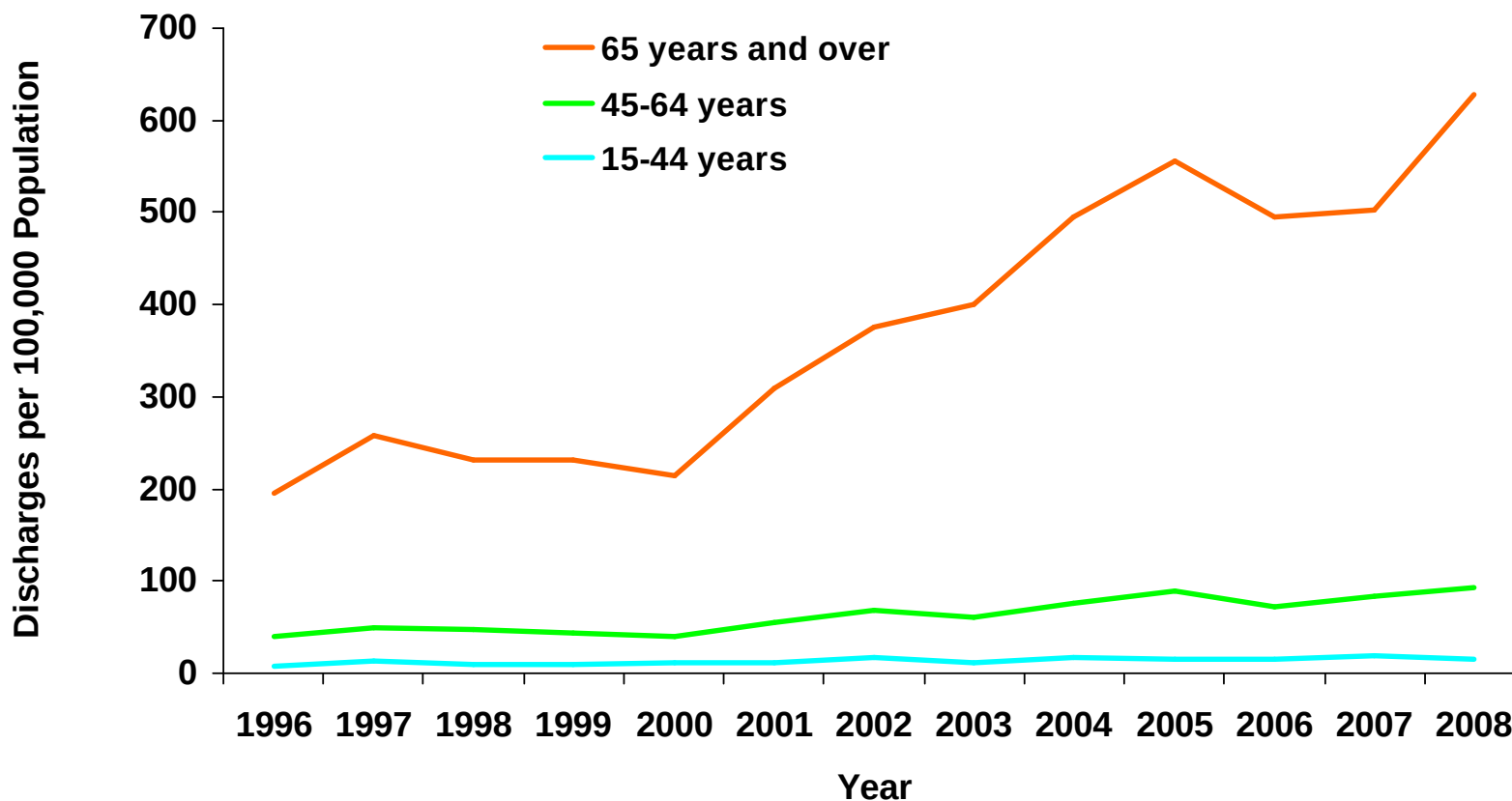
Source: Bhuiya F, Pitts SR, McCaig LF. Emergency department visits for chest pain and abdominal pain: United States, 1999-2008. NCHS data brief, no 43. Hyattsville, MD: National Center for Health Statistics. 2010.

Trend in average length of inpatient stay by age: United States, 1970-2008



Source: CDC/NCHS, National Hospital Discharge Survey (NHCS)

Hospitalization rates for inpatients with *Clostridium difficile* by age, 1996-2008



Source: McDonald LC, et al. Emerging Infectious Disease. 2006;12(3): 410-5. and unpublished estimates from the National Hospital Discharge Survey, 2004-2008

Patient discharge level data

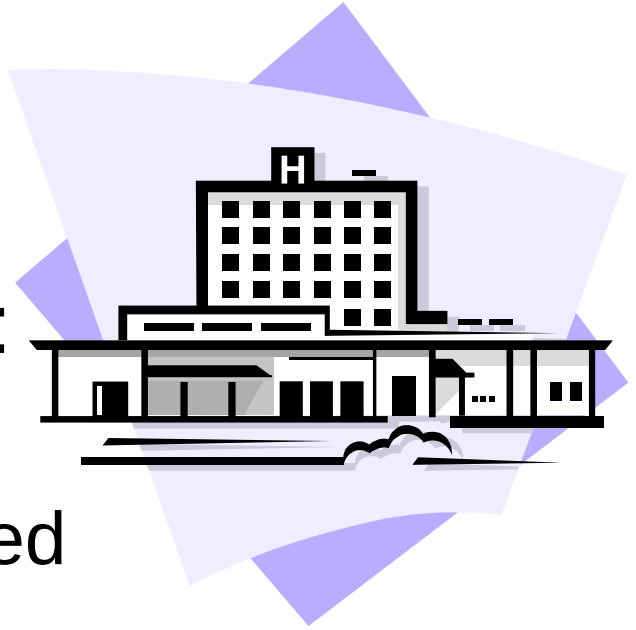
- 2011 inpatient component:
 - Uniform Bill (UB) 04 claims data for all discharges in the calendar year
 - Special studies with chart abstraction for a sample of discharges
- 2013 ambulatory component:
 - Chart abstraction for a sample of visits to EDs, OPDs and ASCs.



Sources of facility level data

- In 2011-inpatient component:
 - Telephone interviews
 - Facility questionnaire completed by hospital staff

- Starting in 2013-ambulatory component:
 - In-person interviews





We are asking for your participation in NHCS

- Your participation is voluntary. There is no penalty for not participating.
- All information from your hospital or health care center will be used solely for research and statistical purposes.
- All information will be kept strictly confidential.

We are asking for your participation in NHCS (*continued*)

- A \$500 set-up fee for establishing the UB-04 electronic transmission and \$500 after completion of each year of data collection.
- Health care staff who are HIM professionals are eligible for CEU credit after completion of an on-line module at www.cdc.gov/nchs/continuing_education.htm

How was my health care facility chosen?

- A sample of all hospitals in the United States was chosen to represent different kinds of hospitals.
- We cannot replace your facility with another, as this would introduce a bias into the data we collect.

Response rate for NHCS

- Although facility participation in the NHCS is voluntary, in similar studies, over 90% of hospitals asked agreed to participate.
- A sample of hospitals has been drawn for this new survey and we hope to achieve comparable results.

What is involved in participation?

Inpatient component starting in 2011:

- Speaking with NCHS contractor staff to learn about the study and answer a few questions about your hospital.
- Agreeing to participate.
- Identifying a primary contact within the hospital who will coordinate the transmission of UB-04 data on a quarterly basis for all inpatient discharges.

What is involved in participation?

(continued)

- Working with NCHS's contractor to establish procedures for transferring electronic UB-04 data to a secure server.
- Providing additional information about the characteristics of the hospital by answering a self-administered facility questionnaire.
- Occasionally participating in special studies.

What is involved in participation?

(continued)

In 2013 inpatient and ambulatory components:

- Continuing to provide UB-04 data on a quarterly basis for all inpatients discharged from the hospital.
- Providing information to determine whether your hospital's EDs, OPDs, and ASCs are eligible for participation.

What is involved in participation?

(continued)

- Identifying contacts within your facility who will be responsible for enrolling the ambulatory units in NHCS.
- Providing additional information about the sampled EDs, OPDs, and ASCs by answering a self-administered facility questionnaire.
- Allowing abstraction and limited re-abstraction of medical records data.



NCHS will provide competent, well-trained and experienced staff to

- Work with your hospital to find the best way to transmit the UB-04 data over a secure network.
- Take as little of your time as possible.
- Promptly answer any questions you have.

How long will participation take?

2011 inpatient component:

- Telephone induction interviews:
about 2 hours
- Facility questionnaire:
about 2 hours
- Transfer of UB-04 data:
1 hour every reporting period

Patient identifiers

- We will collect patients' personal identifiers, such as name, address, zip code, social security number, and medical record number.
- To adhere to all requirements of federal privacy legislation, we will provide detailed written information for your records explaining your participation in this CDC research.

Why do we need this identifying information?

- To aggregate patient data over time for research purposes.
- To link to other sources of data, such as the National Death Index and Medicare and Medicaid data.
- To learn more about the geographic and socioeconomic factors that affect patient lives and health by connecting to Census data.

NCHS safeguards the privacy of data

- NCHS law and other privacy laws require us to
 - Maintain very **strict** confidentiality of facility and patient data
 - Follow procedures to ensure confidentiality of all provider and patient records
- Hospitals may participate in this research while strictly adhering to the requirements of Federal privacy legislation, including HIPAA.



Why should you do this?

- Data from hospitals and ambulatory surgery centers such as yours contribute to the nation's ability to make health care policy.
- It is important to the public health community and hospitals to continue to collect national data about people cared for in the nation's hospitals and ambulatory surgery centers to plan for future services.

What is the next step?

- Designate a primary contact person
- The NCHS contractor will work with the primary contact and the staff he/she recommends to
 - Establish procedures for electronic transmission of UB-04 claims data.
 - Complete the facility questionnaire

Questions




Thank you so much!



*Hope we can
count on you!*





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