

# SPARCS Update

New York State Department of Health

June/July 2013

Office of Quality and Patient Safety

## *Changes in Organizational Structure and Location*

In June 2012, the former Bureau of Biometrics and Health Statistics (BBHS) became part of the Office of Quality and Patient Safety (OQPS). In October 2012, a realignment of the two functions of the former BBHS went into effect: SPARCS Operations became part of the OQPS Bureau of Health Informatics, and Vital Statistics became part of the OQPS Bureau of Outcomes Research.

Effective Monday, April 8, 2013, SPARCS Operations moved to a new location in the Empire State Plaza.

### **Our new mailing address is:**

SPARCS Operations  
New York State Department of Health  
Office of Quality and Patient Safety  
Bureau of Health Informatics  
Empire State Plaza  
Corning Tower Room 878  
Albany, New York 12237

The following phone and e-mail information has remained unchanged:

Phone: (518) 473-8144

Fax: (518) 486-3518

E-mail: [SPARCS@health.state.ny.us](mailto:SPARCS@health.state.ny.us)

## *Data Collection: Expanded Outpatient Data Collection Requirement*

In July of 2012, Diagnostic and Treatment Centers and Hospital Extension Clinics, licensed to provide Ambulatory Surgery Services and Outpatient Services, were notified of their requirement to begin reporting SPARCS Outpatient Services data as of January 1, 2013. Only nine facilities have begun reporting this data, and eight others have contacted SPARCS

## *Highlights*



Changes in Organizational Structure and Location

Data Collection: Expanded Outpatient Data Collection Requirement

Data Collection: Enhanced Reporting Requirements (Race and Ethnicity)

Reminder on Reporting Race and Ethnicity

Provider Licenses Update

Modifications to Edits

ICD-10 Reporting Update

Annual Report Generator

[Health.Data.NY.Gov](http://Health.Data.NY.Gov)

Operations to report that they do not provide Outpatient Services. All others are required to submit this data.

**Data Collection: Enhanced Reporting Requirements (Race and Ethnicity)**

On May 31, 2013, a letter notification was sent to Article 28 facilities that submit data to SPARCS that the inpatient and outpatient data elements for race and ethnicity are being expanded to align with Affordable Care Act (ACA) Section 4302 data collection standards. Providers will need to ensure that their electronic medical health records collect, in structured fields, race and ethnicity according to the expanded data standards.

The standards for collection and reporting of data on race and ethnicity have been revised to include additional categories among Hispanic, Asian and Native Hawaiian or Pacific Islander populations. In addition, we will now allow the reporting of up to ten selections of race and/or ethnicity. Expanded data reporting standards are being implemented to improve researchers’ ability to monitor and understand health disparities, and to develop more effective strategies for reducing or eliminating disparities.

The data collection standard for race and ethnicity reporting to SPARCS is being enhanced to include the following (“?” denotes all except specific codes listed, and must be a valid code in accordance with CDC Race and Ethnicity Code Set -Version 1.0):

Race Standards			
<i>What is your race? (One or more categories may be selected)</i>			
Current Data Standard		Expanded Data Standard	
X12 Value	Race	X12 Value	Race
R1	American Indian or Alaska Native	R1	American Indian or Alaska Native
R2	Asian		
		R2.01	Asian Indian
		R2.06	Chinese
		R2.08	Filipino
		R2.11	Japanese
		R2.12	Korean
		R2.19	Vietnamese
		R2.??	Other Asian
R3	Black or African American	R3	Black or African American
R4	Native Hawaiian or Pacific Islander		
		R4.01.001	Native Hawaiian

Race Standards			
<i>What is your race? (One or more categories may be selected)</i>			
Current Data Standard		Expanded Data Standard	
X12 Value	Race	X12 Value	Race
		R4.02.001	Guamanian or Chamorro
		R4.01.002	Samoan
		R4.??.???	Other Pacific Islander
R5	White	R5	White
R9	Other Race	R9	Other Race

Ethnicity Standards			
<i>Are you Hispanic, Latino/a, or Spanish origin? (One or more categories may be selected)</i>			
Current Data Standard		Expanded Data Standard	
X12 Value	Ethnicity	X12 Value	Ethnicity
E1	Spanish/Hispanic Origin		
		E1.02	Mexican, Mexican American, Chicano/a
		E1.06	Puerto Rican
		E1.07	Cuban
		E1.??	Another Hispanic, Latino/a, or Spanish Origin
		E2	Not of Hispanic, Latino/a, or Spanish origin
E9	Unknown	E9	Unknown

Race and ethnicity are currently mandatory and will remain so for inpatient, emergency department, and ambulatory surgery reporting. They will continue to be optional for the Expanded Outpatient Data Collection (EODC).

The SPARCS system will be able to accept reporting of the expanded data standards as of **July 1, 2013**. Health care facilities may begin submitting files in the expanded format at this time. Facilities should consider a successful transition to the expanded standards when one successful test file passes the edits for these data elements on all submitted records.

Facilities must be fully transitioned to the expanded version for **discharges as of January 1, 2014**.

### *Reminder on Reporting Race and Ethnicity*

With the January 1, 2013 requirement that SPARCS submissions be reported in the 5010 version of the X12-837 file, race and ethnicity should no longer be reported in the NTE segment, as it was in the 4010 version. For 5010, race and ethnicity are to be collected in the DMG segment.

To assist facilities in the transition, we have been accepting it in the NTE segment during the transition to the 5010 version of the X12 837. Effective July 1, 2013, we will no longer be accepting race and/or ethnicity reported in the NTE segment and require that it be reported in the DMG segment.

If you have any questions on these new race and ethnicity data standards or the time frame for data collection, please contact SPARCS Operations at SPARCS@health.state.ny.us.

### *Provider Licenses Update*

The following updates have been made to the ranges of acceptable provider license types:

- **Podiatrist.** Range 20000500-20006500 upper bound is invalid. Currently, issuing license numbers is in the 20006550 series, with an annual increase of 79 licenses per year. Upper bound is now 20006800, giving a three year buffer.
- **Psychologist.** Range 50000003-50018000 upper bound is invalid. Currently, issuing license numbers is in the 50022000 series, with an annual increase of 500 licenses per year. Upper bound is now 50023500, giving a three year buffer.

### *Modifications to Edits*

- **LOS Edit for Medicare.** The Length of Stay (LOS) edit is now being bypassed on emergency department claims, where Medicare is the primary payer.
- **Date of Service Inclusion in Duplicate Logic.** The edit program now uses the date of service as part of the key; so, repeating claims, like physical therapy, will not be rejected as duplicate submissions.
- **CPT Code Library Update.** The CPT code library has been updated for 2013 codes. Please resubmit any claims that may have failed for incorrect CPT code.
- **Body Mass Index.** The ICD-9-CM V85.5x (Body Mass Index, pediatric) has been updated to allow ages 17-20 to be submitted.
- **New Warning Message.** When ICD-9-CM diagnosis code 610.1 (Diffus cystic mastopathy) is submitted for patients less than 14 years of age, SPARCS will generate a warning message instead of failing the claim.

### *ICD-10 Reporting Update*

The input structure is built to receive ICD-10 codes. The Department is currently modifying current ICD-9 edits for the ICD-10. In October 2013, facilities will be able to test submissions. In October 2014 submission to production will be required.

### *SPARCS Annual Report Generator*

An application to query SPARCS inpatient, emergency department and ambulatory surgery data from 2000 to present is now available on the NYS DOH Health Commerce System (HCS). Queries may be conducted facility specific or statewide. The SPARCS Annual Report Generator can be accessed by

logging into the HCS, then going to Applications => S => SPARCS Data Queries => Annual Report Generator.

The SPARCS Annual Report Generator will generate reports, by year, from SPARCS inpatient, emergency department and ambulatory surgery data. Report types include: age group, AP-DRG, APR-DRG, Severity of Illness, Major Diagnostic Category (MDC), discharge disposition, race, ethnicity, payer, gender, AHRQ Clinical Classification System (CCS) diagnosis or procedure categories, county, service category and total discharges. Reports may be grouped by facility, county, Health Service Area (HSA) or Commission Catchment Area (CCA). The report generator will create simple listings, as well as comparisons. Comparison reports will show the selected report type compared by year, facility, county, HSA or CCA. A new feature has recently been added to the Annual Report Generator that allows query results to be exported as .csv files.

Questions regarding the HCS account process or how to use the Annual Report Generator can be directed to: [SPARCS@health.state.ny.us](mailto:SPARCS@health.state.ny.us).

### [SPARCS Data on Health.Data.NY.Gov](http://health.data.ny.gov)

SPARCS 2010 hospital discharge data by facility and hospital discharges by patient county of residence are now available on the Health Data NY website ([health.data.ny.gov](http://health.data.ny.gov)).

### *SPARCS Contact Information*

We welcome comments and feedback. Please contact us at:

SPARCS Operations  
New York State Department of Health  
Office of Quality and Patient Safety  
Bureau of Health Informatics  
Empire State Plaza  
Corning Tower, Room 878  
Albany, New York 12237

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Data Release:	<a href="mailto:BIO-INFO@health.state.ny.us">BIO-INFO@health.state.ny.us</a>