

SPARCS Update

New York State Department of Health

May/June 2016

Office of Quality and Patient Safety

General Announcements

NYHIMA Presentation

SPARCS program staff presented at the New York Health Information Management Association (NYHIMA) Annual Conference, held June 7-10 in Melville, New York. The presentation included information on upcoming changes for the next year in SPARCS. The topics covered were ICD-10 codes, data quality, and private referred ancillaries. Another topic of discussion was how SPARCS data are being used in the NYS Health Profiles and Health Data NY platforms on the public web site. The presentation was followed by a fifteen-minute Q&A session.

The presentation is available on the SPARCS webpage:
<https://www.health.ny.gov/statistics/sparcs/training/>.

Compliance

Monthly

Warning notices have been sent to healthcare facilities that have not submitted inpatient and/or outpatient monthly SPARCS data. Regulation NYCRR 400.18 requires 95% of the patient records being sent to SPARCS within 60 days from the end of the month of the visit/discharge. Discharges/visits that occur in the month of March 2016 were due by May 31, 2016. The information used for compliance can be found on the June 1, 2016 audit report, located at <http://www.health.ny.gov/statistics/sparcs/reports/audit.htm>.

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Quarterly

June 2016 is the last email reminder about the conclusion of the Fourth Quarter 2015 SPARCS Reconciliation period. All of SPARCS data for visits/discharges that occurred in the months of October, November, and December 2015 are due **June 30, 2016**. The compliance report will be generated with the July 6, 2016 Master file update. The cut-off for the upload will be the data submitted and received by July 5, 2016 at 5:00 PM.

Regulation NYCRR 400.18 allows facilities 180 days from the end of the quarter to reconcile the number of records submitted to SPARCS as compared to their facility's own data. This reconciliation period is for facilities to fix their SPARCS edit errors.

If all data has been submitted and there are months with less than the expected number of records, as found on the compliance report, it is the responsibility of the SPARCS coordinators to request an exception for those months. An exception is requested by email to SPARCS.submissions@health.ny.gov.

Exceptions will not be granted if unresolved errors are greater than 1% of the total number of records accepted for the period, unless the SPARCS coordinator submits reasons the unresolved errors cannot be fixed.

If healthcare facilities are having technical difficulties getting their data submitted, SPARCS allows two sequential one-month extensions after the end of the reconciliation period. Extension requests should be made by email to SPARCS.submissions@health.ny.gov.

Month	Fourth Quarter 2015 SPARCS Reconciliation Activities
June 2016	3 rd email warning notice to SPARCS coordinators and CEOs 4 th quarter data due June 30, 2016
July 2016	Statement of Deficiency issued

Data Release

Data Governance Committee

The SPARCS Data Governance Committee convened on June 7, 2016. The following SPARCS identifiable data requests were presented to the Committee during this meeting:

Request #	Project Title	Organization Name
1606-01	Clinic Based vs Home-Based Support to Improve Care and Outcomes for Older Asthmatics	Mount Sinai Medical Center
1606-02	Predicting Influenza Hospitalizations in New York City and London through the use of Twitter	Michigan State University

Request #	Project Title	Organization Name
1606-03	Assessment of outcomes following surgical procedures in the State of New York	SUNY Stony Brook Medical Center

The next meeting of the SPARCS Data Governance Committee will be held on July 18, 2016.

Limited and Identifiable

The following organizations received SPARCS data from April 8, 2016 through June 1, 2016.

Organization	Data Type	Years
SUNY Stony Brook University Medical Center	Identifiable	2005-2014
1199 SEIU United Healthcare Workers East	Limited	2014
Bassett Healthcare	Identifiable	2008-2015
Cornell University	Limited	2015
Dartmouth College	Limited	2014
DataBay Resources	Limited	2015
Dutchess County Department of Health	Limited	2015
Finger Lakes Health Systems Agency	Identifiable	2015
Gradient, Risk Sciences Group	Identifiable	2006
Health Quest	Limited	2015
iVantage Health Analytics	Limited	2015-2016
John Hopkins University	Identifiable	1995-2019
Lexis Nexis, Risk Solutions, Healthcare	Limited	2015-2016
Manatt Health Solutions (MHS)	Limited	2014-2015
Montefiore Medical Center	Identifiable	2008-2014
Mount Sinai Medical Center	Identifiable	1982-2014
Nathan S Kline Institute for Psychiatric Research	Identifiable	2000-2015
North Shore-Long Island Jewish Health System	Identifiable	2014-2016
Northwell Health Systems - LIJ	Limited	2000-2010
NYS Office of Mental Health	Identifiable	2015-2016
Oscar Insurance Corp	Limited	2013
SG2- MedAssets	Limited	2014-2015
SUNY Albany School of Public Health	Identifiable	2014-2016
SUNY Downstate Neurology	Limited	2010-2014
Treo Solutions	Identifiable	2014-2015
Truven Health Analytics	Limited	2015-2016
Truven Health Analytics	Identifiable	2015-2016
University of Illinois	Limited	2007-2012
Vermont Hospital Association and Health Systems	Limited	2014-2015
Western CT Health Network	Limited	2014-2016

The complete list of approved identifiable data requests dating back to 2009 is on the public webpage at the following address: http://www.health.ny.gov/statistics/sparcs/dgc/appr_data_req.htm.

Submitter Notes

Submitting/Re-submitting Older Years of SPARCS Data

As a result of the Medicare Recovery Audit Program, healthcare facilities have made changes to previous years of patient records. Healthcare facilities have requested clarification about submitting those facilities must produce a SPARCS record with all the data required by the current editor. Inpatient data may be submitted as a correction or replacement file as long as the primary keys remain the same. The inpatient primary keys are as follows: permanent facility identifier (PFI), patient control number, medical record number, statement from date, and statement through date. Otherwise, the record must be deleted before submitting the new record.

For outpatient data, the record should be deleted before submitting the new record. In the batch update process that merges the record into the Master file, the system requires 1000 records (from all facilities combined) to trigger the monthly update for data older than the current year and previous year, otherwise the system only gets updated once per year during the January update.

Injury Codes

The Department of Health requires the codes (if applicable) of the Cause and Place of Injury, although CMS does not. The shift to ICD-10 does not negate this requirement. Also, this field is case sensitive. The edit accepts upper-case only. If lower-case is submitted, it will cause an error.

Submitting Private Ancillaries

On September 3, 2015 SPARCS emailed an announcement letter regarding the reporting of private referred ancillary charges to all SPARCS Coordinators and healthcare facilities' Chief Operating Executives and/or Administrators. The original announcement letter is found on the SPARCS public website: <https://www.health.ny.gov/statistics/sparcs/announcements/>.

The letter discussed the reporting of Stand-Alone Radiology and Laboratory Services, and thus evolved into the title of Labs and Rads. This prior exclusion was originally given to submitters at the beginning of the reporting of outpatient services, formerly called expanded outpatient data collection (EODC), to reduce the volume of data. SPARCS is now able to accept this volume of data so the request to exclude them has been rescinded.

If a specimen or radiology test is taken at a SPARCS reporting facility, the test gets reported under the permanent facility identifier (PFI). The only reporting facilities are hospitals, hospital extension clinics, and D&TCs that are certified for ambulatory surgery services. For example, a blood draw taken at a hospital extension clinic not certified for ambulatory surgery (non-reporting entity), and analyzed at the hospital, would not be reportable to SPARCS because the source of the laboratory sample is not a reporting entity.

Additionally, all services that occur at a reportable entity must be submitted to SPARCS, except those services non-reportable on the X12-837 R. The non-reportable are dental claims on the X12-837 D;

professional services reportable on the X12-837 P; and outpatient pharmacy claims such as the National Drug Code (NDC) on the X12-837 R.

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SPARCS Update newsletters are distributed electronically to individuals who have Health Commerce System (HCS) data upload access, subscribers to SPARCS-L, and other interested parties upon request.

*Updates are also available online at:
<http://www.health.ny.gov/statistics/sparcs/newsletters/>*