[](http://mhdo.maine.gov/imhdo/)

2014 Hospital inpatient Release Notes

Updated 5/2/2016

# Opening Statement

This release contains the Calendar Year 2014 Hospital Inpatient Encounter data.

# Facility Specific Data Notes

Included with this release is an excel document that contains record counts by facility by month. There are no data gaps to report.

You will note that some facilities have volume fluctuations month to month that may be outside of the expected range. At this time we do not have information to explain that fluctuation, but in our new hospital submission Portal coming online this summer, we will have a data validation that will compare volume with previous submissions which will allow us to detect potential data issues and capture explanations from facilities about fluctuation at the point of data submissions or notify them to submit missing information. We will capture this information and make it available to the user as part of our new Meta data structure.

200001 St. Joseph Hospital - All of the records from St. Joseph Hospital (200001) were submitted with a Payer Identification Number indicating that the visit was “Self-Pay.” Thus, 100% of the visits for this facility have an MHDO-Assigned Primary Payer value of Self-Pay (08). This was also the case in the 2013 data. The MHDO has contacted the facility about this issue and they are investigating.

# Assignment of Geocodes

In the restricted data releases the MHDO has historically assigned a geocode populated in the “geocode” field. In the revised 2012/2013 data distributed in March of 2016, the MHDO modified the algorithm used to determine this geocode. The MHDO assigns a geocode when the city, state, and ZIP match the entries that appear on the canonical list of geocode values (a data table of Maine geocodes provided by the Maine Office of GIA (MEGIS) is the canonical list used for the assignment and is included in this release). The MHDO will not impute geocodes based on incomplete or conflicting city, state, or zip information. In order to improve our ability to assign geocodes we are working with those facilities that have not provided consistent city, state, and zip information.

Also note that in compliance with MHDO Rule Chapter 120 section 9(A)(2)(f) by default, data releases will only include county to identify the patients’ home addresses unless the additional data elements of city, state and zip code are specifically requested and approved by the MHDO.

# DRG Calculation

The DRG codes are assigned using the 3M Grouper software. The DRG versions DataBay used are as follows:

AP-DRG = 27.0

APR-DRG = 31.0

CMS-DRG = 24.0

MS-DRG= 31.0

As a part of the the cutover of hospital data submissions to the new portal, the MHDO is reviewing the current DRG calculations in order to determine if modifications are necessary. If it is determined that DRG calculation modifications will be put in place for the 2015 hospital data, the MHDO will retroactively apply these calculation revisions to the 2014 data and make these new values available to data users.

# Issues with MHDO-Assigned Medical Record Numbers (MRN) across Time

The MHDO has been made aware of some variances in how the MHDO-Assigned Medical Record Number (MRN) has been created in previous years of data, specifically in how alpha characters are encoded. While the MHDO-Assigned Medical Record Number is generally consistent across time for the same individual within the same facility, there are some cases where the same underlying MRN may have been assigned a slightly different MHDO-Assigned MRN in historical files than is currently being assigned.

Data users are reminded that the MHDO-Assigned Medical Record Number generally cannot be used to track individuals between facilities; the same MRN may be used at different facilities to represent different individuals. Also, even within the same facility, an individual may not retain the same MRN across time; when hospitals merger or when they transition to new data systems, new MRNs may be assigned. The MHDO has no control over the MRN assignment policies within facilities.

The MHDO is developing data elements that will allow an individual to be more reliably tracked both across time within a given facility and between facilities.