

Date: April 9, 2025

To: Hospital Chief Financial Officers and Case Mix Liaisons

From: Claudine Williams, Principal Deputy Director, HDMI

Subject: **FY 2025 Q3 Data Forum Follow-up**

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Thanks to all who participated in the FY 2025 Q3 Data Forum held on March 14, 2025. Below is a summary of what was discussed and next steps.

Announcements

Quality Update

Staff presented updates on quality-related data initiatives and reviewed the following for CY 2025 (refer to slides 5-14):

- PPC Updates and Feedback
- RY Updates: MHAC, RRIP for CY 2025
- RY 2027 QBR Timeline
- RY 2027 Quality Staff Policy Proposal Updates
- Planned Monitoring Reports
- CY 2025 Digital Measure Submissions to HSCRC
- eQCM Reporting Timeline (including required and optional measures for upcoming calendar years)
- HSCRC Hospital-Wide Readmission and Mortality Reporting Requirements (for CY 2024-2025)

SOGI and SDOH Update

Staff provided updates on the implementation timeline and training sessions for the Sexual Orientation and Gender Identity (SOGI) variables (refer to slides 16-18).

Q & A from meeting participants:

- **Q:** Are SOGI variables mandatory?
 - **A:** Yes, SOGI variables will be mandatory starting in FY26. However, patients have the option to select "Prefer not to answer" if they don't wish to disclose this information.
- **Q:** Is SOGI data expected to be collected for every patient encounter? Isn't that burdensome for recurring patients?

- **A:** HSCRC will follow up with best practices regarding SOGI data collection frequency. The hospital that raised this question uses Cerner EHR.

New Health Plan Payer Code and Edits

Staff reminded participants that the new health plan code for Carelon Behavioral Health is 130 (use MD MEDICAID for MD Medicaid Payer), and the old code 118 will no longer be valid for discharges, effective January 1, 2025. System edits will be updated to reflect this change, with code 118 being fully removed in the next fiscal year.

New Reserve Flag and Optional Country of Birth

Staff reminded participants that the "Country of Birth" data field will be made optional for Inpatient (IP), Outpatient (OP), and Psychiatric Services (PS) discharges, effective January 1, 2025. Furthermore, on March 1, 2025, a new reserve flag was implemented specifically for the 8th Floor of Adventist White Oak (Inpatient Only). When this flag is set to "Y", an error will be generated if the hospital code is not 210016 and the discharge date precedes February 1, 2025.

Discontinuing Release of ICD-9 Case Mix Data

Staff reminded participants that datasets preceding Calendar Year 2016 (with ICD-9 diagnosis codes) will be excluded from public use files and access via CRISP or hMetrix, effective immediately. This measure is being implemented to optimize data management and concentrate on contemporary trends. Consequently, all CRS reports that historically presented data prior to October 2015 will now be restricted to display data from October 2015 onward.

CDS-A Reports

Staff reminded participants that the CDS-A Report is available on the CRISP Portal (refer to slides 24-25). This report allows hospitals to review growth in the cost of outpatient infusion and chemotherapy drug utilization for outlier dosage units based on 3rd Monthly case mix data in CRISP. The expectation is that hospitals will use this information to correct errors prior to submission of Quarterly case mix data. **Please be aware, hospitals will be subject to fines if any material error is found in a hospital's CDS-A audit.**

Data Forum Survey

Staff reminded participants to complete the survey in Survey Monkey. The link was sent on **Wednesday, March 19th**. Please use this opportunity to provide the HSCRC staff feedback on the data forums.

Q & A from meeting participants:

- **Q:** Can the survey completion timeline be extended?
 - **A:** Yes, the deadline is being extended to April 4, 2025.

Patient Level Denial Template

Staff announced that the HSCRC will disseminate a Patient Level Denial Template to hospitals in response to the observed increase in payer denial trends. The report detailed the data to be collected using the template and outlined the proposed implementation timeline (refer to slides 27 - 32).

Q & A from meeting participants:

- **Q:** Can a hospital system submit one file for all its hospitals?
 - **A:** The current plan is to continue with UCC submissions.
- **Q:** Will the file include patient medical record numbers?
 - **A:** No, the file will include patient account numbers. HSCRC will update the slides to reflect this.
- **Q:** Should the submission file only include regulated accounts?
 - **A:** Both regulated and unregulated accounts can be submitted, but HSCRC will only process the regulated accounts in their downstream processing.
- **Q:** Will HSCRC provide any resources for the submission?
 - **A:** Yes, HSCRC will send out a data dictionary and template for hospitals to review.
- **Q:** What percentage of hospitals are currently using SFTP?
 - **A:** Only 10% of hospitals are using SFTP.

FY 2026 DSR Update

National Drug Code

Staff announced that effective July 1, the National Drug Code (NDC) will be a new 11-digit variable in OP data (Record Type 3) for all drug codes. This addition, as part of a CDS-A drug policy revision, will follow the format XXXXXXXXXXXXX with leading zeros (refer to slide 34).

RSV Vaccination Administration

A new one-digit "RSVAdmin" variable will be added to IP case mix data to track RSV vaccinations given during the hospital stay (1=Yes, 0=No). Edits will flag inconsistencies based on the patient's Nature of Admission (refer to slide 35).

Q & A from meeting participants:

- **Q:** Will RSV flag reporting start from July 1, 2025
 - **A:** Yes, the RSV flag will be in the data from July 1. Below is the timeline for the data submission
 - FY26 data submission format in the **Testing** environment: All files submitted from **August 1, 2025**, onwards (July Monthly file)
 - FY26 data submission format in the **Production** environment: All files submitted from **October 1, 2025**, onwards (July-September Monthly file)

Revised Definition of Admission and Discharge Dates

The "Admission Date" definition is clarified to capture the date of formal acceptance for care in any setting, while the "Discharge Date" will specify the date and time of the patient's release from the hospital. These updates aim for greater accuracy in capturing admission and discharge information (refer to slide 36).

Data Processing Update

Mary Pohl discussed the upcoming changes in submission and data processing, FY 26 financial data submissions to DAVE, change in submission processes, change in revision submitting process, proposed changes to financial templates, supplemental data submissions to DAVE and financial and supplemental data timelines. Mary also reminded participants about production data submissions, rate center trend monitoring report, the financial reconciliation form, EHR survey overdue reminder, DAVE User Management and Change in hospital connection options (refer to slides 37-47).

Case Mix Review Update

Brenda Watson from Advanta Governmental Services discussed the definition of point of origin and emergency department encounters (refer to slides 48-53).

Upcoming Workgroups

Staff announced information for the Payments Models Workgroup, Performance Measurement Workgroup and Total Cost of Care Workgroup (refer to slides 54-57).

Next Meeting

The next Quarterly Data Forum Meeting is scheduled for **June 13, 2025**. If you have any agenda items, please send them to Curtis, or myself by **May 23, 2025**. If you have any questions or concerns about the topics discussed above, please contact Curtis Willis at: Curtis.Wills@maryland.gov.