



# The Oregon Maternal Data Center (OMDC)

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## **Housekeeping Notes**

- Phone lines are open. Please place your line on mute until speaking.
- You are free to ask questions at any time. If you prefer, you can type questions in the questions box on your screen.
- Use the chat feature to alert us to any technical difficulties.
- We will monitor both questions and chat features throughout the webinar.





## **Q Corp Updates**

- Held one-on-one hospital meetings to secure OMDC pilot participants
  - □ Committed/very interested hospitals on today's Webinar
- Finalizing build decisions for OMDC tool w/ CMQCC
- Negotiating/finalizing legal agreements w/ CMQCC
- Today's Webinar key step in pilot preparations
- All materials (data specs, legal agreements, other) will be available at:

http://www.q-corp.org/maternity-care





## What is the Maternal Data Center (MDC)?

An interactive tool to support hospitals' OB quality improvement initiatives and service line management

- Overall hospital performance measures
- Drill-down to the patient level and case review worksheets to identify quality improvement opportunities—for both clinical quality and data quality
- Provider-level statistics—to assess variation within a hospital
- Benchmarking statistics--to compare your hospital to regional, state, and like-hospital peers in OR, WA and CA
- Facilitating reporting to Leapfrog and Quality Net





## **Maternal Data Center Background**

- MDC developed by the California Maternal Quality Care Collaborative (CMQCC) --a research program operated from Stanford University School of Medicine
- Database and application servers on site at Stanford Med-IRT
- Maternal Data Center has been in operation for California hospitals since January 2012 and for Washington hospitals since August 2014.
- The Oregon MDC (OMDC) now being customized for hospitals in the Oregon Perinatal Collaborative!





## Demonstration of Maternal Data Center





#### **Data Files**

#### Three Required Data Files

- Patient Discharge Data
- Core Maternal Clinical File
- Core Newborn Clinical File
- -Comma-Delimited Flat File Format (CSV) with all data elements for each case in a single row. (NO set field lengths.)
- -Submit based on discharge date—for <u>all</u> file types
- -Use MDC-designated column headers
- -Detailed Data Specifications and CSV File Templatemade available in February
- -Core Files to include ALL required data elements





## Patient Discharge Data (PDD)

Subset of the data elements hospitals submit to OAHHS

Facility ID (NPI)	ICD-9 Diagnosis and Procedure Codes (all)	
Date of Birth	Dates of Service	
Patient Zip Code	Admission and Discharge Dates & Times	
Race/Ethnicity	Revenue Codes and Service Units	
Admission Source	Payer Information	
Discharge Status	MRN or Patient Account Number (to be encrypted by MDC)	

- Can include all discharges –OR—only moms and babies (based on ICD-9 codes in Data Specifications)
- Will transition to ICD-10 with October 2015 data
  - Any early transitions?
- Revenue Codes and Service Units: To auto-populate ICU metrics
- Recommend MRN over Patient Account Number
  - Facilitates record lookups by clinical staff
  - In event want to look at re-admissions in the future





#### **Core Clinical Files**

#### **Required Data Elements**

#### **Core Maternal Clinical File**

- Maternal Medical Record Number
- Discharge Date
- Maternal Date of Birth
- Parity
- Gestational Age-Weeks
- NPI of Delivering Provider

#### **Core Newborn Clinical File**

- Newborn Medical Record Number
- Newborn Discharge Date
- Newborn Date of Birth
- Maternal Medical Record Number
- Birthweight
- 5 Minute Apgar Score
- Clinical files also submitted based on discharge date.
- If cannot select clinical cases based on ICD-9 codes, attempt to identify only <u>delivery-related</u> clinical records (<u>not</u> antepartum or postpartum).



## **OPTIONAL Supplemental Clinical Data**

#### **Maternal File**

#### MRN

- Date of Discharge
- Gestational Age-Days
- Number of Maternal ICU Days
- Blood Products Transfused (RBC, FFP, PP, Cryo)
- Labor
- Spontaneous Rupture of Membranes
- Prior Uterine Surgery
- Antenatal Steroid Therapy Initiated
- Reason for Not Initiating ANS Therapy
- DVT Prophylaxis C-Section
- Sample Flag for Joint Commission PC-01
- Sample Flag for Joint Commission PC-02
- Sample Flag for Joint Commission PC-03
- Provider ID: Delivering Provider
- Maternal Diagnosis Codes (for corrections to PDD)
- Maternal Procedure Codes (for corrections to PDD)
- Patient Height-Feet
- Patient Height-Inches
- Patient Pre-Pregnancy Weight

#### **Newborn File**

- MRN
- Date of Discharge
- 10 Minute Apgar Score
- Bloodstream Infection Present on Admission
- NICU Admission
- Exclusive Breast Milk Feeding
- Reason for Not Exclusively Breastfeeding
- Bilirubin Screen:
- Bilirubin Screen: Parental refusal to test
- Sample Flag for Joint Commission PC-05
- Sample Flag for Leapfrog Bilirubin Measure
- Newborn Diagnosis Codes
- Newborn Procedure Codes

Hospital choice: Number of supplemental files submitted, the choice of fields and the timing of the submission





## Why Submit OPTIONAL Fields?

Optional fields may be derived from internal systems (e.g., EMR, core measure vendor system) and might be used to:

- Correct data already in the MDC system from your original file submissions
- Pre-populate the "chart-review" data elements (e.g., labor, SROM or Prior Uterine Surgery) in the MDC system.
- Additional metrics (e.g., OB hemorrhage, PC-05)





## **Data Submission Timing**

- Recommendation: Retrospective to January 2013 (<u>Option</u> to submit back to January 2011 if hospital chooses)
- Submit on monthly basis--45 days after the end of each reporting month
  - Wait <u>at least</u> 45 days to ensure coding is complete and all records are included in the submission!
- Submit complete set of records for each month based on discharge date





#### **Data Submission Process**

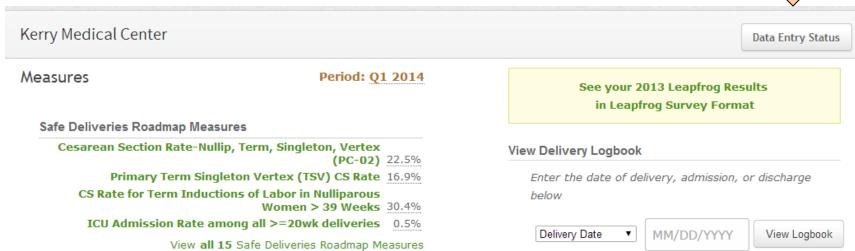
- Create "Test" Data file, including 2-3 months of data by 3/31/15
- All data submissions made via the MDC's secure web-based tool housed on Stanford servers. (FTP site planned for future)
- MDC site requires hospital registration
- When test file ready, contact Anne Castles to initiate registration. Provide:
  - Contact information (including e-mail address) for *Primary MDC* Administrator for the hospital—the individual who will register the hospital and has the authority to add other hospital users.
  - Planned date of submission



#### **Data Submission Process**

Data submitter to register in MDC and submit files

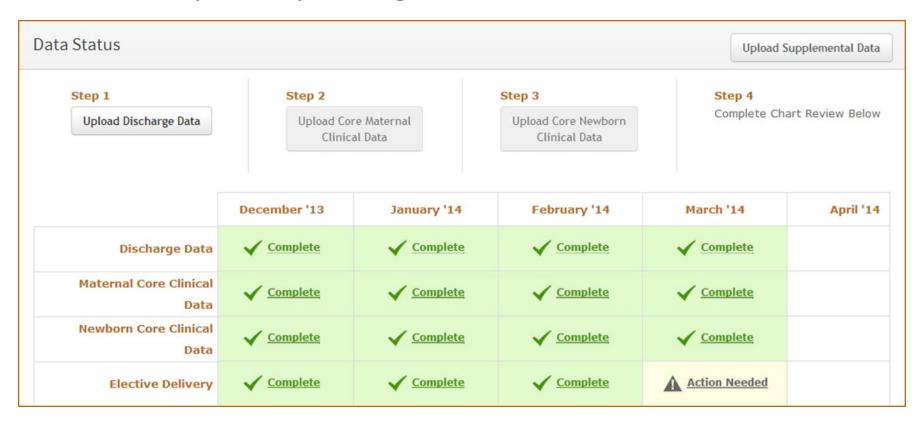






#### **Data Submission Process**

Follow Steps for Uploading Files



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## **Completeness Checks**

Automated Error Checks

#### **Examples:**

- At least one discharge record in the first X days and one discharge record in the last X days of the month (X based on hospital delivery volume)
- All PDD records to include a principal diagnosis code
- Facility ID included (NPI)
- All required fields
- Linkage Statistics
  - Hospital encouraged to review once file processed
- CMQCC Evaluation
  - Evaluate for completeness and accuracy and notify hospital of next steps (i.e. fix specific issues or move forward with full data submission)





#### **Measure Calculation**

 Measures calculated automatically upon file submission.....provided that all data elements submitted

Measure Requirements	Examples	
Patient Discharge Data (PDD)	Episiotomy Rate	
	VBAC Rate	
PDD <u>and</u> Core Clinical Data Sets	NTSV CS Rate	
	Unexpected Newborn Complication	
	Rate	
	Primary TSV CS Rate	
PDD <u>and</u> Core Clinical Data Sets	ED<39 Week Rate	
and supplemented by chart review	OB-Hemorrhage Rate	
or supplemental clinical data		

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#### **After Submission**

- Once all retrospective data uploaded, CMQCC will schedule 1.5 hour webinar training session with each hospital team
- Quarterly User Group Meetings
- Technical Support upon request!



## **Participation Steps**

What?	When?
<ul> <li>Participation Agreement, BAA and Enrollment Fees</li> <li>Between Hospital, Q Corp and CMQCC</li> <li>Hospital enrollment fees paid to Q Corp</li> </ul>	Target: Available by Feb 2015 for execution by 3/31/15
<ul> <li>Data File Creation</li> <li>Discharge Data File         <ul> <li>Mimics what hospital already reports</li> </ul> </li> <li>Maternal and Newborn Clinical Files         <ul> <li>GA, Parity, Birthweight, Apgar Score</li> </ul> </li> </ul>	Data specifications ready by February 2015
<ul> <li>Webinar to review final Data Specifications</li> <li>Webinar to review registration, file upload steps</li> </ul>	<ul><li>Last week of February</li><li>Latter half of March</li></ul>
Hospital Registration in MDC  5-minute process!	Target: March 31, 2015
<ul><li>First Data Submission</li><li>Start with 3 months of baseline data</li></ul>	Target: March 31, 2015, rolling basis
CMQCC Training for your Hospital Team	Post data submission



## **Questions?**

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### **Next Steps**

- Hospitals should e-mail Liz Whitworth, OMDC project manager at whitworth42@gmail.com to confirm participation.
- Provide hospital contacts (name/email) for:
  - Overall OMDC project contact
  - □ Data submission/IT
  - Legal agreements review/signature
  - Invoicing
- Reminder: All materials (data specs, legal agreements, timelines) will be available at:

http://www.q-corp.org/maternity-care

Questions at any time? Liz Whitworth, OMDC project manager at whitworth42@gmail.com

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## Thank you!