

Overview of NCHS' National Health Care Surveys

Carol DeFrances, Ph.D., Acting Director, Division of Health Care Statistics

HITAC Public Health Data Systems Task Force Meeting

October 12, 2022

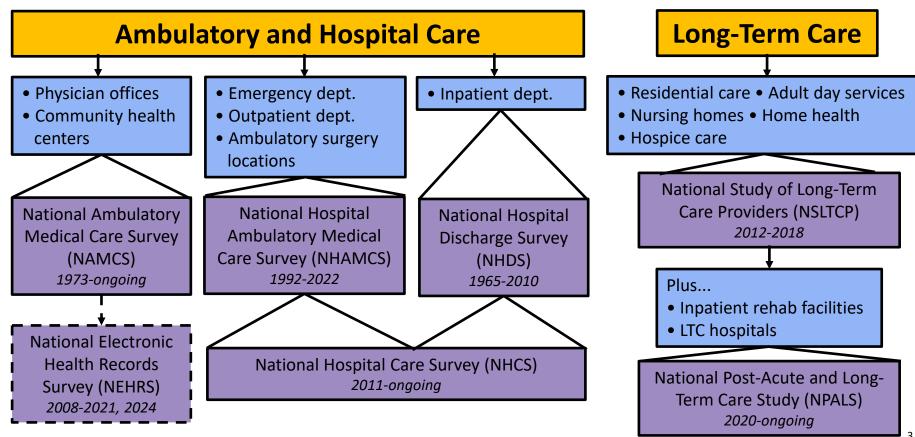


National Health Care Surveys

- Produce accurate objective, nationally-representative statistics on health care to inform health care policy and serve a variety of research needs.
- Are establishment surveys, not household surveys.
- Provide estimates about the universe of encounters with providers, not the population.
- Historically, patient-level data largely abstracted from medical or administrative data.
- Include health care provider surveys to understand this population's experience providing care.



National Health Care Surveys Spectrum of Care



Examples of the Data Elements Included in Surveys

Facility/practice level

- Type of practice
- Physician specialty
- Num./Type of providers
- Num. of inpatient beds
- Num. of inpatients
- Num. of ED visits
- Num. of births
- COVID-19 experiences
- Use of telemedicine

Patients

- Demographics
- Insurance status
- Residential zip
- Medical conditions
- Smoking history
- Personal identifiers for linkage (e.g., to the National Death Index)

Encounters

- Reason for visit
- Diagnosis
- Procedures and services
- Medications and immunizations
- Laboratory and other diagnostic tests
- Types of providers seen

Data Dissemination

- Preliminary data
- Data Files
 - Public use files and associated documentation available for download on NCHS website
 - Restricted use files available through the NCHS Research Data Center (RDC)

Network

NCHS Reports

Peer-reviewed journal articles

Official government reports

National Health Statistics Reports

Number 175 ■ September 28, 2022

Experiences Related to the COVID-19 Pandemic Among U.S. Physicians in Office-based Settings, 2020–2021

by Zachary J. Peters, M.P.H. Christopher Cairns, M.P.H., and Danielle Davis, M.P.H.

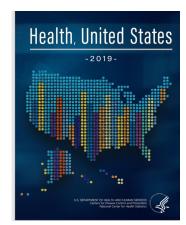
ORIGINAL RESEARCH

Assessment and Diagnosis of Mental Illness in EDs Among Individuals Without a Home: Findings from the National Hospital Ambulatory Care Survey

Hijab Ahmed, MS*+

*Texas Tech University Health Sciences Center School of Medicine, Department of Emergency Medicine, Lubbock, Texas Medicine, Lubbock, Texas Texas Tech University Health Sciences Center, Department of Public Health, Lubbock, Texas

Section Editor: Marc Martel, MD Submission history: Submitted January 25, 2021; Revision received June 13, 2021; Accepted July 17, 202: Electronically published November 5, 2021 Full text available through open access at http://escholarship.org/uc/uciem_westjem



Leveraging Healthcare Data & Interoperability *Standards* and Regulations to Enable EHR Data Collection

Standards

- HL7 CDA National Health Care Surveys Implementation Guide (IG)
 - o Releases 1, 1.1, 1.2, 2, and 3
- HL7 Health Care Surveys (FHIR) Content IG
 - Tightly aligned with USCDI
 - Uses the CDC MedMorph Reference Architecture IG

Regulations

- CMS Promoting Interoperability (PI) Program
 - 100+ EHR products are certified to:§ 170.315(f)(7) Transmission to public health agencies health care surveys
- ONC's Cures Act Final Rule (2020)
 - HL7 CDA National Health Care Surveys IG standard/format named for Health Care Surveys Certification Criteria in the rule.

Building Infrastructure and Enhancing Data Capacity To Support EHR Collection

- Migration to the cloud to support the NHCS and NAMCS surveys for collecting and processing EHR data.
 - Compliance with Confidential Information Protection and Statistical Efficiency Act (CIPSEA).
 - Collect, integrate, harmonize, store, and process EHRs and administrative claims data.

FHIR EHR Data Lake Pilot: 2022-2023

- Implement FHIR application inside provider's firewall.
- Build data lake on CDC Enterprise Data Analytics and Visualization (EDAV)
 platform to process and store EHR data collected.
- Build data governance structure to allow sharing of EHR data with other CDC programs.

Our Vision for the Future...

- All National Health Care Surveys public health reporting registry providers and hospitals submit data in FHIR IG format:
 - Continue creating nationally representative data sets
 - Develop surveillance and research data sets
- Build a data lake with hospital, ambulatory, and long-term EHR data for all CDC programs.
- Make timely and reliable estimates for conditions resulting from public health emergencies and rare conditions.
- Continue methodological work:
 - Explore other linkages (e.g., Medicaid and Veterans Affairs)
 - Continue NLP and algorithm development for opioid and other drug encounters, social determinants of health, and other medical conditions
 - Explore using Privacy Preserving Record Linkage (PPRL)
 - Consider developing synthetic data for public and restricted use files

For more information, contact CDC 1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

