



Pre/Post Visit Level Details

User Guide

By CRISP, Last updated 08/2025

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Purpose

The purpose of the user guide is to define and clarify how to navigate the Pre/Post Report. The Pre/Post report help users who have implemented programs to understand hospital utilization before and after a specific enrollment date for the patients in their program within an visit level view. The report allows users to upload a customized panel of patients which they have a treatment relationship with, in order to analyze their hospital utilization data.

General Information

1. Individual patients are identified using CRISP EID. The total number of members in the panel is the total number of patients on the panel that were matched to a CRISP EID and not necessarily the number unique patients on the panel. This can happen if invalid MRNs are provided.
2. Patients that have opted out and/or have 42-CFR data are excluded from the visit level reports.
3. Depending on the number of months selected, some participants might not be included in the analysis if they do not have data for the entire period before and after the analysis
4. If the admit date is on or before the program enrollment date, the visit will be considered part of the pre period. If the admit date is after the program enrollment date, then the visit will be considered part of the post period.
5. Data for this report follows a one-group pre-post design with no control group. The limitation of this design is the inability to control outside events and not being able to compare results for a similar population with no program exposure.
6. Patient mortality is not factored into analysis.
7. Patients that do not have hospital visits in MD or do not have hospital utilization will be added to the program but are not factored into analysis.
8. Patients that do not have valid EIDs found in the CRISP database will be added to the program but are not factored into analysis.
9. Patients that are not found in the Case Mix data ranging after 10/01/2015 will be added to the program but are not factored into analysis.

Data Sources

1. Inpatient and Outpatient Case Mix data from the Health Services Cost Review Commission (HSCRC)
2. CEND panel information for programs uploaded using panel MRNs

Timeframe

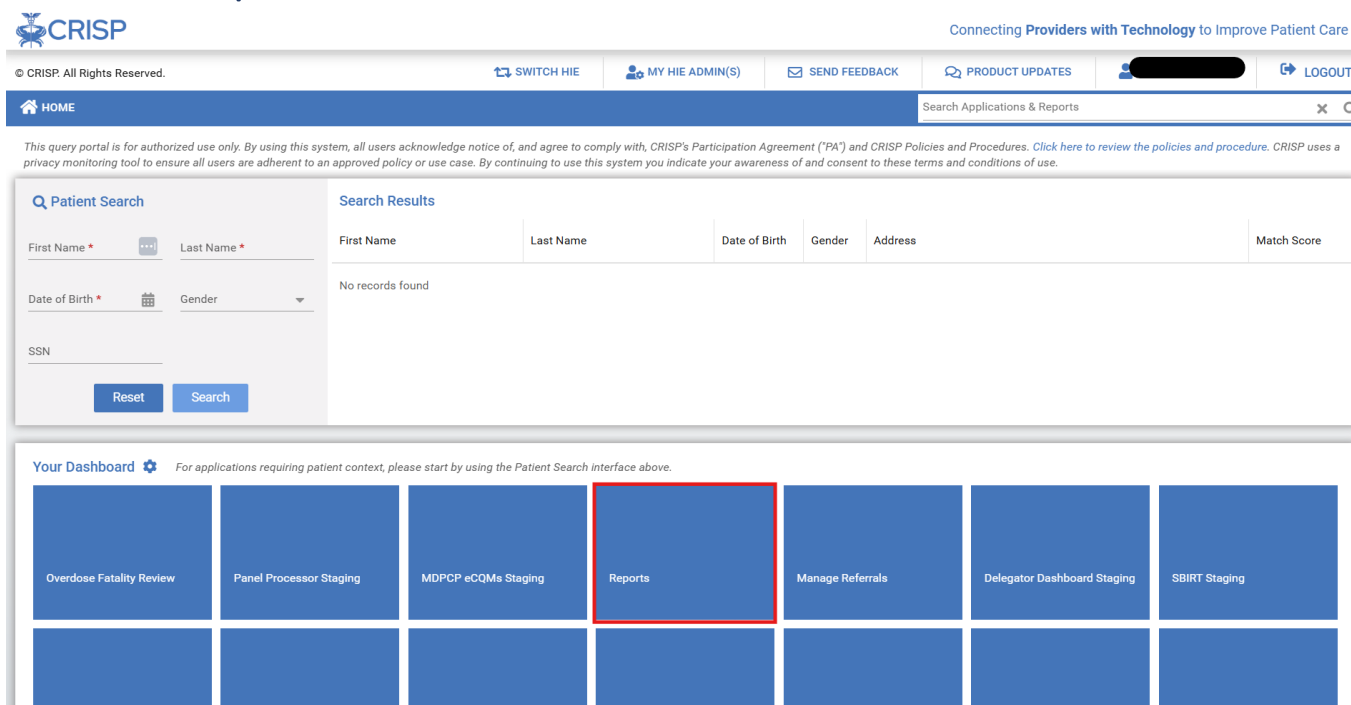
The denominator is based on the program enrollment date provided for each patient on the panel and the date of the most recent case mix data. Inclusion is based on an acceptable amount of Casemix data based on when the panel was submitted.

For example, if the case mix data has been updated through March 31, 2022, and the program enrollment date for MRN 123456 is April 15, 2021, this patient will be a part of the 1-, 3-, and 6-month timeframes but not the 12-month. MRN 123456 will be included in the 12-month timeframe *only after* data has been updated through April 30, 2022, and the patient has been enrolled in the program for a

full 12 months. This helps to ensure the denominator is most accurate in representing how long each person has been enrolled in the program.

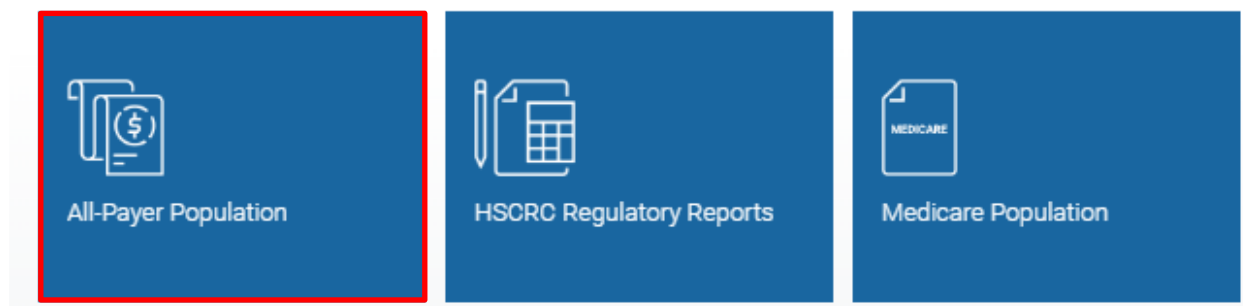
The recorded monthly period will be the same date each month apart from the enrollment date. For example, Feb 28th is the enrollment date which means Jan 28th is the 1-month period. 1 month before June 15th is May 15th, etc. Data can be filtered by any time period between 1- and 12-month(s).

Pre-Post Report Access

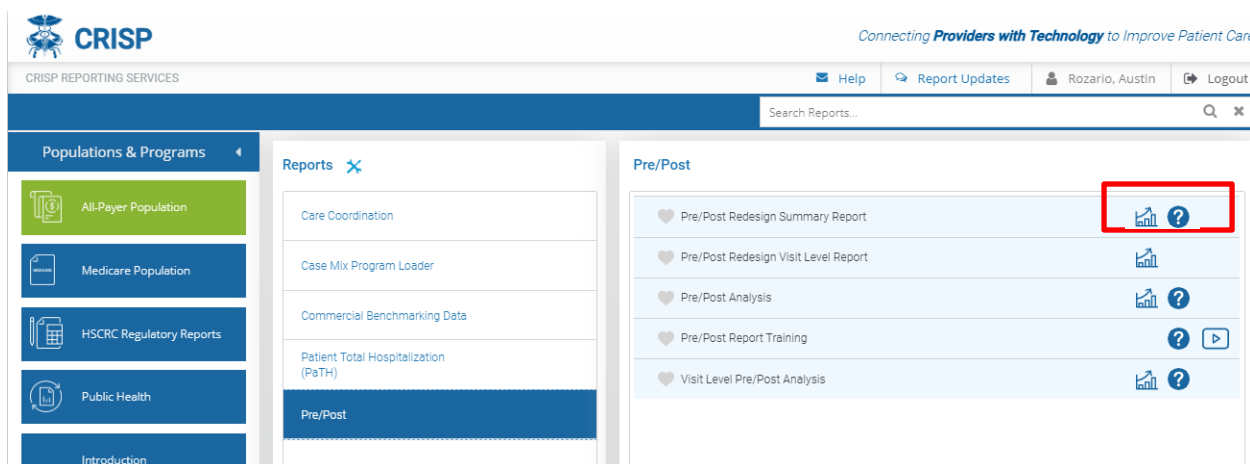


The screenshot shows the CRISP InContext HIE Portal interface. At the top, there is a navigation bar with links for SWITCH HIE, MY HIE ADMIN(S), SEND FEEDBACK, PRODUCT UPDATES, and a user profile dropdown with a LOGOUT button. Below the navigation bar is a search bar for Applications & Reports. The main content area is divided into two sections: Patient Search and Search Results. The Patient Search section includes fields for First Name, Last Name, Date of Birth, Gender, and SSN, along with Reset and Search buttons. The Search Results section shows a table with columns for First Name, Last Name, Date of Birth, Gender, Address, and Match Score, but it currently displays "No records found". Below the search section is the "Your Dashboard" area, which contains a grid of cards. The "Reports" card is highlighted with a red border. Other cards include Overdose Fatality Review, Panel Processor Staging, MDPCP eCQMs Staging, Manage Referrals, Delegator Dashboard Staging, and SBIRT Staging.

Step 1. The Pre-Post Report can be accessed via the CRISP InContext HIE Portal at <https://portal.crisphealth.org> by logging-in with your CRISP username and password and clicking the "Reports" card.



Step 2. Once you are in the “Reports” card, a dashboard of various blue cards will appear. *Note that the availability of reports is based on the access granted to the user.* The “All-Payer Population” card will give you the option for the “Pre/Post” tab.



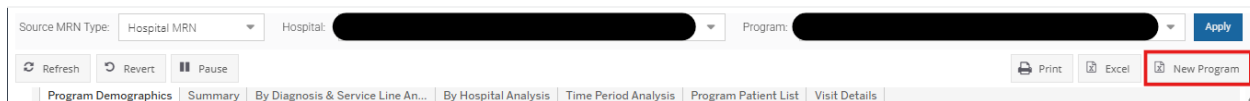
Step 3. Select the Pre/Post tab. This will open a group of subtabs, including the Pre/Post Redesign Summary Report and the Pre/Post Redesign Visit Level Report. Click on the graph icon highlighted in the screenshot above to access the most up to date Tableau dashboard reports. The question icon will provide helpful documentation such as user guides and data dictionaries. The play button next to Pre/Post Report Training plays a webinar recording of Pre-Post User Training.

Note: Pre/Post Redesign Visit Level Report is only available for users with PHI access.

Uploading a New Program

A program can be uploaded on the Pre/Post Analysis subtab using the “New Program” button highlighted below. Programs can be submitted via Hospital MRN, or through the Panel MRN option.

Note: A program can be uploaded with multiple source codes.



Hospital MRN Panel Submission

1. If you are submitting through the Hospital MRN route, select the corresponding Source MRN Type.

Case Mix Program Loader

All use of this service must comply with laws and regulations which govern uses and disclosures of personally identifiable information, including but not limited to sensitive health information such as drug and alcohol treatment information protected by federal confidentiality regulations at 42 CFR Part 2.

☒ New Program
 ☐ Update Program

Program Name:*

Source MRN Type: Hospital MRN

Hospital:*

Upload File:*

Browse...

Download Template

Notes

- Enrollment Date must be populated in the upload file for Program to be able to be used in Pre-Post report.
- Use the Source Code shown in parentheses in the Panel dropdown as the Source Code in the Program Templates when creating a Program using Panels.

☐ By checking this box, the user attests to having a treatment relationship with all patients on the uploaded panel.

Save

2. Click 'Download Template'

Source MRN Type: Hospital MRN

Hospital:*

Upload File:*

Browse...

Download Template

3. Insert data into the Pre-Post template. Follow these specifications:

- MRN
 - Hospital MRN = Hospital Casemix MRN (should be no letters or leading zeros) which is a unique patient identifier
- Source Code = Unique CRISP Identifier for the Hospital. Hospital source codes are listed [at the end of this document](#).
- Program Enrollment Date = Format date as MM/DD/YYYY

| 1 | MRN | Source Code | Program Enrollment Date |
|----|--------|-------------|-------------------------|
| 2 | 123456 | CRISP | 8/25/2024 |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | | | |
| 15 | | | |

4. Save the template onto your device.
5. Return to 'Case Mix Program Loader' in the Portal
6. Enter a Program Name.
7. Select your hospital panel using the dropdown arrow.
8. Click 'Browse' to upload the updated template.
9. Check the treatment attestation checkbox.
10. Click 'Save'
11. An error message will pop up if any of the fields in the list were invalid, otherwise a message with the prompt "Upload Successful" will pop up.
12. If certain patients cannot be matched, you will have the option of downloading the list of unmatched patients, with an [explanation of why the patients were not matched](#). You will also be able to proceed with a partial upload of matched patients.
13. Select the newly created program under 'Program Name' dropdown option on the first tab of the report.

Panel MRN Submission

1. If you select the Panel MRN submission route, select the corresponding Source MRN Type.

Case Mix Program Loader

All use of this service must comply with laws and regulations which govern uses and disclosures of personally identifiable information, including but not limited to sensitive health information such as drug and alcohol treatment information protected by federal confidentiality regulations at 42 CFR Part 2.

☒ New Program
 ☐ Update Program

Program Name:*

Source MRN Type: Panel MRN

Panel:*

Upload File:*

[Browse...](#)
[Download Template](#)

Notes

- Enrollment Date must be populated in the upload file for Program to be able to be used in Pre-Post report.
- Use the Source Code shown in parentheses in the Panel dropdown as the Source Code in the Program Templates when creating a Program using Panels.

☐ By checking this box, the user attests to having a treatment relationship with all patients on the uploaded panel.

[Save](#)

2. Click 'Download Template'

Source MRN Type: Panel MRN

Panel:*

Upload File:*

[Browse...](#)
[Download Template](#)

3. Insert data into the Pre-Post template. Follow these specifications:

- a. MRN
 - i. Panel MRN = MRN submitted on the Panel
- b. Source Code = CEND Panel identifier.
- c. Program Enrollment Date = Format date as MM/DD/YYYY

| 1 | MRN | Source Code | Program Enrollment Date |
|----|--------|-------------|-------------------------|
| 2 | 123456 | CRISP | 8/25/2024 |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | | | |
| 15 | | | |

4. Save the template on your computer.
5. Return to 'Program Editor' in the CRS Portal
6. Enter a Program Name.
- 7.
8. Select the panel using the dropdown error. Click 'Browse' to upload the newly created template.
9. Check the treatment attestation checkbox.
10. Click 'Save.'
11. An error message will pop up if any of the fields in the list were invalid, otherwise a message with the prompt "Upload Successful" will pop up.
12. If certain patients cannot be matched, you will have the option of downloading a list of unmatched patients, with an [explanation of why the patients were not matched](#). You will also be able to proceed with a partial upload of matched patients.
13. Select the newly created program under 'Program Name' dropdown option on the first tab of the report.

Error List

The following table lists and describes the possible errors a user may run into when uploading a program. When users encounter errors 1-6, they will not see the corresponding patients in the program. Errors 7-8 will count patients to be in the program's total denominator, but they will not count towards the analysis shown in the report.

| Error Type | Reject Reason | Description |
|------------|-------------------------|--|
| 1 | Missing MRN | <i>MRN missing</i> |
| 2 | Missing Source Code | <i>Source Code missing</i> |
| 3 | Duplicate Records Found | <i>Duplicate MRN and Source Code combination</i> |

| | | |
|---|--|---|
| 4 | Source code Mismatch | <i>Source Code does not match selected panel</i> |
| 5 | Invalid Enrollment Date | <i>Invalid enrollment date (must be MM/DD/YYYY format)</i> |
| 6 | Enrollment date is before 10/01/2015 | <i>Enrollment date cannot be before 11/01/2015</i> |
| 7 | Member's EID is not found in CRISP database | No CRISP unique identifier for MRN & Source Code to match with Casemix data |
| 8 | Member is not found in Case Mix data from 10/01/2015 | Member is not found in Case Mix data. You should only get this message when uploading via Hospital MRN. |

Save

×

Upload Program

Upload Failed.

- 8 Records with error due to which they will not be added to the Program.
- 1 Records with Warnings due to which they will be added to the Program but will not be included in the counts of Patients being reported.
- 22 Records with no errors that will be included in the Program and the counts of Patients being reported.

Do you want to continue creating the program?

Partial Upload

Download Invalid Patients List

Panel Loader Notes

1. Some MRNs may be invalid and listed in a separate document after the panel is loaded. This is proper functionality as those MRNs do not exist in our system. Please note that these MRNs have always been invalid (even when CRISP processed the panels).
2. The panel loader is sensitive to layout and formatting. Please load the data in the required format with the same column headers that are provided in the template. The file type must be .XLSX; .CSV or other formats will not work.
3. Please note that when using a CEND panel, the panels in the report are not updated in real-time. For example, if a CEND panel was updated on 5/1/23, and the report contains CEND panels through 4/30/23, the panel loader may not recognize all the CEND MRNs, especially if those patients are new to the panel. The report will note how updated each data source is. It can take up to a week after a CEND panel is uploaded to be available in Pre/Post.
4. You can delete an uploaded panel using the delete button in the program editor. When you select 'Update Panel' in the program editor, select the panel you would like to delete and then click 'Delete'.
5. There is also the option to download the patients currently uploaded using the 'Download Patients' button. You can also see the patients uploaded in the program under the Program Patient List tab.

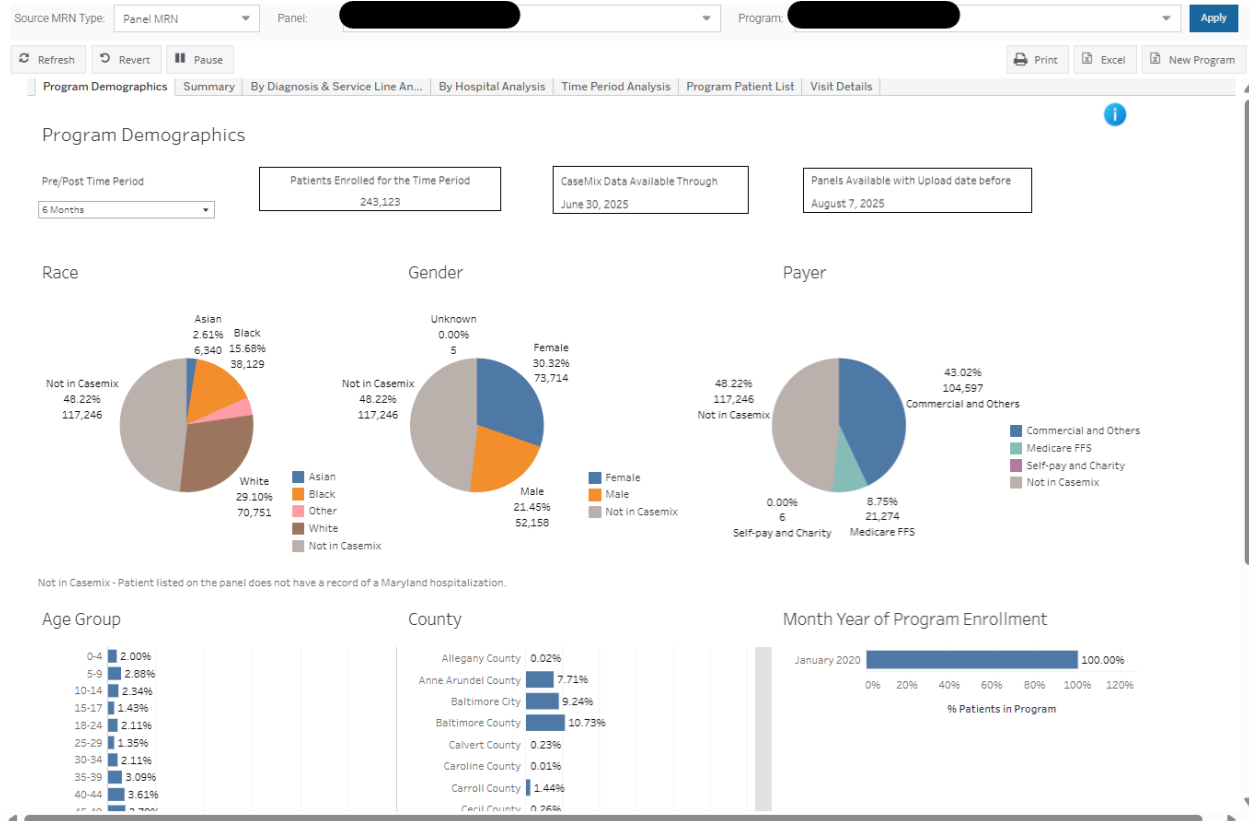
Report Sections

- [Program Demographics](#)
- [Summary](#)
- [By Diagnosis and Service Line Analysis](#)
- [By Hospital Analysis](#)
- [Time Period Analysis](#)
- [Program Patient List](#)
- [Visit Level Details](#)

Program Demographics

The Program Demographics Dashboard displays patient demographics for the selected program based on the HSCRC Casemix data. Use Pre/Post Time Period selection to limit the report to patients eligible during a specific time period.

Demographics are based on the most recent visit in Casemix. If there are no demographics in the Casemix data for the patient, the patient will be included in the 'Not in Casemix' category.



| | |
|---------------------------------|--|
| Age Group | DOB – max (primary visit/admit Date) |
| Case Mix Data Available Through | The Case Mix data is an all-payer, claims-based dataset that captures any visit occurring at an acute care hospital in Maryland. Latest available Case Mix data. Date through which Case Mix data is available in this report. Usually 6 weeks lag. |
| County | <p>County from the most recent Case Mix visit for members in the program. Other categories under County could be</p> <ol style="list-style-type: none"> 1. "Not in Case Mix" - A particular Source Code and MRN combination has an EID but no Case Mix visit on or after 10/01/2015 2. "Not in CRISP MPI" - A particular Source Code and MRN combination has no EID attached and thus not found in CRISP database. The reason for no EID could be incorrect MRN. |
| Gender | <p>Gender from the most recent Case Mix visit for members in the program. Other categories under Gender could be</p> <ol style="list-style-type: none"> 1. "Not in Case Mix" - A particular Source Code and MRN combination has an EID but no Case Mix visit on or after 10/01/2015 2. "Not in CRISP MPI" - A particular Source Code and MRN combination has no EID attached and thus not found in CRISP database. The reason for no EID could be incorrect MRN. |

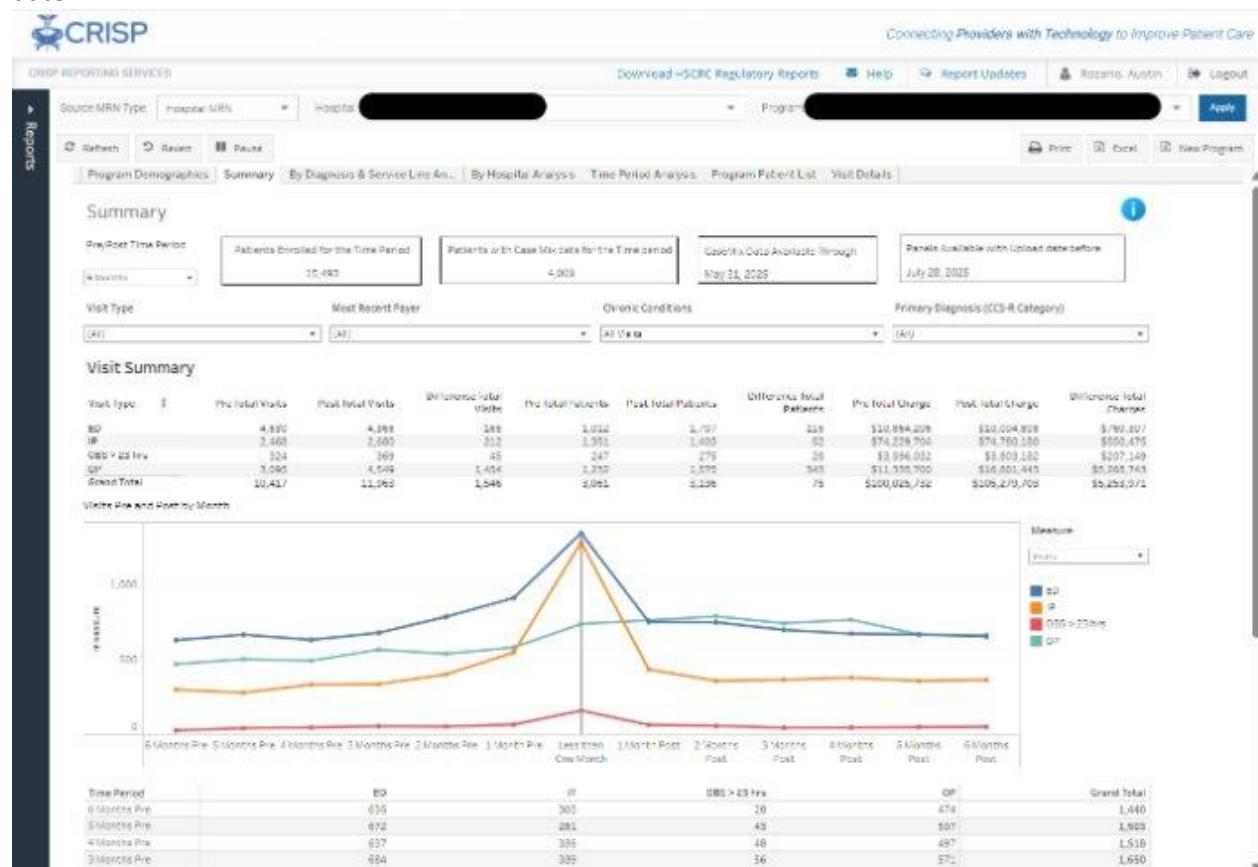
| | |
|---|--|
| Month Year of Program Enrollment | Percentage of members in the program by enrollment Month and Year |
| Panel Available with Upload date before | Date on which Panel data was last updated. |
| Patients Enrolled for the Time Period | Total number of patients who have been enrolled long enough to contribute to the analysis for the chosen Pre/Post Time Period. This is the count of members for which the difference between the maximum Case Mix Date and the Enrollment Date is less than the Pre/Post Time Period chosen. |
| Patients with Case Mix data for the Time period | This is the count of members for which the difference between maximum Case Mix Date and Enrollment Date is less than the Pre/Post Time Period chosen and has Case Mix Discharge Date corresponding to the chosen Pre/Post Time Period. |
| Payer | Payer from the most recent Case Mix visit for members in the program. Other categories under Payer could be <ol style="list-style-type: none"> 1. "Not in Case Mix" - A particular Source Code and MRN combination has an EID but no Case Mix visit on or after 10/01/2015 2. "Not in CRISP MPI" - A particular Source Code and MRN combination has no EID attached and thus not found in CRISP database. The reason for no EID could be incorrect MRN. |
| Pre/Post Time Period | Drop down to restrict the analysis to members who are enrolled in the program for a chosen number of months. The enrollment time period is calculated as difference between enrollment date and most recent Discharge Date in Case Mix data. For example if two months is chosen the analysis is restricted to all the members who have been enrolled for two months when compared to the latest Case Mix data that we have received. A member is included only if data is available for the entire pre and post chosen time period. |
| Primary Diagnosis (CCS-R Category) | The CCS-R category corresponds to the primary diagnosis. |
| Race | Race from the most recent Case Mix visit for members in the program. Other categories under Race could be <ol style="list-style-type: none"> 1. "Not in Case Mix" - A particular Source Code and MRN combination has an EID but no Case Mix visit on or after 10/01/2015 2. "Not in CRISP MPI" - A particular Source Code and MRN combination has no EID attached and thus not found in CRISP database. The reason for no EID could be incorrect MRN. |

Summary

The Summary tab displays the Pre/Post results for the selected program and time period. All Patients, including those without a visit, are in the denominator. For report inclusion, patients must be enrolled for the time period length based on the Casemix through date. For example, patients with a program enrollment date of 1/1/2024 need Casemix data through 2/1/2024 to be counted in the one-month Pre/Post analysis.

Pre/Post was designed to provide a high-level overview of your program. Pre/Post does not provide a control group or control for any confounding factors. Any conclusions made are up to the discretion of the user.

Line Graph: The line graph displays the measure for each month. For example, 5 months post displays the number of visits that occurred between 4-5 months after the program enrollment date. 6 months post displays the number of visits that occurred between 5 and 6 months after the program enrollment date.



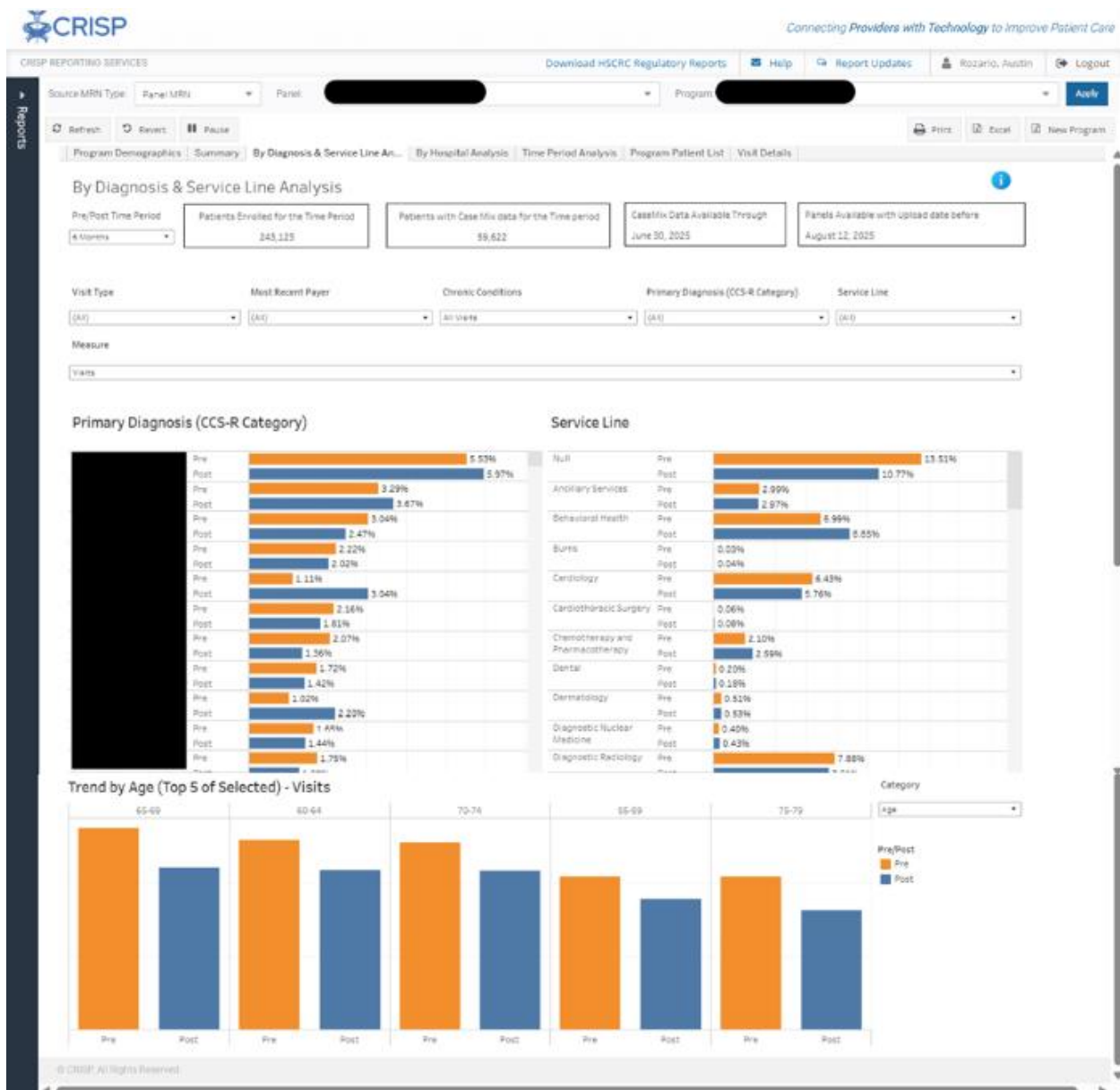
| | |
|--------------------|--|
| Chronic Conditions | Applying filter will restrict dashboard to only members with the specified chronic condition. Members are flagged with chronic conditions if they have the appropriate diagnosis codes in Case Mix data, using CMS Chronic Condition Warehouse methodology. Calculated at the patient-level. |
| Enrollment Status | Enrollment Status |

| | |
|---------------------|--|
| Measure | <p>Visits - Applying filter will restrict dashboard to total number of unique visits belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Patients - Applying filter will restrict dashboard to total number of members belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Charges - Applying filter will restrict dashboard to total charges belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Average Charges per Visit - Applying filter will restrict dashboard to (total charges/total visits) belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Charges per 1000 Visits - Applying filter will restrict dashboard to (total charges/total visits)*1000 belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> |
| Most Recent Payer | Payer from the most recent Case Mix visit for members in the program. |
| Program Name-Source | This field combines the 'Program Name' from the panel data with its associated 'Source'. |
| Visit Summary | <p>Total Visits - Total number of visits belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Inpatient Visits - Total number of visits IP (Inpatients visits) only</p> <p>ED Visits - Total number of visits ED (OP visits with ED charges) only</p> <p>OP Visits (Excluding ED) - Total number of visits OP (Excluding ED)</p> |

| | |
|------------|---|
| Visit Type | At visit-level : ED (OP visits with ED charges) , IP (Inpatient visits), OBS > 23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) |
|------------|---|

By Diagnosis and Service Line Analysis

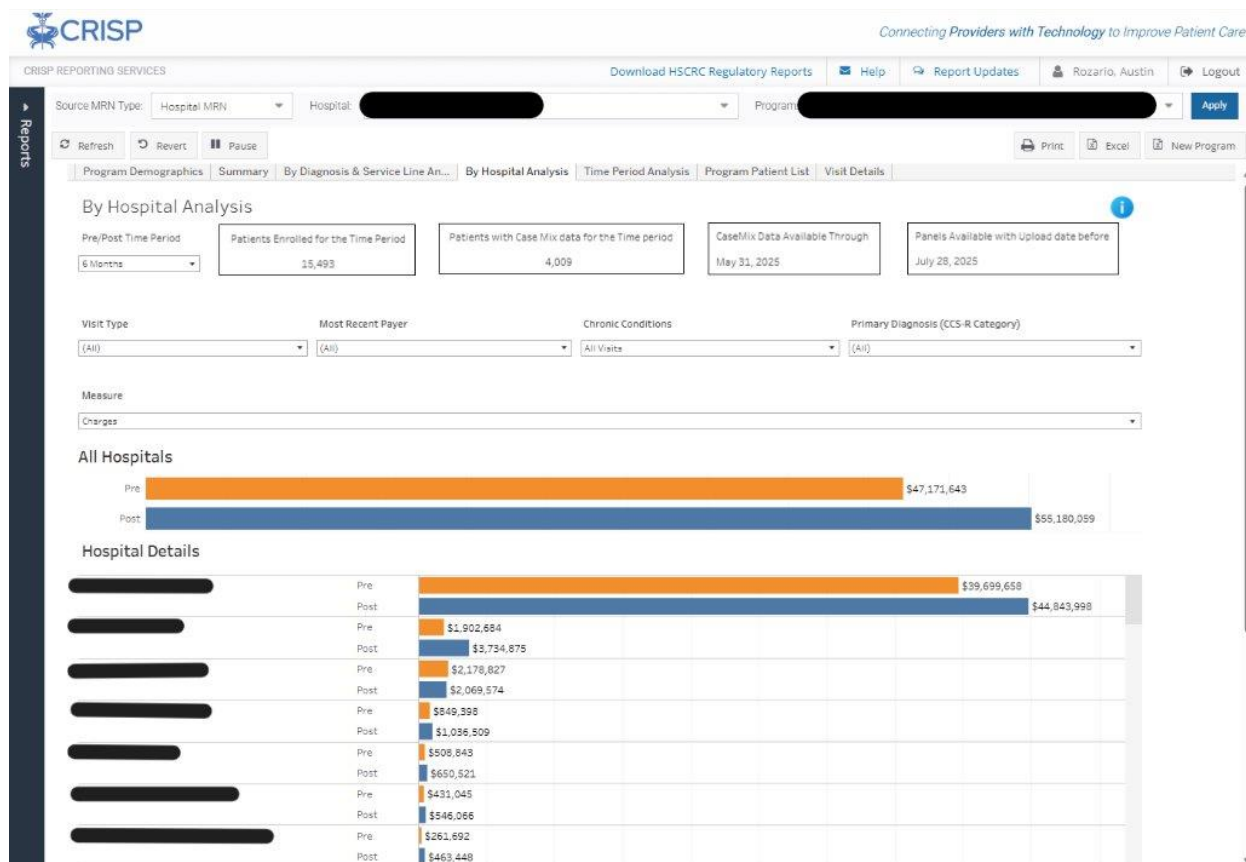
The Diagnosis Analysis tab allows users to view the most frequent primary diagnoses Pre and Post the program enrollment date. The primary diagnoses are grouped based on CCS-R category.



| | |
|------------------------|--|
| Category | County, Zip, Hospital, Payer, Age Group, Gender, and Race |
| Primary Diagnosis Code | Visits with condition specific diagnosis codes present as primary diagnosis divided by total pre visits and visits with condition specific diagnosis codes present as primary diagnosis divided by total post visits |

By Hospital Analysis

The By Hospital Analysis tab displays the hospitals that the patients visited Pre and Post enrollment. This tab allows users to see totals at each hospital from patients listed in the panel, filtered by different categories.

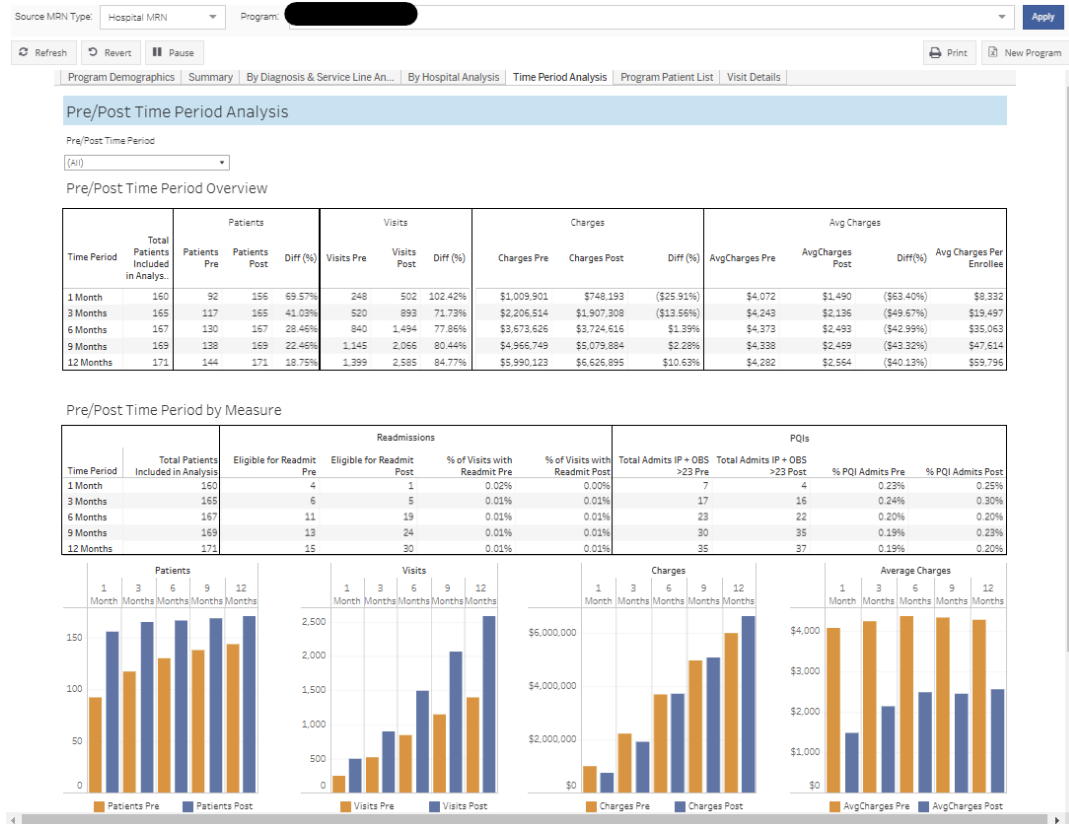


| | |
|------------------|---|
| Hospital Details | Based on the filters applied to the dashboard user will see hospital wise pre and post details |
| Measure | <p>Visits - Applying filter will restrict dashboard to total number of unique visits belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Patients - Applying filter will restrict dashboard to total number of members belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Charges - Applying filter will restrict dashboard to total charges belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Average Charges per Visit - Applying filter will restrict dashboard to (total charges/total visits) belonging to IP (Inpatient visits) , ED (OP visits with ED charges),</p> |

| | |
|--|---|
| | <p>OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Charges per 1000 Visits - Applying filter will restrict dashboard to (total charges/total visits)*1000 belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Readmissions Visits - Applying filter will restrict dashboard to total number of readmissions belonging to IP for different possible time periods</p> <p>PAU Visits - Applying filter will restrict dashboard to total number of potentially avoidable utilization measures belonging to IP and OBS>23 for different possible time periods</p> <p>PAU Charges - Applying filter will restrict dashboard to total amount of potentially avoidable utilization charges belonging to IP and OBS>23 for different possible time period</p> |
|--|---|

Time Period Analysis

The Pre/Post Time Period Analysis tab allows users to compare totals and averages Pre and Post the program enrollment date through the 1, 3, 6, 9 and 12-month increments.



| | |
|---------------------------------|--|
| PQIs | A Prevention Quality Indicator (PQI) is a measure used to identify hospital admissions that could potentially have been prevented with effective outpatient care or early intervention |
| Pre/Post Time Period Analysis | The Pre/Post Time Period Analysis tab allows users to compare totals and averages Pre and Post the program enrollment date through the 1, 3, 6, 9 and 12-month increments. |
| Pre/Post Time Period Overview | Comparative totals of patients, visits, charges, and average charges Pre and Post the program enrollment date based on the Pre/Post time periods. |
| Pre/Post Time Period by Measure | Comparative totals of readmissions and PQIs Pre and Post the program enrollment date based on the Pre/Post time periods. |
| Readmissions | A readmission occurs when a patient is admitted to a hospital within 30 days after a recent discharge |

Program Patient List

The Program Patient List tab provides the list of patients for the selected program. The information displayed is based on the panel uploaded to CRISP. The comments section provides information on the patient inclusion in the analysis.

Source MRN Type: Hospital MRN
Program:
Apply

Refresh
Revert
Pause
Print
Excel
New Program

Program Demographics
Summary
By Diagnosis & Service Line An...
By Hospital Analysis
Time Period Analysis
Program Patient List
Visit Details

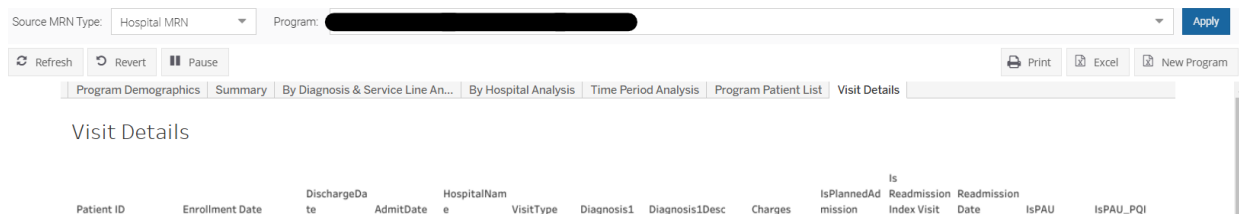
Program Navigator

| Patient ID | First Name | Last Name | DOB | Zip | Gender | Enrollment Date | Comments |
|------------|------------|-----------|-----|-----|--------|-----------------|----------|
| | | | | | M | 7/11/2017 | |
| | | | | | F | 3/10/2017 | |
| | | | | | F | 4/28/2017 | |
| | | | | | F | 1/23/2017 | |
| | | | | | F | 11/30/2017 | |

Visit Details

The visit details section enables you to view visit level information for patients for up to 12 months pre and post enrollment in the program. The Crosstab button allows you to download the table into excel to perform calculations. For more detailed information on the variables, see the [metric definitions section](#). Users can hover over the details hyperlink to view the additional fields such as diagnosis code descriptions, patient age, and last expected payer.

Please note: This is only available to viewers with PHI access



The screenshot shows the 'Visit Details' section of a web application. At the top, there are filters for 'Source MRN Type' (set to 'Hospital MRN') and 'Program' (a dropdown menu). Below these are buttons for 'Refresh', 'Revert', and 'Pause'. To the right are buttons for 'Print', 'Excel', and 'New Program'. A tabbed interface shows 'Visit Details' as the active tab, with other tabs including 'Program Demographics', 'Summary', 'By Diagnosis & Service Line An...', 'By Hospital Analysis', 'Time Period Analysis', and 'Program Patient List'. Below the tabs, the 'Visit Details' title is followed by a table with the following columns: Patient ID, Enrollment Date, Discharge Date, Admit Date, Hospital Name, Visit Type, Diagnosis 1, Diagnosis 1 Desc, Charges, Is Planned Admission, Is Readmission Index Visit, Readmission Date, Is PAU, and Is PAU PQI.

Tips for Analyzing the Visit Details Data: The visit level data does **not** exclude patients who have not been enrolled for the full analysis period. This is to provide users the most available data. It is important to note that the results in the visit level pre-post report will not match the patient counts in the summary and panel analysis tabs because visit level data is all inclusive whereas pre-post report data only uses patients who have met the enrollment criteria/deadline.

- For example, if you are looking at 3-month pre-post data, with data through 12/31/2023, and a patient enrolled on 11/1/2024:
 - All visits in the three months prior will show
 - All visits in the two months post will show
- In the Program Demographics and Summary tabs, this patient would have been excluded because they do not have the full data run out for 3 months post.

Definitions/Acronym List

Filter/Measure Definitions

| Filter/Measure | Definition |
|--------------------------------|--|
| Age Group | DOB – max (Discharge Date) |
| CaseMix Data Available Through | The Case Mix data is an all-payer, claims-based dataset that captures any visit occurring at an acute care hospital in Maryland. Latest available Case Mix data. Date through which Case Mix data is available in this report. Usually 6 weeks lag. |
| Category | County Zip Hospital Payer Age Group Gender Race |
| Chronic Conditions | Applying filter will restrict dashboard to only members with the specified chronic condition. Members are flagged with chronic conditions if they have the appropriate diagnosis codes in Case Mix data, using CMS Chronic Condition Warehouse methodology. Calculated at the patient-level. |
| County | County from the most recent Case Mix visit for members in the program. Other categories under County could be 1. "Not in Case Mix" - A particular Source Code and MRN combination has an EID but no Case Mix visit on or after 10/01/2015 2. "Not in CRISP MPI" - A particular Source Code and MRN combination has no EID attached and thus not found in CRISP database. The reason for no EID could be incorrect MRN. |
| Enrollment Status | Enrollment Status |
| Gender | Gender from the most recent Case Mix visit for members in the program. Other categories under Gender could be 1. "Not in Case Mix" - A particular Source Code and MRN combination has an EID but no Case Mix visit on or after 10/01/2015 2. "Not in CRISP MPI" - A particular Source Code and MRN combination has no EID attached and thus not found in CRISP database. The reason for no EID could be incorrect MRN. |
| Hospital Details | Based on the filters applied to the dashboard user will see hospital wise pre and post details |
| Measure | Visits - Applying filter will restrict dashboard to total number of unique visits belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater |

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| | <p>than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Patients - Applying filter will restrict dashboard to total number of members belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Charges - Applying filter will restrict dashboard to total charges belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Average Charges per Visit - Applying filter will restrict dashboard to (total charges/total visits) belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Charges per 1000 Visits - Applying filter will restrict dashboard to (total charges/total visits)*1000 belonging to IP (Inpatient visits) , ED (OP visits with ED charges), OBS>23 (OP visits with observation charges greater than 23 hours only), OP (all other visits that do not fall in the other three categories) for different possible time periods</p> <p>Readmissions Visits - Applying filter will restrict dashboard to total number of readmissions belonging to IP for different possible time periods</p> <p>PAU Visits - Applying filter will restrict dashboard to total number of potentially avoidable utilization measures belonging to IP and OBS>23 for different possible time periods</p> <p>PAU Charges - Applying filter will restrict dashboard to total amount of potentially avoidable utilization charges belonging to IP and OBS>23 for different possible time period</p> |
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Source Codes

| Account Name | Source Code |
|---|-------------|
| Adventist Rehabilitation Hospital of Maryland | ARHM |
| Anne Arundel Medical Center | AAMC |

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| Ascension Saint Agnes Hospital | SAH |
| Atlantic General Hospital | AGH |
| Calvert Health Medical Center | CVMH |
| Carroll Hospital Center | CHC |
| Christiana Care Health Services | CCHS |
| Doctors Community Hospital | DCH |
| Fort Washington Medical Center | FWMC |
| Frederick Memorial Hospital | FMH_ID |
| Garrett Regional Medical Center | GCMH |
| Grace Medical Center | GMC |
| Greater Baltimore Medical Center | GBMC |
| Holy Cross Hospital | HCH |
| Holy Cross Hospital Germantown | HCH_GT |
| Howard County General Hospital | HCGH |
| Johns Hopkins Bayview Medical Center | JHH_BVIEW |
| Johns Hopkins Hospital | JHH |
| Medstar Franklin Square Medical Center | MEDSTAR_FSH |
| Medstar Good Samaritan Hospital | MEDSTAR_GSH |
| Medstar Harbor Hospital | MEDSTAR_HHC |
| Medstar Montgomery Medical Center | MGH |
| Medstar Southern Maryland Hospital Center | SMH |
| Medstar St. Mary's Hospital | STMH |
| Medstar Union Memorial Hospital | MEDSTAR_UMH |
| Mercy Medical Center | MHS |
| Meritus Medical Center | MMC |
| Mt. Washington Pediatric Hospital | MWPH |
| Northwest Hospital Center | LBH_NWH |
| Shady Grove Adventist Hospital | ADVSGAH |
| Sinai Hospital of Baltimore | LBH_SHB |
| Suburban Hospital | SUBURBAN |
| Tidalhealth McCready Pavilion | MCMH |
| Tidalhealth Peninsula Regional Medical Center | PRMC |
| Baltimore Washington Medical Center | UMMS_BWMC |
| University of Maryland Charles Regional Medical Center | CMC |
| University of Maryland Laurel Regional Hospital | LRH |
| University of Maryland Medical Center (UMMC) | UMMS_UMMC |
| University of Maryland Medical Center Midtown Campus | UMMS_MGH |
| University of Maryland Prince George's Hospital Center | PGHC |

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|---|--------------|
| University of Maryland Rehabilitation and Orthopaedic Institute | UMMS_KERNAN |
| University of Maryland Shore Medical Center at Chestertown | UMMS_CHSTR |
| University of Maryland Shore Medical Center at Easton | UMMS_EASTON |
| University of Maryland Shore Medical Center Dorchester | UMMS_DRCHSTR |
| University of Maryland St. Joseph Medical Center | SJMC |
| Upper Chesapeake Medical Center | UCMC |
| Washington Adventist Hospital | ADVWAH |
| Western Maryland Health System | WMHS |