



# Department of Health

**ANDREW M. CUOMO**  
Governor

**HOWARD A. ZUCKER, M.D., J.D.**  
Commissioner

**SALLY DRESLIN, M.S., R.N.**  
Executive Deputy Commissioner

September 3, 2015

Re: Reporting of Stand-Alone Radiology and Laboratory Services

Dear Administrator:

This letter serves as notification to Article 28 facilities that submit data to the Statewide Planning and Research Cooperative System (SPARCS), as authorized by Section 2816 of the Public Health Law, Section 400.18 of Title 10 (Health) of the Official Compilation of Codes, Rules and Regulations of the State of New York, facilities are required to submit all outpatient services. Outpatient services reported to SPARCS should include stand-alone radiology and laboratory claims.

### Directive

As required by regulation, Article 28 facilities currently submitting to SPARCS should begin reporting as soon as possible, but no later than January 1, 2016, stand-alone radiology and laboratory patient records in the X12-837I (Institutional) claim format as part of their submission of all outpatient data services.

### Background

As published on the DOH public website on February 16, 2011, facilities were directed as part of the Expanded Outpatient Data Collection (EODC) Frequently Asked Questions (FAQ) to not report "lab-only" and "x-ray only" patient records. This directive is now being cancelled and instructions for submission are contained within this letter.

| Q#       | Topic            | Questions                             | Answer   | Posted    | Revised   |
|----------|------------------|---------------------------------------|--|-----------|-----------|
| EODC-005 | Law / Regulation | Q: How are you defining "outpatient"? | A: The new regulations define outpatient data as: "Outpatient clinic data shall mean all data submitted by a licensed Article 28 general hospitals and diagnostic and treatment centers, excluding inpatient hospitalization data, emergency department data, and ambulatory surgery data".<br><br>After several meetings and discussions, the intent behind this definition was to make it easier for hospitals to submit their remaining | 2/16/2011 | 8/21/2015 |

| Q#       | Topic                        | Questions                               | Answer  | Posted    | Revised   |
|----------|------------------------------|---|---|-----------|-----------|
|          |                              |   | <p>outpatient data. Instead of creating a long list of services or "excepting-out" certain services, facilities felt it would be easier to submit the remaining outpatient data from their facility. The Department of Health will be collecting "lab-only" and "x-ray only" patient records for all patient records with service dates on or after January 1, 2016.</p>  |           |           |
| EODC-006 | Type of Data / Clarification | Q: What records need to be sent?        | <p>A: An outpatient service visit consists of all services provided by one or more licensed professionals provided to patients at the site of service. The service provided must be charted. Each facility classifies outpatient services/departments differently. Some examples of services to be sent are: Cardiology/stroke (heart programs), diabetes centers, rehabilitation services, wound care services, and women's health services. As mentioned in "EODC-005" (above), "lab-only" and "x-ray only" visits should sent at this time. When reported, these records must conform to the "OP" required data elements and edits. If you need further clarification, SPARCS Operations can assist you.</p> | 2/16/2011 | 8/21/2015 |
| EODC-011 | Type of Data / Clarification | Q: What records do not need to be sent? | <p>A: All outpatient records should be sent at this time.</p>   | 2/16/2011 | 8/21/2015 |

| Q#       | Topic                        | Questions   | Answer   | Posted    | Revised   |
|----------|------------------------------|---|--|-----------|-----------|
| EODC-012 | Type of Data / Clarification | Q: How do you suggest removing lab-only or x-ray only visits? | A: We are no longer suggesting removing lab-only or x-ray only visits from SPARCS outpatient data reporting. | 2/16/2011 | 8/21/2015 |

### Phase-In Timeline

The SPARCS system will be able to accept reporting of the expanded outpatient data standards immediately.

### Mandated Reporting Timeline

Facilities must be fully compliant with reporting of stand-alone laboratory and/or radiology claims for discharges/visits as of **January 1, 2016**.

### Related Additional Information

To assist facilities during the six month transition to the expanded outpatient reporting standard, additional information will be sent to SPARCS Coordinators over the next few weeks.

The following CPT/HCPCS codes are suggested for Laboratory/Radiology inclusion criteria. 36415; 70000 – 76999; 77051 – 77084; 78000 – 78999; 80000 – 89999; 99000 – 99002; G0027; G0101 – G0107; G0117 – G0124; G0130 – G0148; G0202 – G0235; G0252; G0306 – G0307; G0328; G0330 – G0331; G0430 – G0431; G0434; G0450; G0452; G0455; P2028 – P7001; P9603 – P9615; Q0091 – Q0115; R0070 – R0076; S0820; S2120; S3600 – S3900; S3905; S8001 – S8093; S9024.

The following revenue codes are being suggested to identify single event laboratory and radiology services. Within the following coding list, the "X" denotes a wildcard: 030X – 0341; 0343; 0349; 035X; 040X; and 061X.

### Contact Information

If you have any questions on the expanded outpatient data collection standards, or the time frame for data collection, please contact SPARCS Operations at 518-473-8144 or [SPARCS.Submissions@health.ny.gov](mailto:SPARCS.Submissions@health.ny.gov).

Sincerely,

Scott Franko, Director  
Bureau of Health Informatics  
Office of Quality and Patient Safety