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11/12/2003

NEBRASKA HEALTH AND HUMAN SERVICES  
REGULATION AND LICENSURE

186 NAC 3

TITLE 186 HEALTH REGISTRIES AND RELEASE OF INFORMATION

CHAPTER 3 EXTERNAL CAUSE OF INJURY REGISTRY

3-001 SCOPE AND AUTHORITY: The purpose of the External Cause of Injury Registry is to provide a central data base of accurate, precise and current information regarding the external causes of injury to be utilized for research, analytical and statistical purposes and for injury prevention.

These regulations apply to each hospital within the State of Nebraska. They implement the laws governing the establishment and maintenance of a registry that includes a record of the external causes of injuries, poisonings and adverse effects, and such information that the Department determines is necessary and appropriate for the statistical identification and planning for injury prevention purposes. These regulations set forth procedures for the reporting requirements for hospitals of the State of Nebraska of data concerning external causes of injury, poisoning and adverse effects, and provide procedures and standards for governing access to registry data pursuant to Neb. Rev. Stat. §§ 71-2078 to 71-2082 and Neb. Rev. Stat. §§ 81-677 to 81-680.

3-002 DEFINITIONS:

Department means the Nebraska Department of Health and Human Services Regulation and Licensure.

Diagnosis Codes refers to the codes for diseases and health-related conditions determined in accordance with Volumes I and II of the International Classification of Diseases, 9th Revision, Clinical Modification ("ICD-9-CM"), incorporated herein by reference and available for viewing at the Nebraska Department of Health and Human Services Regulation and Licensure, Division of Public Health Assurance, Section of Data Management, 301 Centennial Mall South, 3<sup>rd</sup> floor, Lincoln, Nebraska, 68509-5007.

E Codes refers to the codes for the external causes of injury, poisoning, or adverse effects, to be entered on the hospital uniform billing form pursuant to Neb. Rev. Stat. § 71-2080, which are determined in accordance with the Supplementary Classification of External Causes of Injury and Poisoning of the International Classification of Diseases, 9th Revision, Clinical modification ("ICD-9-CM"), incorporated herein by reference and available for viewing at the Nebraska Department of Health and Human Services Regulation and Licensure, Division of Public Health Assurance, Section of Data Management, 301 Centennial Mall South, 3<sup>rd</sup> floor, Lincoln, Nebraska, 68509-5007.

Hospital shall have the meaning found in Neb. Rev. Stat. § 71-419.

Hospital Uniform Billing Form means the Health Care Financing Administration claim form, number 1450 mandated for the medicare program pursuant to Sections 1814(a)(2) and 1871 of the Federal Social Security Act, as amended, commonly referred to as the UB-92 form, a copy of which is attached as Attachment 1 and incorporated herein by this reference;

Procedure Codes means the codes for procedures in medicine, determined in accordance with Volume III of the International Classification of Diseases, 9th Revision, Clinical Modification ("ICD-9-CM"),

incorporated herein by reference and available for viewing at the Nebraska Department of Health and Human Services Regulation and Licensure, Division of Public Health Assurance, Section of Data Management, 301 Centennial Mall South, 3<sup>rd</sup> floor, Lincoln, Nebraska, 68509-5007.

3-003 DATA REQUIREMENTS: Data are to be abstracted, for each patient discharged from a hospital, receiving outpatient services, or released from observation, for whom an external cause of injury code is recorded. Data to be abstracted from medical records or made available through medical records for abstracting as specified by reporting requirements set forth in 186 NAC 3-004 are as follows:

1. Diagnosis codes, as defined in 186 NAC 3-002;
2. E codes, as defined in 186 NAC 3-002;
3. Procedure codes, as defined in 186 NAC 3-002;
4. Admission date;
5. Discharge date;
6. Disposition code;
7. Birth date;
8. Sex;
9. City and county of residence;
10. Zip code of residence.
11. Identification of hospital reporting information

3-004 HOSPITAL REPORTING REQUIREMENTS: Each hospital within the state must assign an E-code to each patient discharged, receiving outpatient services, or released from observation, for whom an E-code is appropriate. The hospital must submit data to the Department on a quarterly basis. The data may be submitted to the Department via an agreement between the Department and the Nebraska Hospital Association or any other entity that has such data collection agreement. This submission may be in electronic or written format.

3-005 AVAILABILITY OF MEDICAL RECORDS: Each hospital must make available to the Department or its authorized representative, upon presentation of proper identification, medical records which document the diagnosis and treatment of individuals for whom an E-code was appropriate for the purpose of recording specific data required by Neb. Rev. Stat. §§ 71-2078 to 71-2082 and 186 NAC 3. These records must be made available on the premises of the hospital and during normal working hours.

3-006 CONFIDENTIALITY AND RELEASE OF INFORMATION: All data provided to the Department pursuant to Neb. Rev. Stat. §§ 71-2078 to 71-2082 and 186 NAC 3 will be classified as Class I and Class II data pursuant to Neb. Rev. Stat. § 81-667 (1) and (2). The aggregate data reports will be considered public documents.