

## CEDAR Data Inventory

### Healthcare Cost and Utilization and Project (HCUP)

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For information please submit a CEDAR SPARC request

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[https://www.hcup-us.ahrq.gov/HCUP Overview/HCUP Overview/index.html](https://www.hcup-us.ahrq.gov/HCUP%20Overview/HCUP%20Overview/index.html)

#### **State Ambulatory Services Databases (SASD)**

State	2015	2014	2013	2012	2011	2010	2009	2008	2007	2006*
California								X	X	X
Florida		X	X				X		X	X
Georgia		X	X							
Iowa							X			
Kentucky		X	X							
Maryland		X	X				X	X	X	X
New Jersey							X	X	X	X
New York		X	X							
South Carolina		X	X						X	
Vermont		X	X							
Wisconsin	X	X	X				X			

\*earlier years available for a few states

\*\* HCUP data sets contain indicators of patient race and span ages 0-89 years.

#### **State Ambulatory Services Data (SASD) with Visit Links\*\*†**

State	2015	2014	2013	2012	2011	2010	2009	2008	2007	2006*
California								X	X	X
Florida		X	X				X			
Georgia		X	X							
Kentucky										
Maryland		X	X							
New York		X	X							
South Carolina										

Vermont		X	X							
Wisconsin	X	X	X							

\*earlier years available for a few states

\*\* HCUP data sets contain indicators of patient race and span ages 0-89 years.

‡ Visit links follow patients over time

## Overview of the State Ambulatory Surgery and Services Databases (SASD)

The State Ambulatory Surgery and Services Databases (SASD) are part of the family of databases and software tools developed for the [Healthcare Cost and Utilization Project \(HCUP\)](#). The SASD include encounter-level data for ambulatory surgeries and may also include various types of outpatient services such as observation stays, lithotripsy, radiation therapy, imaging, chemotherapy, and labor and delivery. The specific types of ambulatory surgery and outpatient services included in each SASD vary by State and data year. All SASD include data from hospital-owned ambulatory surgery facilities. In addition, some States include data from nonhospital-owned facilities.

### About the SASD

The SASD include encounter-level data for ambulatory surgery and other outpatient services from hospital-owned facilities. In addition, some States provide ambulatory surgery and outpatient services from nonhospital-owned facilities. The specific types of ambulatory surgery and outpatient services included in each SASD vary by State and data year.

- The SASD include encounter-level data for ambulatory surgery and other outpatient services from hospital-owned facilities in participating States that are translated into a uniform format to facilitate multistate comparisons and analyses.
- All SASD include data from hospital-owned ambulatory surgery facilities. In addition, some States include data from facilities not owned by a hospital.
- The databases contain a core set of clinical and nonclinical information on all patients, regardless of payer, including those covered by Medicare, Medicaid, private insurance, and the uninsured.

### SASD Data Elements

The SASD contain clinical and resource-use information that is included in a typical discharge abstract, with safeguards to protect the privacy of individual patients, physicians, and hospitals (as required by data sources). The SASD contain more than 100 clinical and nonclinical variables included in a hospital discharge abstract, such as:

- All-listed diagnoses and procedures
- Patient demographic characteristics
- Expected payment source
- Total charges
- Hospital identifiers that permit linkage to inpatient hospital databases, such as the AHRQ-sponsored [State Inpatient Databases \(SID\)](#) and the American Hospital Association Annual Survey File

Elements included in the SASD are not always available for all States, including the hospital county identifiers or HCUP's [Revisit Variables](#). Please see the [Availability of Data Elements by Year](#).

HCUP Databases. Healthcare Cost and Utilization Project (HCUP). April 2017. Agency for Healthcare Research and Quality, Rockville, MD. [www.hcup-us.ahrq.gov/sasdooverview.jsp](http://www.hcup-us.ahrq.gov/sasdooverview.jsp).

## HCUP

The Healthcare Cost and Utilization Project (HCUP, pronounced "H-Cup") is a family of health care databases and related software tools and products developed through a Federal-State-Industry partnership and sponsored by the Agency for Healthcare Research and Quality (AHRQ). HCUP databases bring together the data collection efforts of State data organizations, hospital associations, private data organizations, and the Federal government to create a national information resource of encounter-level health care data ([HCUP Partners](#)). HCUP includes the largest collection of longitudinal hospital care data in the United States, with all-payer, encounter-level information beginning in 1988. These databases enable research on a broad range of health policy issues, including cost and quality of health services, medical practice patterns, access to health care programs, and outcomes of treatments at the national, State, and local market levels.

HCUP's objectives are to:

- Create and enhance a powerful source of national, state, and all-payer health care data.
- Produce a broad set of software tools and products to facilitate the use of HCUP and other administrative data.
- Enrich a collaborative partnership with statewide data organizations aimed at increasing the quality and use of health care data.
- Conduct and translate research to inform decision making and improve health care delivery.

HCUP Overview. Healthcare Cost and Utilization Project (HCUP). April 2019. Agency for Healthcare Research and Quality, Rockville, MD. [www.hcup-us.ahrq.gov/overview.jsp](http://www.hcup-us.ahrq.gov/overview.jsp).