Handout#1

Preliminary Analysis of Elective PCI Volume That Potentially May Be Shifted to ASCs

In CY 2022, there were a total of 8,467 PCI cases in Maryland, based on MHCC's staff's analysis of the ACC-NCDR CathPCI data. Among those cases, there were 6,323 cases that were non-primary PCI cases, labeled as elective or urgent. (Primary PCI cases are those labeled as emergency or salvage.)

The cases that I identified as those that may potentially be shifted to the ASC setting are those labeled as "elective or urgent" in the PCI status field in the ACC-NCDR CathPCI data registry for CY 2022 which had a zero length of stay (procedure date and discharge date were the same). Based on this methodology, a total of 16.9% of PCI cases may be shifted to an ASC setting. Under a more conservative definition, counting only cases labeled as elective 13.3% of cases may be shifted from hospitals to an ASC setting. The number and percentage of cases that may shifted ranged among hospitals, as described below. The analysis below assumes cases labeled as elective or urgent may be shifted.

- For five hospitals, less than 10 cases could be shifted and that represents less than 10% of the elective PCI cases at these hospitals; two hospitals have cardiac surgery programs, and three hospitals have only PCI. Two hospitals already have less than 200 PCI cases total.
- For four hospitals, between 13 and 23 cases could be shifted and that represents between 4% and 24% of each hospital's elective PCI volume; one hospital has cardiac surgery, and the other three hospitals have only PCI. Two hospitals already have less than 200 PCI cases total.
- For five hospitals, between 42 and 54 cases could be shifted and that represents between 24% and 30% of each hospital's elective PCI volume; one hospital has cardiac surgery, and the other four hospitals only have PCI. Two of these hospitals would go from having over 200 PCI total to under 200 PCI if all the estimated volume that can be shifted, is shifted.
- For four hospitals, between 66 and 79 cases could be shifted and that represents between 13% and 26% of each hospital's elective PCI volume; two hospitals have cardiac surgery, and two hospitals only have PCI. None of these hospitals would go from having over 200 PCI total to under 200 PCI if all the estimated volume that can be shifted is shifted.
- For five hospitals, over 100 cases could be shifted and that represents between 25% and 47% of each hospital's elective PCI volume; these hospitals all have cardiac surgery programs. None of these hospitals would go from having over 200 PCI total to under 200 PCI if all the estimated volume that can be shifted is shifted.