

# **2020 New Mexico Emergency Department Data Annual Report**

Health Systems Epidemiology Program  
Community and Health Systems Epidemiology Bureau  
Epidemiology and Response Division  
New Mexico Department of Health



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## Executive Summary

This report presents overall New Mexico (NM) emergency department (ED) visit numbers, as well as rates by age, sex, race/ethnicity, and health region for NM residents.

Federal NM hospitals are not included in these data because they are not required to report their data to the New Mexico Department of Health (NMDOH); therefore, data from Indian Health Service (IHS) facilities and the Veterans Affairs (VA) hospital are not included. ED visits and rates in areas with large American Indian/Alaskan Native populations are lower than they would be if IHS hospital ED visit data were included. The NMDOH is exploring ways to include IHS and VA Hospital data in future reports. In addition, ED visits for NM residents to out-of-state hospitals are not included.

In 2020, 37 non-federal emergency departments reported 730,380 ED visits to the NMDOH. After exclusion criteria were applied to these data, 704,467 records (visits) remained for analysis. This number marked a sharp decline from 2019, which contained 840,007 ED visits. This sharp decline corresponds to public health orders in March 2020 that limited mass gatherings, temporarily closed non-essential businesses, and restricted non-essential health care services, procedures, and surgeries.

Of the reported ED visits, 52.6% of the visits were among females and 47.4% were among males. About 21.5% of all visits occurred among residents aged 65 years and older. The overall ED visit rate in 2020 for New Mexico residents was 33,202.96 visits per 100,000 population. The Southeast Region had the highest rate of New Mexico ED visits in 2020 (41,324.49 visits per 100,000 population). Overall, there was a drop in ED visits in 2020 from previous years, and this drop was highest in the second quarter of 2020, when there were 158,459 visits as opposed to 201,982 visits during the same time in 2019. This drop was seen across the subsequent three quarters of 2021.

## Methods

The New Mexico Public Health Act grants the NMDOH the authority to “investigate, control and abate the cause of disease” (Section 24-1-3C). Additional authority was enacted on April 30, 2009, requiring all non-federal emergency departments in the State of New Mexico to report ED data to the NMDOH (NMAC 7.4.3.10). ED data (2010-2019) have been requested annually via letter from all non-federal New Mexico emergency departments.

In this report, ED discharge rates were calculated using the New Mexico 2020 population estimates as determined by the NM Population Estimates, Geospatial and Population Studies (GPS) Program at the University of New Mexico (<https://gps.unm.edu/>). Population estimates from UNM were updated in October 2020.

This report provides policy makers and the public and with an overview of the analysis of ED visits to non-federal emergency facilities in the state. These data were verified by each submitting hospital, and then submitted to the NMDOH for analysis. This report does not include ED visits by New Mexicans to facilities outside the state, or to Indian Health Service (IHS) or Veterans Affairs (VA) facilities.

Some records were excluded from the data reported due to missing information. As indicated in Table 1 below, records with unknown ZIP codes (and therefore unknown health region), unknown sex, unknown age, and missing primary diagnosis codes were excluded. The exclusion criteria above are not mutually exclusive. For example, a record may have both unknown sex and unknown primary diagnosis.

Table 1. Number of Discharges, NM, 2019

<b>Total Records Collected</b>	<b>730,380</b>
<b>Record Exclusion* for 2020 ED</b>	<b>25,913</b>
<i>Out-of-State or Unknown ZIP Code</i>	24,395
<i>Missing/Invalid Principal Diagnosis Code</i>	776
<i>Unknown Sex</i>	72
<i>Unknown Age</i>	1,039
<b>Records Remaining (Total)</b>	<b>704,467</b>

\*Note: The exclusion criteria listed in the table are not mutually exclusive. For example, a record may have both unknown sex and unknown Principal diagnosis.

**Definitions for Diagnoses and Procedures:** The ED diagnoses contained in the database were coded using the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM). Definitions for diagnoses and procedures presented in this report may be found at <http://www.cdc.gov/nchs/icd/icd10cm.htm>.

**Rate Calculations:** All rates presented are per 100,000 population. We present crude rates (specific within each age group) and age-adjusted rates. Rates were age-adjusted to the 2000 U.S. standard population. (<https://ibis.health.state.nm.us/resource/AARate.html>; <https://www.cdc.gov/nchs/data/statnt/statnt20.pdf>).

**Limitations:** Federal NM hospitals are not included in these data; therefore, data from IHS and the VA hospital are not included. ED visits and rates in areas with large American Indian/Alaskan Native populations are lower than they would have been had IHS data been included. The NMDOH is exploring ways to include IHS and VA hospital data in future reports. ED visits by NM residents to out-of-state hospitals are not included.

**Diagnosis Categories:** Each ED visit record has only one Principal diagnosis code and up to 44 subsequent diagnosis codes. The count under "Principal Diagnosis" in this report is mutually exclusive from each subsequent diagnosis category (see Table 4). "All Diagnoses" includes the principal diagnosis code and all subsequent codes. For counts under "All Diagnoses," one ED visit is counted once under each of the categories. A discharge is counted once, even if it has multiple diagnosis codes that fall into a single category (Table 5). Table 2 contains the diagnosis category (DC) numbers (DC\_1 – DC\_21) with the diagnosis category descriptions that appear in Figures 18 - 23. For example, if a resident went to the ED and was discharged with two diagnosis codes that both fell under the "Certain infectious and parasitic diseases" category, these would both be under DC\_1 and would be counted only once.

**Condition-specific ICD-10 Visits:** The conditions included in this report for in-depth analyses are hepatitis C virus (HCV), asthma, opioid overdoses, heroin overdoses, falls, and motor vehicle accidents. Refer to the appendix on page 42 for the ICD-10-CM codes used to define each condition. The rates for these conditions were calculated based on "All Diagnoses" (Principal diagnosis and all subsequent diagnoses).

Table 2. Diagnosis Category Descriptions

<b>Diagnosis Categories</b>	<b>Diagnosis Category Description</b>	<b>ICD-10-CM Codes Range</b>
DC_1	Certain infectious and parasitic diseases	A00 - B99
DC_2	Neoplasms	C00 - D49
DC_3	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50 - D89
DC_4	Endocrine, nutritional, and metabolic diseases	E00 - E89
DC_5	Mental, behavioral, and neurodevelopmental disorders	F01 - F99
DC_6	Diseases of the nervous system	G00 - G99
DC_7	Diseases of the eye and adnexa	H00 - H59
DC_8	Diseases of the ear and mastoid process	H60 - H95
DC_9	Diseases of the circulatory system	I00 - I99
DC_10	Diseases of the respiratory system	J00 - J99
DC_11	Diseases of the digestive system	K00 - K95
DC_12	Diseases of the skin and subcutaneous tissue	L00 - L99
DC_13	Diseases of the musculoskeletal system and connective tissue	M00 - M99
DC_14	Diseases of the genitourinary system	N00 - N99
DC_15	Pregnancy, childbirth, and the puerperium	O00 - O9A
DC_16	Certain conditions originating in the perinatal period	P00 - P96
DC_17	Congenital malformations, deformations, and chromosomal abnormalities	Q00 - Q99
DC_18	Symptoms, signs, and abnormal clinical and laboratory findings, not elsewhere classified	R00 - R99
DC_19	Injury, poisoning and certain other consequences of external causes	S00 - T88
DC_20	External causes of morbidity	V00 - Y99
DC_21	Factors influencing health status and contact with health services	Z00 - Z99



## Key Findings

### Overview of Emergency Department Hospitals

- Thirty-seven non-federal facilities reported data in 2020.
- Of the 37 reporting facilities, University of New Mexico Hospitals (Sandoval Regional and University Hospital) had the highest number of ED visits, with 82,188 visits representing 11.25% of the total ED visits for the year.
- Guadalupe County Hospital had the lowest number of ED visits, with 1,999 visits representing 0.27% of the total ED visits for the year.

### Demographic Characteristics of Emergency Department Visits (pages 16-20)

- Except for ages 45 to 64, females had higher rates of ED visits compared to males. The difference between females and males is greatest in the 15-44 age range, where females had a rate of 42,901 visits per 100,000 population, and males had a rate of 34,530.1 visits per 100,000 population.
- The Metro Region had the highest number of ED visits with 157,108 visits. The Northwest Region had the lowest, with 74,913 visits (see Figure 1 (page 15) for a map of health regions) (data not shown).
- The Southeast Region had the highest rate of ED visits with a rate of 41,324.4 visits per 100,000 population. The Southwest Region followed, with a rate of 435,910.3 visits per 100,000 population (data not shown). Additionally, the Southeast Region had the greatest difference between female and male ED visit rates, with a rate of 45,826.2 per 100,000 population for females and 37,267.2 for males.
- Females in the Southeast Region showed a much higher rate of ED visits than females of other regions (45,826.2 visits per 100,000 population). The Southeast Region had a higher rate of ED visits overall (41,324.4 visits per 100,000 population) compared to the state-wide rate (33,202.9 visits per 100,000 population) (data not shown).
- African Americans had the highest overall rate of ED visits, with a rate of 43,818.2 visits per 100,000 population (data not shown). This racial/ethnic group also had the highest female rate of ED visits (46,648.3 visits per 100,000 population). American Indians or Alaskan Natives had the highest ED visit rate for males in 2020 (41,992.2 visits per 100,000 population).

### Emergency Department Visits by Payer Type (pages 23-25)

- Medicaid represented the largest payer type for ED visits with 312,814 visits in 2020. This was followed by Medicare (174,055 visits) and private insurance (148,085 visits).
- The Northwest Region had the highest rate of Medicaid payers (19,146.3 visits per 100,000 population). The Metro Region had the lowest rate of Medicaid payments (13,860 visits per 100,000 population).

### Emergency Department Visits by Diagnosis Category (pages 25-33)

- For “Principal Diagnosis,” the highest rate of ED visits was in the “Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified” category with a rate of 6,488.5 visits per 100,000 population. These visits include cases that are not otherwise specified or of unknown etiology, cases requiring follow-up, or cases for which, after extensive follow-up, no specific diagnosis was made. This was followed by the category “Injury, poisoning and certain other consequences of external causes,” with a rate of 5,936.5 visits per 100,000 population. For all diagnosis categories, the highest rate fell into the “Factors influencing health status and contact with health services” category (19,003.9 visits per 100,000 population).
- For “Principal Diagnosis,” the highest rate for females was “Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified” (7,176.8 visits per 100,000 population). For males, the highest rate fell into the category “Injury, poisoning and certain other consequences of external causes” (6,459.2 visits per 100,000 population). When looking at “Any Diagnosis,” the highest rate fell into the category “Factors influencing health status and contact with health services” for both sexes (20,740.6 visits per 100,000 population for females, 17,372.3 visits for males). This was followed by “Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified” (14,089.1 visits per 100,000 population for females, 11,882.5 visits for males).
- For “Any Diagnosis” listed by age group, “Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified” had the highest rate in the 65 years and over group, with a rate of 17,346 visits per 100,000 population.
- The Southeast Region had the highest rate of visits categorized as “Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified” for the principal diagnosis code at 7,989.7 visits per 100,000 population. The Southeast Region also had the highest rate of visits categorized as “Injury, poisoning and certain other consequences of external causes” for principal diagnosis code at 7,624.1 visits per 100,000 people.

### Emergency Department Visits by Patient Disposition (pages 34-35)

- Routine discharges accounted for 79.1% of total ED visits (633,086 visits/704,467 total visits). There was a higher rate of females with routine discharges than males: 32,127.7 visits per 100,000 population and 28,232.7 visits per 100,000 population, respectively.
- The rate of “left against medical advice” for ED visits in 2020 was 1,548.6 visits per 100,000 population. This disposition was highest for the 15–44-year-old age group (8477 visits) and the rate was highest in the Southeast Region (988.5 per 100,000 population) and Southwest Region (881.8 visits per 100,000 population). Males left against medical advice at a higher rate than females (856 visits per 100,000 population compared to 692.5 visits per 100,000 population).

- The number of dispositions coded as “expired” was highest in the 65 and over age group (4,151 visits). By region, the rate was lowest in the Metro Region (220.1 visits per 100,000 population) and highest in the Southeast Region (708.7 visits per 100,000 population) in 2020.

Infectious Disease- COVID-19 (page 36)

- In 2020, there were 24,428 COVID-19 ED visits (data not shown).
- Females had the higher rate of COVID-19 ED visits in all age groups except for the 65 and over age group.
- The highest rate of COVID-19 ED visits was among females in the 45 to 64 age group (1,532.1 visits per 100,000 population).
- The rate of COVID-19 ED visits was highest in the Northwest Region (1,570.3 visits per 100,000 population), followed closely by the Southeast Region (1,537.2 visits per 100,000 population).

Infectious Disease – Hepatitis C Virus (HCV) (page 37)

- There were 3,797 hepatitis C virus ED visits in 2020 (data not shown).
- Males in the 45-64 age group had more ED visits with a diagnosis of HCV (476.0 visits per 100,000 population) than any other age group and males had significantly higher visit rates than females across all the age groups.
- The Northeast Region had the highest rate in 2020, at 322.5 visits per 100,000 population. The Northwest Region had the lowest rate, at 140 visits per 100,000 population.
- In 2020 overall, the rate of ED visits related to HCV in New Mexico was 176.3 visits per 100,000 population, a decrease from 2019 (228 visits per 100,000 population) and from 2018 (261 visits per 100,000 population).

Chronic Disease & Environmental Health Related Visits – Asthma (page 38)

- There were 33,567 ED visits for asthma in 2020, or 1,583.7 ED visits per 100,000 population (data not shown).
- Except for ages younger than 15 years, females accounted for higher ED visit rates than males for asthma. Females in the 15-44-year-old age group had a higher overall rate than any other age group (2,766.4 visits per 100,000 population).
- In 2020, the ED visits rates with an asthma diagnosis were the highest for the Southeast Region (2,168.2 visits per 100,000 population) and Southwest Region (1,548.3 visits per 100,000 population).
- In 2020 overall, the rate of ED visits related to asthma in New Mexico was lower than 2018 and 2019.

Injury – Opioid Overdose (page 39)

- In 2020, a total of 1,779 ED visits occurred due to an opioid overdose (data not shown).

- The age group of 15-44-year-olds had the highest rate (250.7 visits per 100,000 population).
- For the period of 2018-2020, the Northeast Region had the highest rate in all three years.
- In 2020 the rate of ED visits related to opioids in New Mexico was 82.9 visits per 100,000 population. This is a slight increase from both 2018 and 2019 (80.2 visits and 78.7 visits per 100,000 population, respectively).

#### *Injury – Heroin Overdose (page 40)*

- In 2020, a total of 592 ED visits occurred due to a heroin overdose (data not shown).
- Males 15-44 had a rate of 80.3 visits per 10,000 population, which was more than double the rate of females in the same age group (31.7 visits per 100,000 population). Males had higher rates than females in any age group.
- The Northeast Region has had the highest rate for all three years from 2018 to 2020.
- In 2020 overall, the rate of ED visits related to heroin in New Mexico was 29.8 per 100,000 population, which is a slight decrease from 2019.

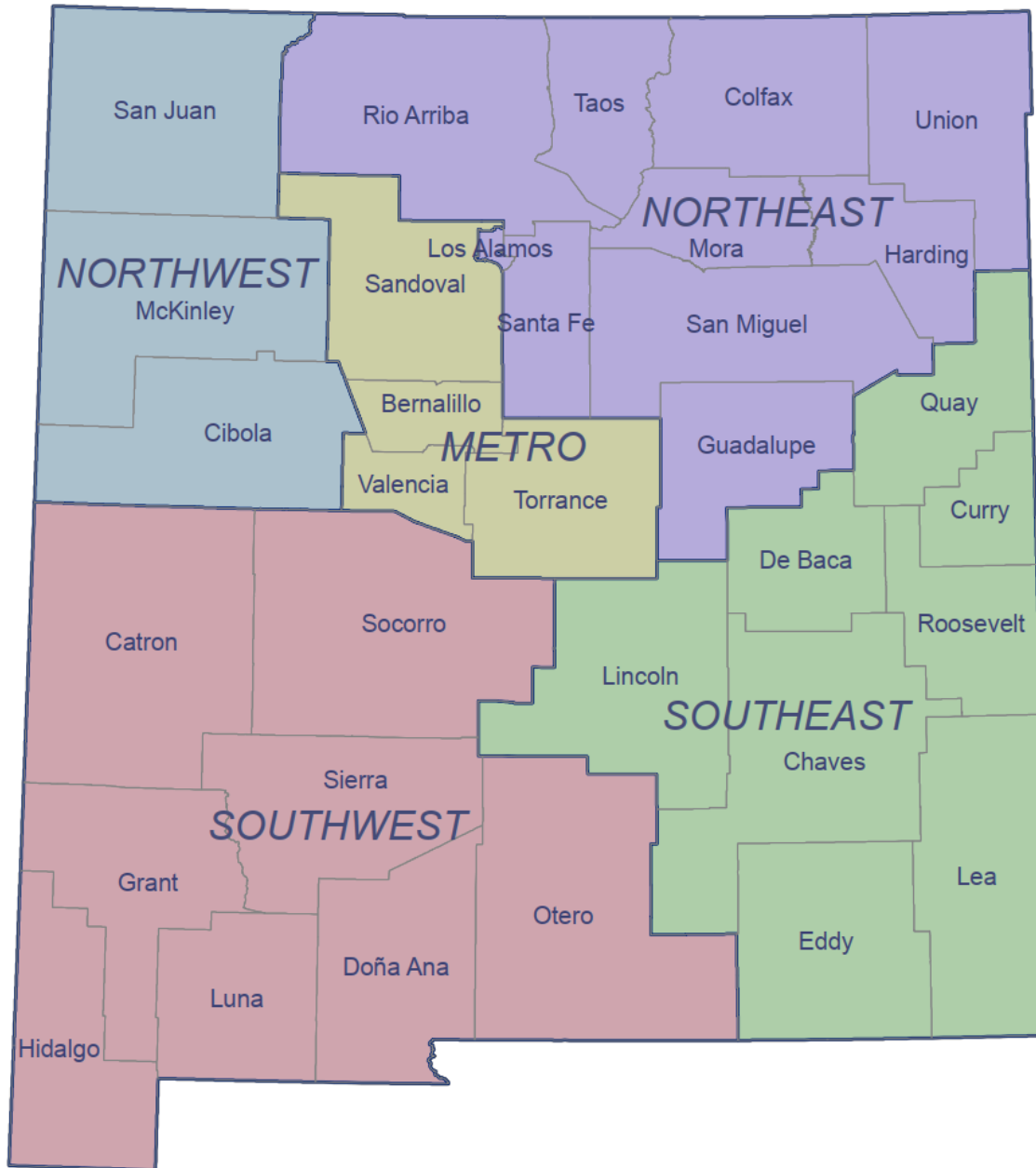
#### *Injury – Fall Injuries (page 41)*

- In 2020, a total of 39,489 ED visits had a diagnosis related to fall injuries (data not shown).
- Except for ages younger than 15 years old, females had higher rates than males. Females 65 years or older had the highest rates at 4,431.8 visits per 100,000 population.
- The Southwest Region had the highest rate for 2020 (2,328.5 visits per 100,000 population), and the Metro Region had the lowest rate (1,257.7 visits per 100,000 population). For all five health regions, the rates for 2020 decreased from the previous years.
- Overall, in 2020 the rate of ED visits related to falls in New Mexico was 1,662.3 visits per 100,000 population, showing a continuous decrease starting in 2018 (2,326.4 visits per 100,000 population in 2019 and 2,129.6 visits per 100,000 population in 2018).

#### *Injury – Motor Vehicle Injuries (page 42)*

- In 2020, a total of 8,498 ED visits occurred due to motor vehicle injuries (data not shown).
- Females in the 15-44-year-old age group had the highest rate, at 638.8 visits per 100,000 population. The rate of motor vehicle injuries was higher among females except for the 65+ age group, where males have a slightly higher rate than females (203.9 per 100,000 population compared to 200.5 per 100,000, respectively).
- The Southwest Region had the highest rate in 2020 (498.9 visits per 100,000 population). The Metro Region had the lowest rate (337.5 visits per 100,000 population).
- In 2020 overall, the rate of ED visits related to motor vehicle injuries in New Mexico was 382.6 visits per 100,000 population, showing a continuous decrease from 2018 (588.1 visits per 100,000 population) and 2019 (512.7 visits per 100,000 population).

Figure 1. New Mexico Health Regions



**Northwest Region:** San Juan, McKinley, and Cibola counties

**Northeast Region:** Rio Arriba, Taos, Colfax, Union, Los Alamos, Santa Fe, Mora, San Miguel, Guadalupe, and Harding counties

**Metro Region:** Bernalillo, Sandoval, Torrance, and Valencia counties

**Southeast Region:** Quay, De Baca, Curry, Lincoln, Roosevelt, Chaves, Eddy, and Lea counties

**Southwest Region:** Catron, Socorro, Grant, Sierra, Hidalgo, Luna, Doña Ana, and Otero counties

Table 3. Number of ED Visits and Percentage of Total Visits by Facility, NM, 2020

Hospital	Frequency	Percent
Alta Vista Regional Hospital	11,528	1.58
Artesia General Hospital	8,978	1.23
Carlsbad Medical Center	17,988	2.46
Christus St. Vincent Medical Center	29,686	4.06
Cibola General Hospital	8,921	1.22
Clovis Parent Location	25,004	3.42
Dan C. Trigg Memorial Hospital	3,949	0.54
Eastern New Mexico Medical Center	23,558	3.23
Gerald Champion Regional Medical Center	24,206	3.31
Gila Regional Medical Center	13,476	1.85
Guadalupe County Hospital	1,999	0.27
Lea Regional Medical Center	15,757	2.16
Lincoln County Medical Center	11,034	1.51
Los Alamos Medical Center	6,109	0.84
Lovelace Health Systems, downtown	31,074	4.25
Lovelace Roswell Regional Hospital	10,126	1.39
Lovelace Westside Hospital	17,393	2.38
Lovelace Women's Hospital	22,318	3.06
Memorial Medical Center	3,1881	4.36
Mimbres Memorial Hospital	12,437	1.7
Miners Colfax Medical Center	4,081	0.56
Mountain View Regional Medical Center	41,806	5.72
Nor Lea General Hospital	10,121	1.39
Presbyterian Hospital Main Location	50,522	6.92
Anna Kaseman Presbyterian Hospital	36,049	4.94
Rust Medical Center Presbyterian Hospital	30,934	4.24
Presbyterian Santa Fe Medical Center	7,427	1.02
Presbyterian Espanola Hospital	20,187	2.76
Rehoboth McKinley Christian Hospital	14,195	1.94
Roosevelt General Hospital	5,654	0.77
San Juan Regional Medical Center	51,645	7.07
Sandoval Regional Medical Center	14,183	1.94
Sierra Vista Hospital	6,278	0.86
Socorro General Hospital	7,820	1.07
Taos Health System: Holy Cross Hospital	13,003	1.78
Union County General Hospital	6,865	0.94
UNM Hospitals (Sandoval Regional and University Hospital)	82,188	11.25

## Demographic Characteristics of ED Visits

Figure 2 Number of ED Visits by Age and Sex, NM, 2020

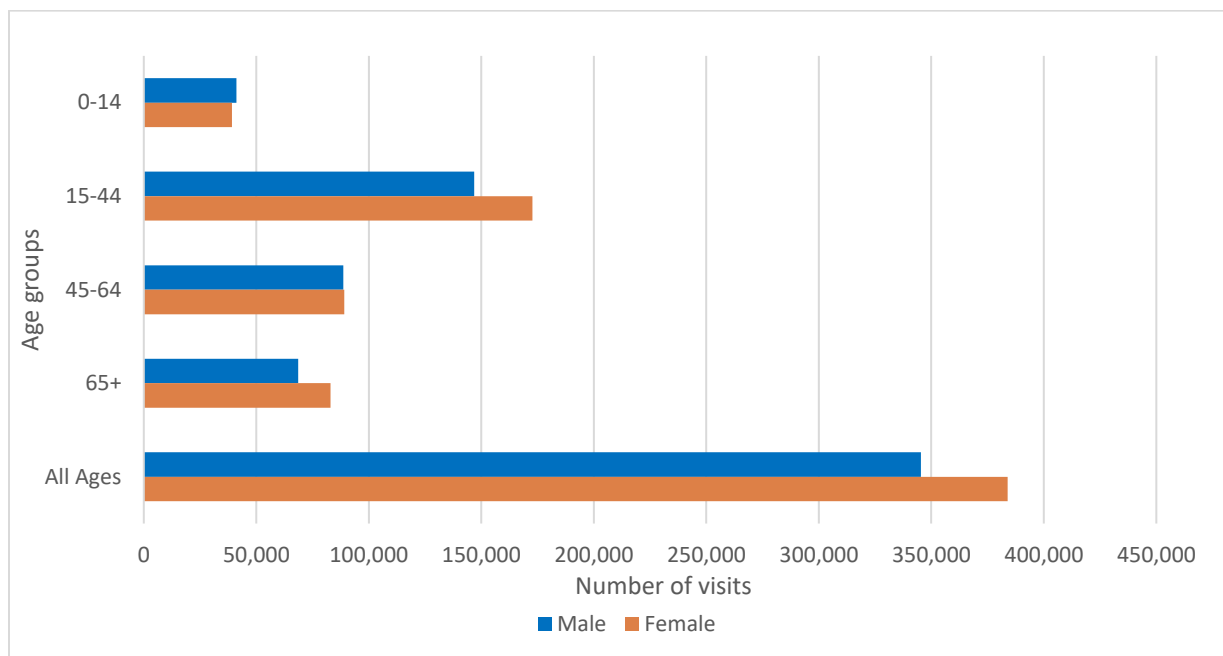


Figure 3. Rates of ED Visits by Age Group and Sex, NM, 2019

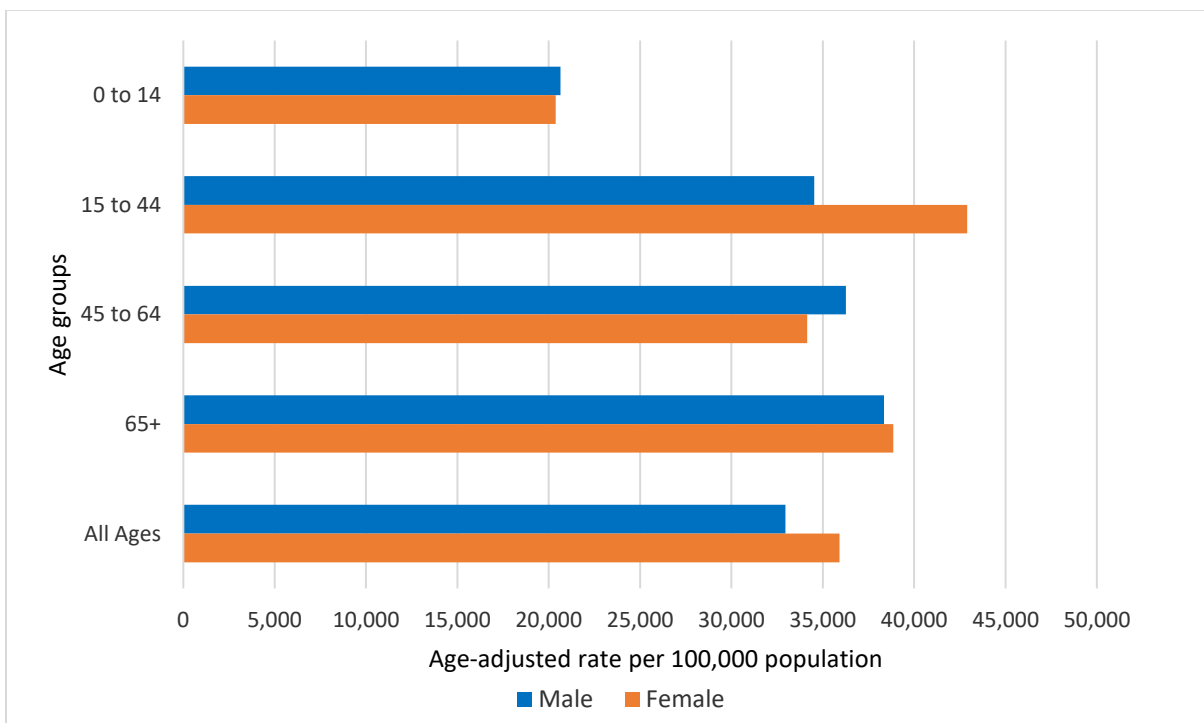


Figure 4. Number of ED Visits by Health Region and Sex, NM, 2020

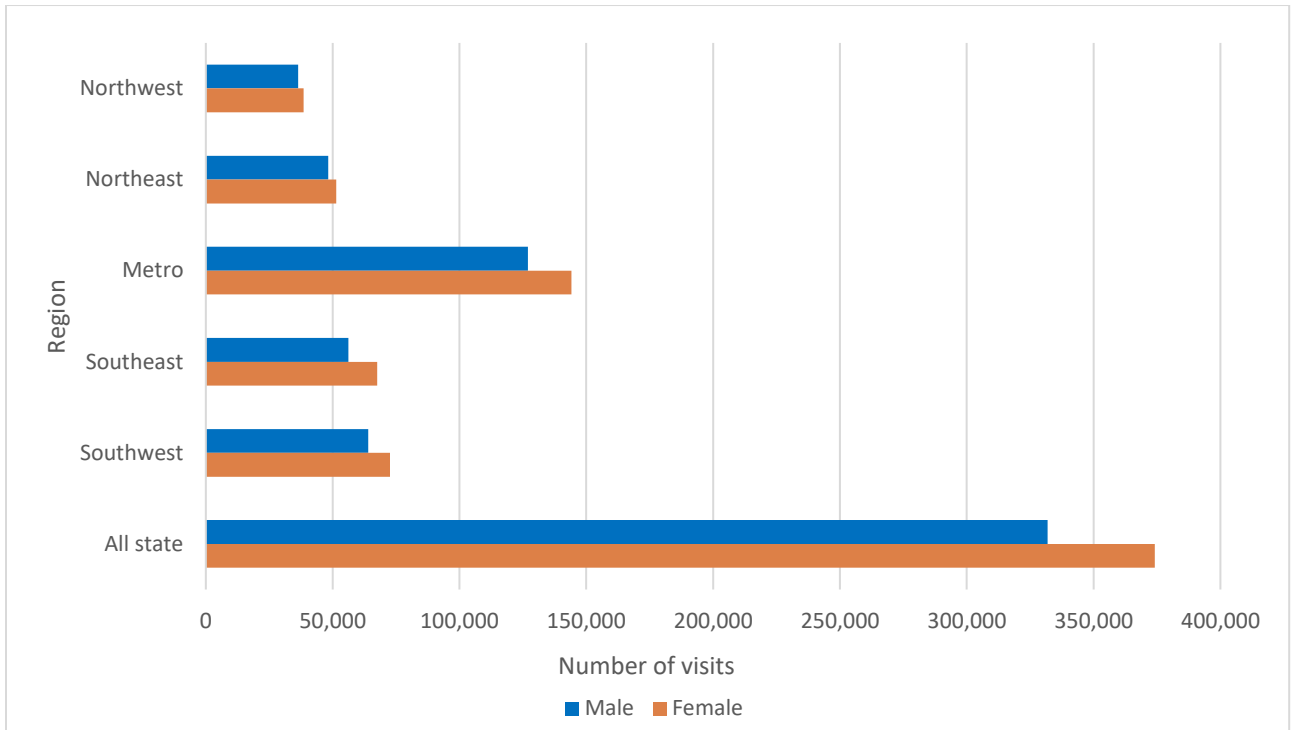


Figure 5. Rates of ED Visits by Health Region and Sex, NM, 2020

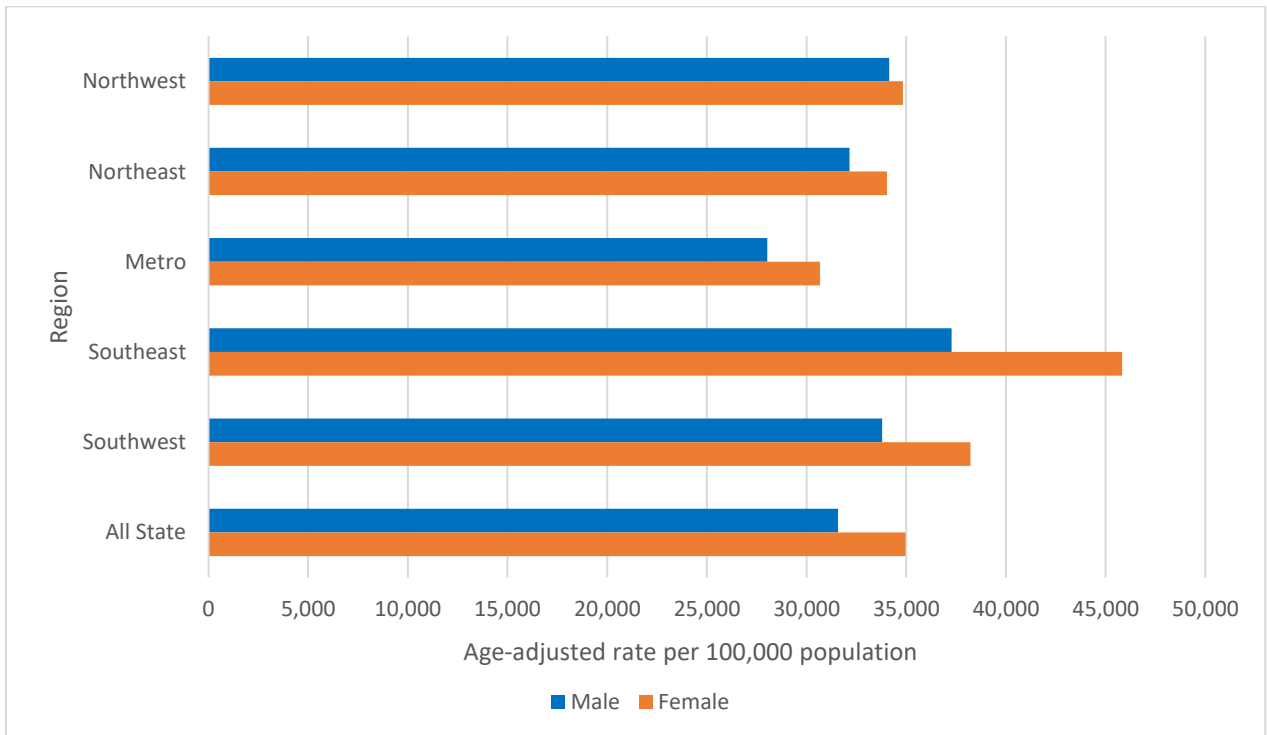




Figure 6. Number of ED Visits by Race/Ethnicity and Sex, NM, 2020

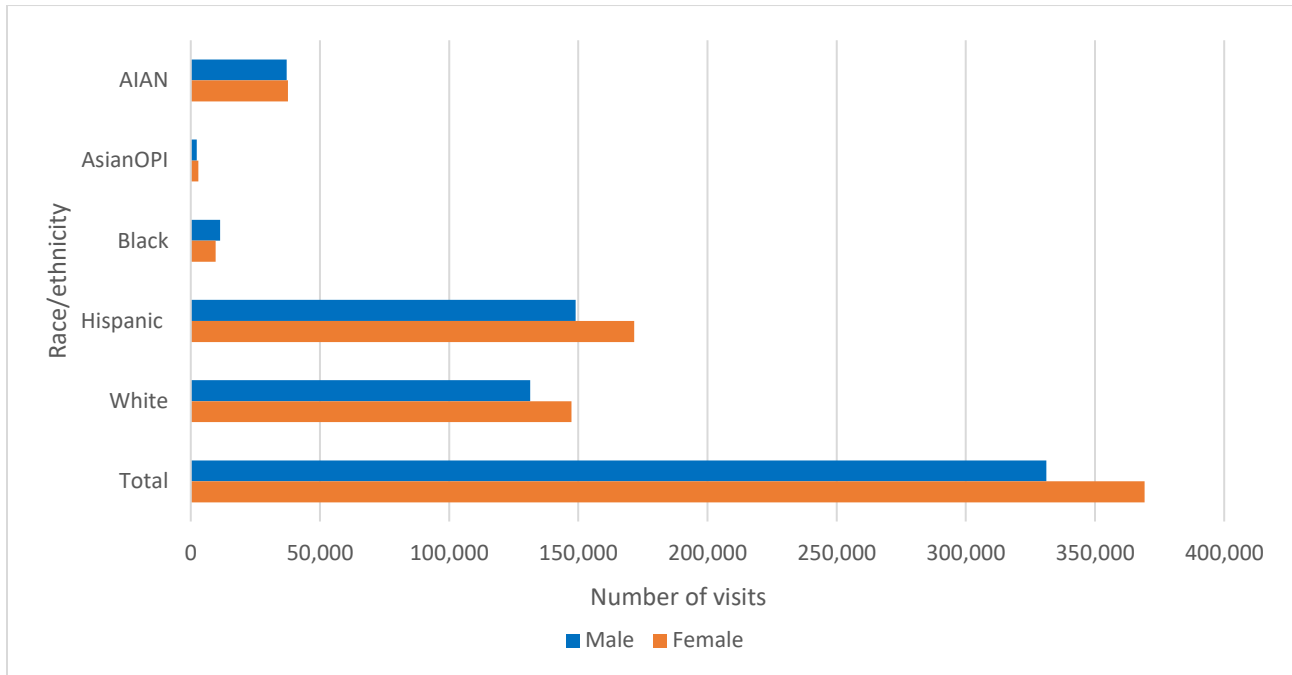
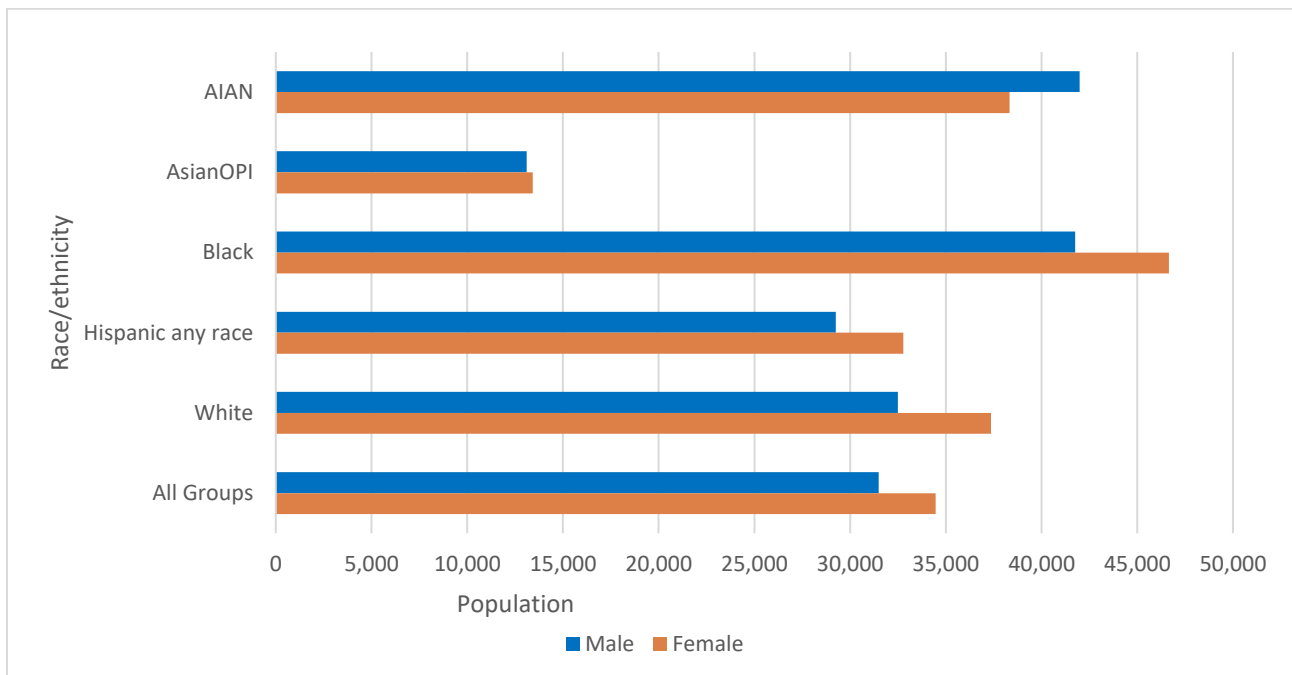


Figure 7. Rates of ED Visits by Race/Ethnicity and Sex, NM, 2020



Notes:

1. For this report, if race was missing and ethnicity was Hispanic, then the discharges are included in the “Hispanic Any Race” group.
2. AsianOPI = Asian or Pacific Islander, AIAN = American Indian or Alaska Native

# ED Visits by Quarter

Figure 8. Number of ED Visits by Quarter, 2018, 2019, and 2020

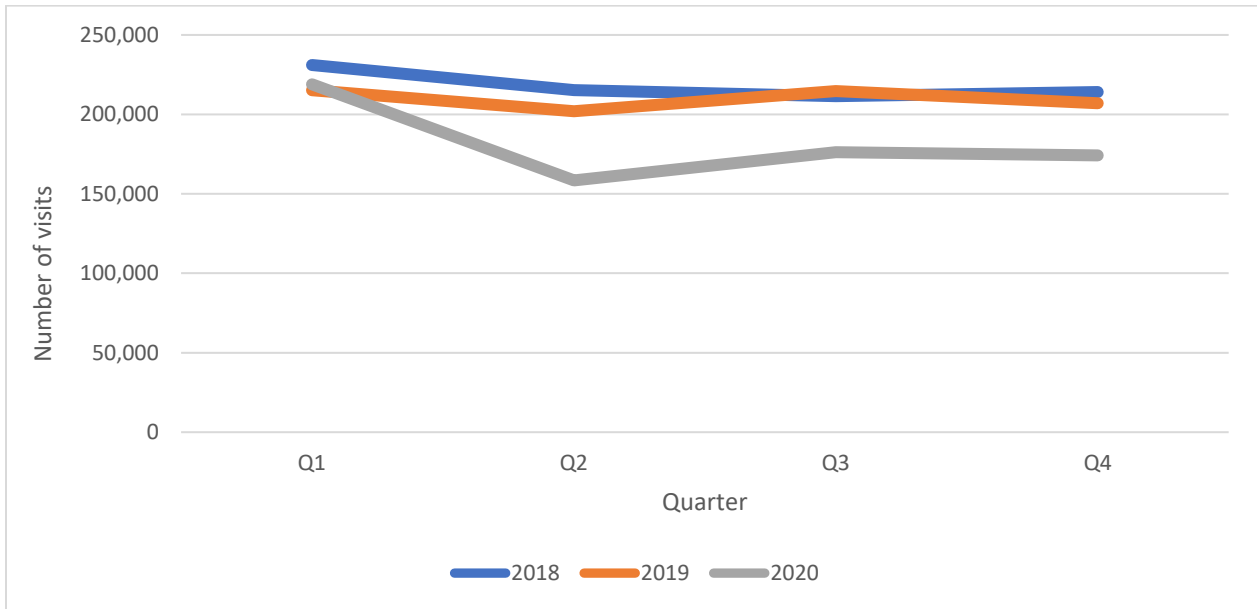


Figure 9. Number of ED Visits by Sex and Quarter, 2020

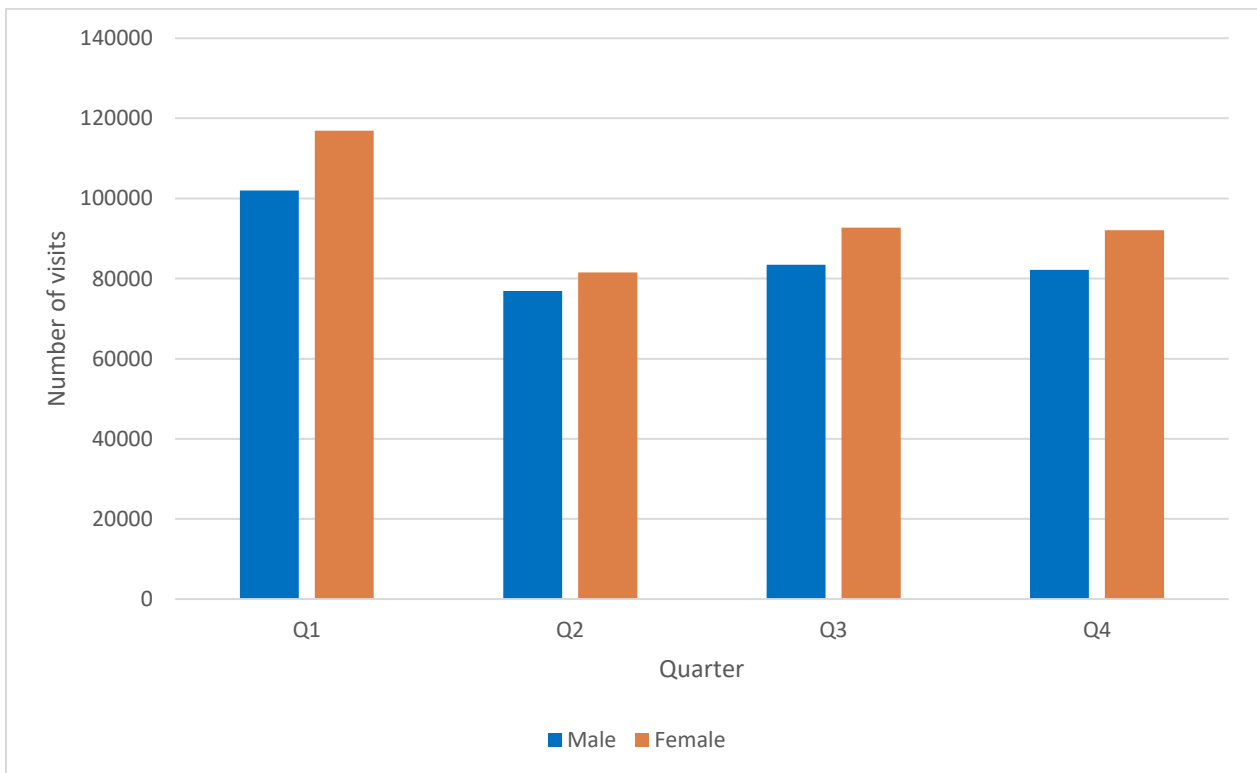


Figure 10. Number of ED Visits by Age Group and Quarter, 2020

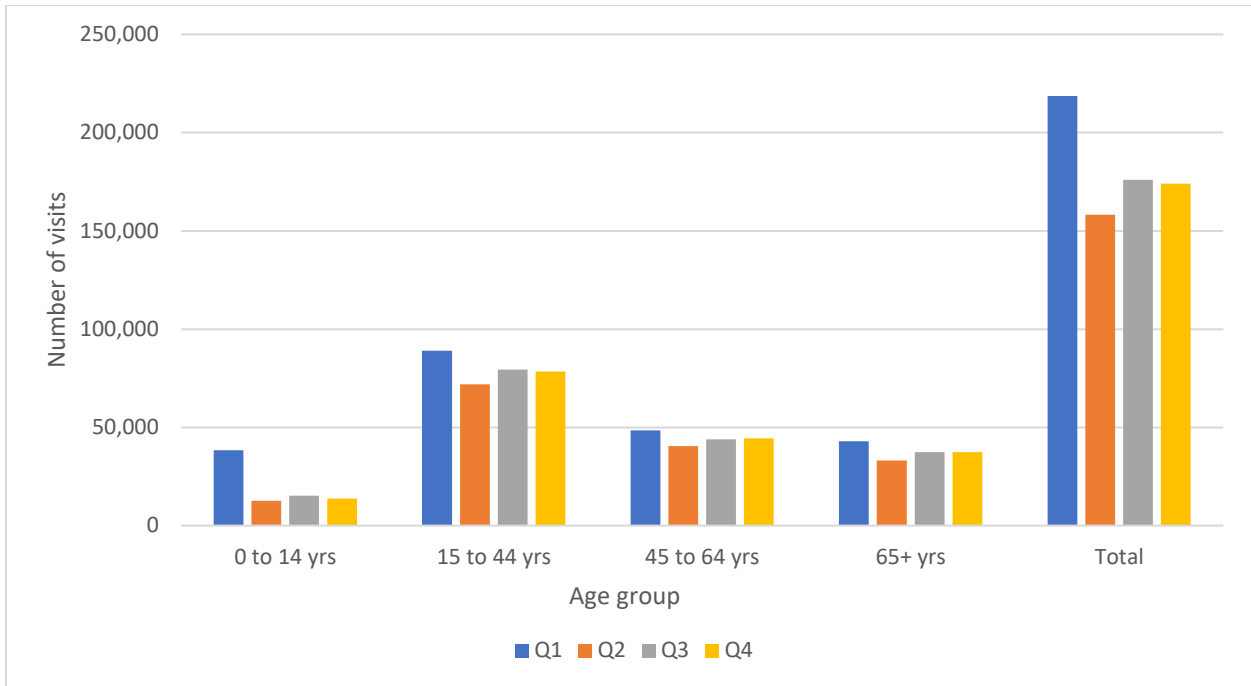


Figure 11. Number of ED Visits by Race/Ethnicity and Quarter, 2020

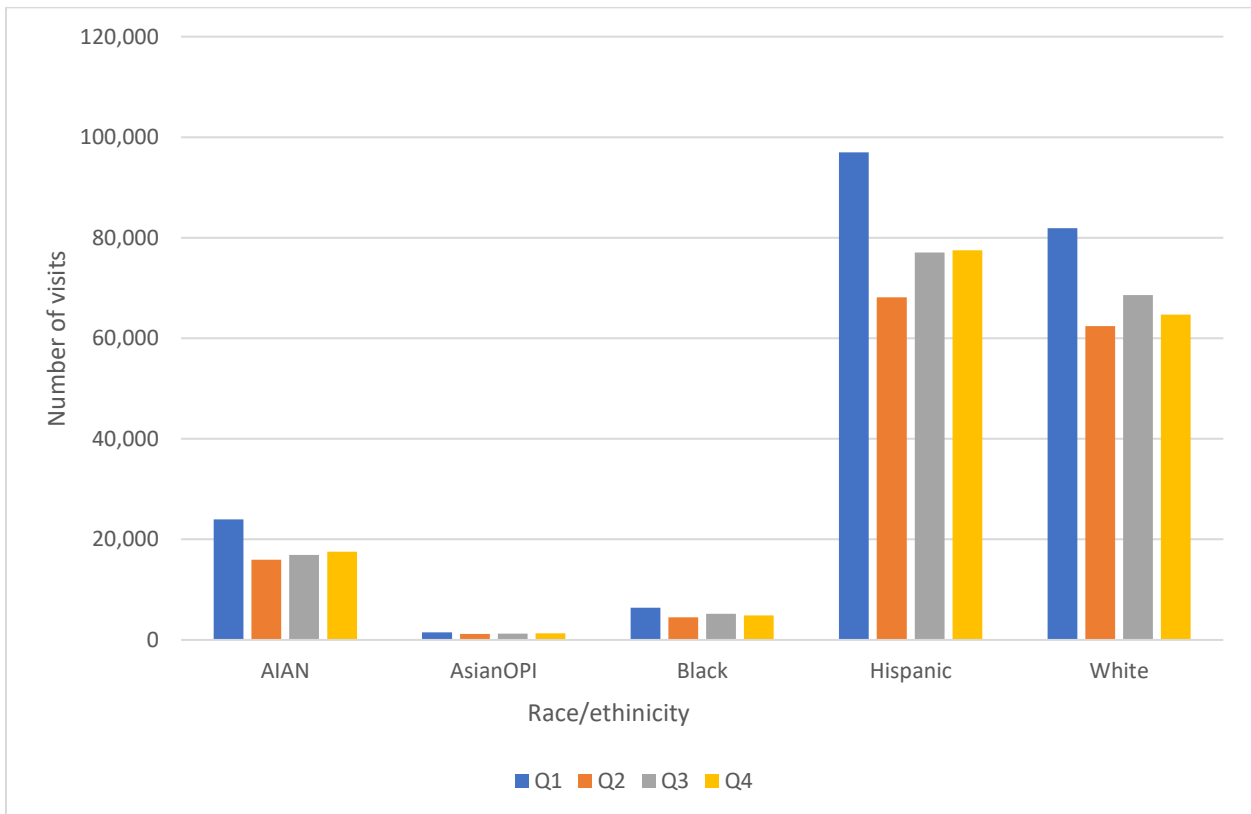


Figure 12. Number of ED Visits by Region and Quarter, 2020

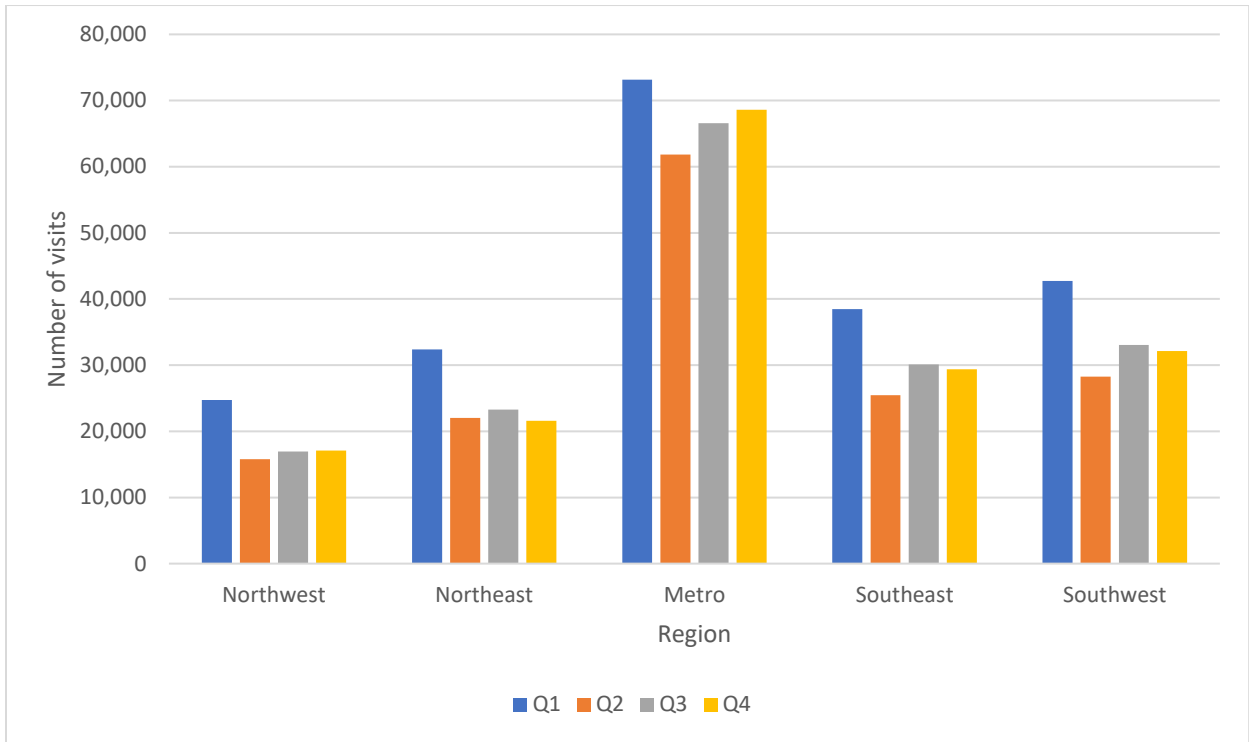
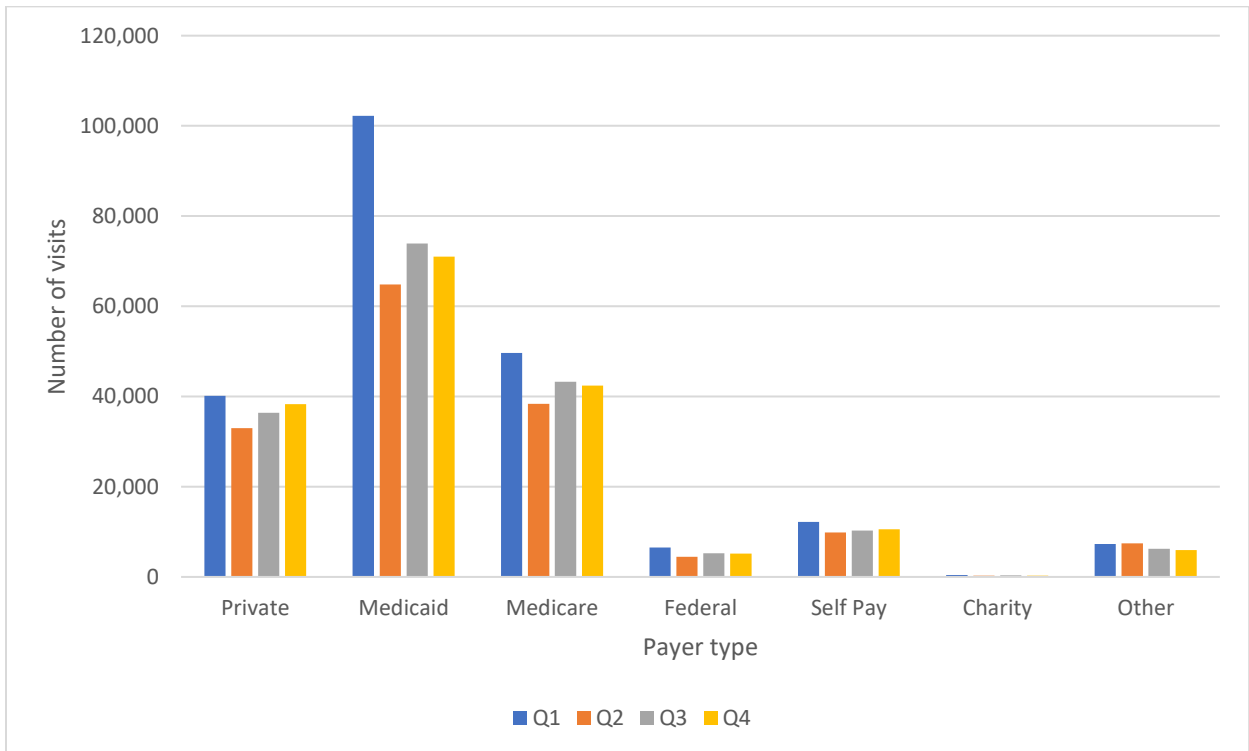


Figure 13. Number of ED Visits by Payer Type and Quarter, 2020



## ED Visits by Payer Type

Figure 14. Number of ED Visits by Payer Type and Age Group, NM, 2020

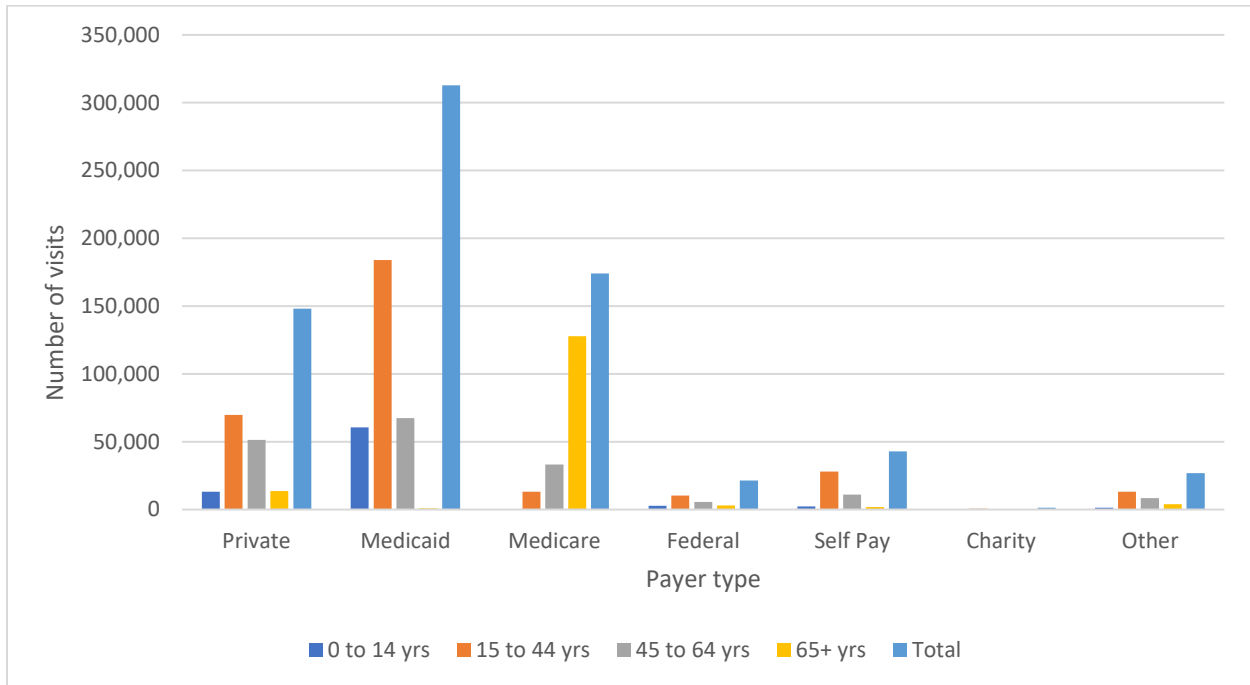


Figure 15. Rates of ED Visits by Payer Type and Sex, NM, 2020

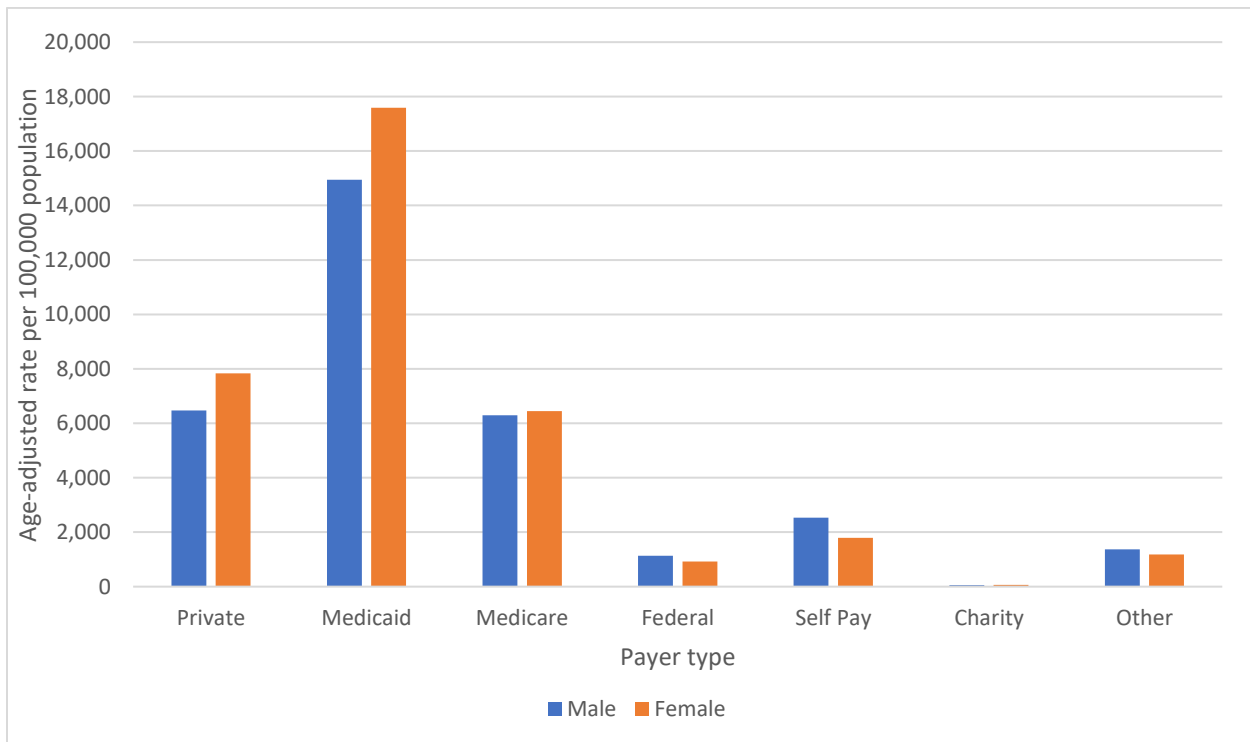


Figure 16. Rates of ED Visits by Payer Type and Region,

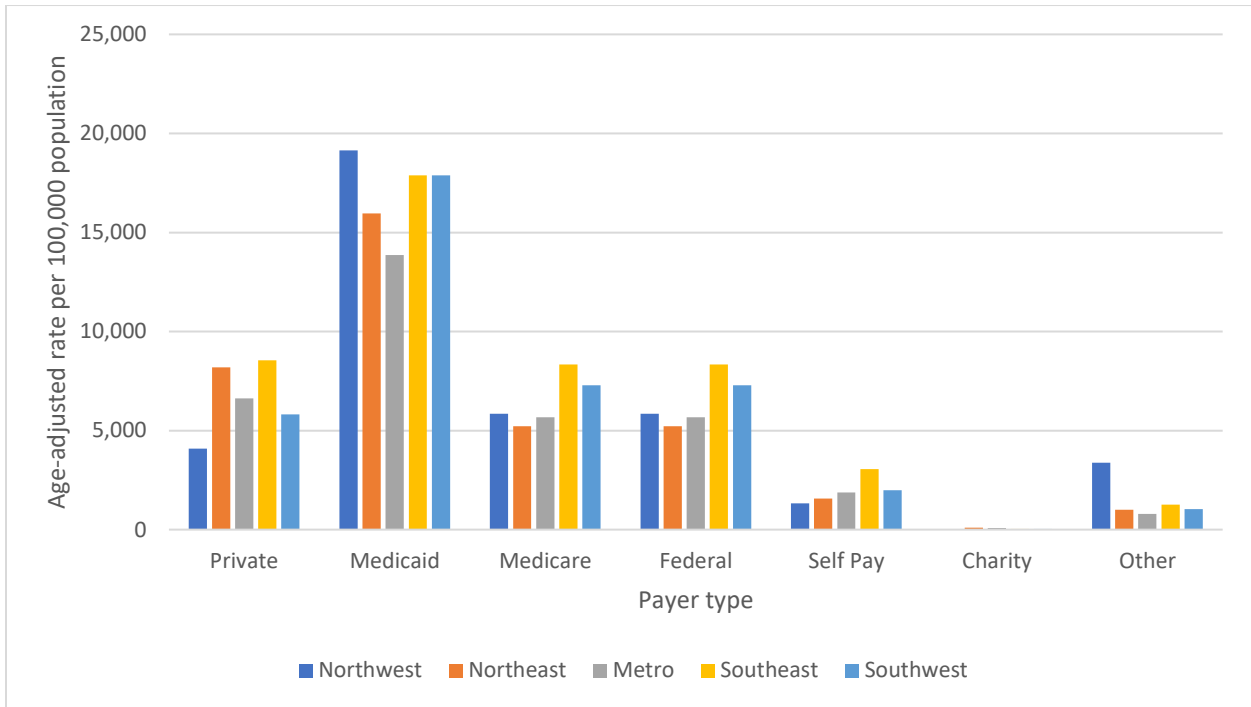
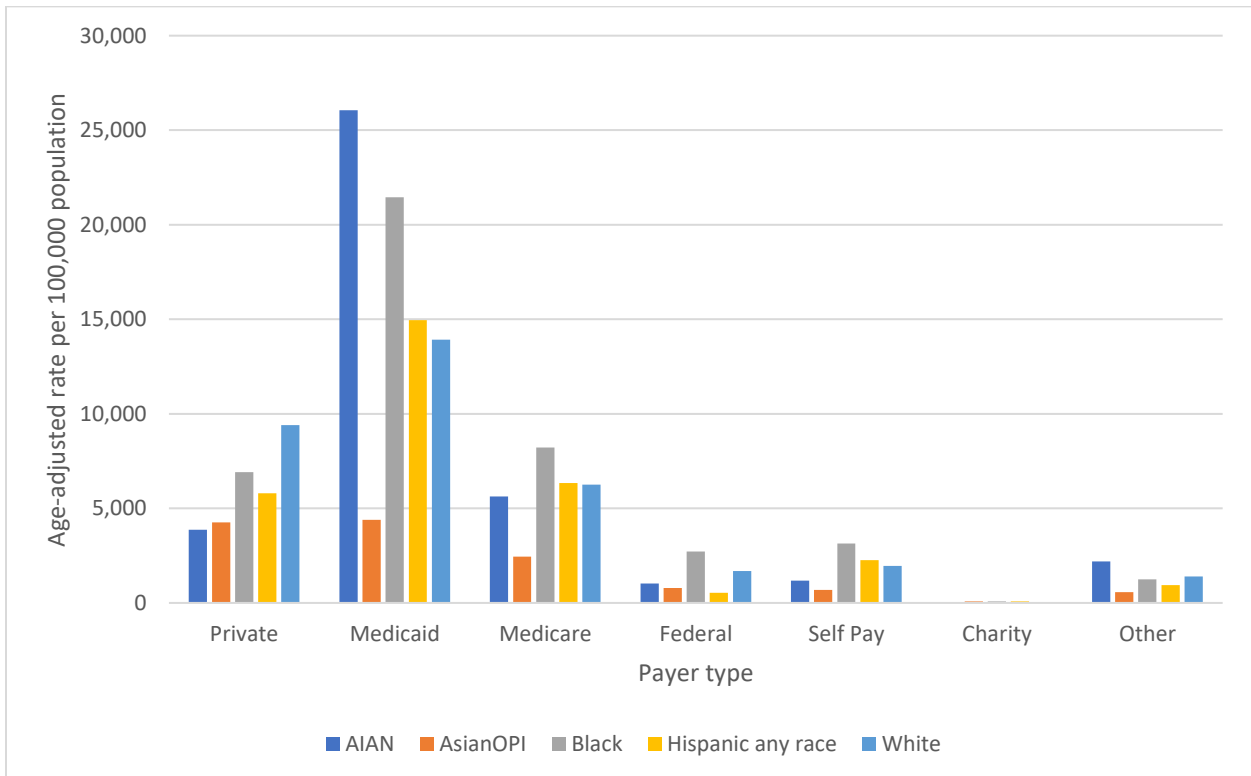


Figure 17. Rates of ED Visits by Payer Type and Race/Ethnicity, NM, 2020



## ED Visits by Diagnosis Category

Table 4. Number of ED Visits by Category of Diagnosis, NM, 2020

Diagnosis Category	Diagnosis Category Description (ICD-10-CM Codes Range)	Principal Diagnosis		All Diagnoses	
		Count	Rank	Count	Rank
DC18	Symptoms, signs, and abnormal clinical and laboratory findings, not elsewhere classified	138,408	1	280,100	2
DC19	Injury, poisoning and certain other consequences of external causes	124,741	2	150,543	7
DC10	Diseases of the respiratory system	66,134	3	158,281	6
DC21	Factors influencing health status and contact with health services	63,979	4	415,436	1
DC11	Diseases of the digestive system	47,745	5	103,920	9
DC5	Mental, behavioral, and neurodevelopmental disorders	44,599	6	195,734	3
DC13	Diseases of the musculoskeletal system and connective tissue	43,632	7	100,348	10
DC14	Diseases of the genitourinary system	37,109	8	94,791	11
DC9	Diseases of the circulatory system	31,831	9	190,136	4
DC1	Certain infectious and parasitic diseases	25,168	10	49,271	13
DC12	Diseases of the skin and subcutaneous tissue	21,834	11	36,408	14
DC6	Diseases of the nervous system	17,676	12	68,222	12
DC4	Endocrine, nutritional, and metabolic diseases	13,754	13	180,338	5
DC15	Pregnancy, childbirth, and the puerperium	13,320	14	13,974	17
DC8	Diseases of the ear and mastoid process	8,661	15	14,573	16
DC7	Diseases of the eye and adnexa	4,288	16	10,443	19
DC3	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	2,637	17	36,254	15
DC2	Neoplasms	2,537	18	12,355	18
DC16	Certain conditions originating in the perinatal period	481	19	668	21
DC17	Congenital malformations, deformations, and chromosomal abnormalities	200	20	3,088	20
DC20	External causes of morbidity	35	21	135,478	8
Total		708,769		2,250,361	

Table 5. Rates of ED Visits (Age-adjusted per 100,000 Population) by Category of Diagnosis, NM, 2020

Diagnosis Category	Diagnosis Category Description (ICD-10-CM Codes Range)	Principal Diagnosis		All Diagnoses	
		Rate	Rank	Rate	Rank
DC18	Symptoms, signs, and abnormal clinical and laboratory findings, not elsewhere classified	6,488.5	1	12,951.2	2
DC19	Injury, poisoning and certain other consequences of external causes	5,936.5	2	7,097.4	7
DC10	Diseases of the respiratory system	3,215.4	3	7,278.6	6
DC21	Factors influencing health status and contact with health services	3,132.8	4	19,003.9	1
DC5	Mental, behavioral, and neurodevelopmental disorders	2,243.5	5	9,338.2	3
DC11	Diseases of the digestive system	2,200.6	6	4,633.8	9
DC13	Diseases of the musculoskeletal system and connective tissue	1,986.3	7	4,412.7	10
DC14	Diseases of the genitourinary system	1,710.4	8	4,043.5	11
DC9	Diseases of the circulatory system	1,242.9	9	7,652.9	4
DC1	Certain infectious and parasitic diseases	1,156.0	10	2,278.9	13
DC12	Diseases of the skin and subcutaneous tissue	1,059.6	11	1,708.1	14
DC6	Diseases of the nervous system	822.4	12	2,952.1	12
DC15	Pregnancy, childbirth, and the puerperium	662.9	13	695.5	17
DC4	Endocrine, nutritional, and metabolic diseases	601.6	14	7,495.2	5
DC8	Diseases of the ear and mastoid process	439.2	15	709.2	16
DC7	Diseases of the eye and adnexa	205.9	16	470.3	19
DC3	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	111.2	17	1,507.1	15
DC2	Neoplasms	99.5	18	474.7	18
DC16	Certain conditions originating in the perinatal period	29.0	19	39.9	21
DC17	Congenital malformations, deformations, and chromosomal abnormalities	10.1	20	146.1	20
DC20	External causes of morbidity	1.8	21	6,455.5	8
Total		33,356		101,345	



Figure 18. Top 10 Rates of ED Visits by Principal Diagnosis Category and Sex, NM, 2020

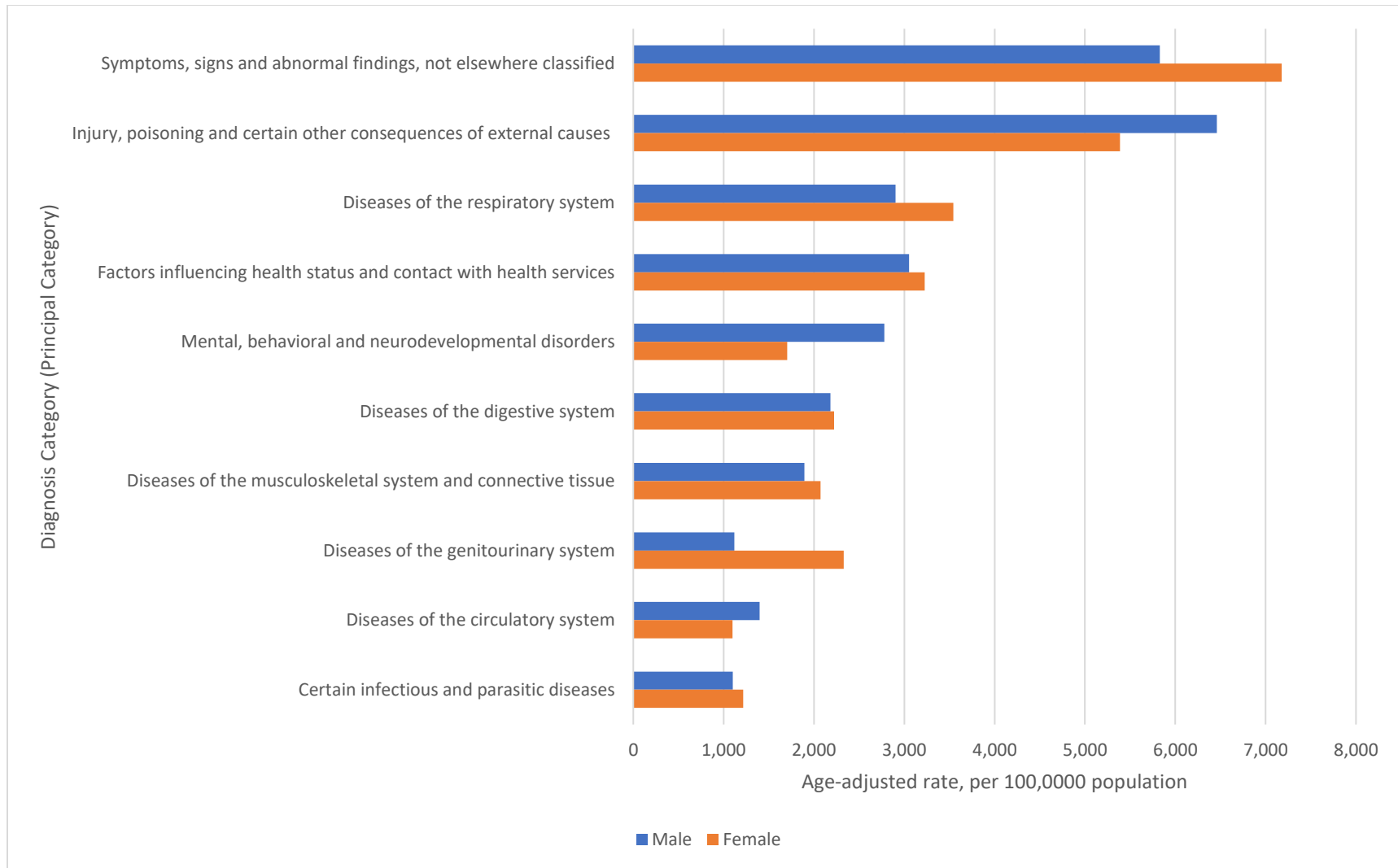


Figure 19. Top 10 Rates of ED Visits by Diagnosis Category (Any Diagnosis) and Sex, NM, 2020

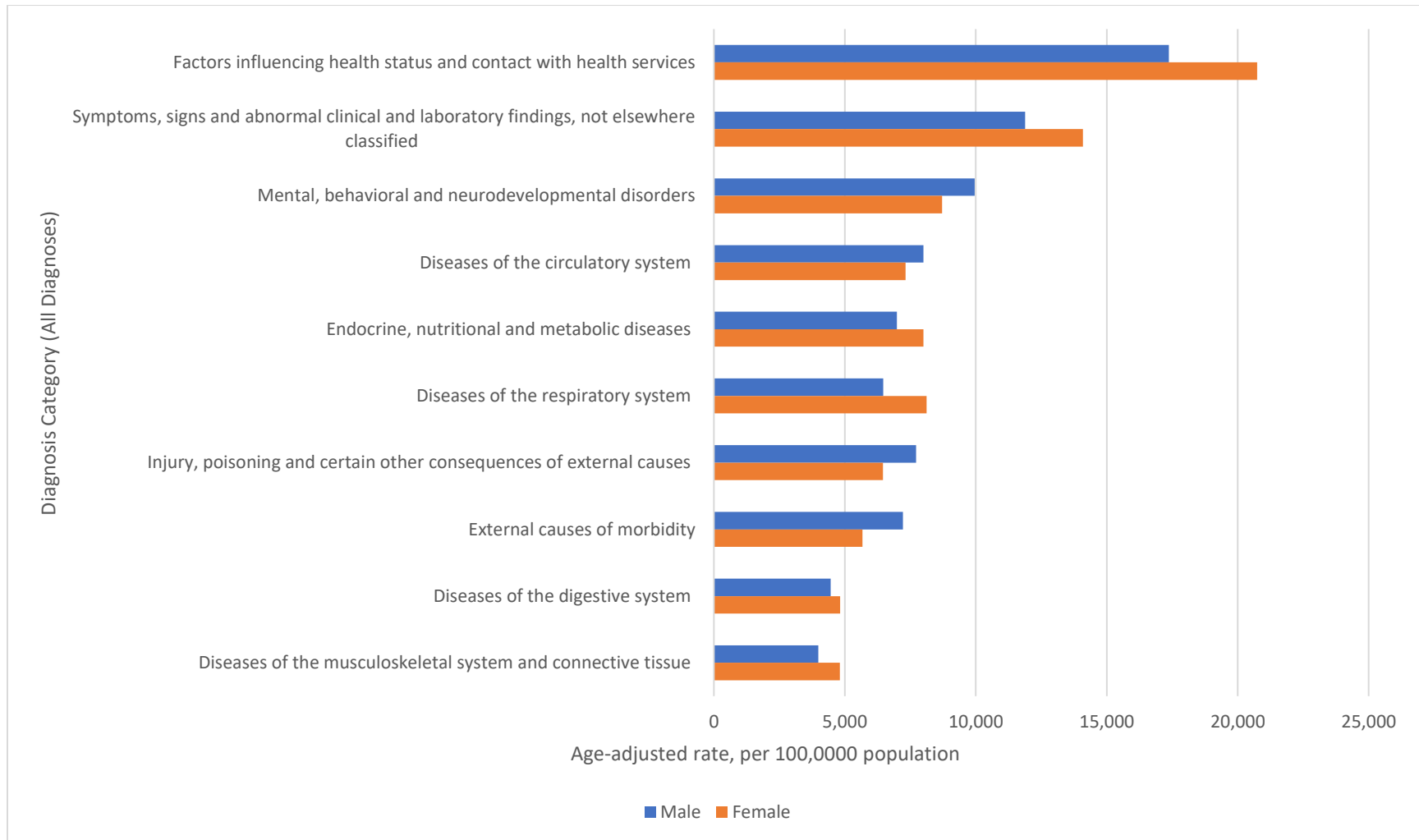


Figure 20. Top Five Categories of Rates of ED Visits (Principal Diagnosis) by Age Group, NM, 2020

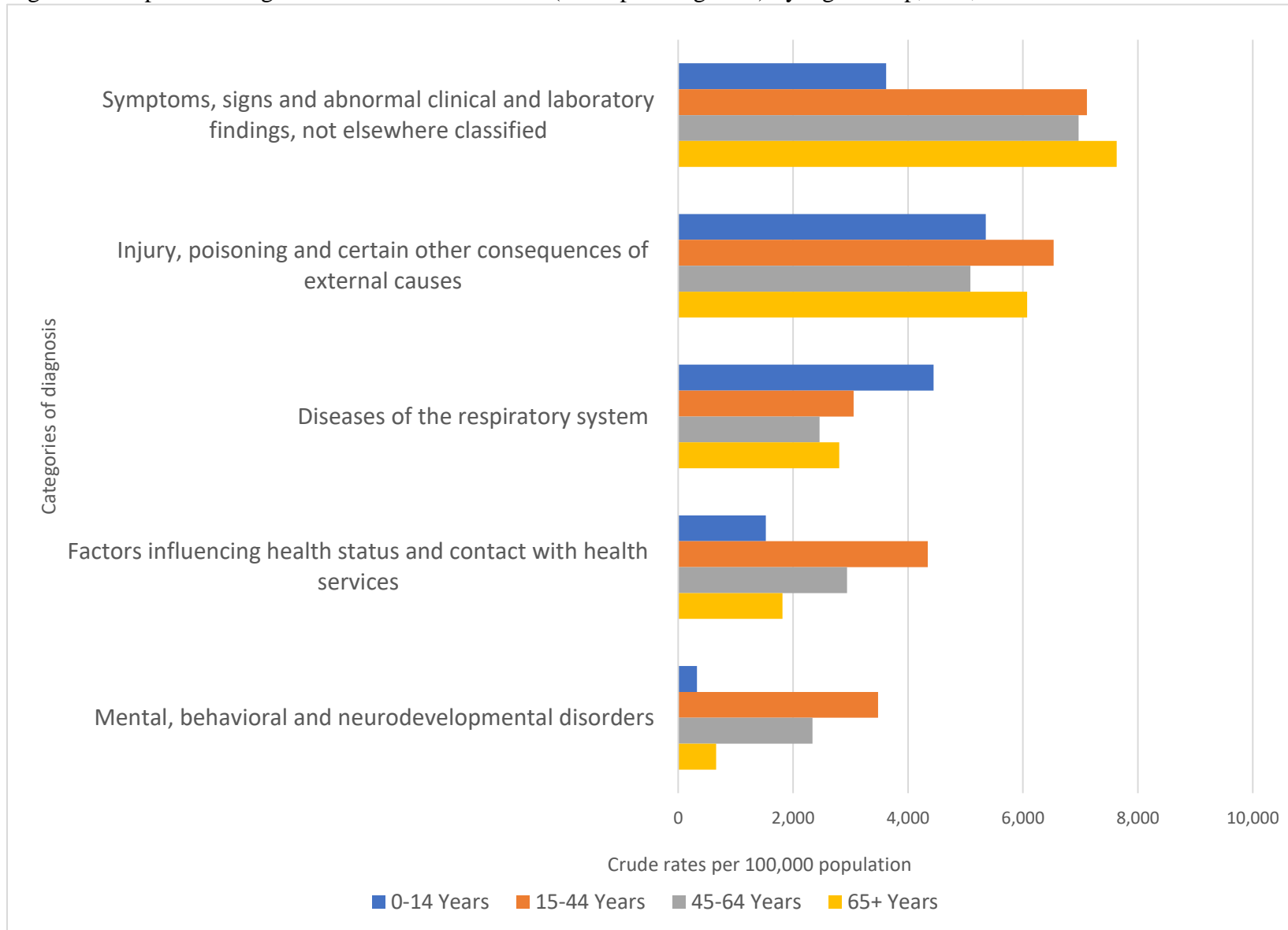


Figure 21. Top Five Categories of Rates of ED Visits (Any Diagnosis) by Age Group, NM, 2020

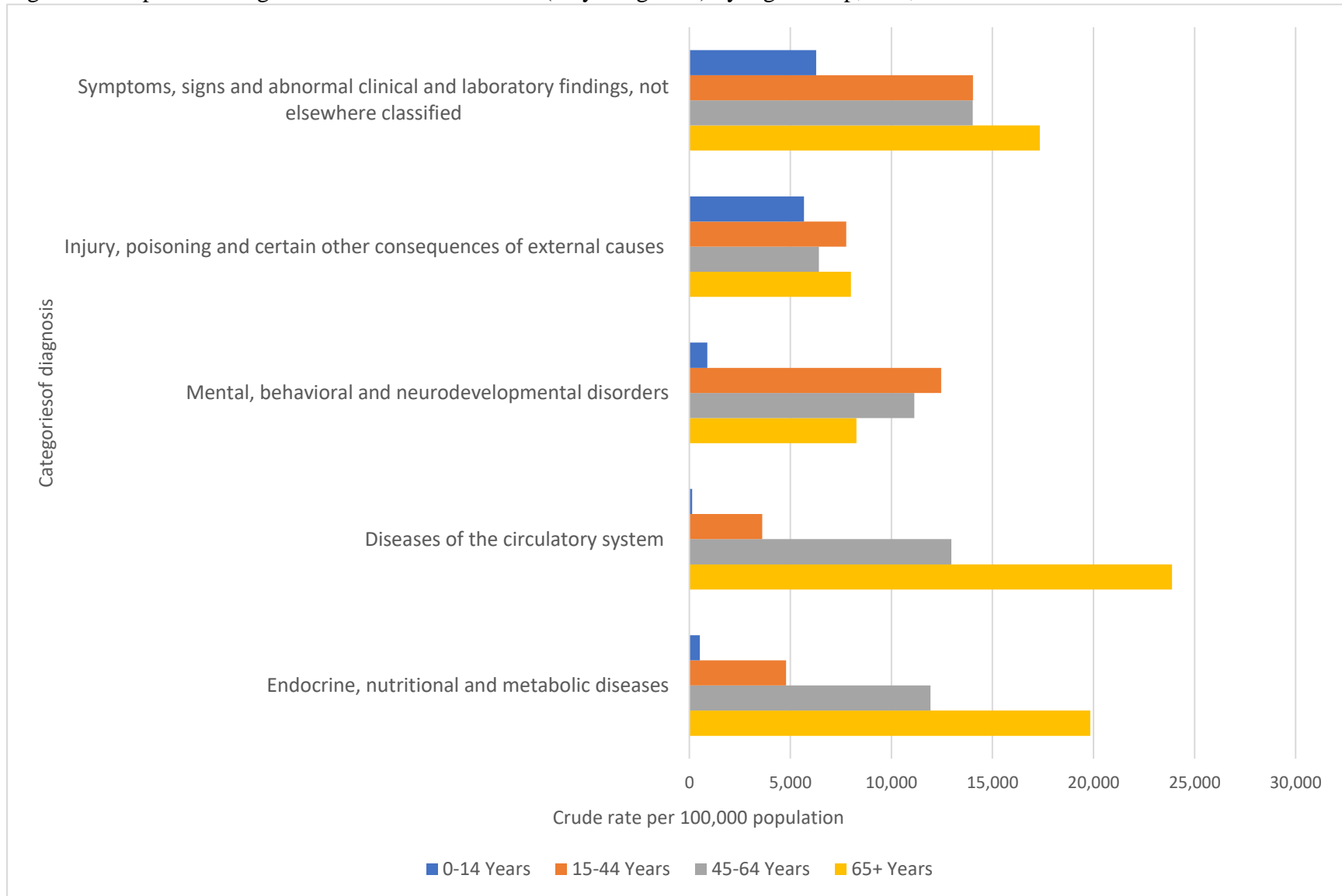


Figure 22. Top Five Categories of Rates of ED Visits (Principal Diagnosis) by Region, NM, 2020

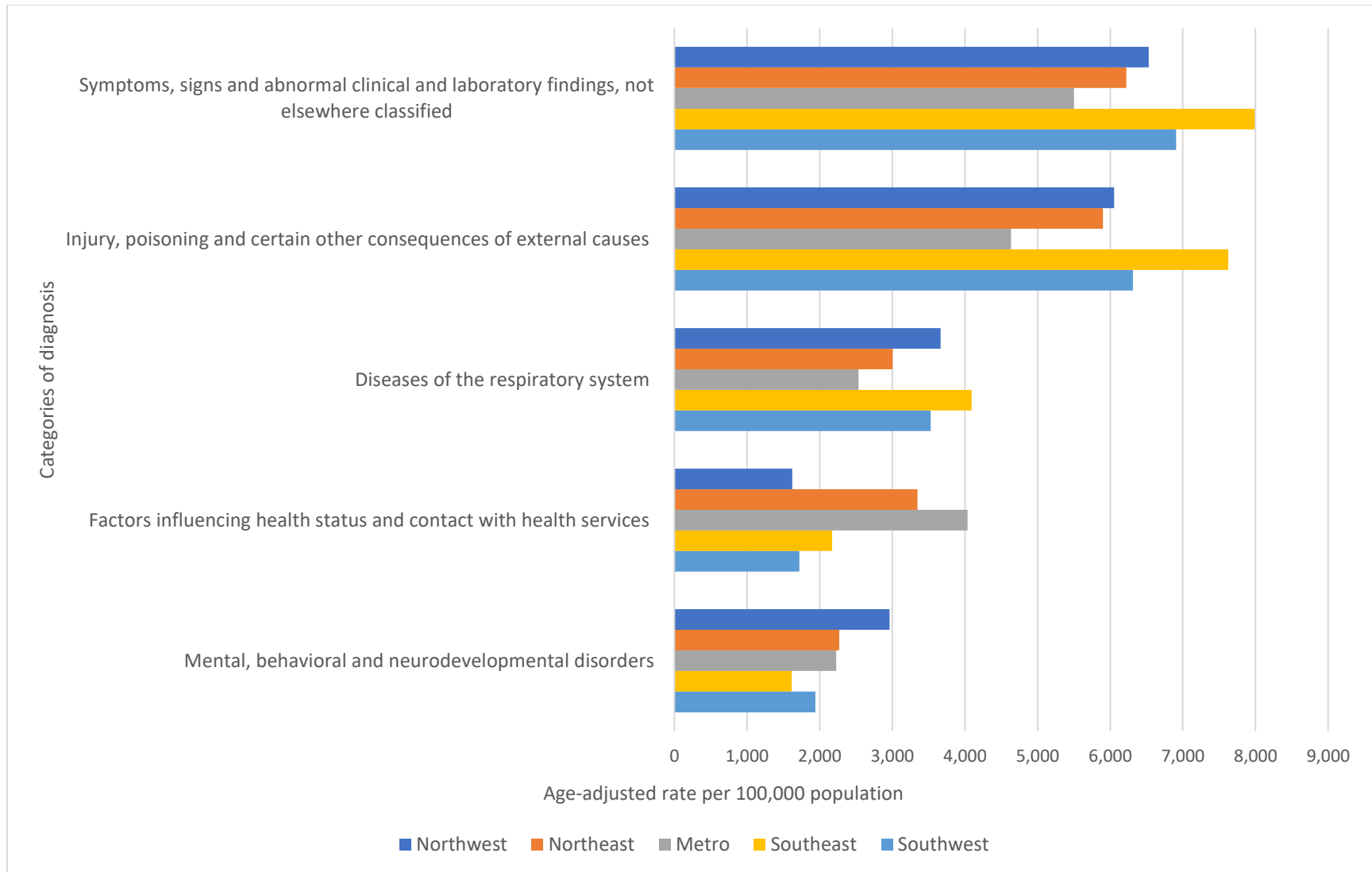
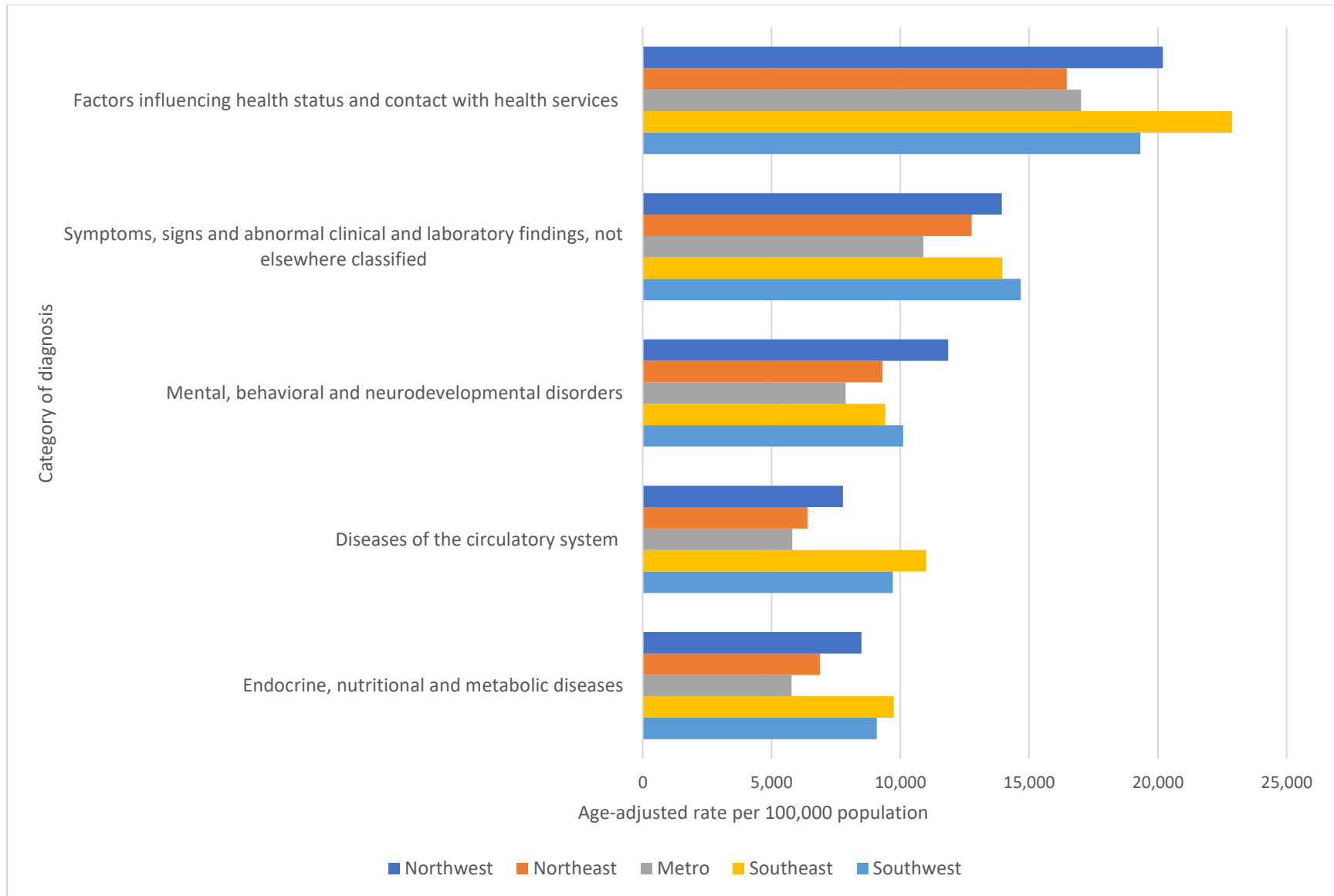


Figure 23. Top Five Categories of Rates of ED Visits (Any Diagnosis) by Region, NM, 2020



# ED Visits by Disposition

Figure 24. Number of ED Visits by Disposition Status and Age Group, NM, 2020

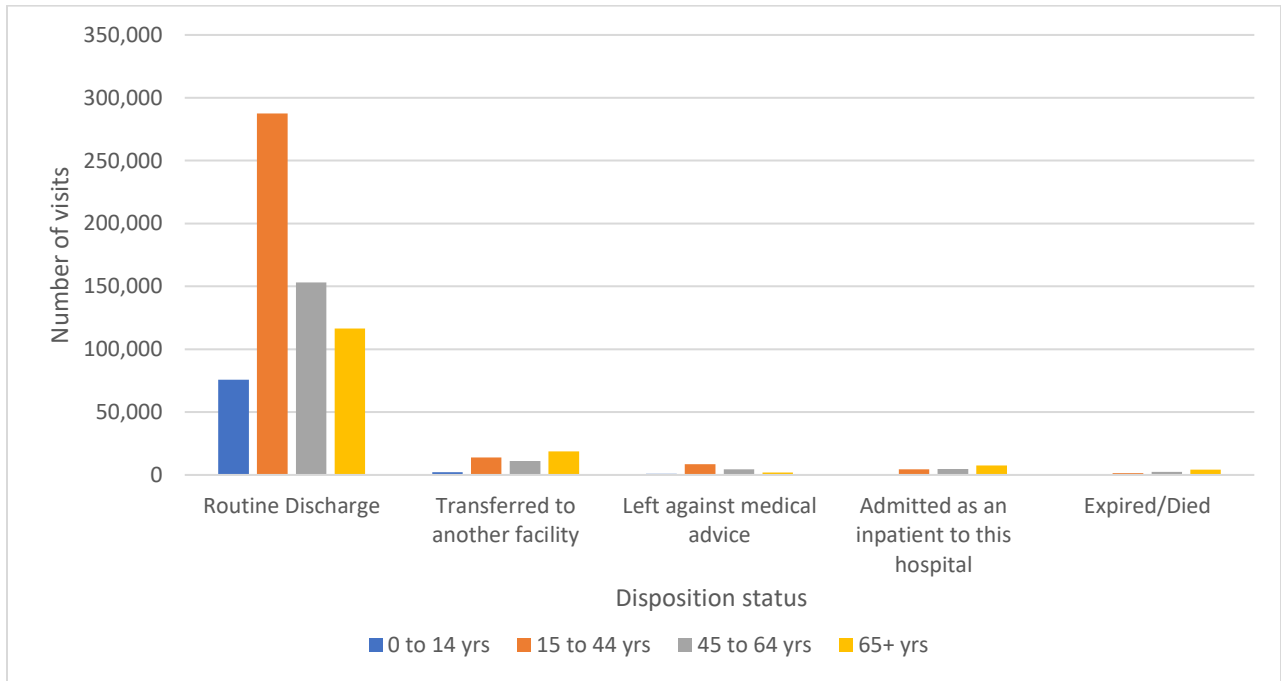


Figure 25. Rates of ED Visits by Disposition Status and Sex, NM, 2020

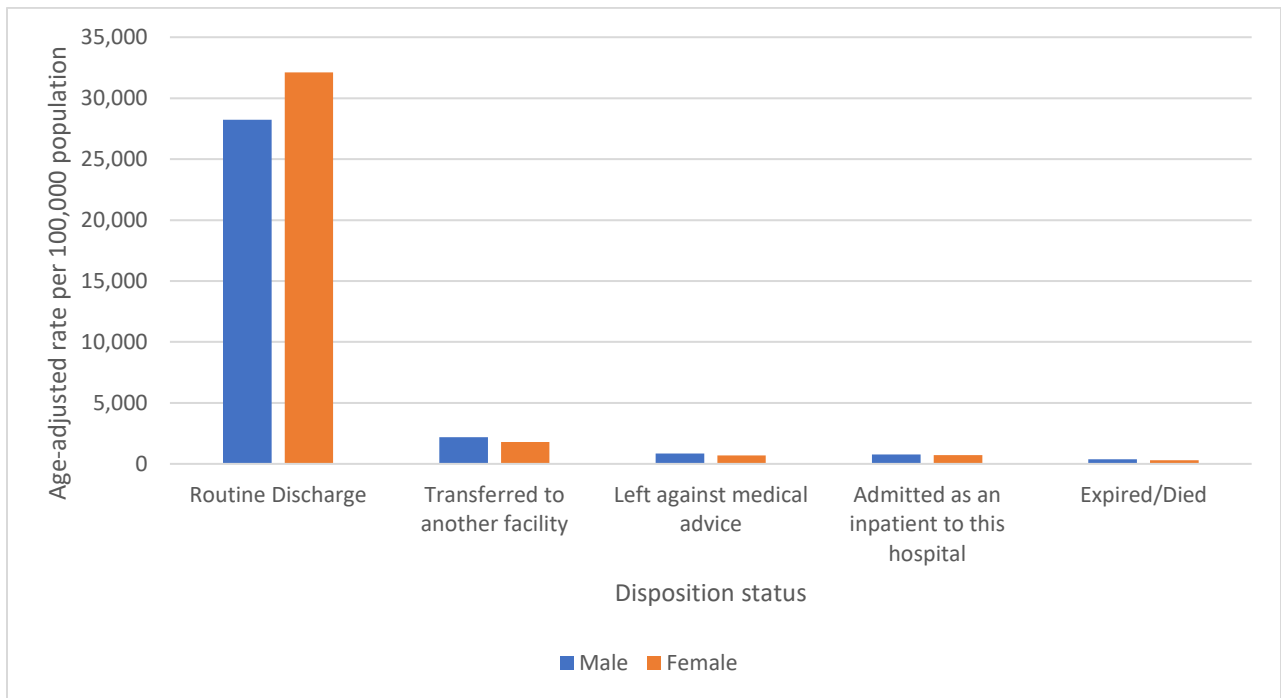


Figure 26. Rates of ED Visits by Disposition Status and Region, NM, 2020

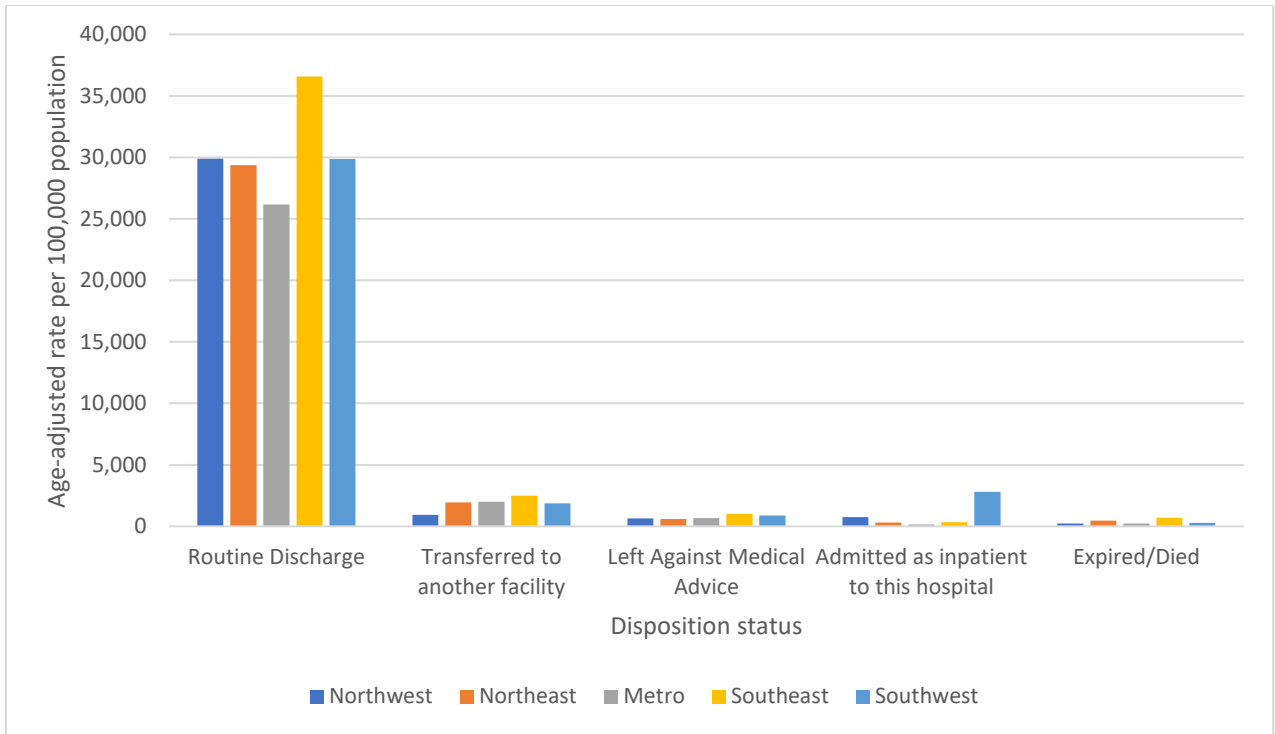
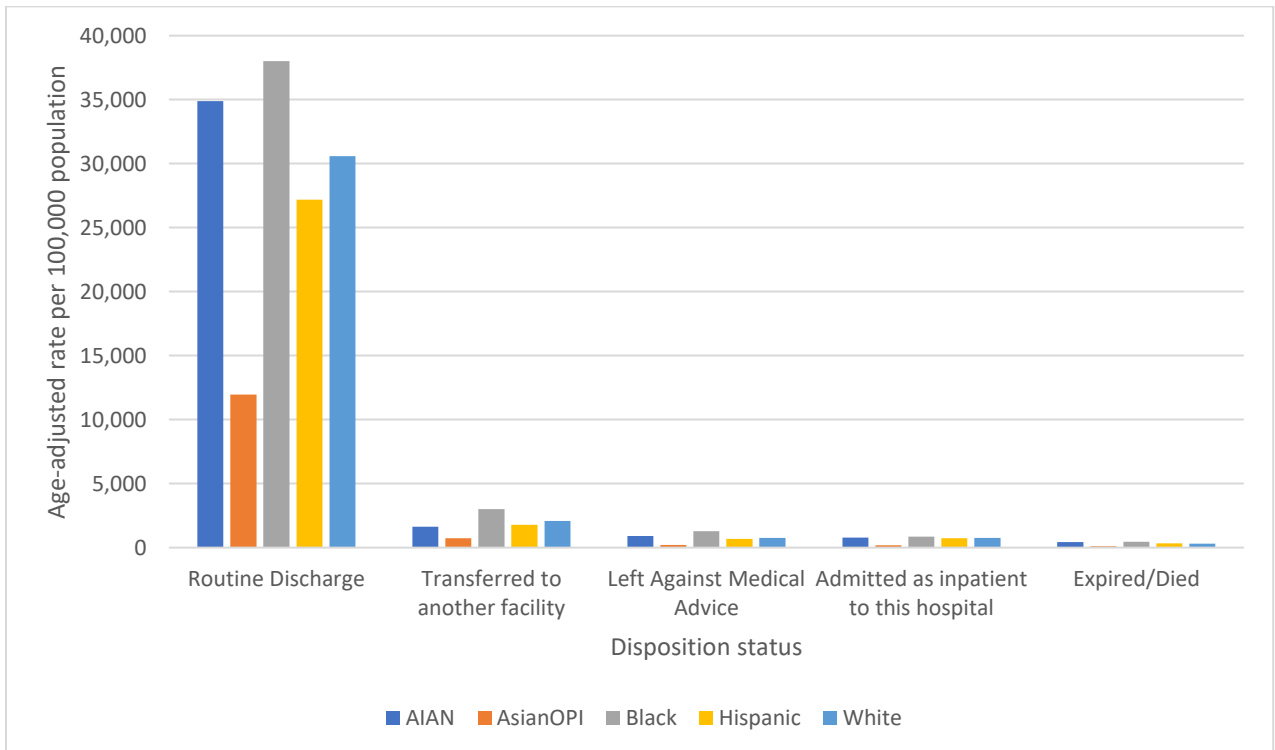


Figure 27. Rates of ED Visits by Disposition Status and Race Ethnicity, NM, 2020





## Infectious Disease

Figure 28. Rates of COVID-19 ED Visits by Age Group and Sex, NM, 2020

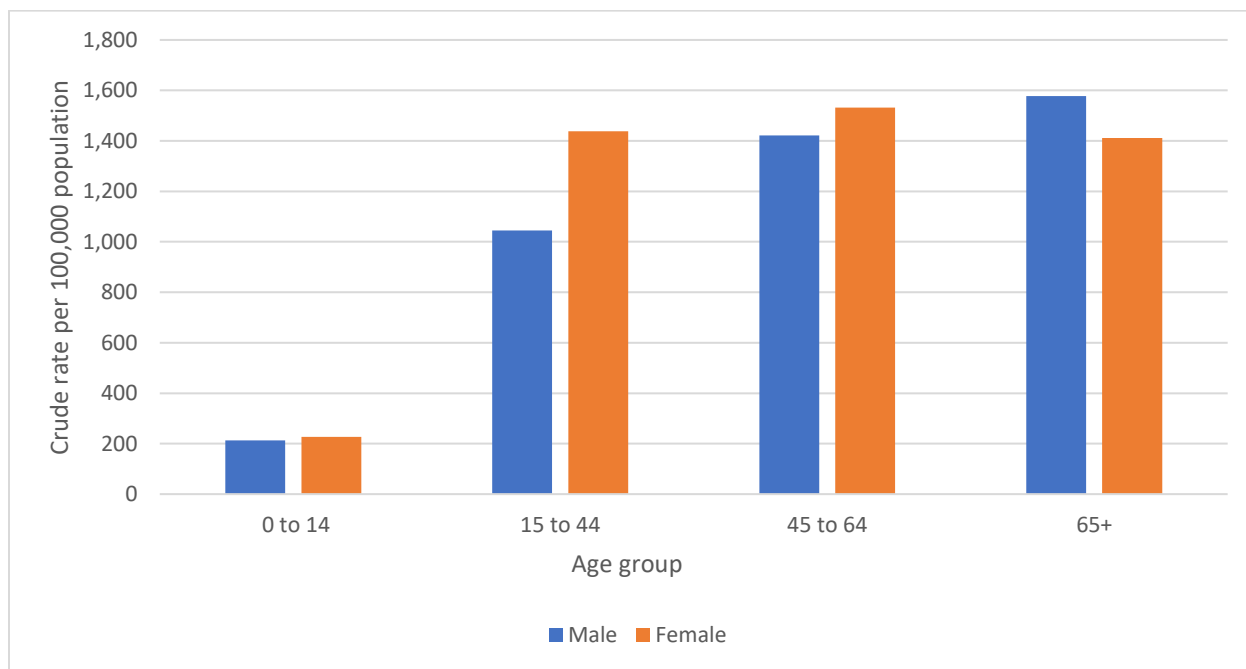
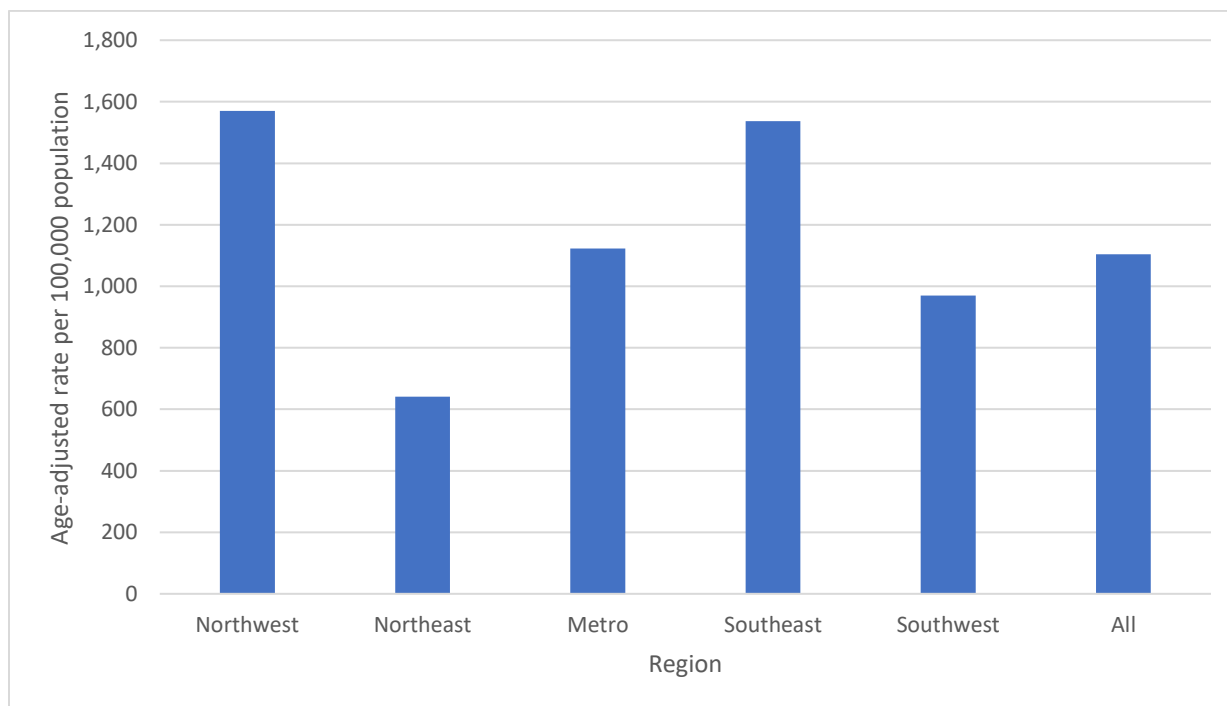


Figure 29. Rates of COVID-19 ED Visits by Region, NM, 2020



Note: Because COVID-19 emerged in 2020, previous years are not provided for comparison

Figure 30. Rates of Hepatitis C ED Visits by Age Group and Sex, NM, 2020

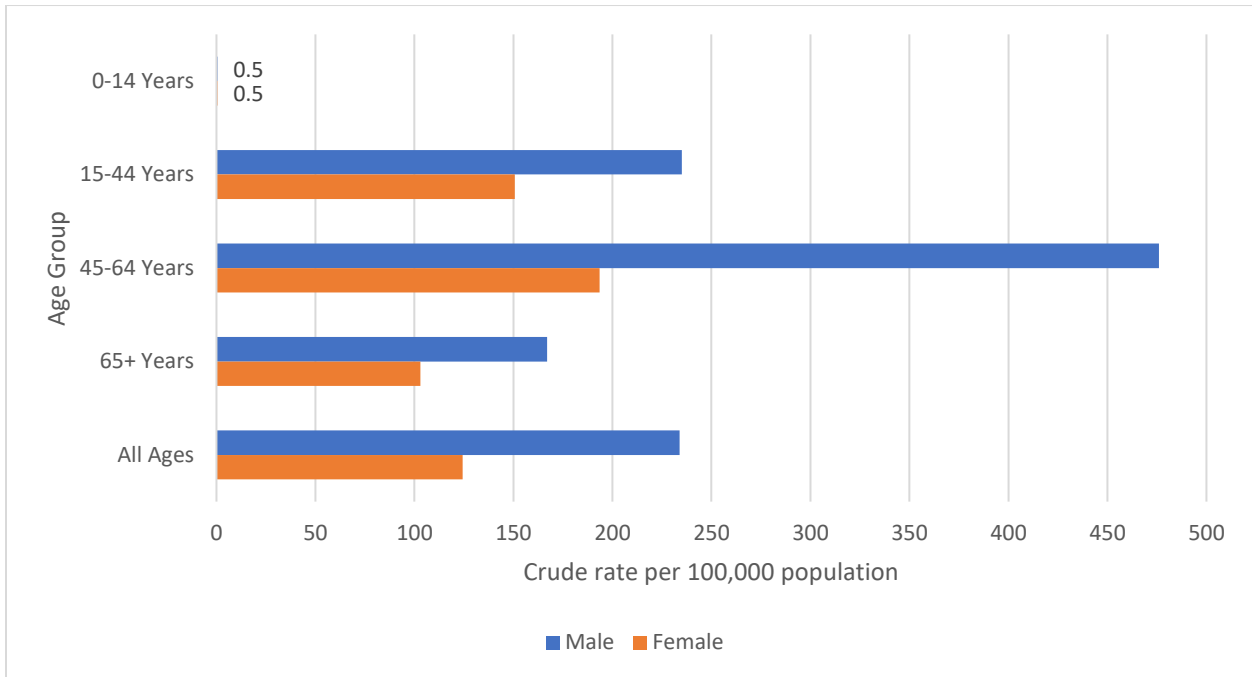
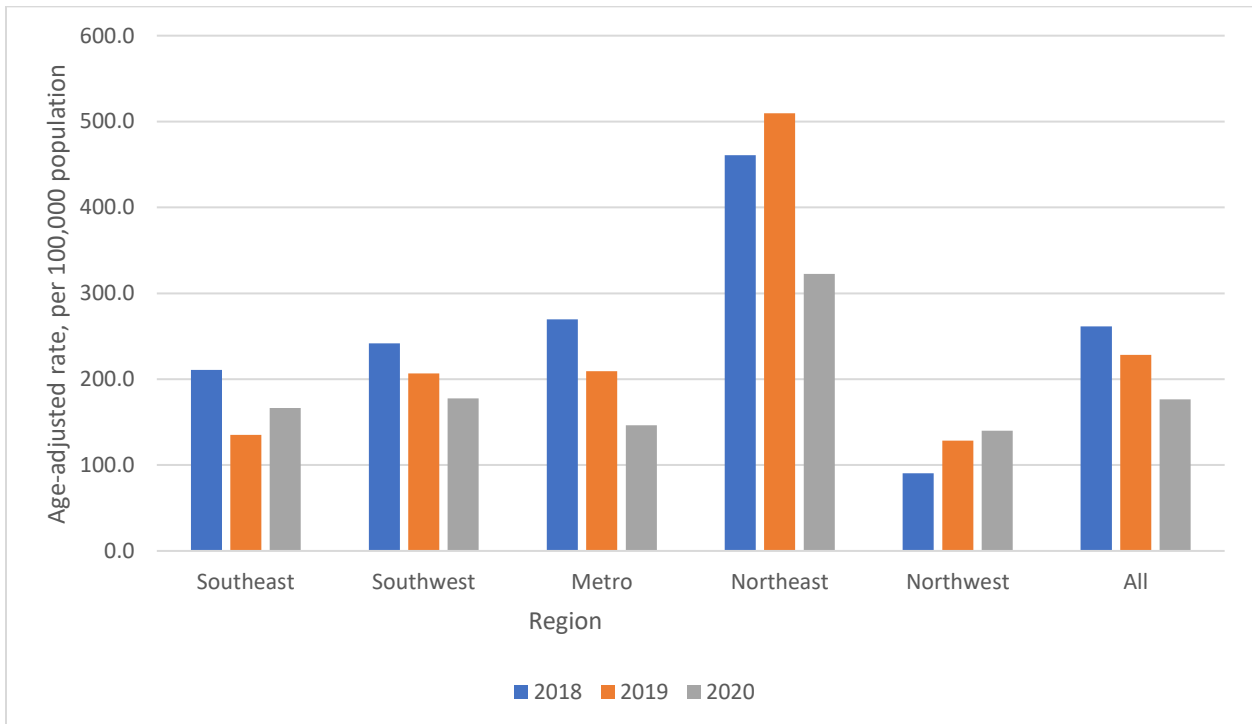


Figure 31. Rates of Hepatitis C ED Visits by Health Region and Year, NM, 2020



# Chronic Disease & Environmental Health Related Visits – Asthma

Figure 32. Rates of Asthma ED Visits by Age Group and Sex, NM, 2020

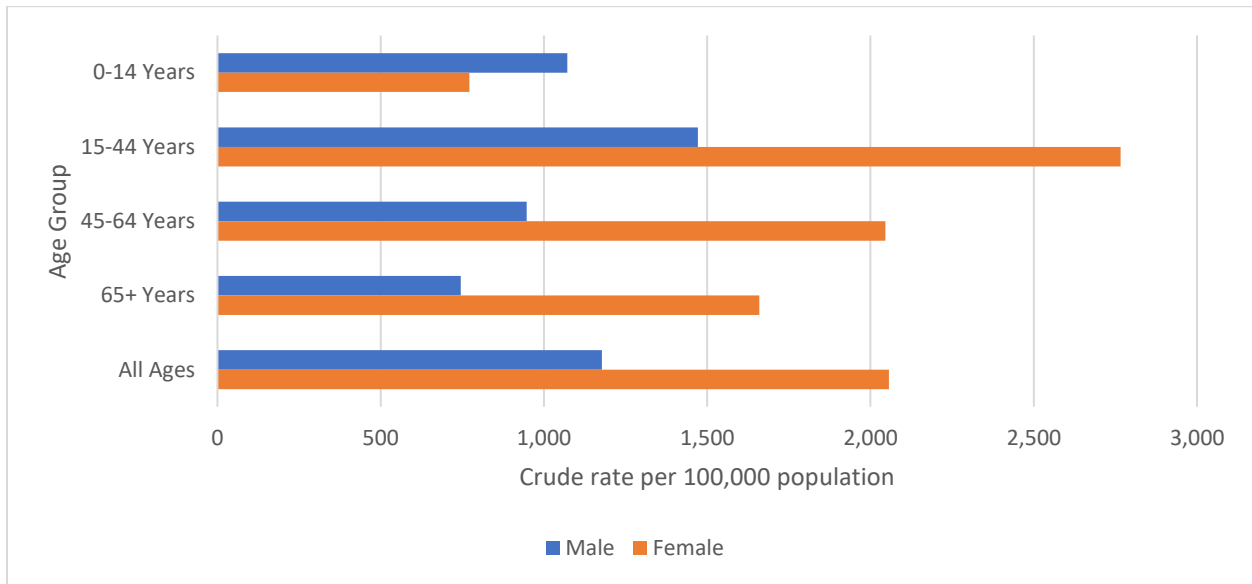
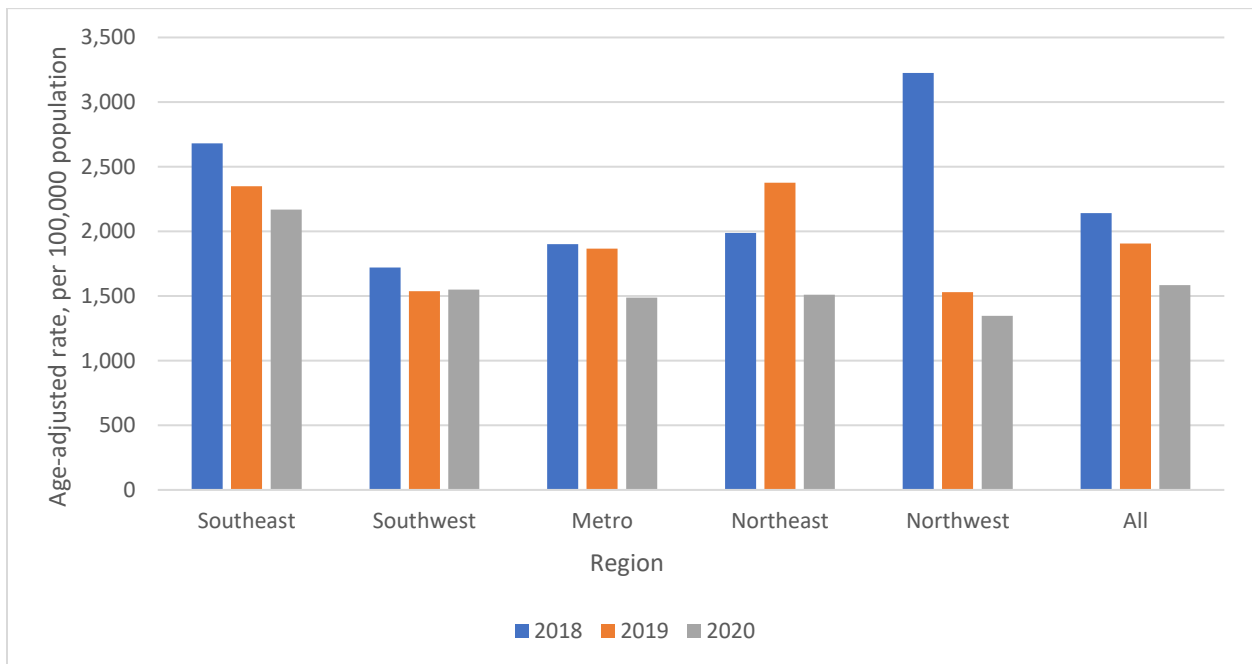


Figure 33. Rates of Asthma by ED Visits Health Region, NM, 2018-2020



# Injury

Figure 34. Rates of Opioid Overdose ED Visits by Age Group and Sex, NM, 2020

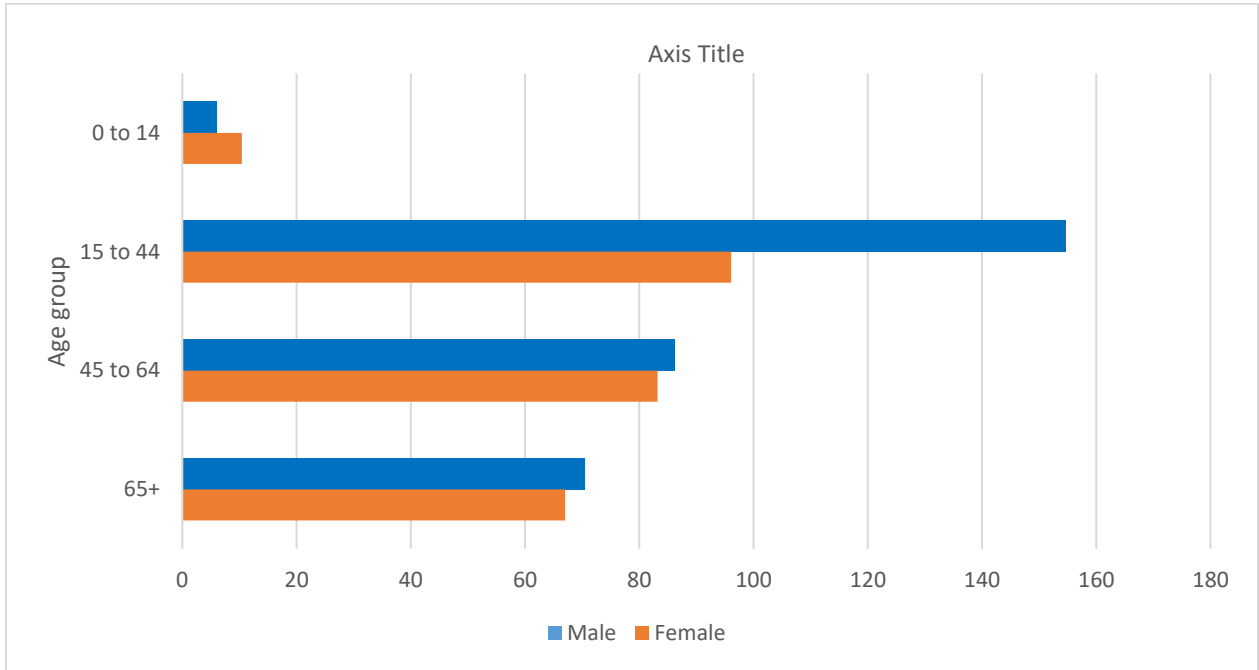


Figure 35. Rates of Opioid Overdose ED Visits by Health Region, NM, 2018-2020

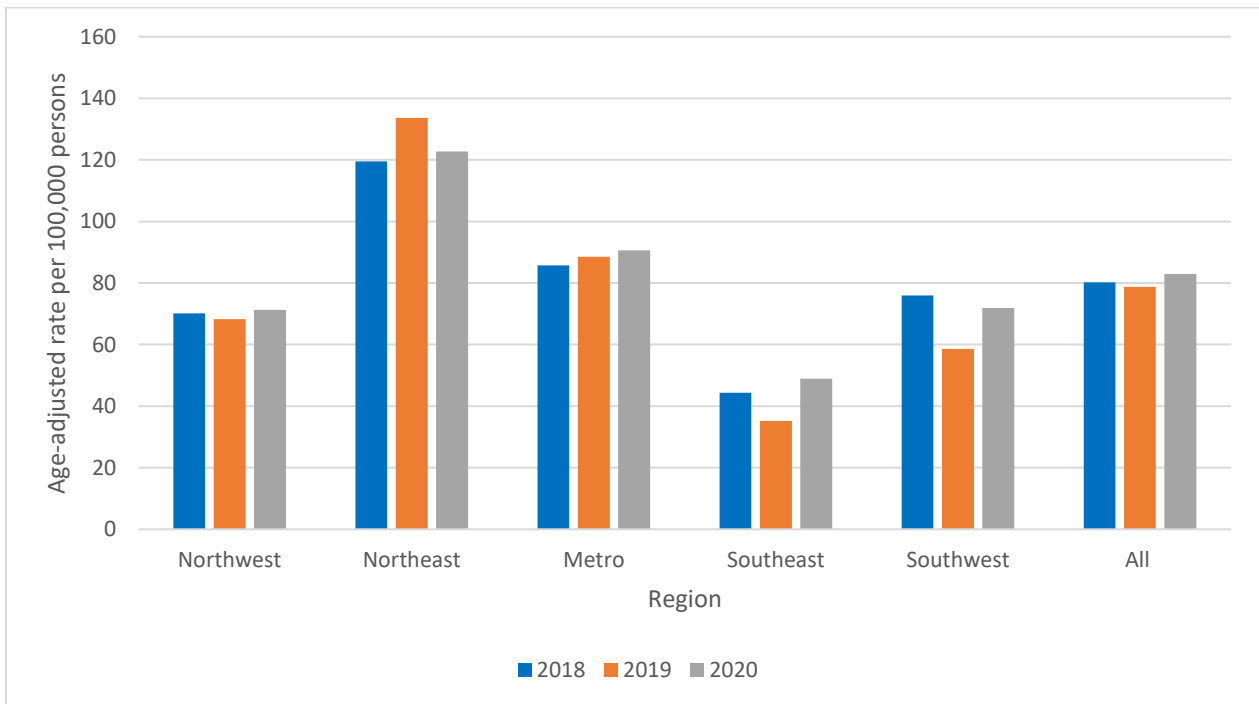
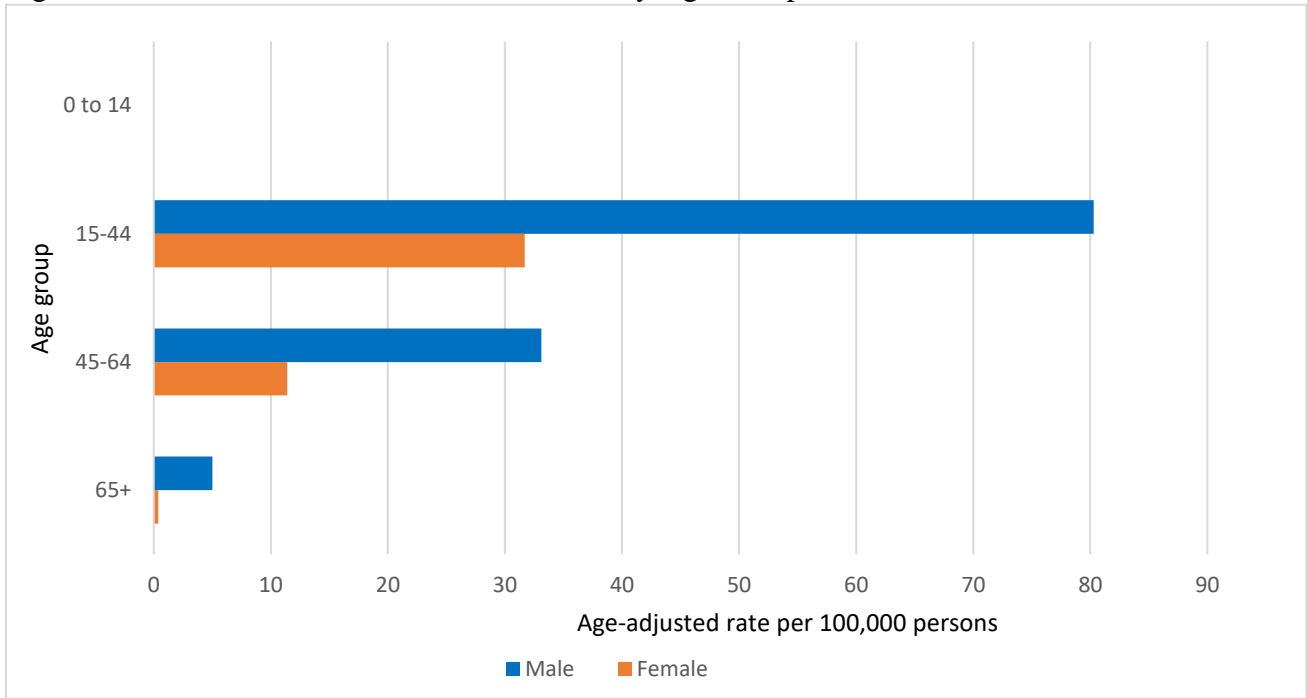


Figure 36. Rates of Heroin Overdose ED Visits by Age Group and Sex, NM, 2020



Note: there were no heroin overdose visits observed in the 0-14 age group in 2020

Figure 37. Rates of Heroin Overdose ED Visits by Health Region, NM, 2018-2020

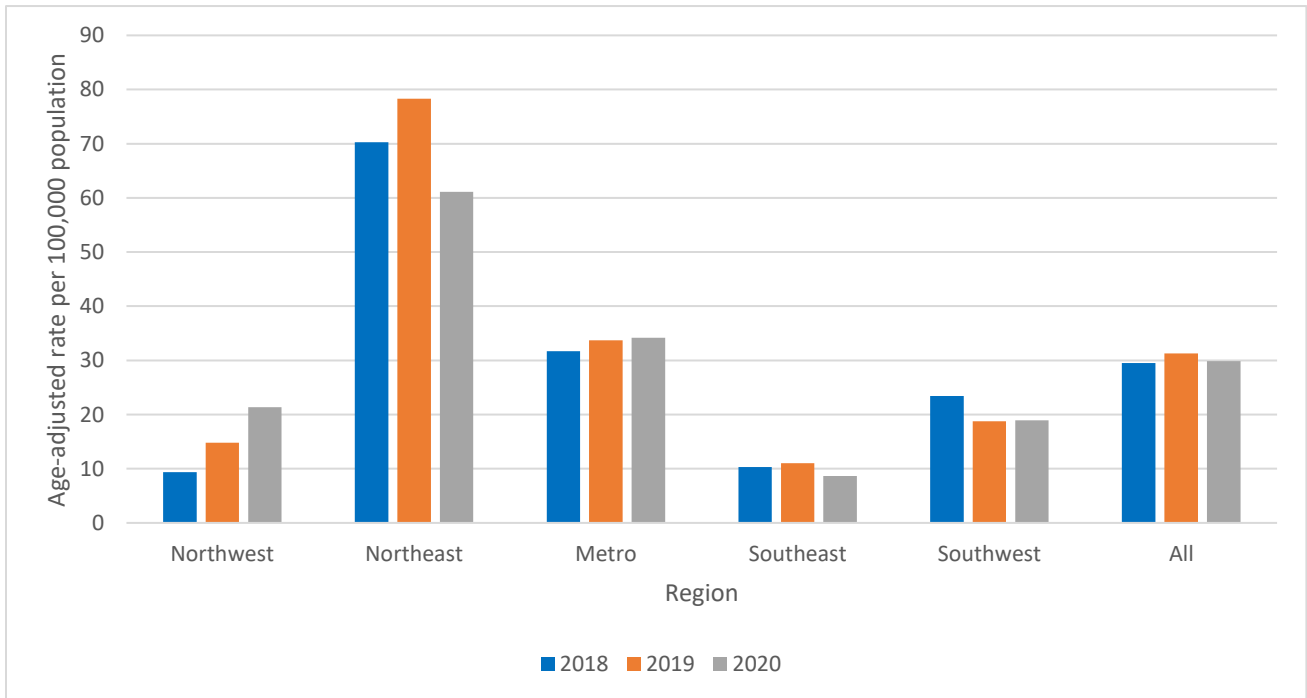


Figure 38. Rates of Fall Injury ED Visits by Age Group and Sex, NM, 2020

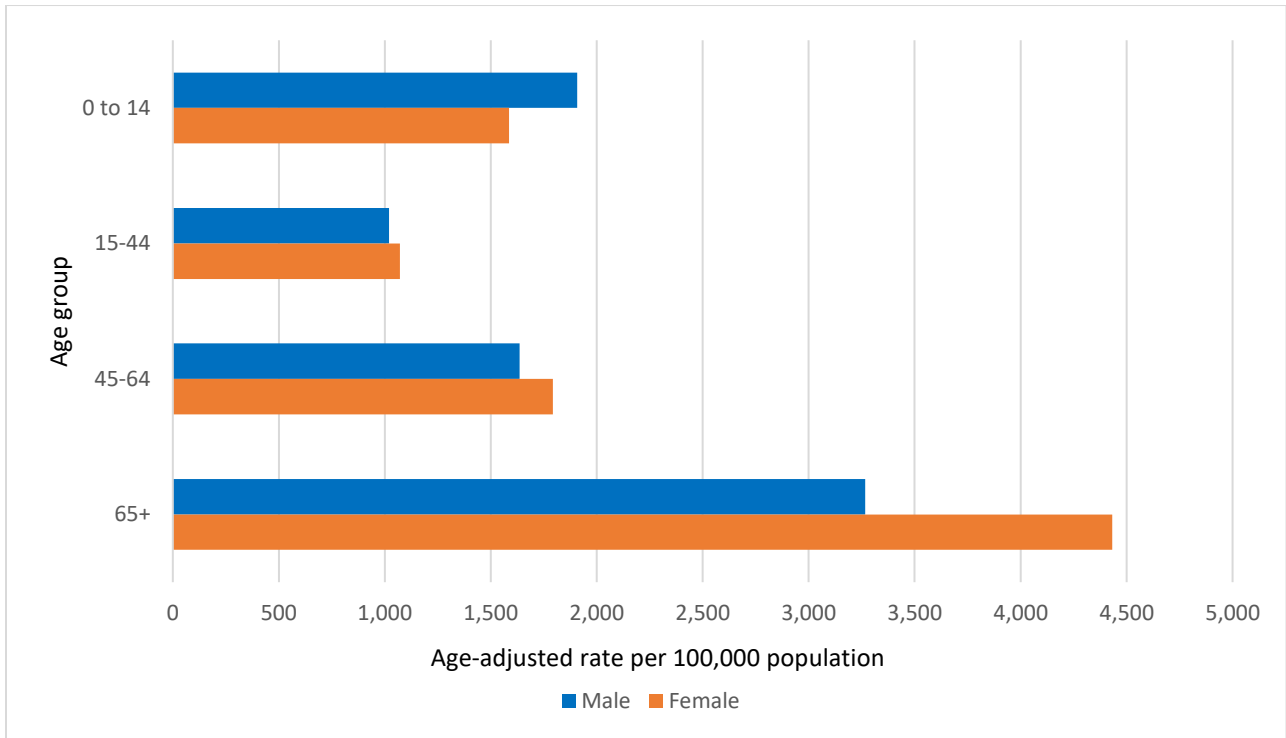


Figure 39. Rates of Fall Injury ED Visits by Health Region, NM, 2018-2020

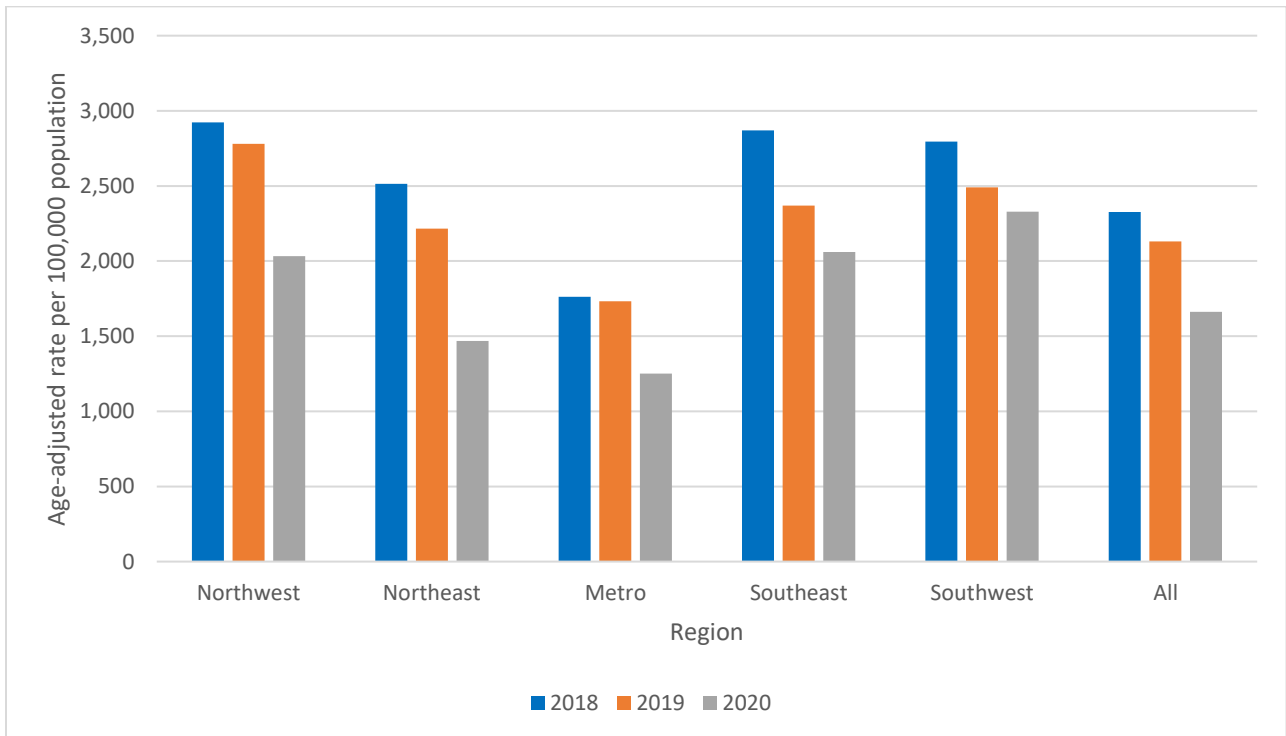


Figure 40. Rates of Motor Vehicle Accident ED Visits by Age Group and Sex, NM, 2020

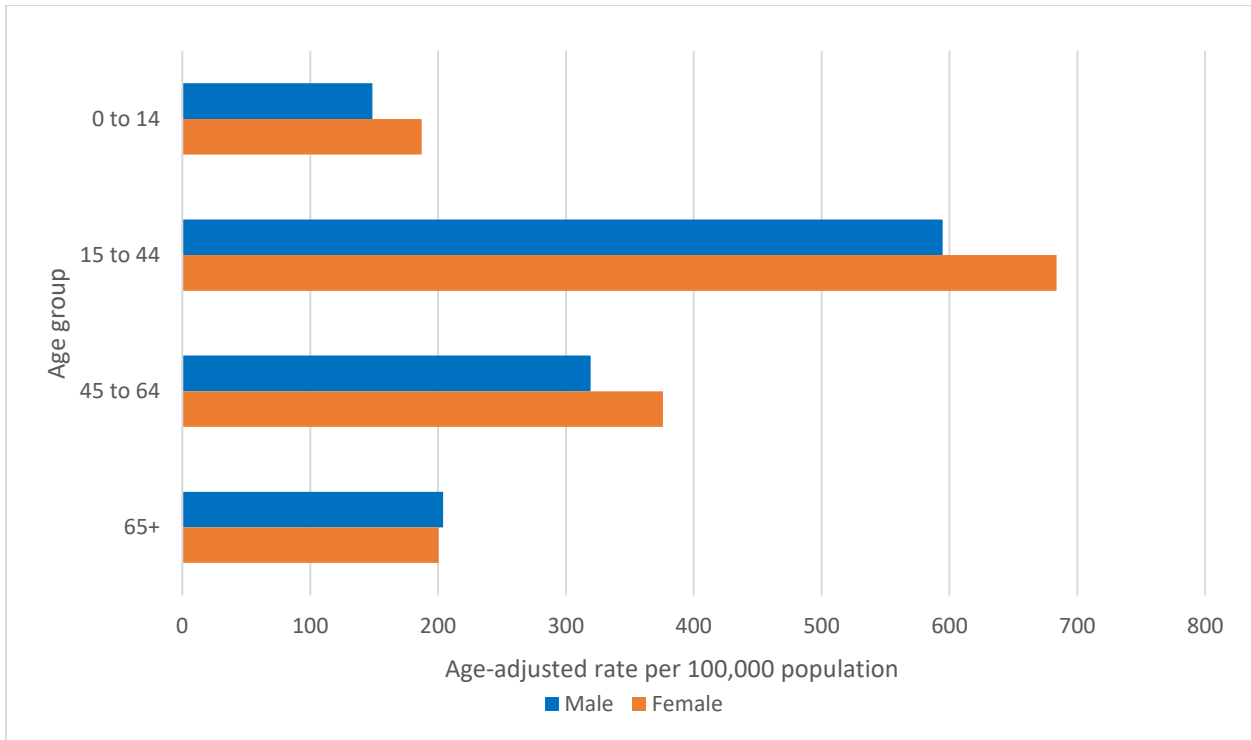
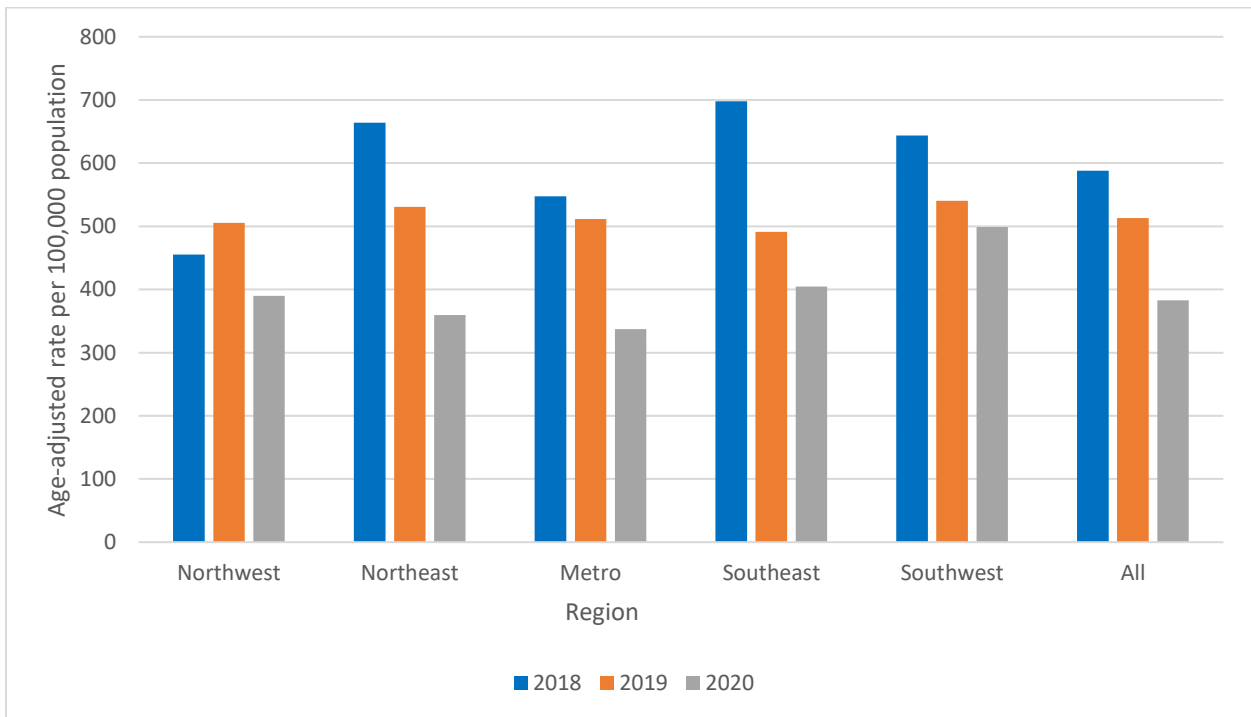


Figure 41. Rates of Motor Vehicle Accident ED Visits by Health Region, NM, 2018-2020



## **Appendix:**

### Condition-Specific ICD-10 Case Definitions

Infectious Disease (Hepatitis C)

ICD-10-CM: B17.10, B17.11, B18.2, B19.20, B19.21

COVID-19:

U07.1 (COVID-19), J12.82 (Pneumonia due to coronavirus disease 2019)

Chronic Disease & Environmental Health Related Visits (Asthma)

ICD-10-CM: J45

Injury (Opioid Overdose)

ICD-10-CM: T40.0X [1-4], T40.1X [1-4], T40.2X [1-4], T40.3X [1-4], T40.4X [1-4]

Injury (Heroin Overdose)

ICD-10-CM: T40.1X [1-4]

Injury (Falls)

ICD-10-CM: W00-W19

Injury (Motor Vehicle Accidents)

ICD-10-CM: V40-V59