

2021 New Mexico Emergency Department Annual Report

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



2021 New Mexico Emergency Department Data Annual Report

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Executive Summary

The Emergency Department (ED) is a critical healthcare setting that is primarily used for treating life-threatening conditions. Emergency department data is generated when a patient is admitted to the emergency department and is treated but not admitted to the hospital. Despite its primary function, many people seek care in the ED setting for less acute conditions as well. This annual report is based on data generated from the ED database for visits during the 2021 calendar year. ED data prepared in this report provides an illustration to better understand New Mexico's healthcare needs, patterns of ED utilization and the burden of injury and illness throughout the state for 2021 and earlier.

The New Mexico Department of Health (NMDOH) is responsible for collecting, using, analyzing, and maintaining the data in the ED database. The emergency department diagnoses contained in the database were coded using the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM). Facilities with emergency departments in the state are annually required to report emergency department data to NMDOH. In contrast, federal facilities are not required to report ED data to NMDOH. Therefore, data from Indian Health Service (IHS) facilities and the Veterans Affairs (VA) Hospital are not included.

Furthermore, this report presents overall New Mexico ED visit numbers and rates by age, sex, race/ethnicity, and region. In 2021, 38 non-federal emergency departments reported emergency department data to the NMDOH. For this report, a total of 774,124 emergency department visits for New Mexico were recorded. As part of the process for enhancing the quality of the data, exclusion criteria are applied to the data, which resulted in 743,832 ED visit records being utilized for analysis and reporting. The number of emergency department visits for 2021 is a noticeable increase from 2020 at 704,467 ED visits.

Of the 38 reporting facilities, University of New Mexico Hospitals (Sandoval Regional and University Hospital) had the highest number of ED visits, with 75,363 visits representing 10.13% of the total ED visits volume for the year in the State of New Mexico. Guadalupe County Hospital had the lowest number of ED visits, with 2,126 visits representing 0.29% of the total ED visits for the year. Additionally, 53.0% of the visits were among females and 47.0% among males. About 22.2% of all visits occurred among residents aged 65 years and older. The overall ED visit rate in 2021 was 34,851.3 visits per 100,000 population, with the Southeast region exhibiting the highest rate of ED visits in 2021 (46,290.4 visits per 100,000 population). There was an increase in the number of ED visits in 2021 compared to 2020 but still fewer visits than in 2019.

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). Since 2010, at the beginning of each year, ED data have been requested from all non-federal emergency departments in New Mexico.

In this report, ED visit rates were calculated using the New Mexico 2021 population estimates as determined by the NM Population Estimates, Geospatial and Population Studies (GPS) Program at the University of New Mexico (UNM) (<https://gps.unm.edu/>).

Every year, the data are verified by each hospital and is submitted to the NMDOH. The NMDOH then conducts its own data cleaning, including the application of exclusion criteria. In addition to other exclusion criteria, this report does not include ED visits of patients with an out of state home address (ZIP code), NM residents who went to ED facilities outside the state of NM, nor visits to IHS or VA hospitals. Additionally, some records were omitted from the data due to missing information. As indicated in Table 1 below, records with incomplete or unknown ZIP codes, unknown sex, unknown age, and/or missing primary diagnosis codes were excluded.

Table 1. Number of Discharges, New Mexico, 2021

Total Records Collected	774,124
Record Exclusion* for 2021 ED	30,292
<i>Out-of-State or Unknown ZIP Code</i>	28,466
<i>Missing/Invalid Principal Diagnosis Code</i>	1,008
<i>Unknown Sex</i>	112
<i>Unknown Age</i>	1,078
Records Remaining (Total)	743,832

*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 <https://www.cdc.gov/nchs/icd/icd-10-cm.htm>.

Rate Calculations: All rates presented are per 100,000 population. Crude rates (specific within each age group) and age-adjusted rates are provided. Rates were age-adjusted to the 2000 U.S. standard population, to allow for comparison between years.

(<https://ibis.doh.nm.gov/resource/AARate.html>;
<https://www.cdc.gov/nchs/data/statnt/statnt20.pdf>).

Limitations: Limitations to the data include: 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; ED visits by NM residents to out-of-state hospitals are not included; Mimbres Memorial Hospital will not include data for January, and Cibola General Hospital did not submit data for half of January; the payer type variable was coded inconsistently by four facilities (Taos Holy Cross Hospital, Union County General Hospital, Mimbres Memorial Hospital, and Nor Lea Hospital), leading to an artificial inflation of the “self-pay” and “other” categories.

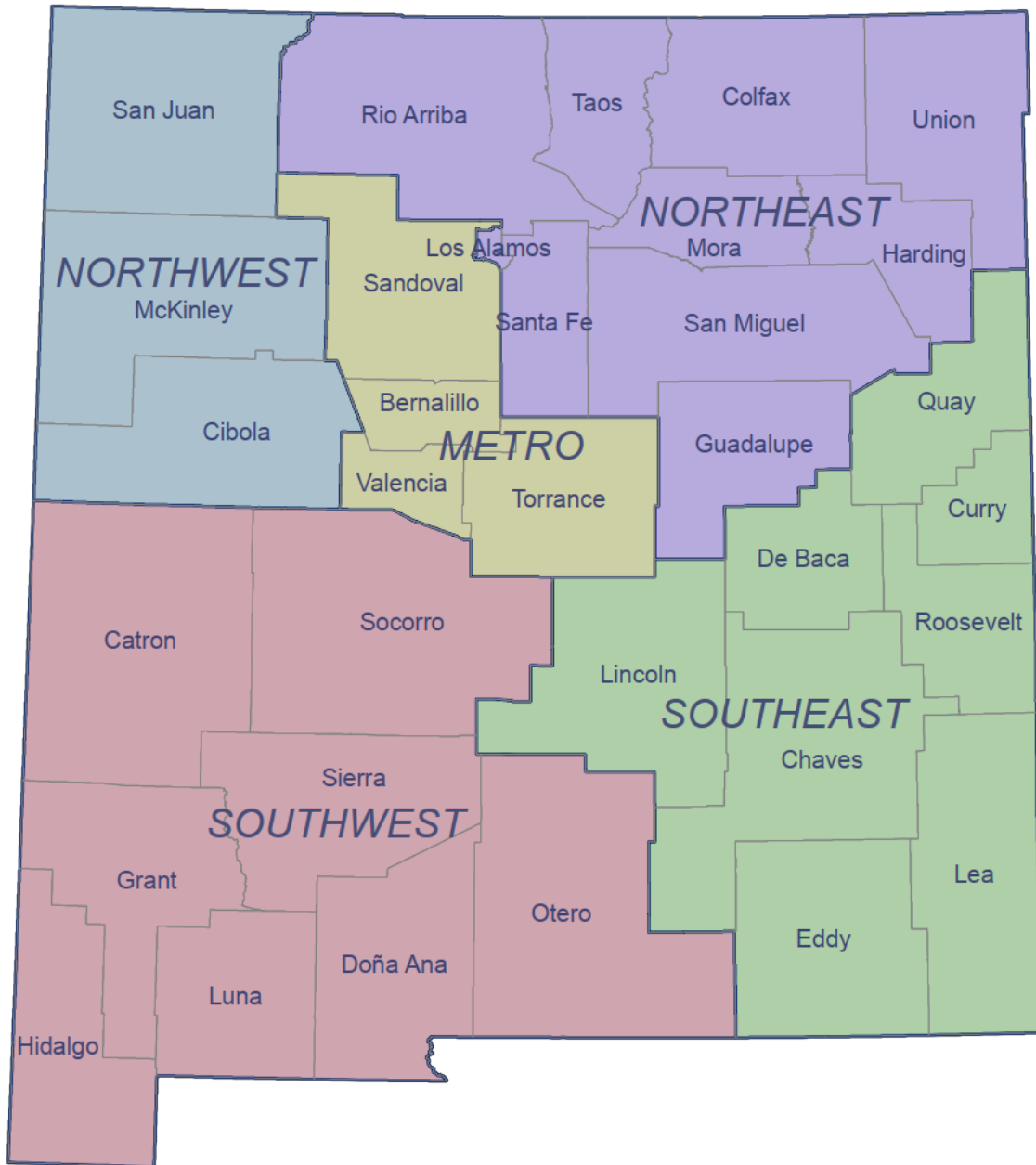
Diagnosis Categories: Each ED visit record has only one principal diagnosis code and up to 44 subsequent diagnosis codes. The count under "Principal Diagnosis" in this report is mutually exclusive from each subsequent diagnosis category (see Table 4). “All Diagnoses” includes the principal diagnosis code and all subsequent codes. For counts under “All Diagnoses,” one ED visit is counted once under each of the diagnosis categories. A visit 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_22) 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. In this year’s report, the new code “Codes for special purposes (U00-U85)” diagnosis category was added as a provisional assignment of new diseases of uncertain etiology or emergency use. ICD-10 codes indicative of cases of COVID-19 and post-acute COVID-19 sequelae (commonly known as “Long COVID”) are captured under this category. ICD-10-CM code “U07.1, COVID-19”, may be used for ED visits starting from April 1, 2020.

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, injuries due to motor vehicle accidents, and COVID-19. Refer to the appendix on page 40 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

Diagnosis Categories	Diagnosis Category Description	ICD-10-CM Codes Range
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	Codes for special purposes	U00-U85
DC_21	External causes of morbidity	V00 - Y99
DC_22	Factors influencing health status and contact with health services	Z00 - Z99

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

Key Findings

Demographic Characteristics of Emergency Department Visits (pages 16-18)

- Females had higher rates of ED visits for the 15-44 and 65+ age groups compared to males who had higher rates for the 0-14 and 45-64 age groups.
- The Metro region had the highest number of ED visits, totaling 265,393 visits for 2021. The Northwest region had the lowest, with 78,643 visits (see Figure 1 page 7 for a map of health regions).
- The Southeast region had the highest rate of ED visits with a rate of 46,290.4 visits per 100,000 population. The Southwest region followed, with a rate of 40,617.8 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 50,862.6 per 100,000 population for females and 41,852.7 for males.
- Black/African Americans had the highest overall rate of ED visits with a rate of 42,189.7 visits per 100,000 population (data not shown). This racial/ethnic group also had the highest rate of ED visits for females (44,016.4 visits per 100,000 population). American Indians or Alaskan Natives had the highest ED visit rate for males in 2021 39,939.1 visits per 100,000 population).

Emergency Department Visits by Quarter (pages 19-21)

- The overall ED visits in 2021 is 5.6% higher than 2020, with lowest visits in Q1 and highest in Q3.
- The number of ED visits for females is always higher than males in each quarter.
- The 15-44 age group has the highest ED visits in each quarter. In the 4th quarter of 2021, the ED visits for the 0-15 age group shows a slight increase, while visits for the other groups decreased.
- The number of ED visits in Hispanic is highest among all race/ethnicity groups, which has 72,343 in Q1 2021, and 97,527 visits in Q3 2021.

Emergency Department Visits by Payer Type (pages 22-23)

- Four hospitals had inconsistent coding for the payer type variable, leading to inflation of the “self-pay” and “other” pay type categories (see the limitations section on page 5)
- Medicaid represented the largest payer type for ED visits with 329,694 visits in 2021. This was followed by Medicare (181,317 visits) and private insurance (131,287 visits).
- The Northwest region had the highest rate of Medicaid payers (22,646.5 visits per 100,000 population). The Metro region had the lowest rate of Medicaid payments (14,026.9 visits per 100,000 population).

Emergency Department Visits by Diagnosis Category (pages 24-33)

- For all diagnosis categories, the highest rate fell into the “Factors influencing health status and contact with health services” category (19,869.1 visits per 100,000 population). 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 7,478.0 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 no specific diagnosis was made. This was followed by the category “Injury, poisoning and certain other consequences of external causes,” with a rate of 6,113.7 8 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” (8,379.1 visits per 100,000 population). For males, the highest rate fell into the category “Injury, poisoning and certain other consequences of external causes” (6,620.6 visits per 100,000 population). When looking at “All Diagnosis,” the highest rate of visits fell into the category “Factors influencing health status and contact with health services” for both sexes (21,566.9. visits per 100,000 population for females and 18,253.5 visits for males). This was followed by “Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified” (15,097.0 visits per 100,000 population for females and 12,521.0 visits for males).
- For “All Diagnosis” by age group, “Factors influencing health status and contact with health services” had the highest rate in the 65 years and over age group, with a rate of 28,928.1 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 9,420.1 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 the principal diagnosis at 8,412.9 visits per 100,00 people.

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

- Routine discharges accounted for 85.0% of total ED visits. There was a higher rate of routine discharges among females than males: 31,951.7 visits per 100,000 population and 27,912.0 visits per 100,000 population, respectively.
- The rate of “left against medical advice” for ED visits in 2021 was 3,173.2 visits per 100,000 population. This disposition was highest for the 15-44 age group (11,600 visits) and the rate was highest in the Southeast region (1,357.3 per 100,000 population) and Southwest region (1,354.2 visits per 100,000 population). Additionally, males left against medical advice at a higher rate than females (1,133.9 visits per 100,000 population compared to 983.9 visits per 100,000 population).
- The number of dispositions coded as “expired” was highest in the 65 and over age group (3,489 visits).

- By region, the rate of “expired” patient disposition was lowest in the Metro region (142.3 visits per 100,000 population) and highest in the Southeast region (7734.7 visits per 100,000 population) in 2021.

Infectious Disease- COVID-19 (page 36)

- In 2021, there were 38,459 ED visits for COVID-19 (data not shown).
- Males had the highest rate of COVID-19 ED visits in all age groups except for the 15-44 age group, where women had a rate of 2,114.5 visits per 100,000 (compared to 1,594.0 visits per 100,000 among men aged 15-44). Females overall had a higher rate of COVID-19 visits (1,863.6 per 100,000 population compared to 1,684.5 per 100,000 population among males)
- Across all age groups, the highest rate of COVID-19 ED visits was among males in the 65 and over age group (2,498.5 visits per 100,000 population).
- The rate of COVID-19 ED visits was highest in the Southeast region (3,184.1 visits per 100,000 population), representing a 107.2% increase from last year. This was followed by the Northwest region (2,234.3 visits per 100,00 population).

Infectious Disease – Hepatitis C Virus (page 37)

- There were 2,700 Hepatitis C Virus (HCV) ED visits in 2021 (data not shown).
- Males in the 45-64 age group had a higher ED visit rate for HCV than any other age group (344.7 visits per 100,000 population). Except for the 0-14 age group, males had significantly higher visit rates than females across all the age groups.
- The Northeast region had the highest rate in 2021, at 214.3 visits per 100,000 population. This represented a 33.5% decrease from the previous year in that region, continuing a downward trend from 2019 when the rate was 509.7 per 100,000 population. The Northwest region had the lowest rate, at 96.8 visits per 100,000 population.
- In 2021 overall, the rate of ED visits related to HCV in New Mexico was 124.0 visits per 100,000 population, a 29.7% decrease from 2020 (176.3 visits per 100,000 population) and a 45.7% decrease from 2019 (228.2 visits per 100,000 population).

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

- There were 34,112 ED visits for asthma in 2021 (1,639.8 visits per 100,000 population) (data not shown).
- Except for ages 0-14, females accounted for higher asthma ED visit rates at 2081.5 visits compared to the rate for males in the same age group (1195.0 visits). Females in the 15-44-year-old age group had a higher overall rate than any other age group (2,826.2 visits per 100,000 population).

- In 2021, the rate of ED visits with an asthma diagnosis code was highest in the Southeast region and Southwest region (2,254.4 visits per 100,000 population and 1649.9 visits per 100,000 population, respectively).
- The rate of ED visits related to asthma in New Mexico in 2021 (1,639.8 visits per 100,000 population) was higher than 2020 (1,583.8 visits per 100,000) but lower than 2019 (1,906.7 visits per 100,000 population).

Injury – Opioid Overdose (page 39)

- In 2021 there were 1,797 opioid overdose ED visits (data not shown).
- Males aged 15-44 had the highest rate, at 174.0 visits per 100,000 population.
- For the period of 2019-2021, the Northeast region had the highest rate of opioid overdose ED visits.
- In 2021, the rate of ED visits related to opioids in New Mexico was 86.7 visits per 100,000 population. This is an increase from both 2019 and 2020 (31,3042 visits and 8.3 visits per 100,000 population, respectively).

Injury – Heroin Overdose (page 40)

- In 2021, there were 396 ED visits due to heroin overdose (data not shown).
- Males aged 15-44 had a rate of 52.2 visits per 100,000 population, which was more than double the rate of females in the same age group (19.9 visits per 100,000 population). Males had higher rates than females in any age group.
- The Northeast region has had the highest rate for the past three years, from 2019 to 2021.
- In 2021 overall, the rate of ED visits for heroin overdose was 20.3 visits per 100,000 population, a decrease from 2020.

Injury – Fall Injuries (page 41)

- In 2021, a total of 41,379 ED visits had a diagnosis related to fall injuries (data not shown), or a rate of 1,815.8 visits per 100,000 population.
- Females had higher rates of fall injuries than males. Females 65 years or older had the highest rates, at 4,766.7 visits per 100,000 population.
- The Southwest region had the highest rate of fall injuries for 2021 (2,484.9 visits per 100,000 population), and the Metro region had the lowest rate (1,384.4 visits per 100,000 population). For all five health regions, the rates for 2021 decreased from the previous years.

Injury – Motor Vehicle Accidents (page 42)

- There was a total of 9,132 ED visits for injuries due to motor vehicle accidents in 2021 (data not shown).
- Females in the 15-44 age group had the highest rate at 774.1 visits per 100,000 population. The rate of injuries due to motor vehicle accidents as higher among females across all age groups.
- The Southwest region had the highest rate in 2021, with 548.9 visits per 100,000 population). The Northeast region had the lowest rate, at 374.9 visits per 100,000 population.
- In 2021 overall, the rate of ED visits for injuries due to motor vehicle accidents in New Mexico was 446.7 visits per 100,000 population, showing an increase from 2020 (382.7 visits per 100,000 population).

Table 3. Number of ED Visits and Percentage of Total Visits by Facility, NM, 2021

Hospital	Frequency	Percent
Alta Vista Regional Hospital	11,907	1.60
Artesia General Hospital	10,443	1.40
Carlsbad Medical Center	18,011	2.42
Christus St. Vincent Medical Center	32,396	4.36
Cibola General Hospital	9,620	1.29
Covenant Health Hobbs Hospital	16,697	2.24
Dan C. Trigg Memorial Hospital	4,134	0.56
Eastern New Mexico Medical Center	24,204	3.25
Gerald Champion Regional Medical Center	26,976	3.63
Gila Regional Medical Center	13,472	1.81
Guadalupe County Hospital	2,126	0.29
Lincoln County Medical Center	12,483	1.68
Los Alamos Medical Center	7,088	0.95
Lovelace Health Systems, Downtown	32,376	4.35
Lovelace Roswell Regional Hospital	11,904	1.60
Lovelace Westside Hospital	20,271	2.73
Lovelace Women’s Hospital	25,062	3.37
Memorial Medical Center	34,776	4.68
Mimbres Memorial Hospital	12,087	1.62
Miners Colfax Medical Center	4,114	0.55
Mountain View Regional Medical Center	45,637	6.14
Nor Lea General Hospital	10,392	1.40
Presbyterian Hospital Main Location	54,878	7.38
Presbyterian Espanola Hospital	21,607	2.90
Presbyterian Kaseman Hospital	36,042	4.85

Presbyterian Plains Regional Medical Center	24,984	3.36
Presbyterian Rust Medical Center	31,750	4.27
Presbyterian Santa Fe Medical Center	1,545	0.21
Rehoboth McKinley Christian Hospital	14,697	1.98
Roosevelt General Hospital	6,205	0.83
San Juan Regional Medical Center	49,690	6.68
Sierra Vista Hospital	6,783	0.91
Socorro General Hospital	8,750	1.18
Taos Health System: Holy Cross Hospital	11,002	1.48
Three Crosses Regional Hospital	2,657	0.36
Union County General Hospital	11,703	1.57
University of New Mexico Hospitals	57,703	7.76
UNM Sandoval Regional Medical Center	17,660	2.37
TOTAL	743,832	100

Demographic Characteristics of ED Visits

Figure 2. Number of ED Visits by Age and Sex, NM, 2021

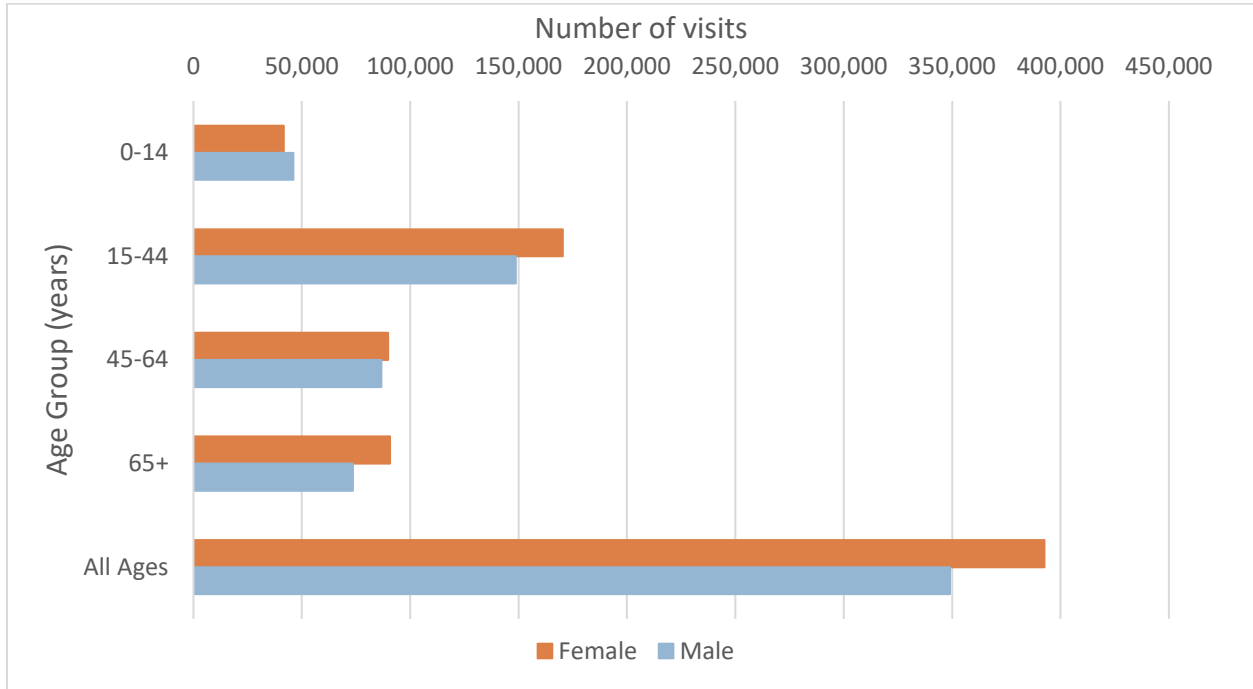


Figure 3. Rates of ED Visits by Age Group and Sex, NM, 2021

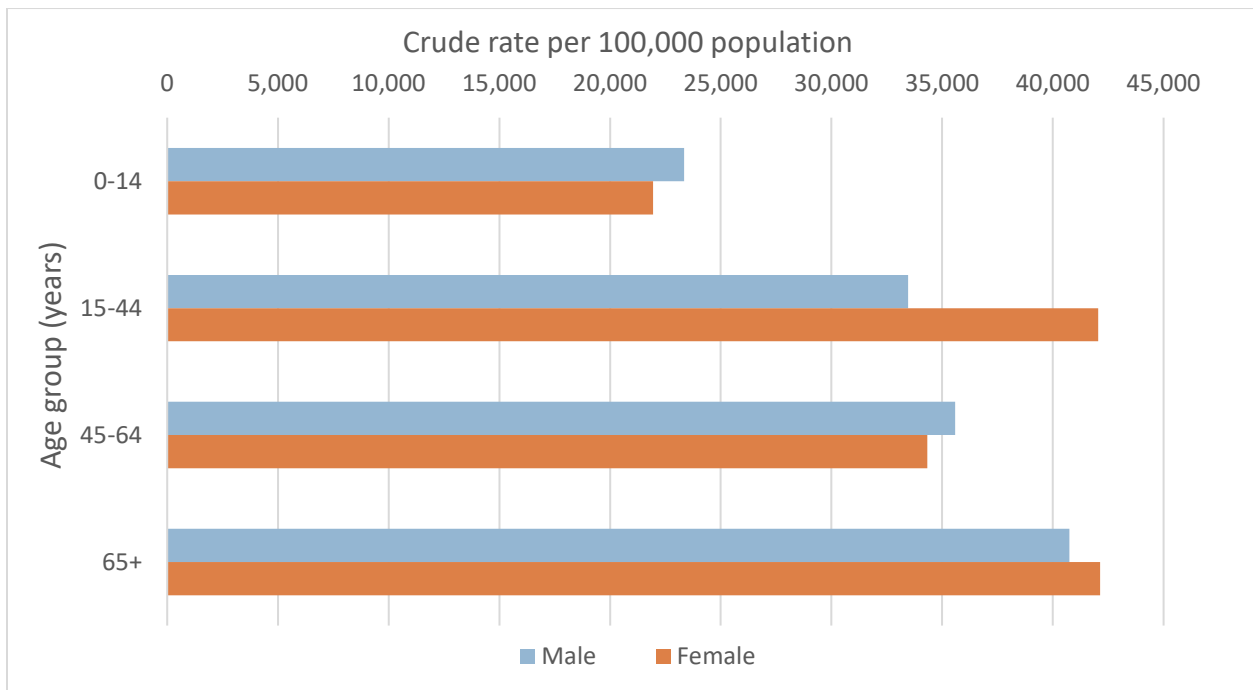


Figure 4. Number of ED Visits by Health Region and Sex, NM, 2021

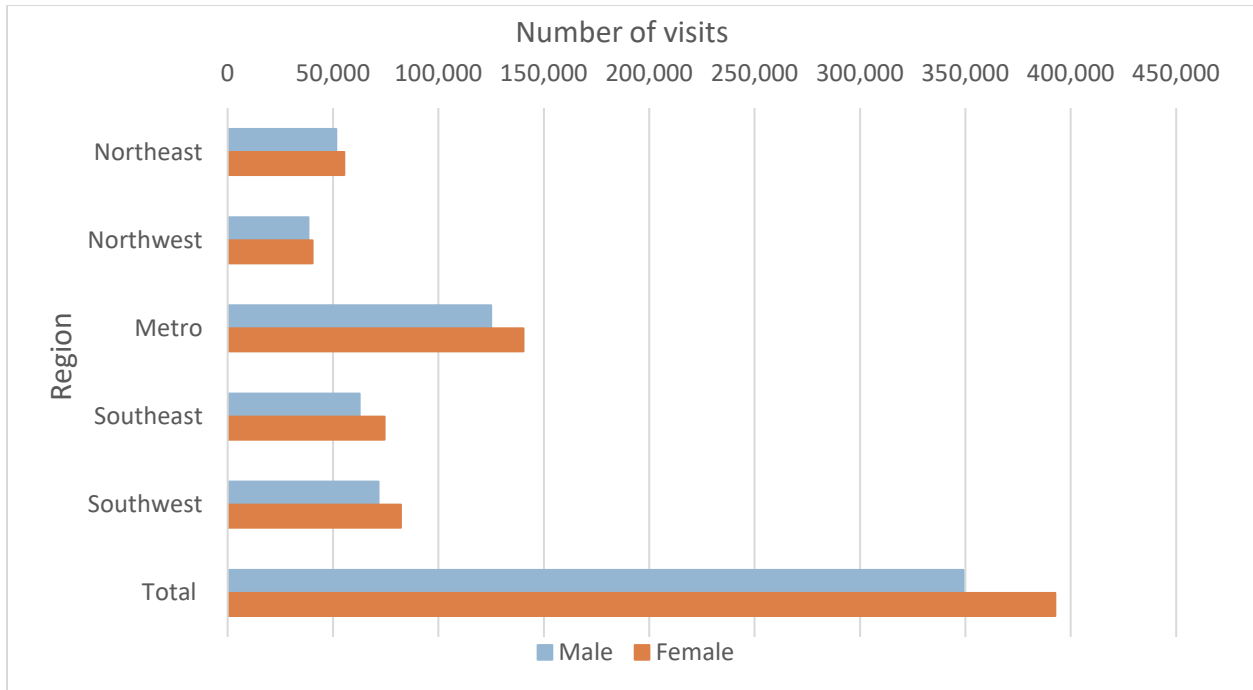


Figure 5. Rates of ED Visits by Health Region and Sex, NM, 2021

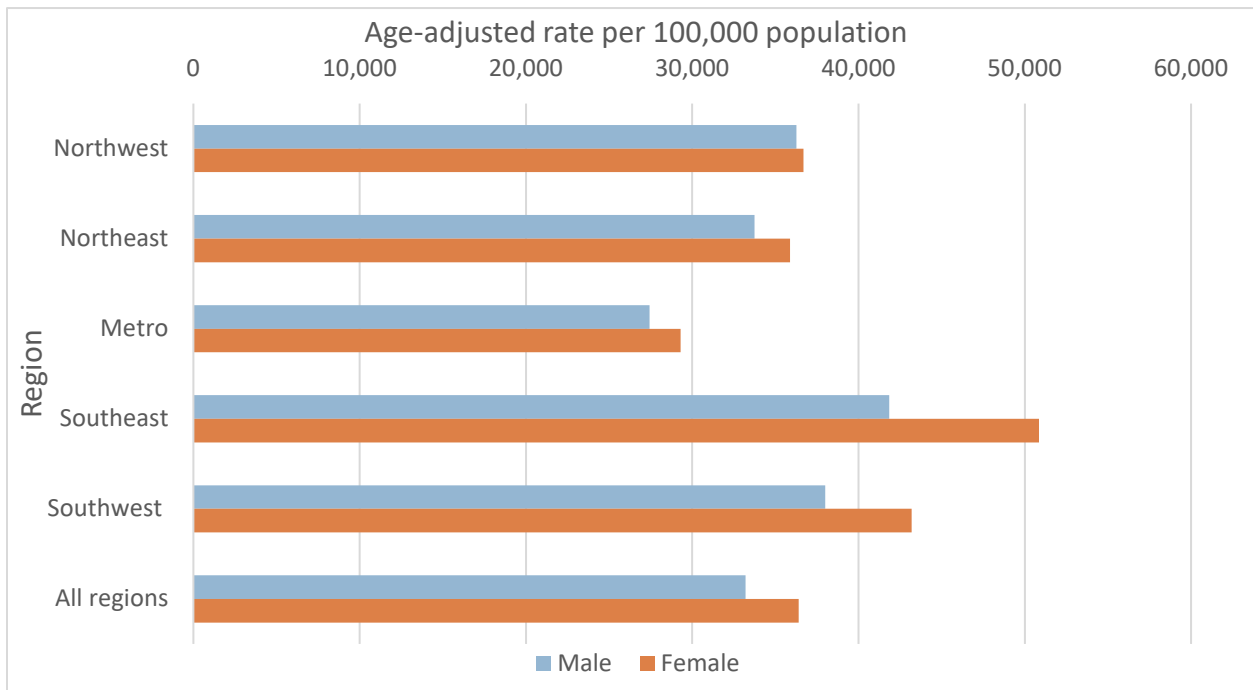


Figure 6. Number of ED Visits by Race/Ethnicity and Sex, NM, 2021

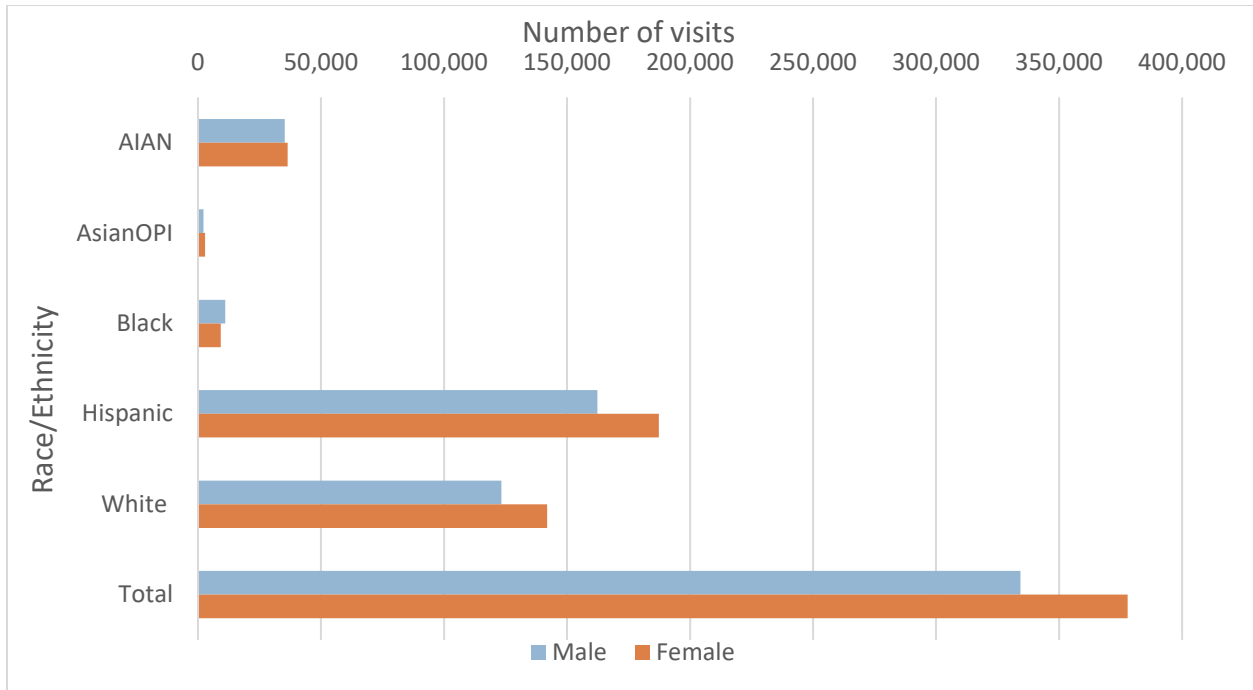
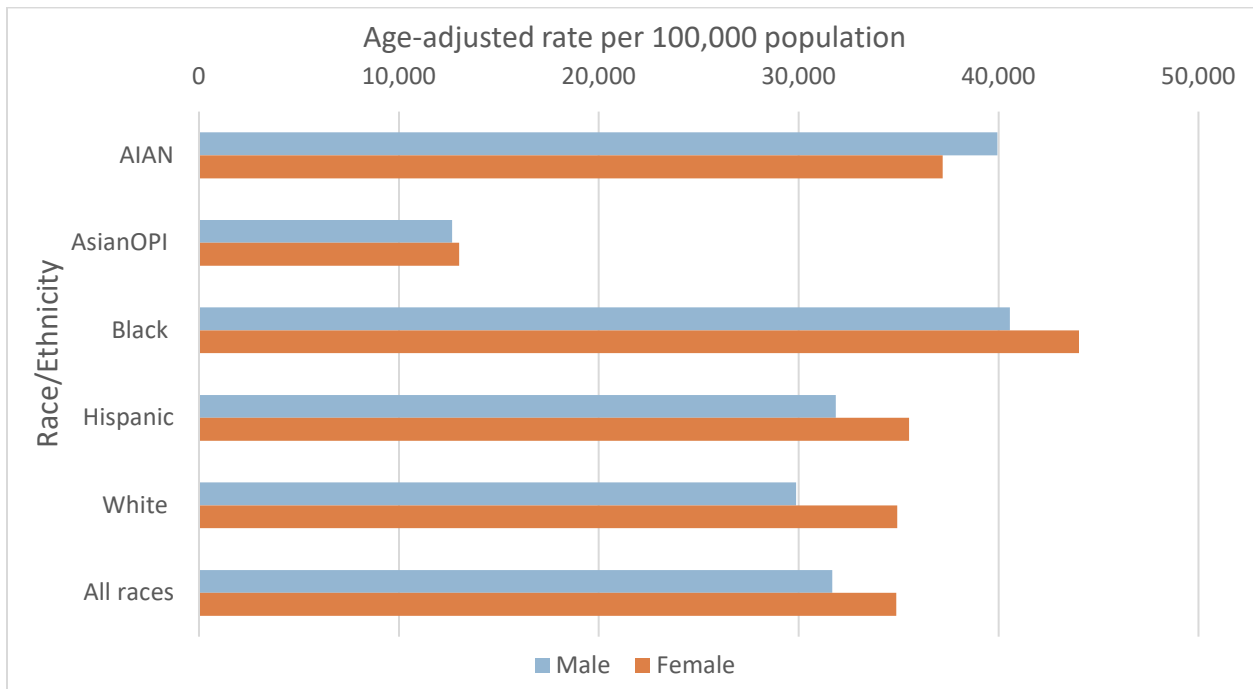


Figure 7. Rates of ED Visits by Race/Ethnicity and Sex, NM, 2021



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

ED Visits by Quarter

Figure 8. Number of ED Visits by Quarters, 2019, 2020, and 2021, NM

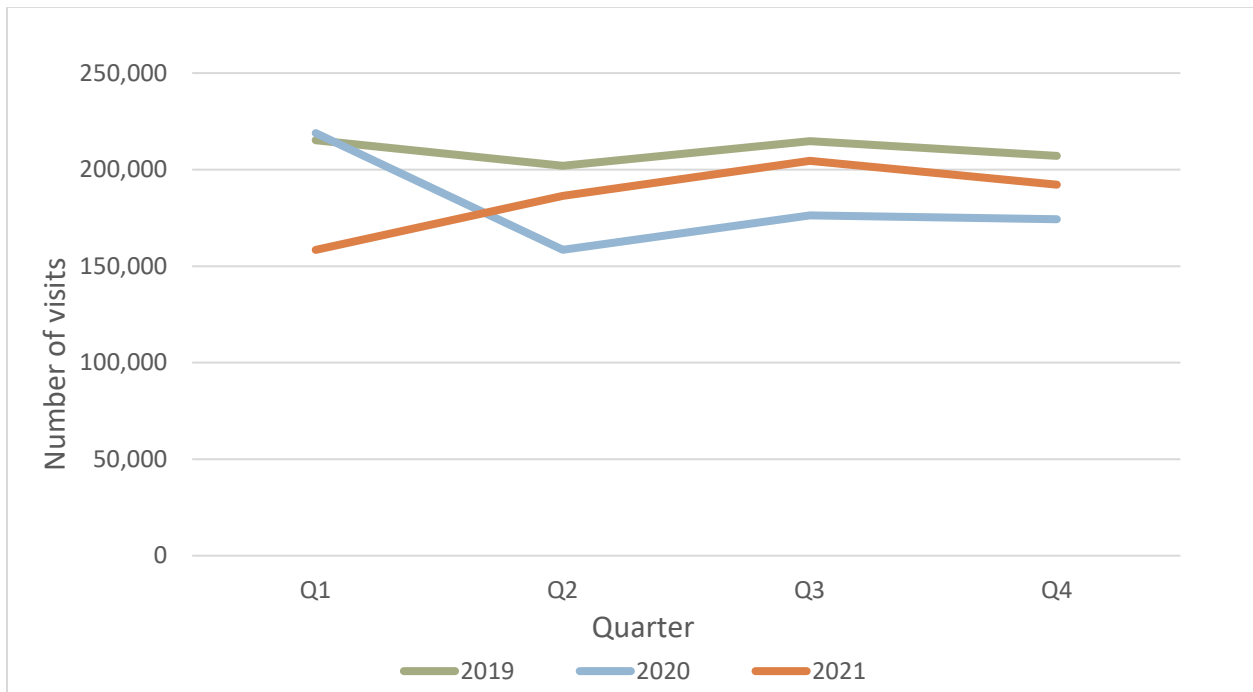


Figure 9. Number of ED Visits by Sex and Quarter, NM, 2021

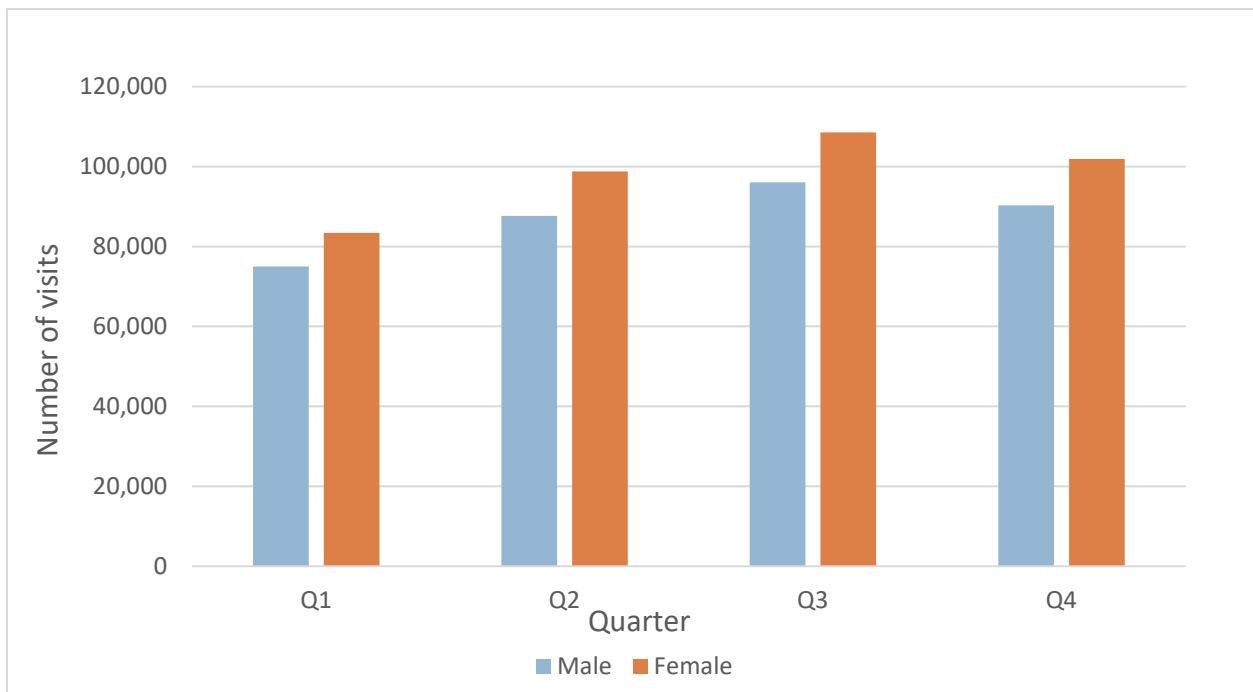


Figure 10. Number of ED Visits by Age Group and Quarter, NM, 2021

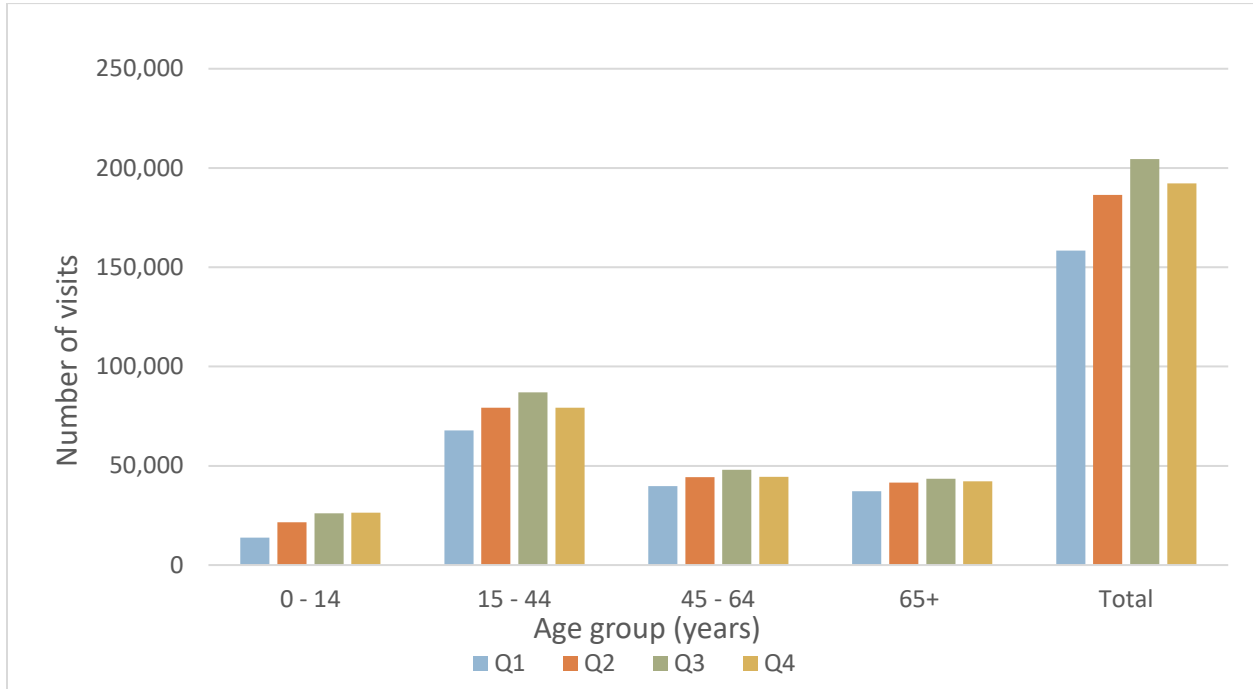


Figure 11. Number of ED Visits by Race/Ethnicity and Quarter, NM, 2021

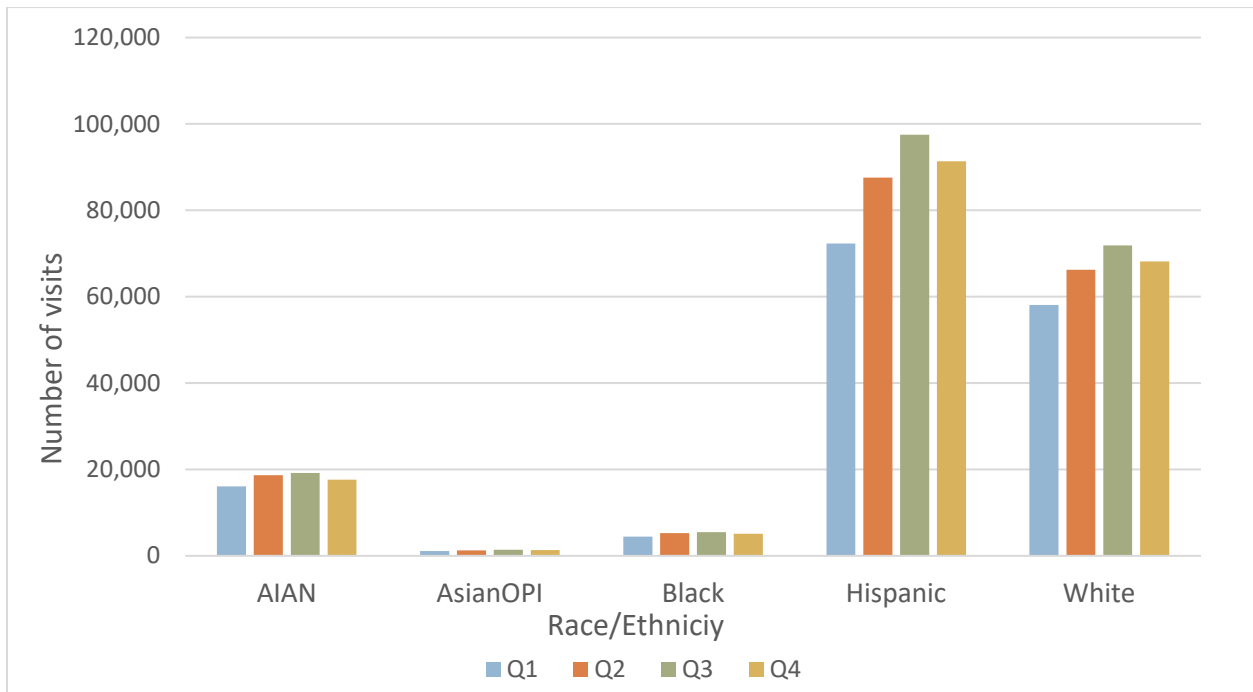


Figure 12. Number of ED Visits by Region and Quarter, NM, 2021

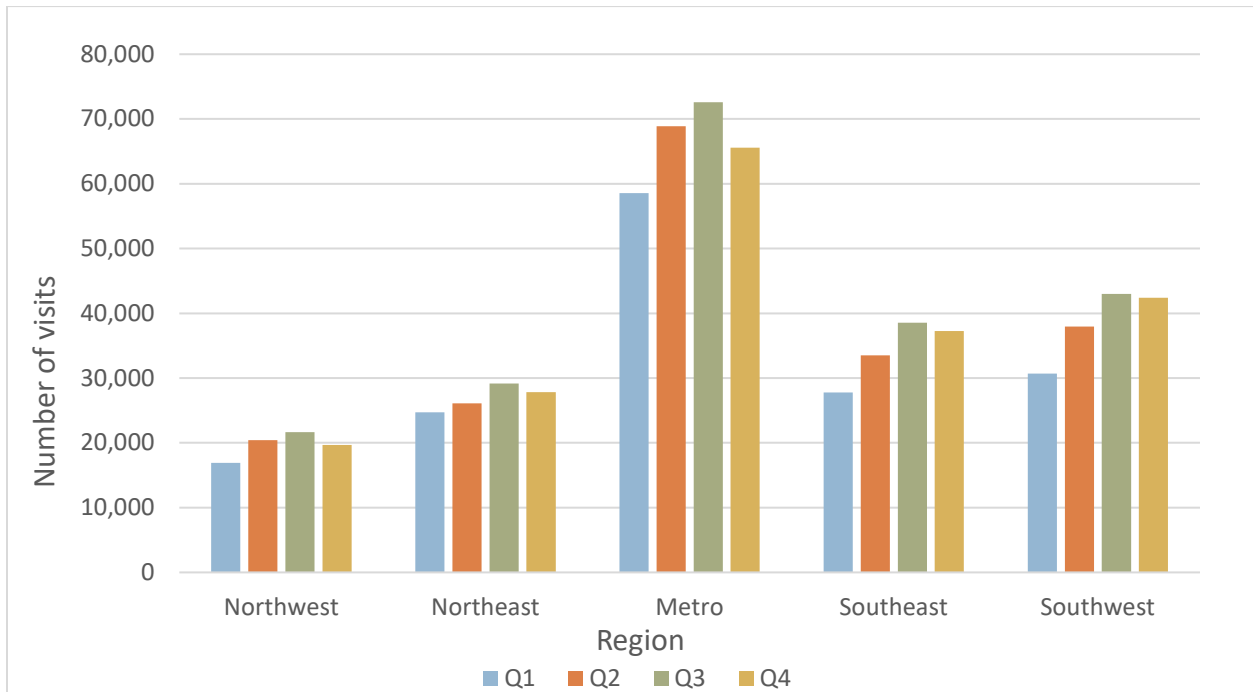
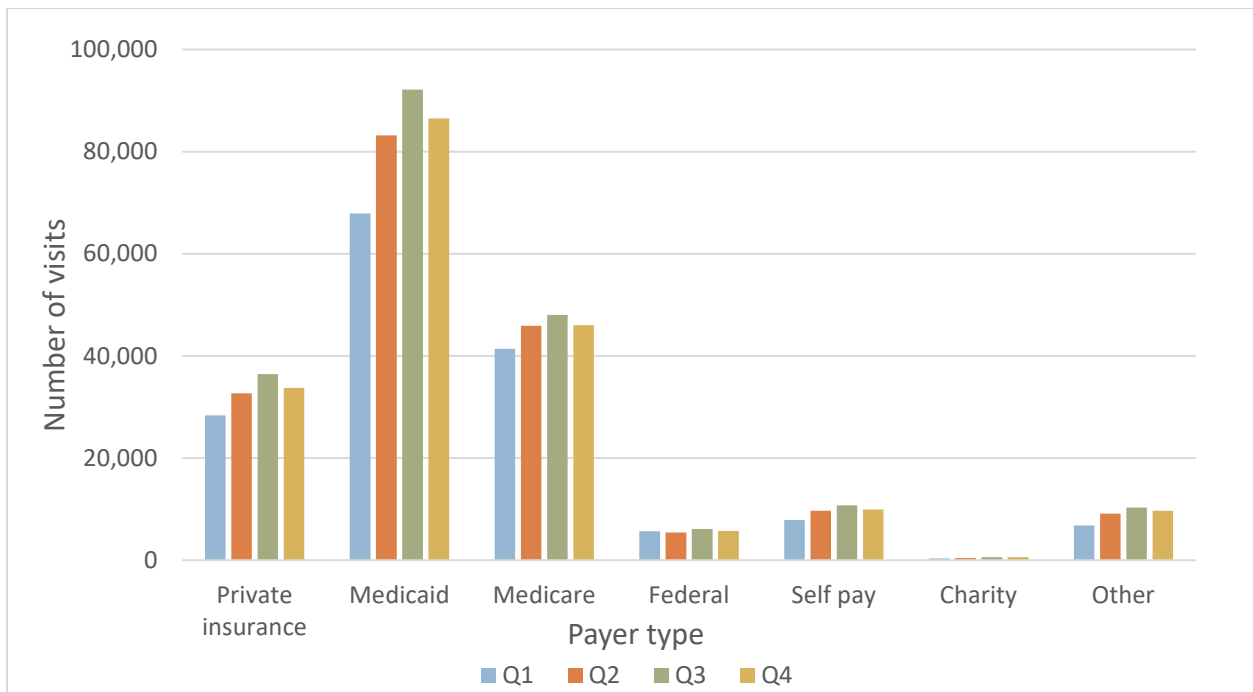


Figure 13. Number of ED Visits by Payer Type and Quarter, NM, 2021



ED Visits by Payer Type

Figure 14. Number of ED Visits by Payer Type and Age Group, NM, 2021

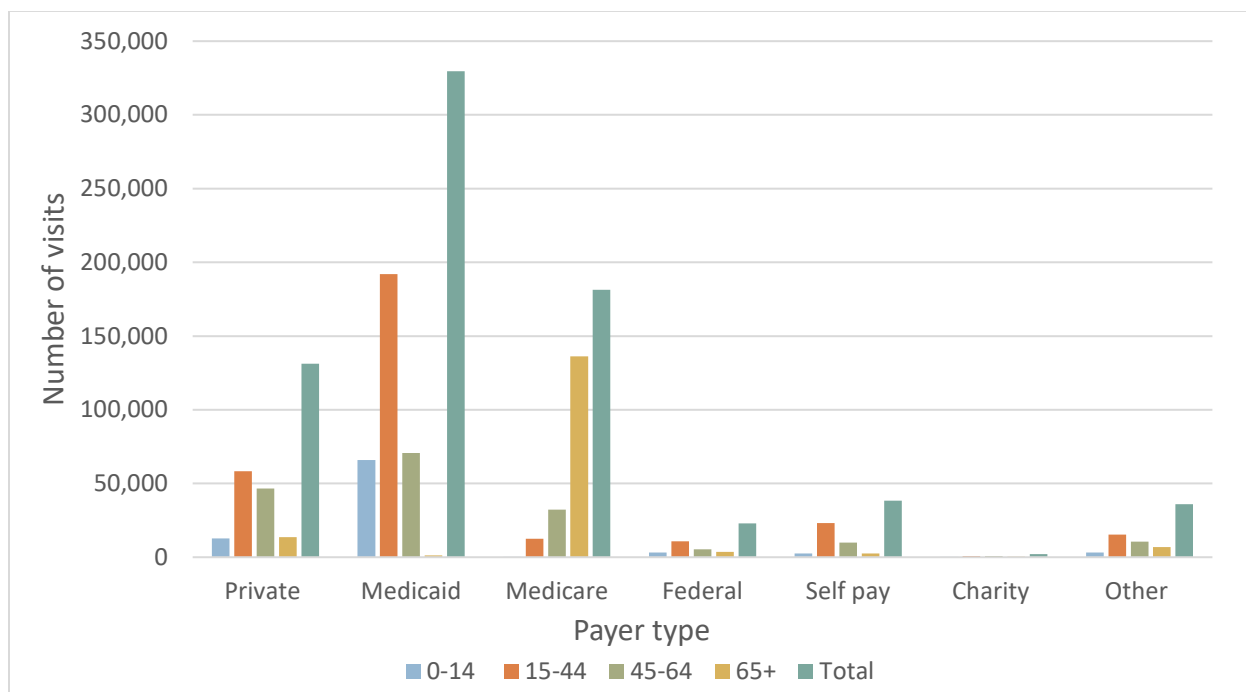


Figure 15. Rates of ED Visits by Payer Type and Sex, NM, 2021

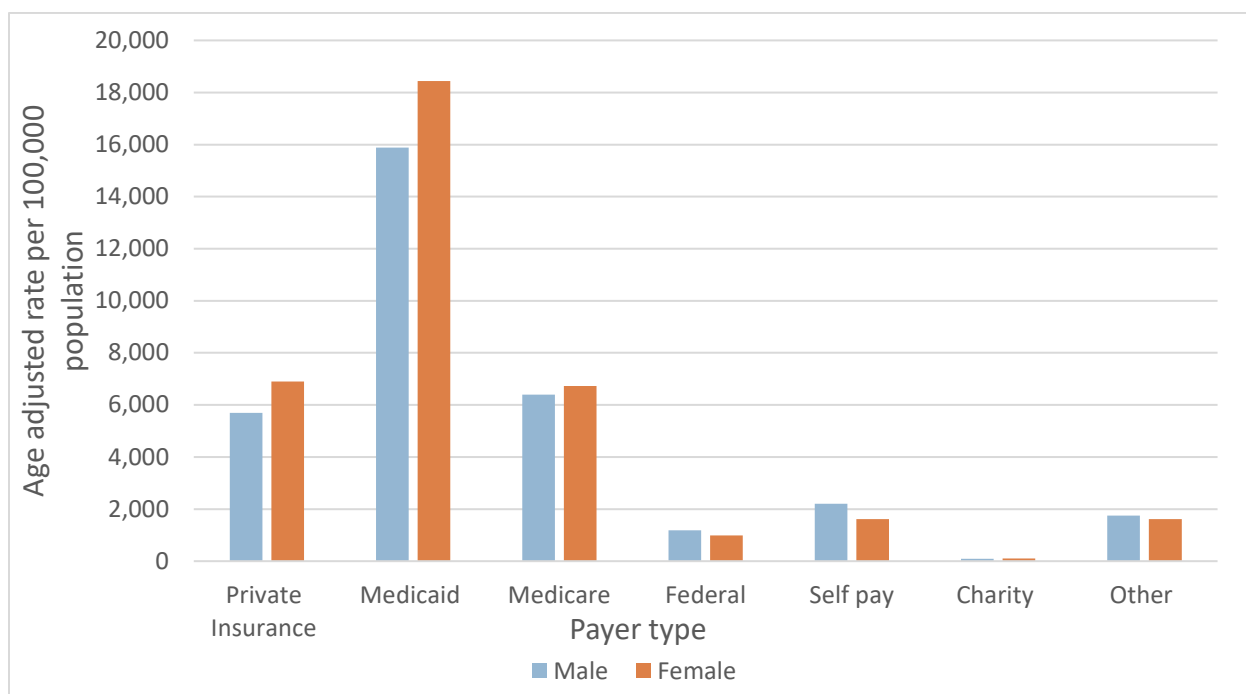


Figure 16. Rates of ED Visits by Payer Type and Region, NM, 2021

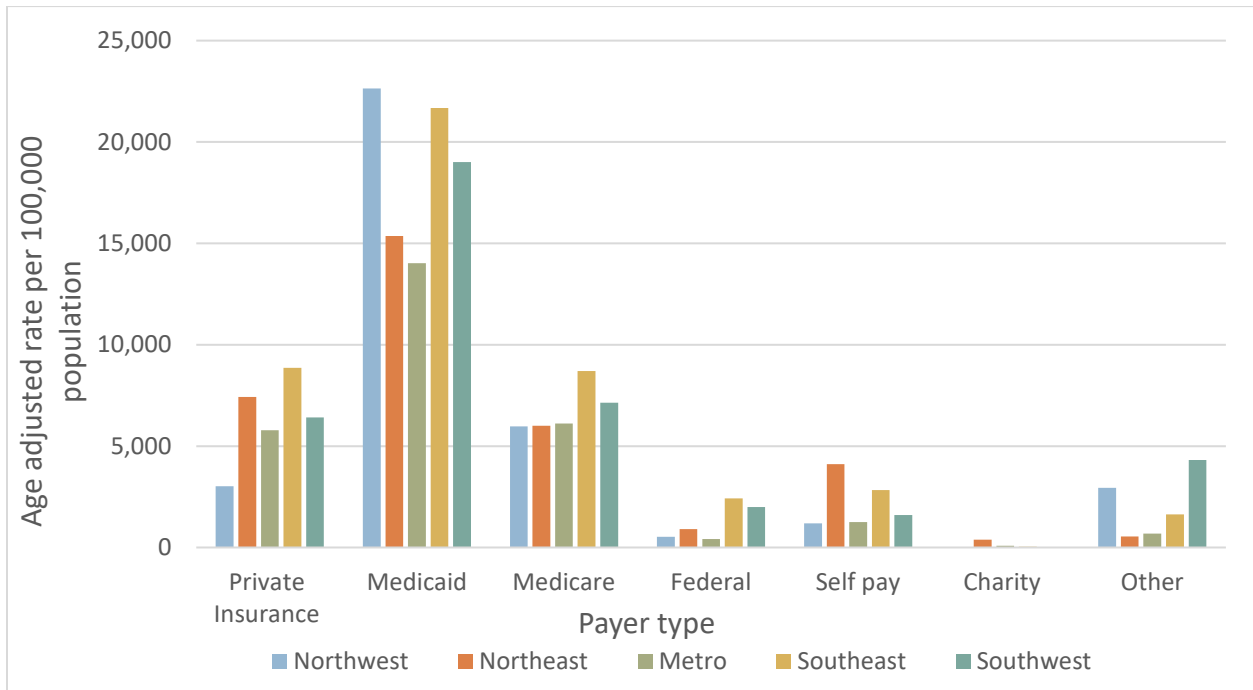
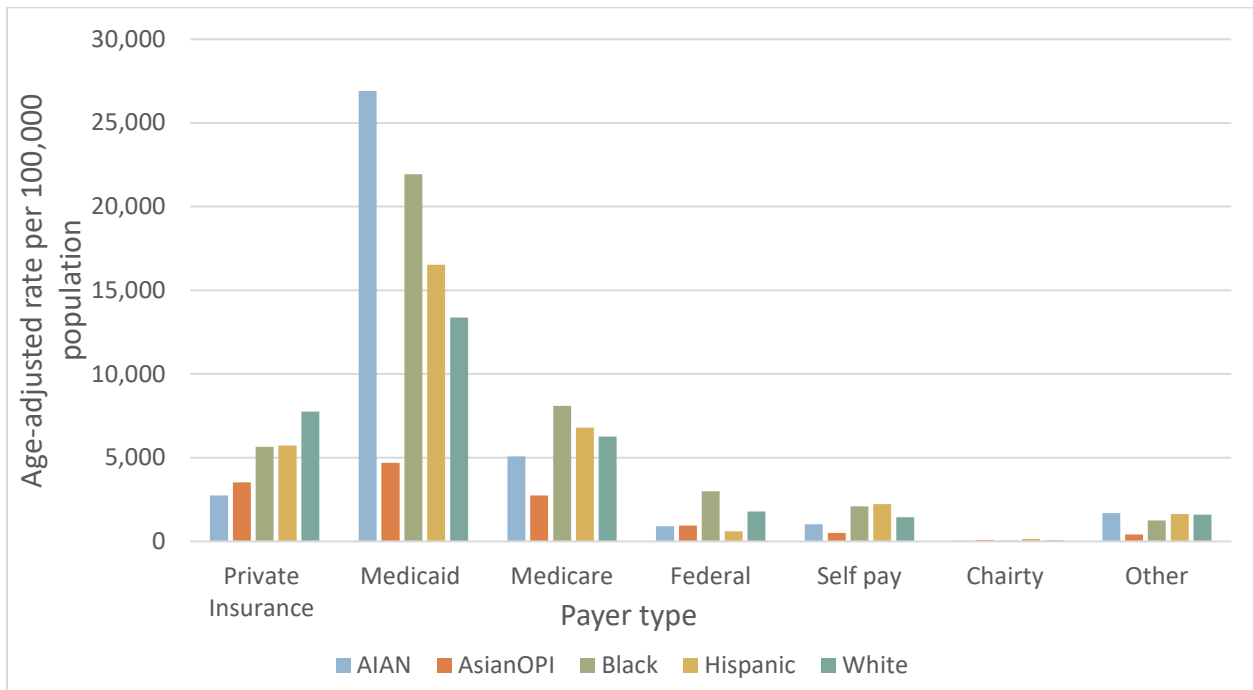


Figure 17. Rates of ED Visits by Payer Type and Race/Ethnicity, NM, 2021



ED Visits by Diagnosis Category

Table 4. Number of ED Visits by Category of Diagnosis, NM, 2021

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	159,023	1	297,846	2
DC19	Injury, poisoning and certain other consequences of external causes	128,670	2	155,994	6
DC11	Diseases of the digestive system	50,066	3	109,749	10
DC13	Diseases of the musculoskeletal system and connective tissue	49,798	4	110,271	9
DC10	Diseases of the respiratory system	48,739	5	136,095	8
DC22	Factors influencing health status and contact with health services	44,727	6	434,202	1
DC5	Mental, behavioral, and neurodevelopmental disorders	42,053	7	184,892	5
DC14	Diseases of the genitourinary system	38,778	8	99,608	11
DC20	Codes for special purposes	32,248	9	38,446	16
DC9	Diseases of the circulatory system	32,016	10	193,650	3
DC1	Certain infectious and parasitic diseases	26,884	11	50,249	13
DC12	Diseases of the skin and subcutaneous tissue	22,919	12	38,528	15
DC6	Diseases of the nervous system	18,554	13	68,621	12
DC4	Endocrine, nutritional and metabolic diseases	15,605	14	185,960	4
DC15	Pregnancy, childbirth and the puerperium	14,558	15	15,086	17
DC8	Diseases of the ear and mastoid process	8,314	16	14,368	18
DC7	Diseases of the eye and adnexa	4,444	17	10,685	20
DC3	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	2,847	18	39,883	14
DC2	Neoplasms	2,753	19	12,920	19
DC16	Certain conditions originating in the perinatal period	532	20	685	22
DC17	Congenital malformations, deformations and chromosomal abnormalities	202	21	3,240	21
DC21	External causes of morbidity	38	22	142,003	7
Total		743,768		2,342,981	

Table 5. Rates of ED Visits (Age-adjusted per 100,000 Population) by Category of Diagnosis, NM, 2021

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	7,478.0	1	13,778.4	2
DC19	Injury, poisoning and certain other consequences of external causes	6,113.7	2	7,341.7	6
DC10	Diseases of the respiratory system	2,384.0	3	6,170.2	8
DC11	Diseases of the digestive system	2,299.4	4	4,885.5	9
DC13	Diseases of the musculoskeletal system and connective tissue	2,259.5	5	4,837.3	10
DC22	Factors influencing health status and contact with health services	2,149.1	6	19,869.1	1
DC5	Mental, behavioral and neurodevelopmental disorders	2,113.6	7	8,796.9	3
DC14	Diseases of the genitourinary system	1,782.5	8	4,242.1	11
DC20	Codes for special purposes	1,494.2	9	1,768.7	15
DC9	Diseases of the circulatory system	1,248.8	10	7,761.7	4
DC1	Certain infectious and parasitic diseases	1,247.0	11	2,338.8	13
DC12	Diseases of the skin and subcutaneous tissue	1,109.9	12	1,806.5	14
DC6	Diseases of the nervous system	860.0	13	2,954.4	12
DC15	Pregnancy, childbirth and the puerperium	723.0	14	749.3	17
DC4	Endocrine, nutritional and metabolic diseases	677.3	15	7,730.2	5
DC8	Diseases of the ear and mastoid process	423.8	16	701.6	18
DC7	Diseases of the eye and adnexa	211.2	17	478.3	20
DC3	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	120.5	18	1,664.7	16
DC2	Neoplasms	106.4	19	495.1	19
DC16	Certain conditions originating in the perinatal period	34.2	20	43.7	22
DC17	Congenital malformations, deformations and chromosomal abnormalities	10.2	21	155.1	21
DC21	External causes of morbidity	1.8	22	6,744.7	7
Total		34,848		105,314	

Figure 18. Top 10 Rates of ED Visits by Principal Diagnosis Category and Sex, NM, 2021

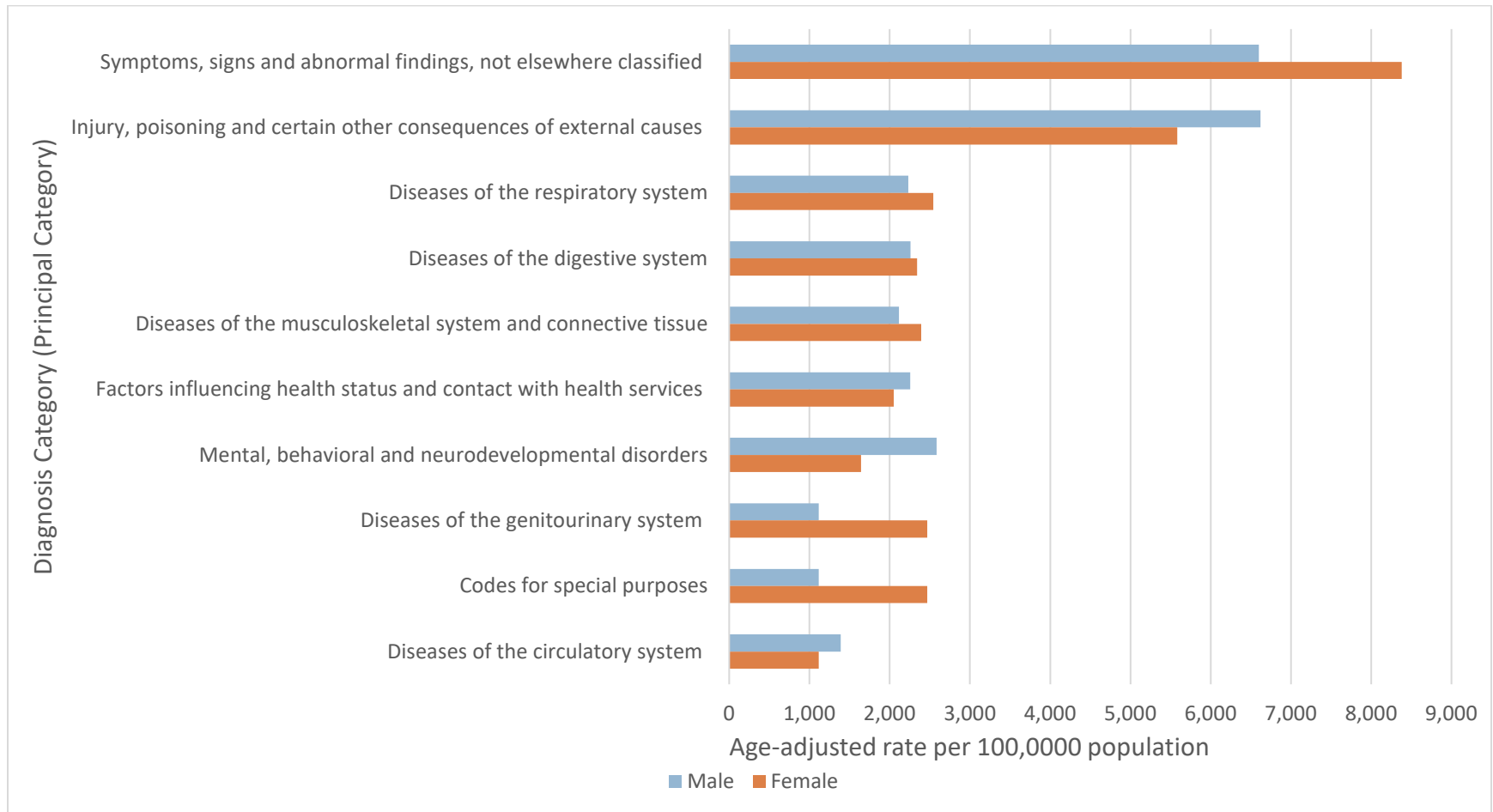


Figure 19. Top 10 Rates of ED Visits by Diagnosis Category (All Diagnosis) and Sex, NM, 2021

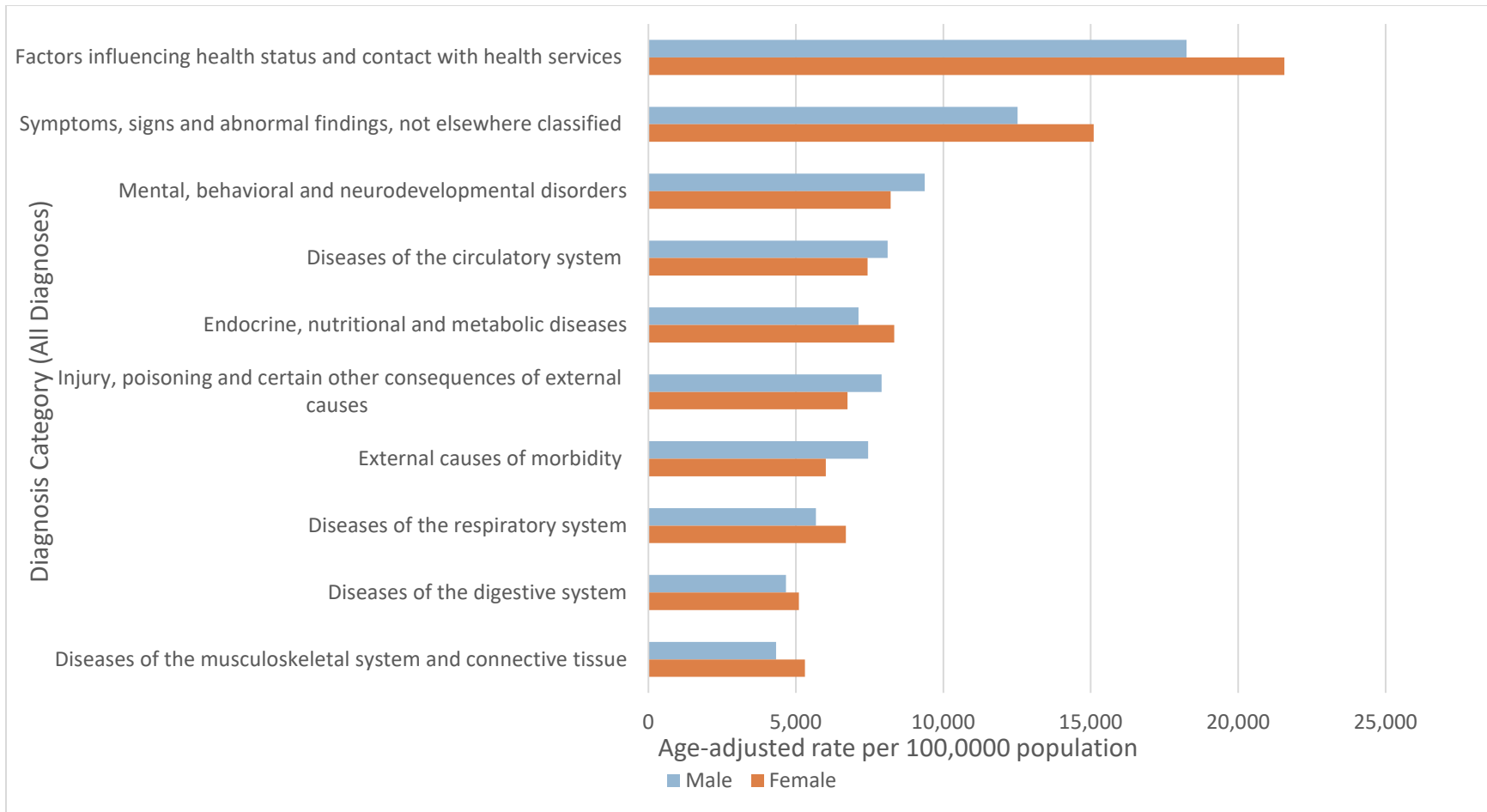


Figure 20. Top Five Categories of Rates of ED Visits (Principal Diagnosis) by Age Group, NM, 2021

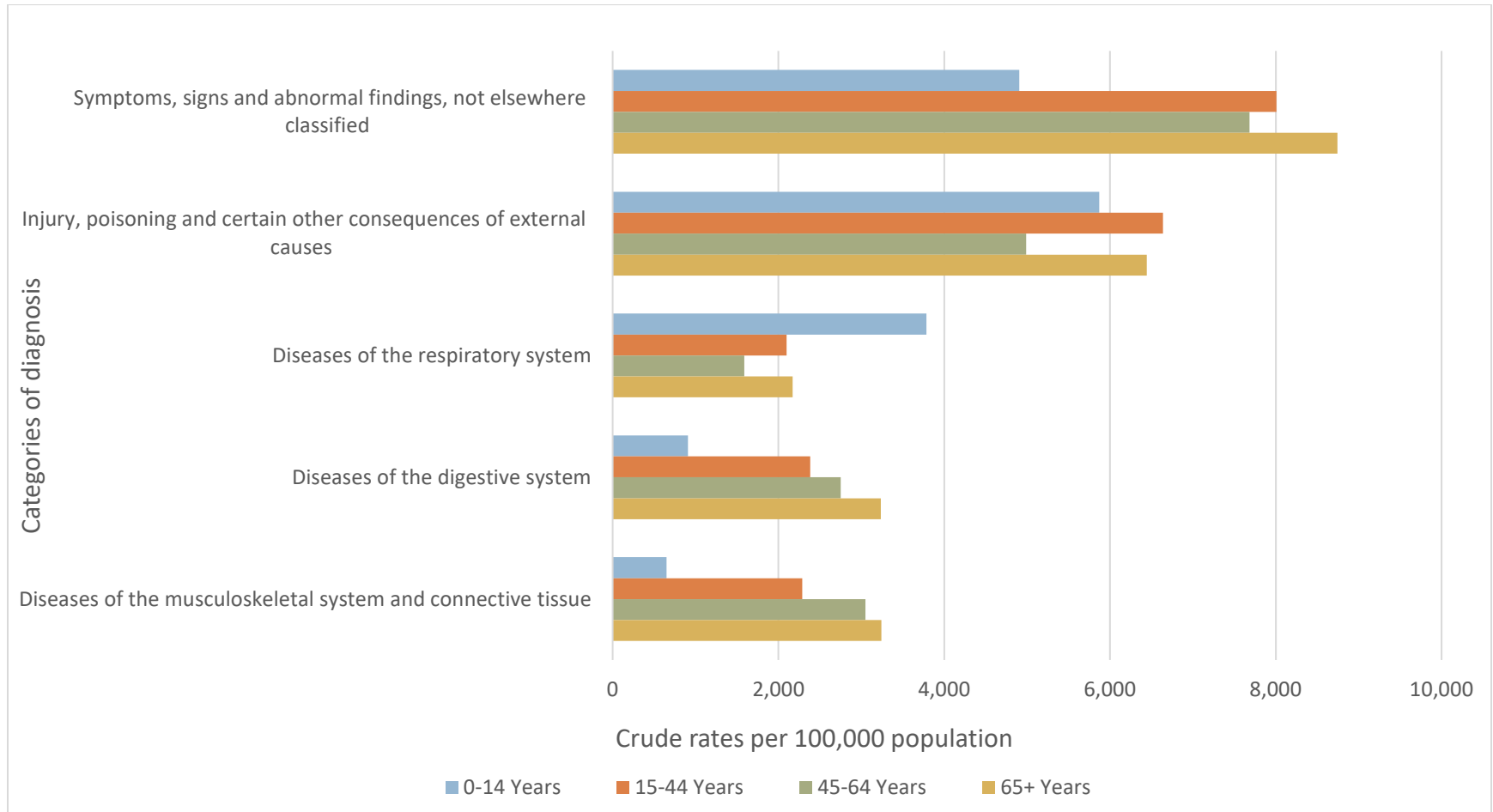


Figure 21. Top Five Categories of Rates of ED Visits (All Diagnosis) by Age Group, NM, 2021

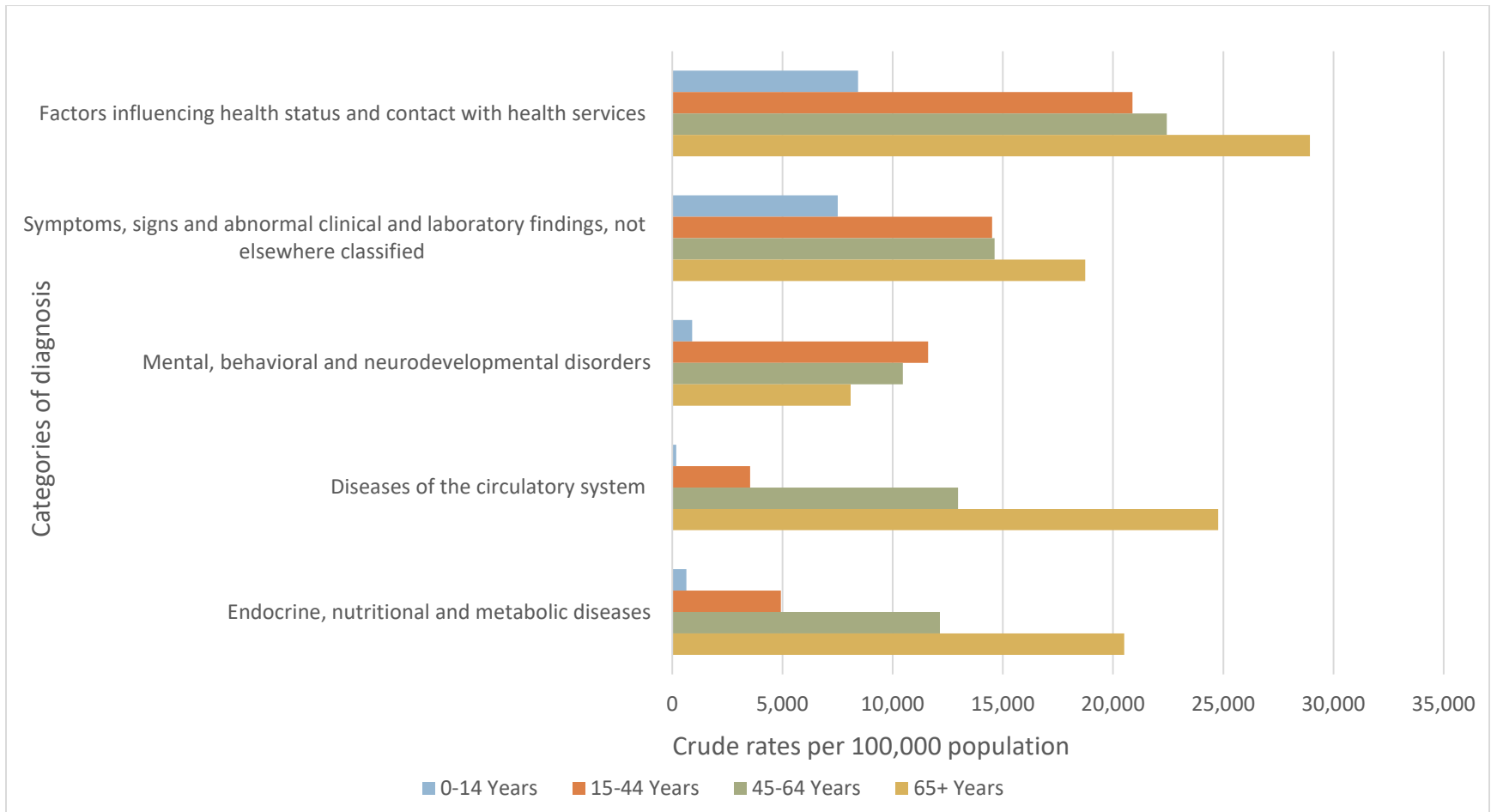


Figure 22. Top Five Categories of Rates of ED Visits (Principal Diagnosis) by Region, NM, 2021

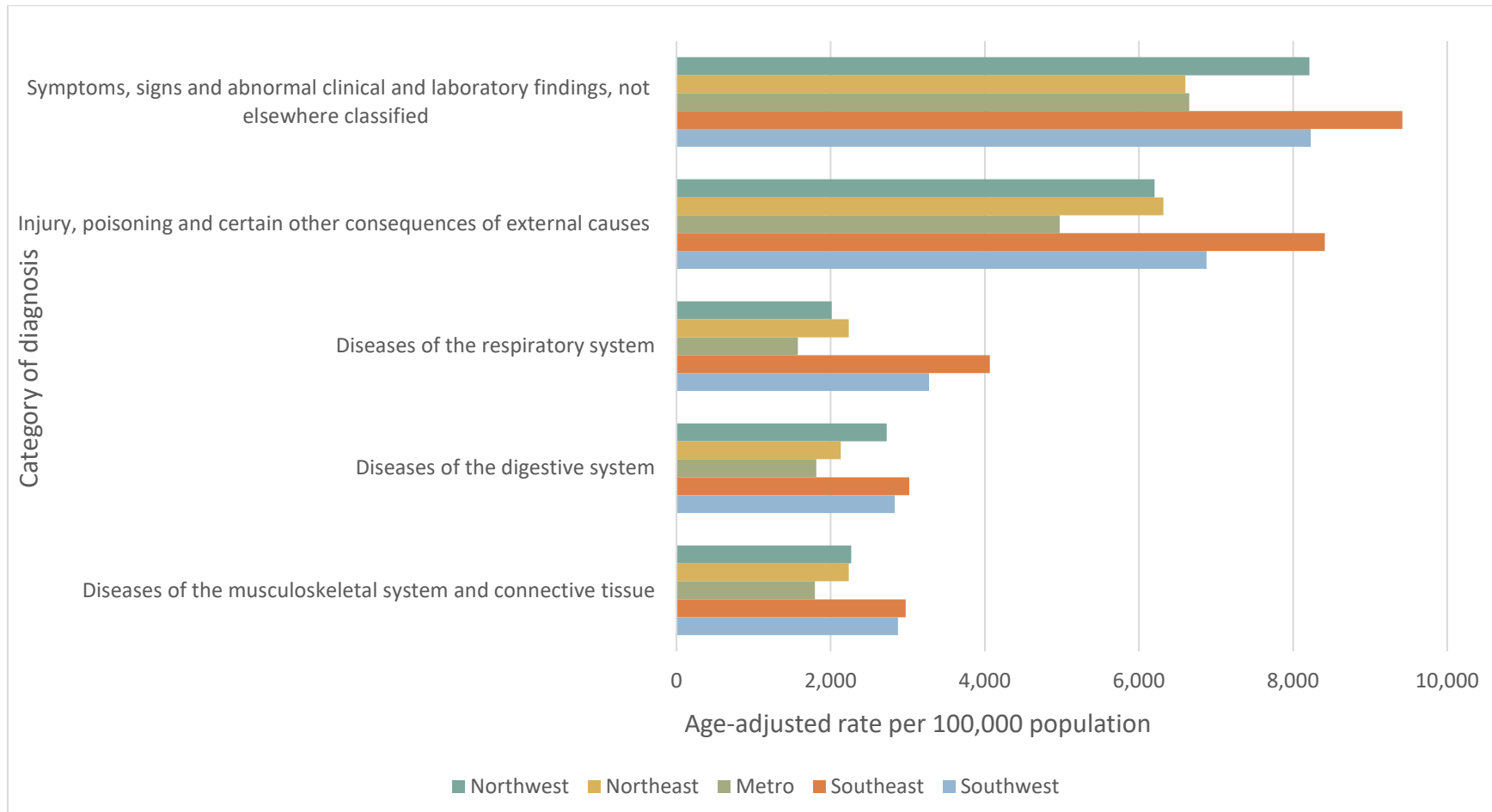
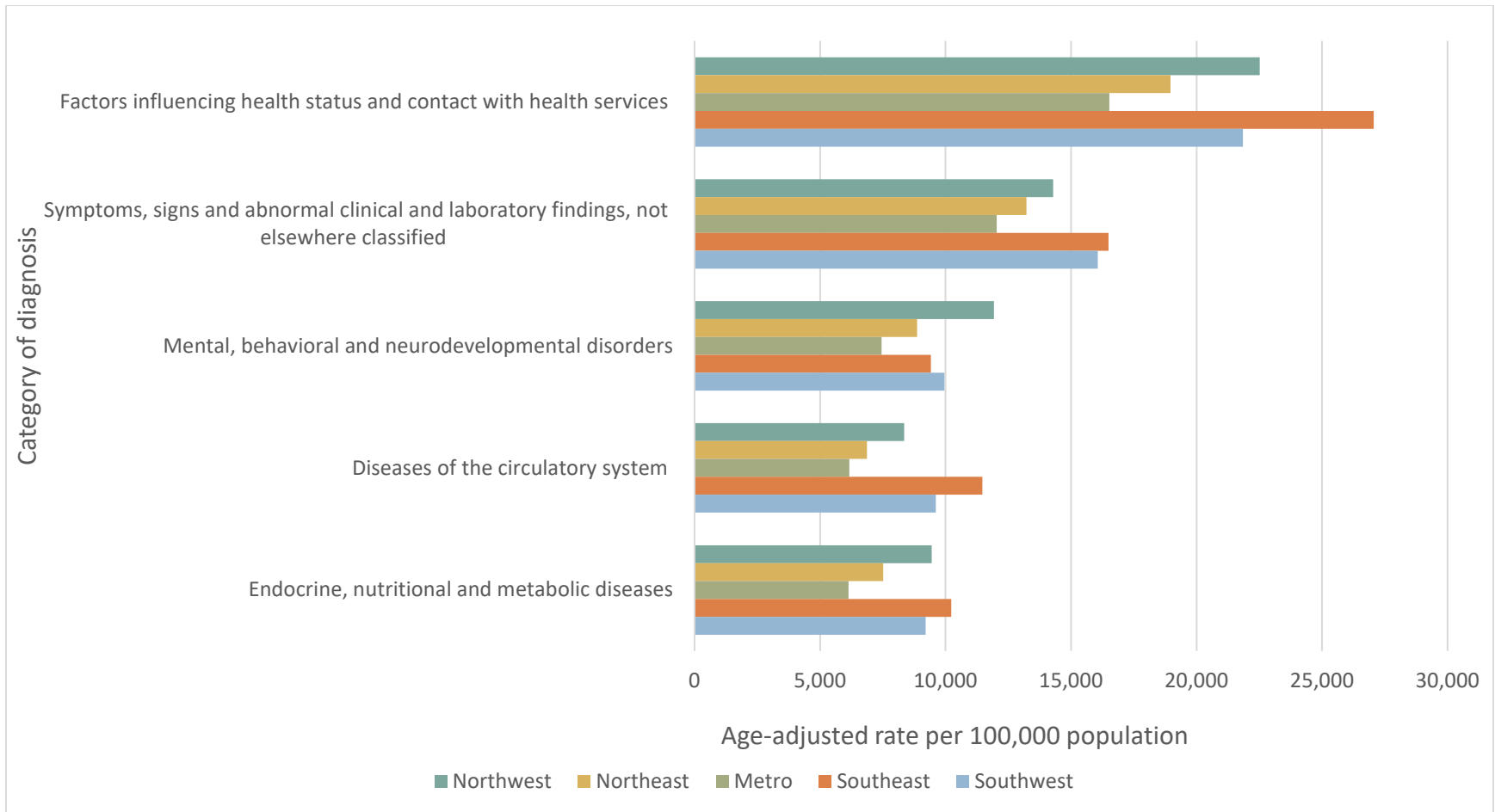


Figure 23. Top Five Categories of Rates of ED Visits (All Diagnosis) by Region, NM, 2021



ED Visits by Disposition

Figure 24. Number of ED Visits by Disposition Status and Age Group, NM, 2021

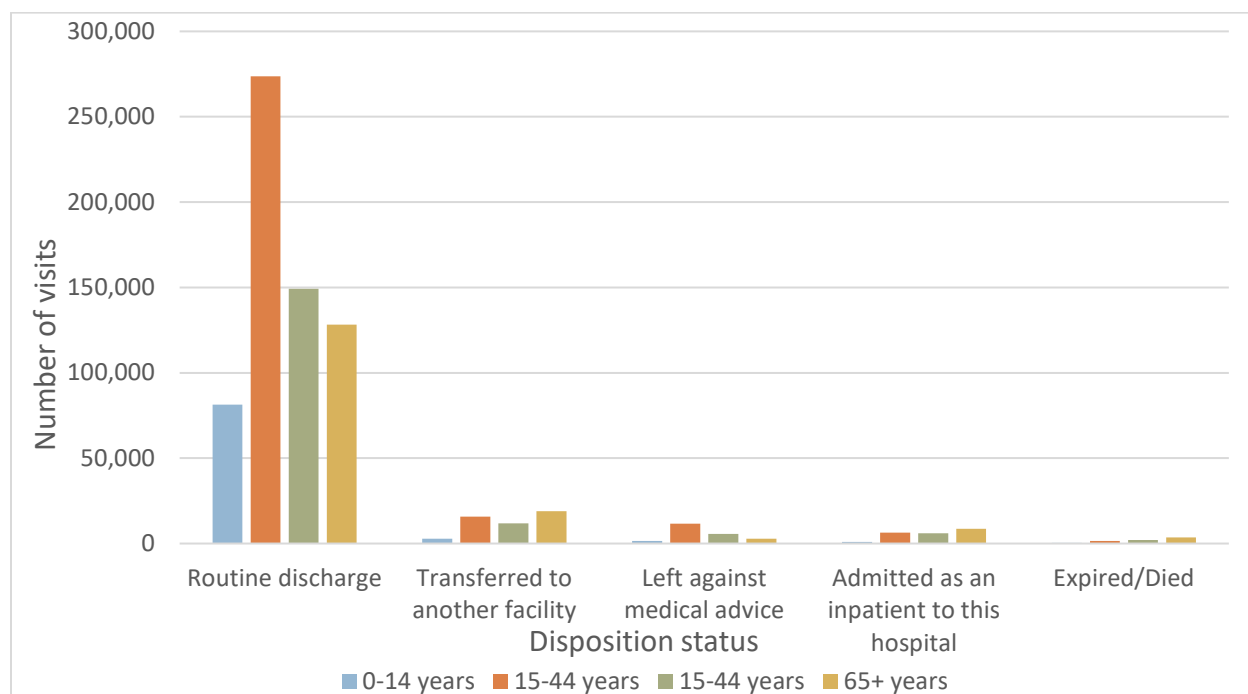


Figure 25. Rates of ED Visits by Disposition Status and Sex, NM, 2021

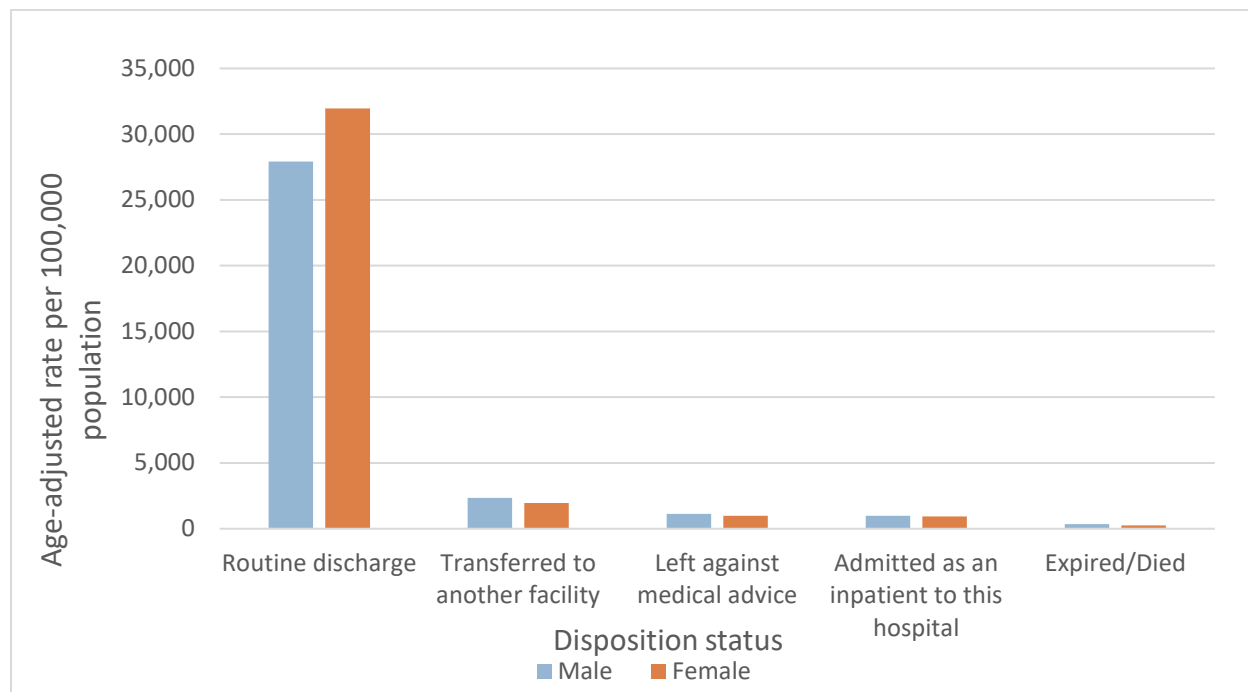


Figure 26. Rates of ED Visits by Disposition Status and Region, NM, 2021

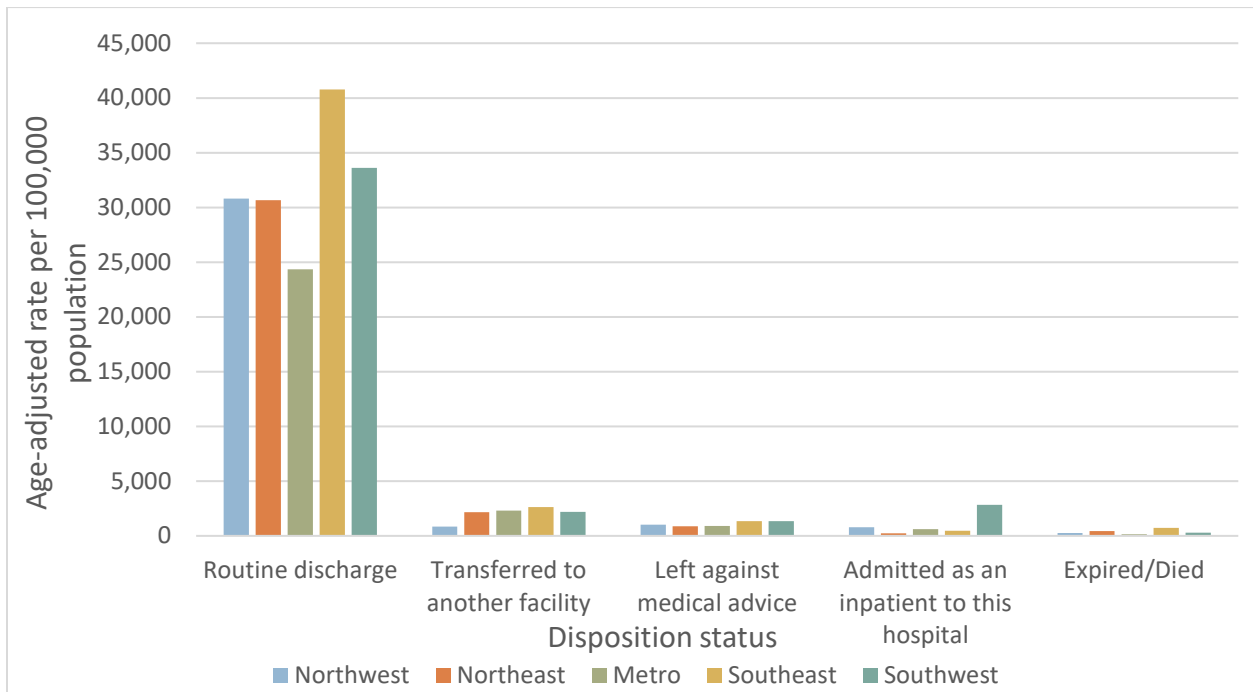
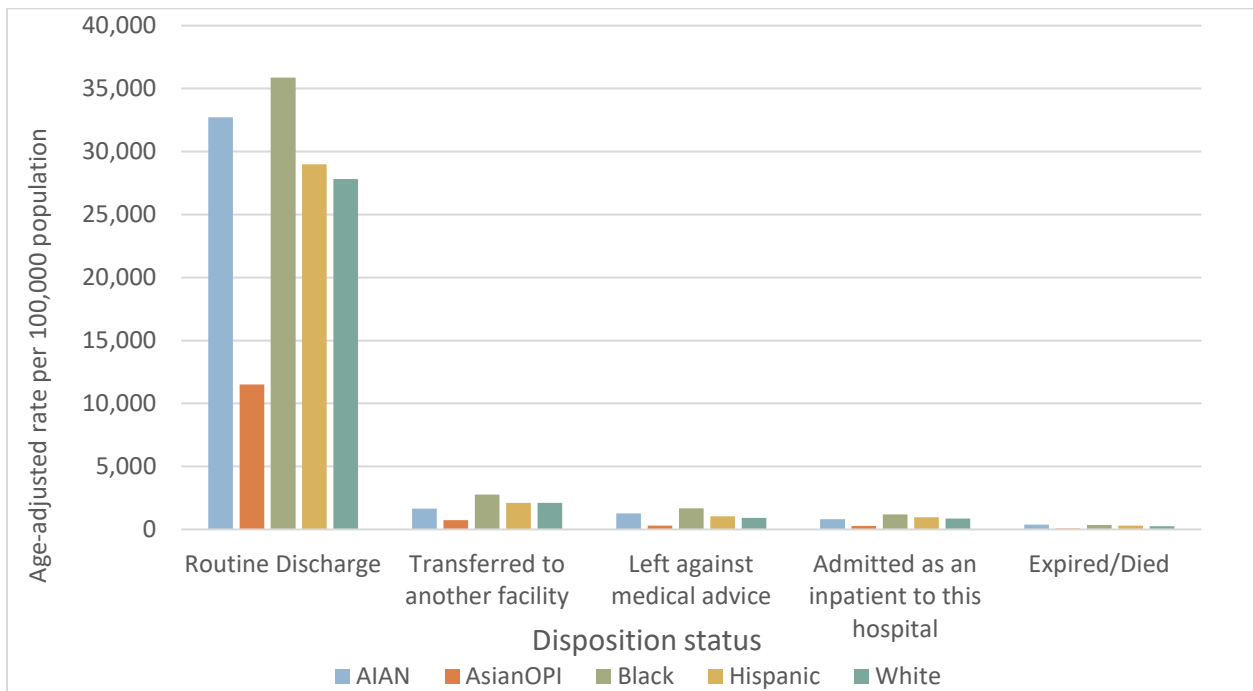


Figure 27. Rates of ED Visits by Disposition Status and Race Ethnicity, NM, 2021



Infectious Disease

Figure 28. Rates of COVID-19 ED Visits by Age Group and Sex, NM, 2021

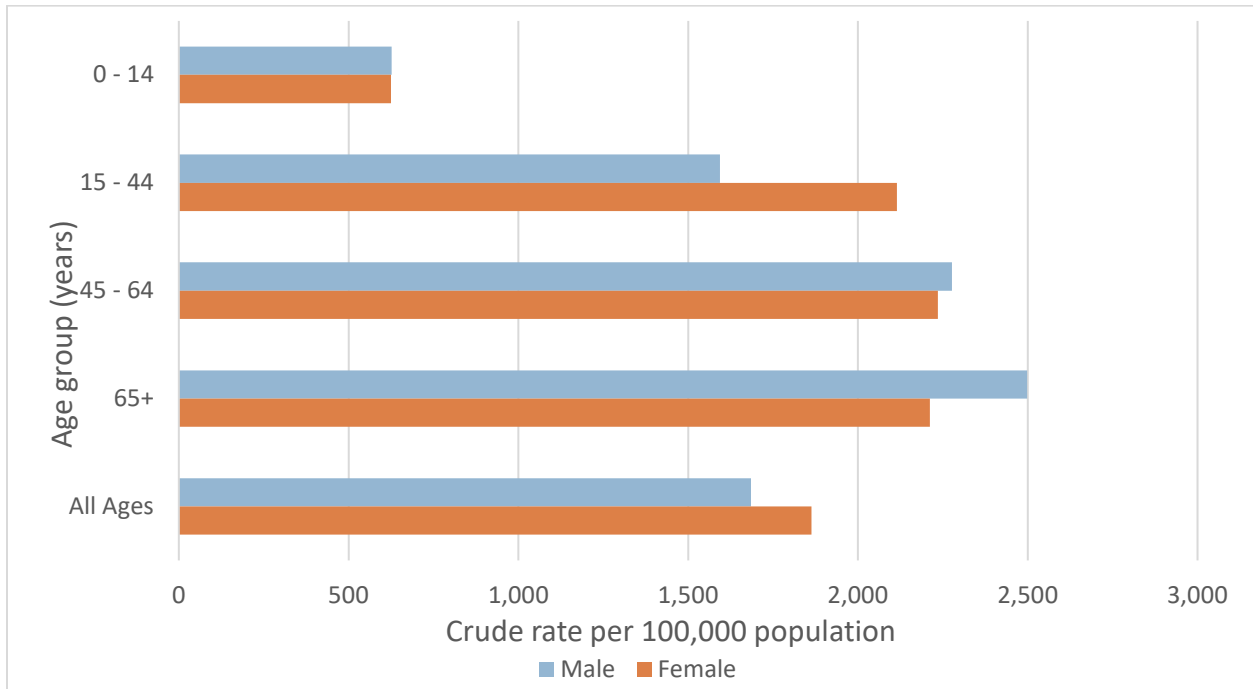
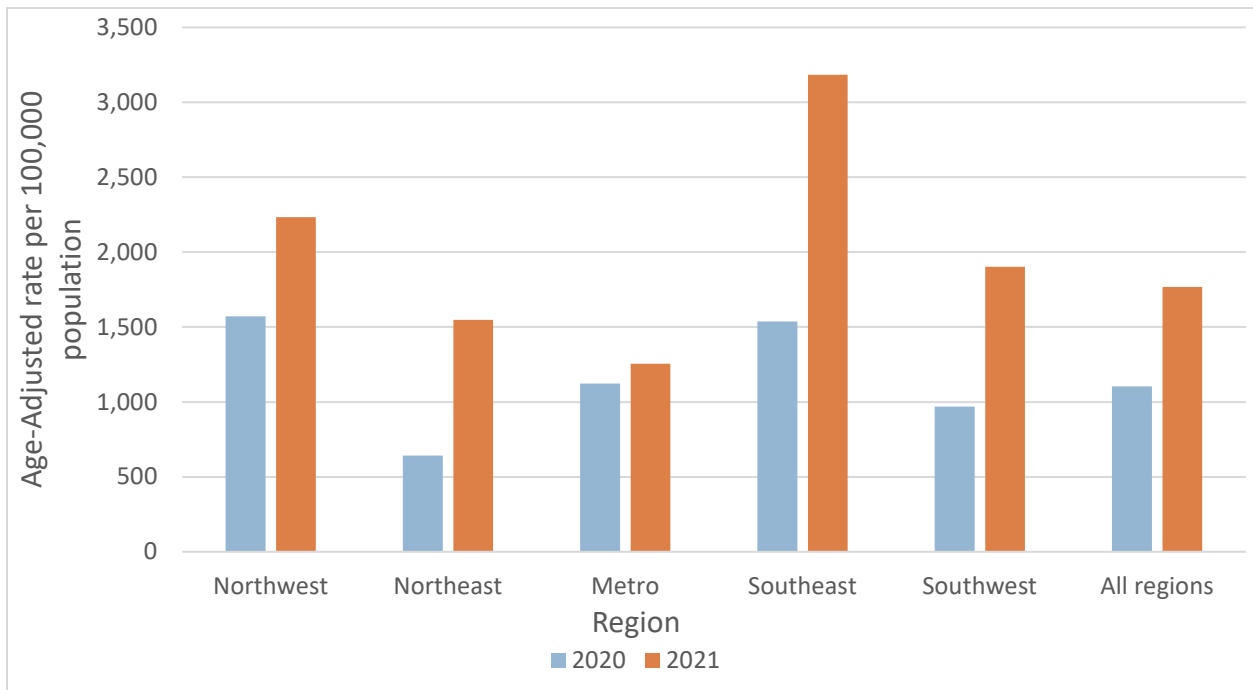


Figure 29. Rates of COVID-19 ED Visits by Health Region and Year, NM, 2020-2021



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, 2021

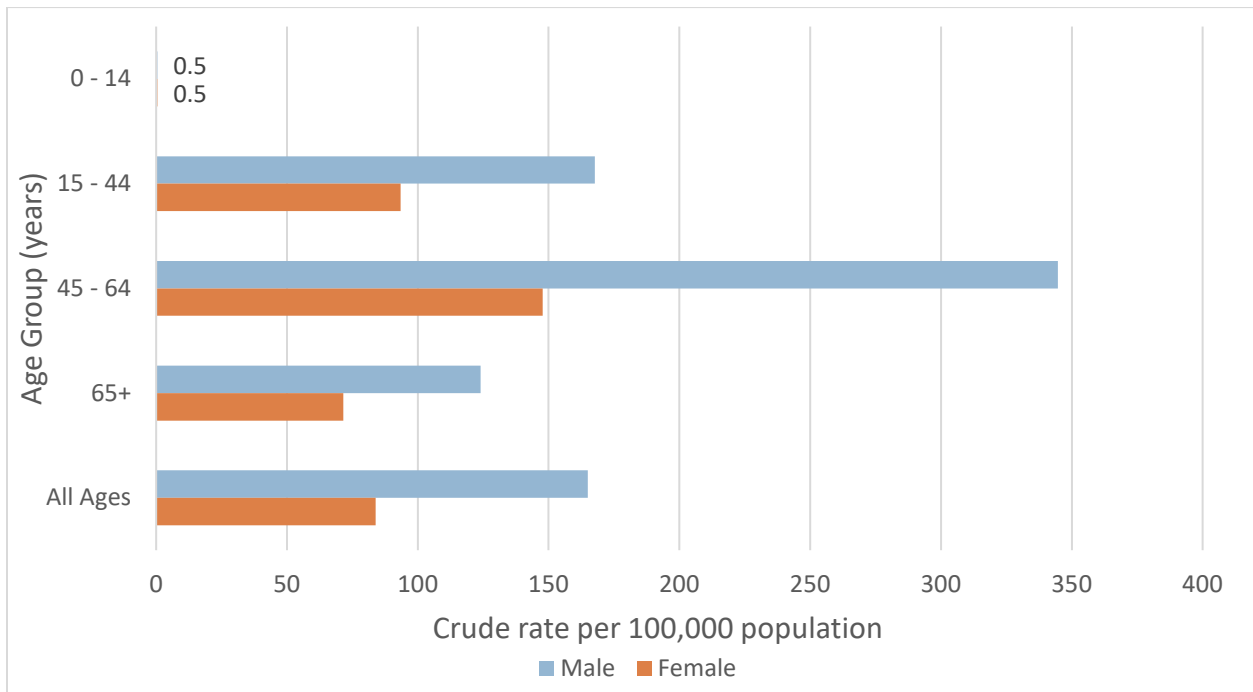
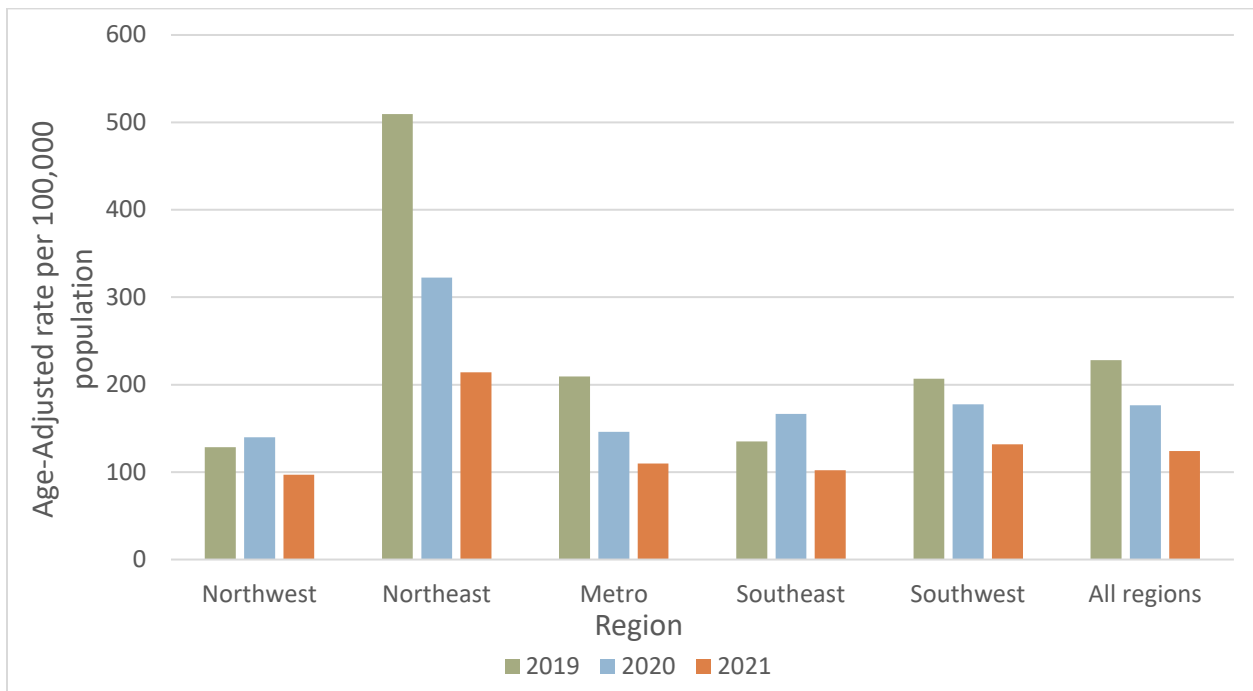


Figure 31. Rates of Hepatitis C ED Visits by Health Region and Year, NM, 2021



Chronic Disease & Environmental Health Related Visits – Asthma

Figure 32. Rates of Asthma ED Visits by Age Group and Sex, NM, 2021

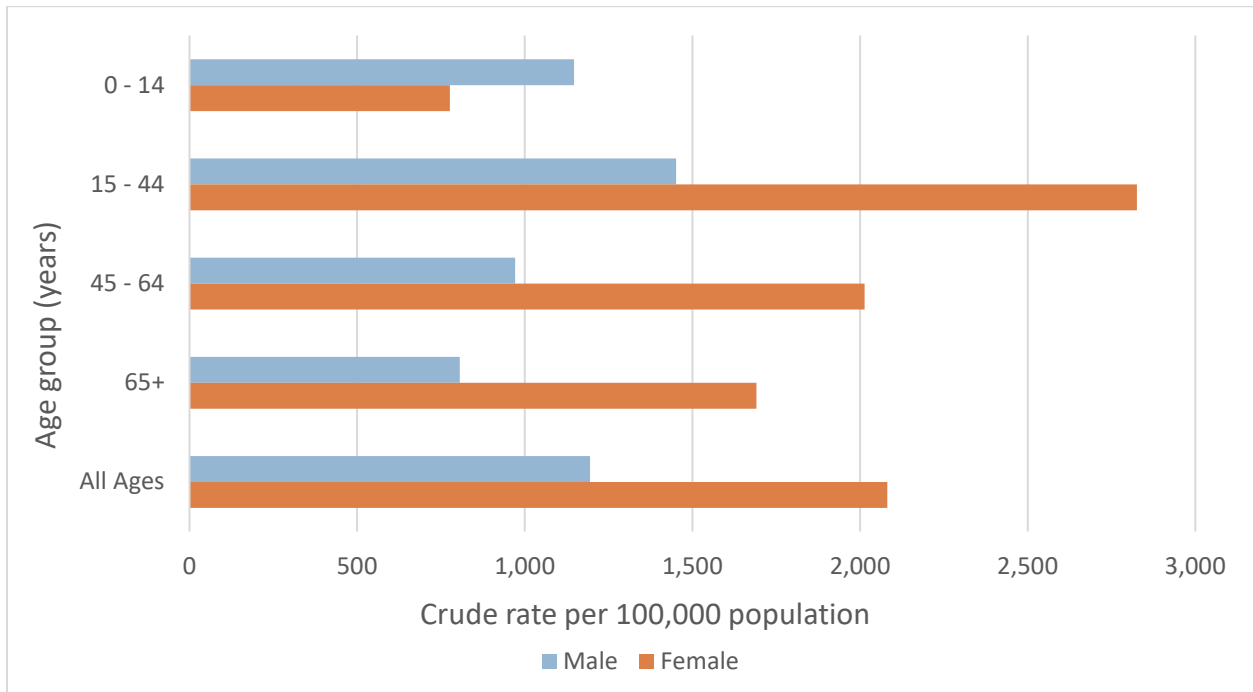
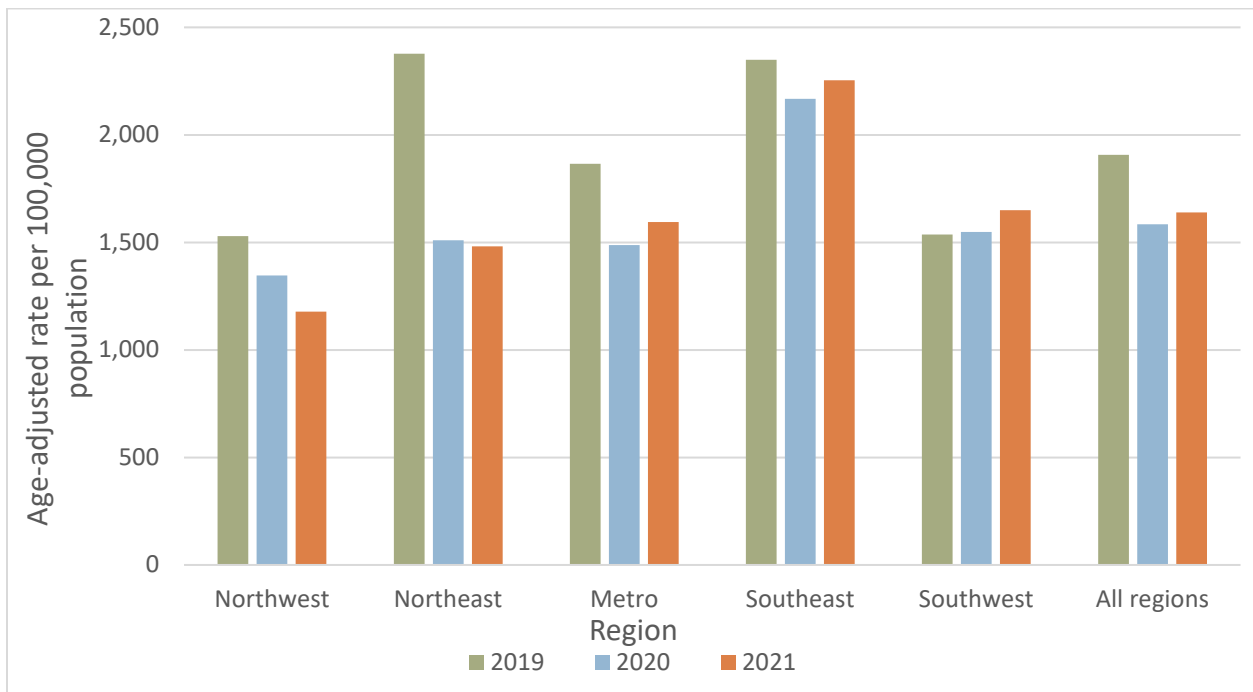


Figure 33. Rates of Asthma by ED Visits Health Region, NM, 2019-2021



Injury

Figure 34. Rates of Opioid Overdose ED Visits by Age Group and Sex, NM, 2021

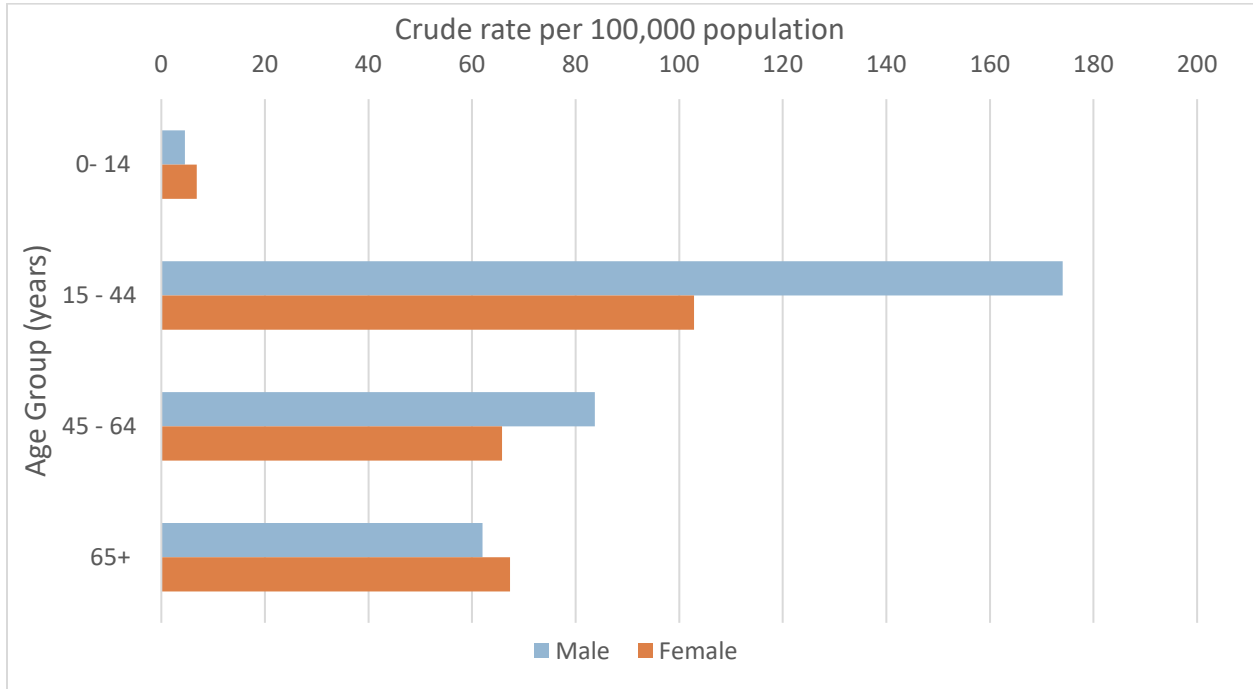


Figure 35. Rates of Opioid Overdose ED Visits by Health Region, NM, 2019-2021

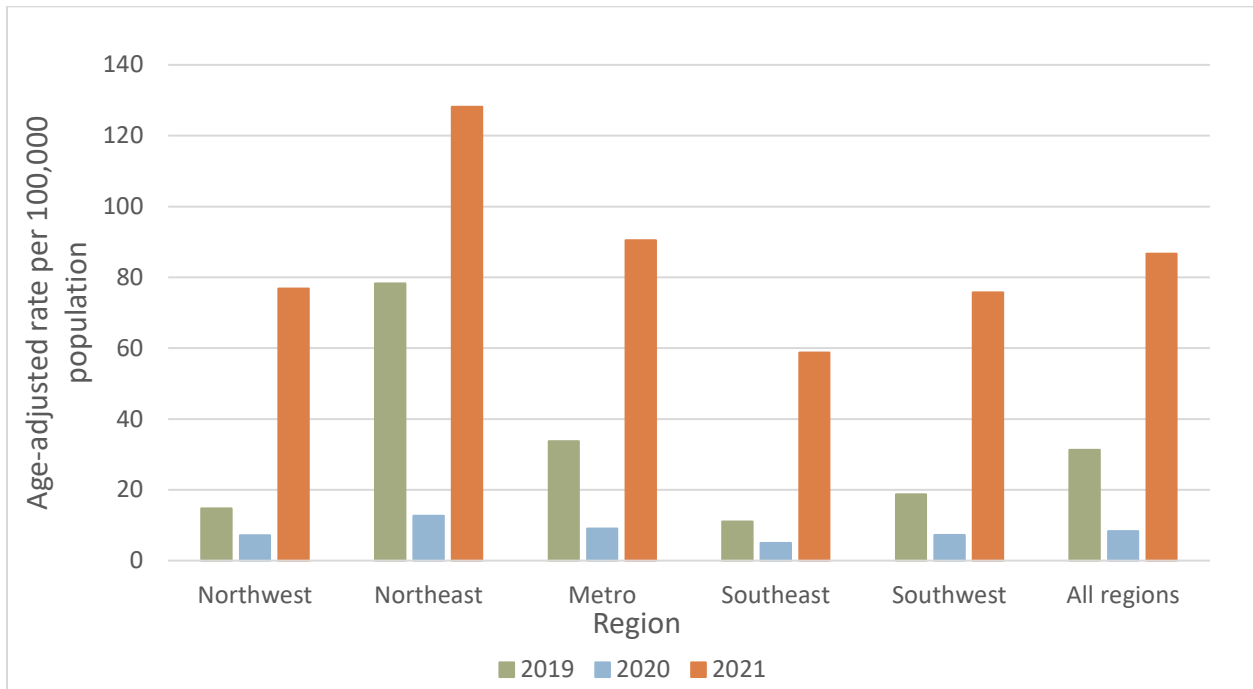
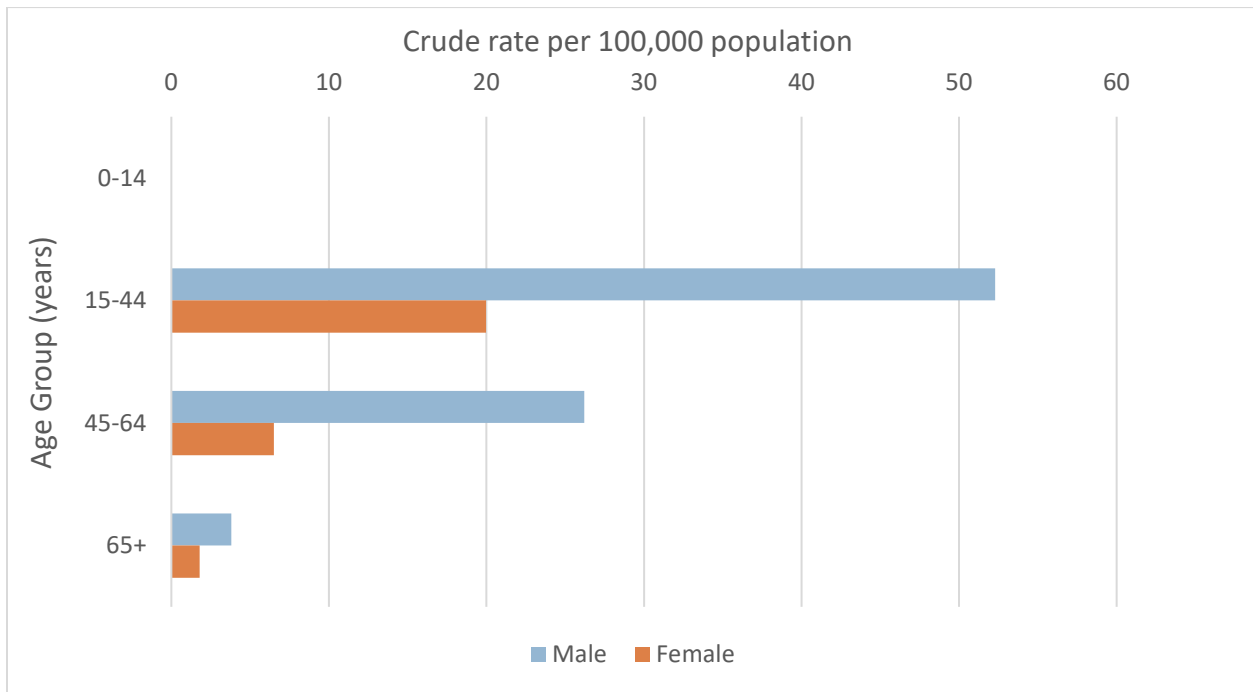


Figure 36. Rates of Heroin Overdose ED Visits by Age Group and Sex, NM, 2021



Note: There were no heroin overdose visits observed in the 0-14 age group in 2021.

Figure 37. Rates of Heroin Overdose ED Visits by Health Region, NM, 2019-2021

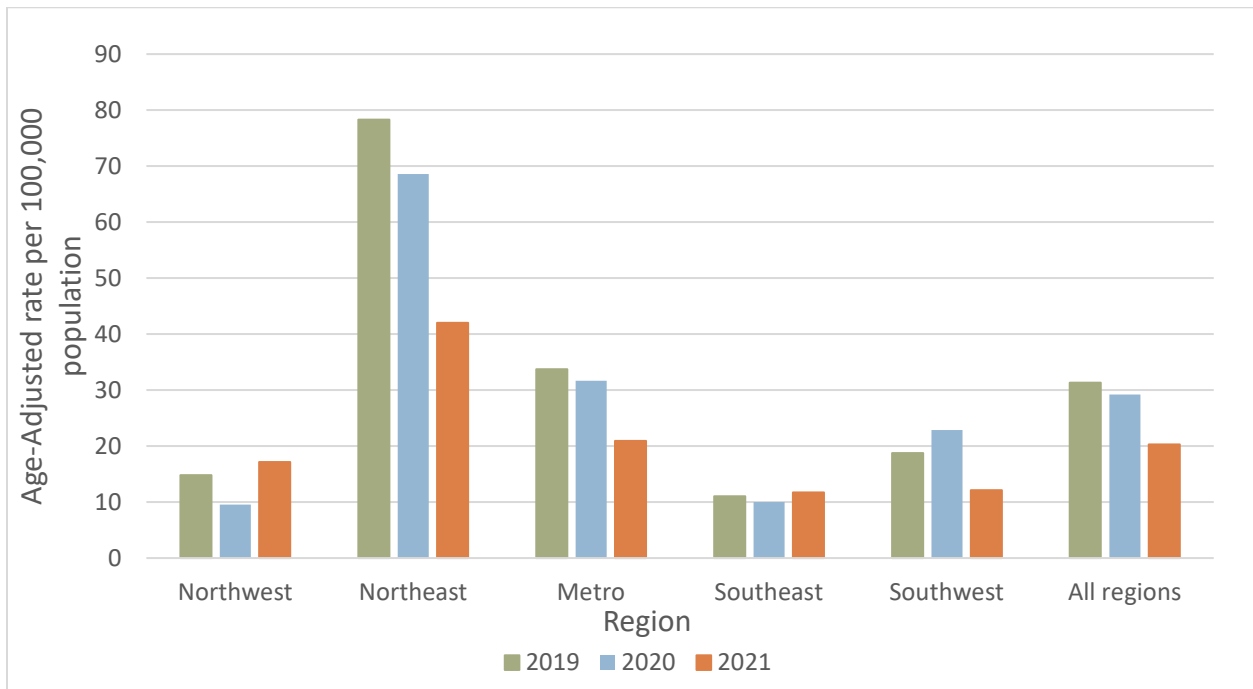


Figure 38. Rates of Fall Injury ED Visits by Age Group and Sex, NM, 2021

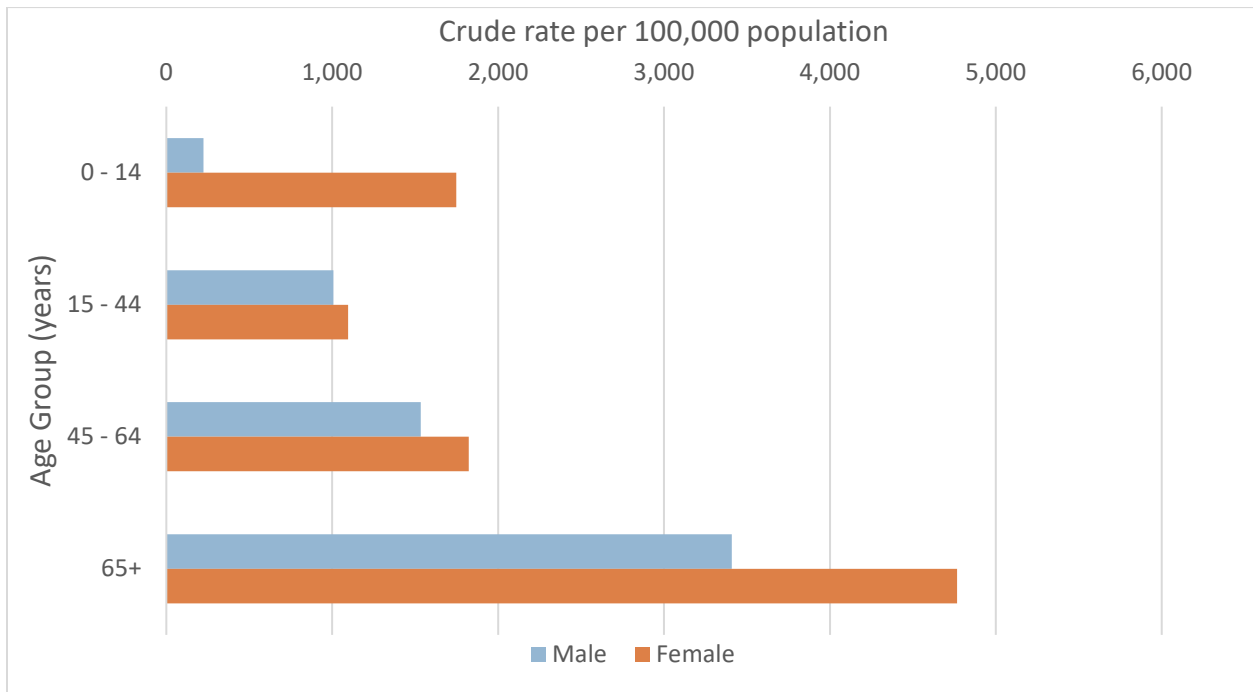


Figure 39. Rates of Fall Injury ED Visits by Health Region, NM, 2019-2021

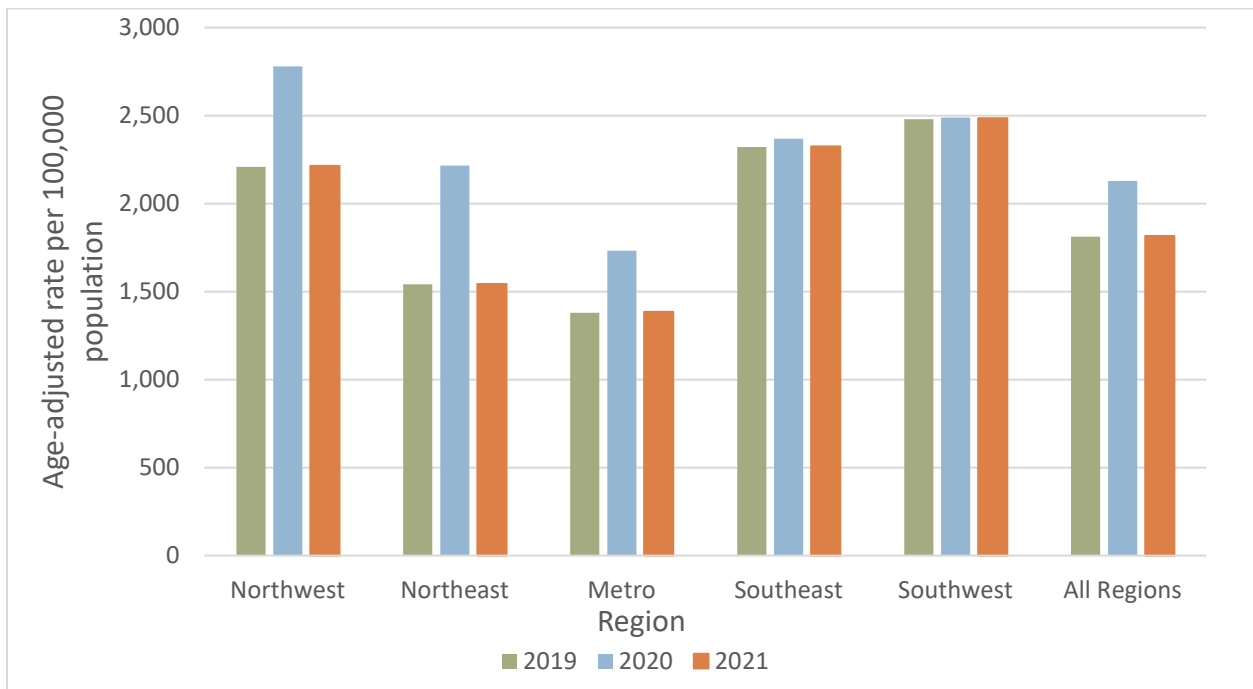


Figure 40. Rates of Injuries Due to Motor Vehicle Accident ED Visits by Age Group and Sex, NM, 2021

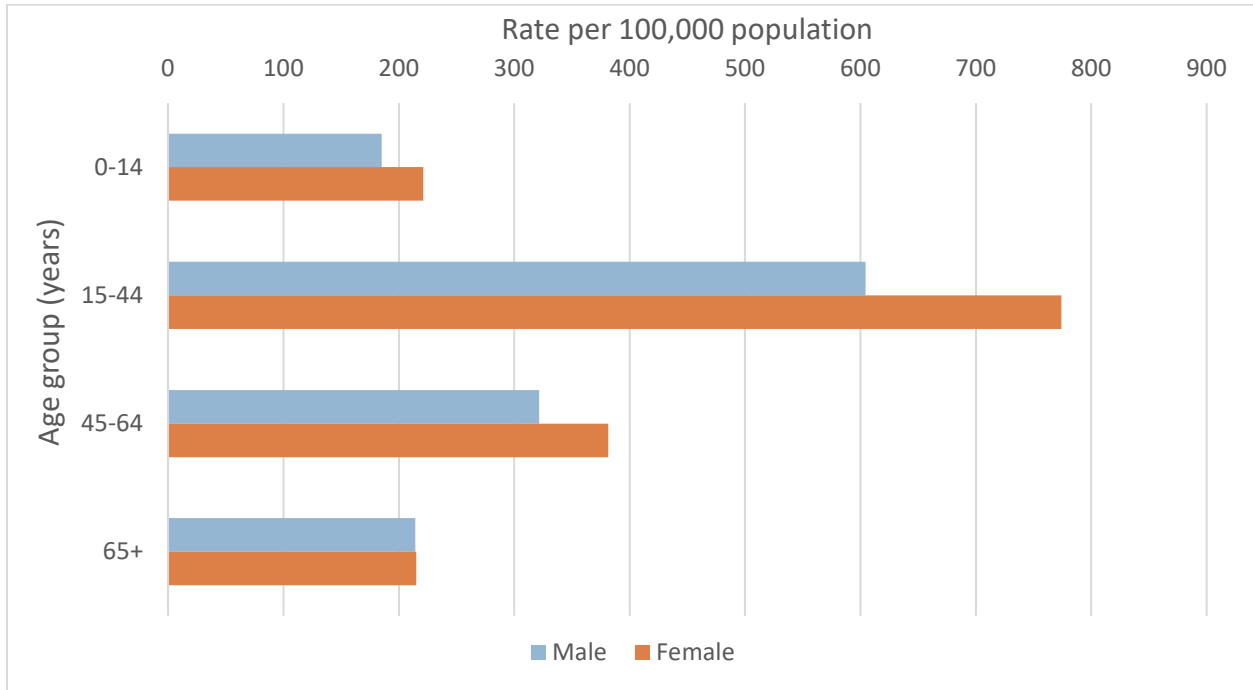
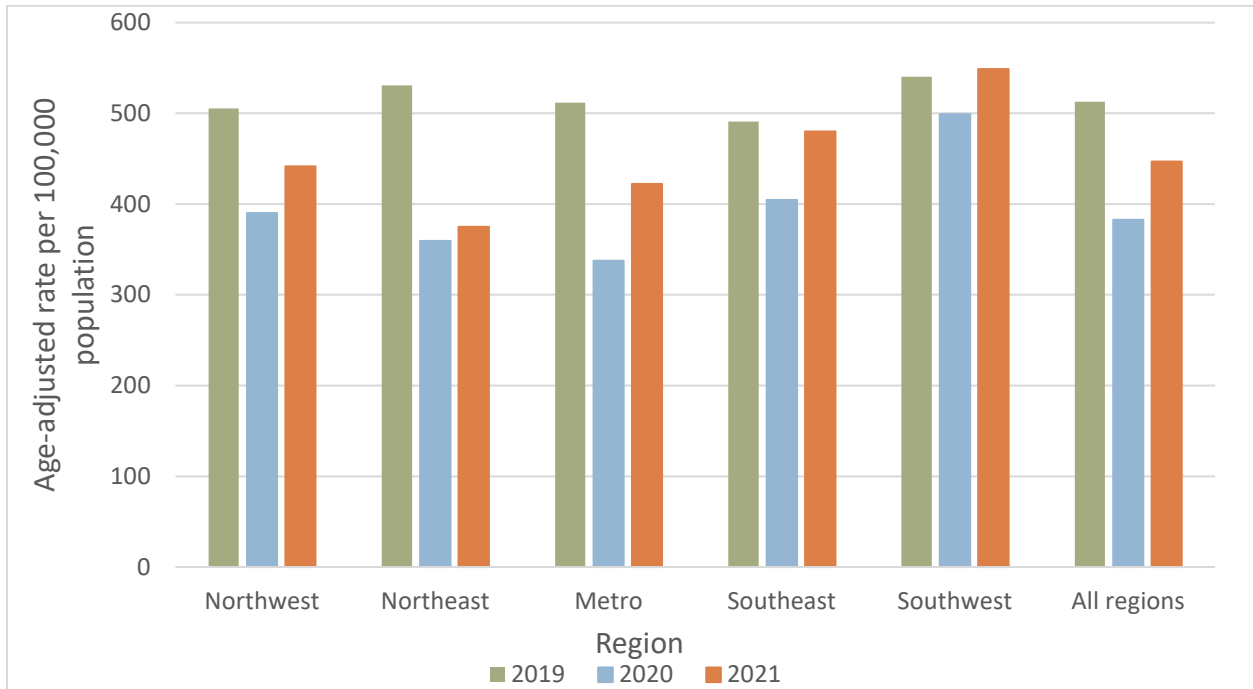


Figure 41. Rates of Injuries Due to Motor Vehicle Accident ED Visits by Health Region, NM, 2019-2021



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