

**An Update on Assigning Class of Case** –  
(CoC *Flash* – Dec. 2012)

Over the last two or three years, a substantial number of hospitals either have purchased physician practices or have begun to hire physicians. The physician or practice is now part of the hospital. Under these circumstances, diagnosis and first-course treatment performed by those physicians are coded as having been done *by the hospital*.

- Hospital A purchased an oncology clinic to provide service to patients living some distance from the main hospital location. Patients who receive first-course treatment in the clinic must be abstracted as having treatment “in the reporting facility” as analytic Class of Case 11-14 or 21-22.
- Hospital B has several dozen physician practices spread across a large metropolitan area; the physicians are employed by the hospital. All diagnosis and first-course treatment provided by these physicians must be abstracted as part of the hospital’s care (analytic Class of Case 00, 11-14, or 21-22).

The examples above illustrate that the geographic location of hospital-employed physicians does not determine Class of Case. Similarly, a practice or clinic that is not owned by the hospital but which rents space within its walls is considered “elsewhere” when patients are diagnosed or receive first course treatment there.

- An independent radiology clinic rents space from Hospital C and provides both diagnostic scans and radiotherapy treatment for many of Hospital C’s patients. Patients who receive care at the clinic must be abstracted by Hospital C *only* if the patient also receives care from the hospital itself. All care given by the clinic is “elsewhere” for the purposes of assigning Class of Case. If the program wishes to abstract cases that never receive care from the hospital, those cases are assigned an appropriate non-analytic Class of Case (usually 42).

The term “staff physician” is used to refer to independent physicians who have routine admitting privileges at the hospital.

- Patients who are diagnosed in the physician’s office by a physician who has routine practice privileges in a hospital and then receive first-course treatment from the hospital itself are abstracted as Class of Case 11 or 12, “initial diagnosis in a staff physician’s office....” If the program wishes to abstract cases seen by staff physicians that never receive care from the hospital, those cases are assigned an appropriate non-analytic Class of Case (usually 40-41).

There are a number of ways to determine whether a clinic or physician practice is part of the hospital.

- Does the hospital own the medical records for the practice?
- Does the hospital's accrediting organization (for example, The Joint Commission) identify the practice as a single entity with the hospital or as separate from it?
- If all else fails, ask your cancer committee or hospital administration what the relationship is.