

CPQCC Satellite NICUs

Year 2025

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Satellite NICUs Definition

Starting with the 2010 CPQCC Network Database, a **Satellite NICU** (or an Embedded NICU) is defined as a NICU owned and managed by one organization (**Main NICU**) located within a delivery facility owned and managed by another hospital (**Co-Located Hospital**).

CPQCC uses HCAI IDs (formerly OSHPD) to capture an infant’s location: birth location (birthlocation, Item 7c and C.32), transport location (xferlocation, Item 59), hospital that discharged infant home (lastHospital, Item 52), referring location (T_referringHospital, Item C.30) and previous transport referring hospital (T_prevHospital, Item C.31). As for most Satellite NICUs, HCAI (formerly OSHPD) reporting is consolidated with HCAI IDs reporting of the main NICU, Satellite NICUs typically do not have their own HCAI ID. Starting in May 2012, in order to capture correct infant location variables we introduced “fake” HCAI ID for all Satellite NICUs in the CPQCC Manual of Definitions.³

Note that we currently use “fake” HCAI IDs for military hospitals, birthing centers that do not report to HCAI and non-hospital or out-of-state hospital locations as well.³ We continue to update this list according to member requests for the specific Satellite NICU setup or member requests for the addition of non-CPQCC member Satellite NICUs of their main NICU.⁵

Table 1: CPQCC Satellite NICUs shows for each of the 11 Satellite NICUs that are currently incorporated into the CPQCC data collection, the associated main NICU and the hospital where the Satellite is located. The location codes (HCAI IDs or “fake” HCAI IDs) are shown in parenthesis for each location.

Table 1: CPQCC Satellite NICUs

SATELLITE NICU	MAIN NICU	CO-LOCATED HOSPITAL	COMMENTS
Children's Hospital of Orange County (CHOC) at Mission (304113)	Children's Hospital of Orange County, CHCC (300032)	Mission Hospital Regional Medical Center (301262)	
Lucille Packard Children's Special Care Nursery at Sequoia Hospital, LPCH (750002)	Lucille Packard Children's Hospital at Stanford, LPCH (434040)	Sequoia Hospital (410891)	
Rady Children's Hospital San Diego at Scripps La Jolla (750005)	Rady Children's Hospital San Diego (370673)	Scripps Memorial Hospital – La Jolla (370771)	

SATELLITE NICU	MAIN NICU	CO-LOCATED HOSPITAL	COMMENTS
Rady Children's Hospital San Diego at Scripps Encinitas (750004)	Rady Children's Hospital San Diego (370673)	Scripps Memorial Hospital – Encinitas (371394)	
Rady Children's NICU at Rancho Springs Medical Center in Murrieta (750007) ⁴	Rady Children's Hospital San Diego (370673)	Rancho Springs Medical Center in Murrieta (334068)	
Rady Children's NICU at Scripps Mercy San Diego (750010) ⁵	Rady Children's Hospital San Diego (370673)	Scripps Mercy San Diego	
Rady Children's NICU at Scripps Mercy Chula Vista (750011) ⁵	Rady Children's Hospital San Diego (370673)	Scripps Mercy Chula Vista	NICU closed in June 2024
Valley Children's Hospital at St. Agnes Medical Center (750001)	Children's Hospital Central California, CHCC (204019)	St. Agnes Medical Center (100899)	
Valley Children's Hospital at Adventist Medical Center, Hanford (750008) ⁴	Children's Hospital Central California, CHCC (204019)	Adventist Medical Center, Hanford (160787)	Non-CPQCC Member
Valley Children's Hospital at Mercy Medical Center, Merced (750009) ⁵	Children's Hospital Central California, CHCC (204019)	Mercy Medical Center, Merced (240942)	Non-CPQCC Member

Coding Instructions in www.cpqccdata.org

Item 7a. Location of Birth¹

1. **Inborn Infant.** For Satellite NICUs the Inborn option is not available.
2. **Infant Born at Co-Located Hospital.** Infants who are delivered at the Co-Located Hospital and then transferred to the Satellite NICU are considered infants Born at the Co-Located Hospital.
 Select **Born at Co-Located Hospital (Satellite NICUs Only)** from the drop-down box⁵ if your center is a Satellite NICU and the infant was delivered in the Co-Located hospital. This includes any location within the Co-Located hospital, e.g., Labor & Delivery, Antepartum unit, Emergency Room.
 For non-Satellite NICUs, the “Infant born at Co-Located Hospital” is not available.
3. **Outborn Infant.** Select **Outborn** if the infant was born in another facility or at any location outside the Co-Located hospital or home at any time after birth. Any infant requiring ambulance transport is considered Outborn. When completing the Admission/Discharge data forms for Outborn infants, use all information available from the hospital from which the infant was transported to your center as well as from your own center. Specifically:
 - **Outborn** should always be used for an infant who was previously home.
 - Infants who are delivered at the Main NICU and then transported to a Main NICU’s Satellite NICU are considered Outborn infants for the Satellite NICU.

Satellite NICU infants who are born at the Co-Located hospital are coded as follows:

7. a) Location of Birth

Note: For infants who were previously home, always check Outborn, even if the infant was born at your hospital or was born at the co-located hospital (for satellite NICUs only).

b) Age in Days at Admission to your NICU

c) Select hospital of birth for outborn infants
 [Narrow list](#) [Reset](#) [Click here for help with narrow list tool](#)

8. Hospital Admission History
Note: The Hyperbilirubinemia Items 50 to 52 are activated ONLY IF the infant Was Home after Birth (Item 8a).

a) Discharged Home after Birth?

b) NICU Re-Admission Status after PDH

- **Item 7a.** If a Satellite NICU is entering data for an infant born at the Co-Located Hospital who is then transferred to the Satellite NICU, code the infant as **Born at Co-Located Hospital** in Item 7a. Location of Birth.

Note: For non-Satellite NICUs the last option (Born at Co-Located Hospital) is not available; for Satellite NICUs the Inborn option is not available.

- **Item 7b.** For Small Babies, Item 7b. Age in Days at Admission to the Satellite NICU is set to 1.
- **Item 7c.** Once “Born at Co-Located Hospital” in Item 7a is selected, the system automatically sets “Item 7c. Select the hospital of birth” to the Co-Located Hospital’s HCAI ID number. The birth location is grayed out, and it cannot be changed by the Data Contact.

SITUATION	SITUATION A: Infant is born at the Co-Located Hospital, is transferred to the Satellite NICU, then transported to the Main NICU, and then back-transported to the Satellite NICU.		SITUATION B: Infant is born at the Co-Located Hospital, is transferred to a non-CPQCC member Satellite NICU, then transported to the Main NICU, and then back-transported to the non-CPQCC member Satellite NICU.	
2015/2016 ITEM ⁵	Main NICU enters data	Satellite NICU enters data	Main NICU enters data	NON-CPQCC Satellite NICU does not enter data
C.30 REFERRING HOSPITAL (HCAI)	Satellite NICU	N/A; CPeTS Form not required	Non-CPQCC Satellite NICU	N/A
C.31B. PREVIOUS TRANSFER REFERRING HOSPITAL (HCAI)	Not applicable	N/A; CPeTS Form not required	Not Applicable	N/A
C.32. LOCATION OF BIRTH (HCAI) -- NO CHANGE	Co-Located Hospital	N/A; CPeTS Form not required	Co-Located Hospital	N/A
7A. LOCATION OF BIRTH	Outborn	Born at Co-Located Hospital	Outborn	N/A

SITUATION	SITUATION A:		SITUATION B:	
7C. BIRTH HOSPITAL (HCAI) -- NO CHANGE	Co-located Hospital	Co-located Hospital	Co-located Hospital	N/A
59. HOSPITAL TRANSPORTED TO (HCAI)	Satellite NICU	Main NICU	Non-CPQCC Satellite NICU	N/A

CPeTS Form: Items C.30, C.31, 52 and 59 - HCAI List^{2,4}

After the initial system update that introduced revised data capture for Satellite NICUs, it was brought to our attention that Main NICUs wanted to be able to distinguish an infant that was transported to the Co-located Hospital’s Well-baby nursery FROM an infant that was transported to the Satellite NICU at the Co-located Hospital. Prior to the systems update in January 2011, Data Contacts were instructed to use the HCAI ID of the Co-located Hospital regardless of the location of transport.

Subsequently, we updated the hospital code list for the following Items: **C.30, C.31, 52 and 59**. Specifically, we used the “fake” HCAI ID codes created for the Satellite NICUs (see Table 1: CPQCC Satellite NICUs).⁵ This change did not affect the HCAI list for the Birth Location (Items C.32 and 7C).

Finally, note that the CPeTS form supports easy data entry of the referring location for infants born at a Co-located hospital (see screenshot below)⁵.

Referral Process

C.30 Referring Hospital Demo Center C (Satellite of A located at D) (000002) [Click for help with narrow list tool](#)

[Click here to copy the Birth Hospital](#)
[Click here to set to Satellite if Birth Hospital is a Hosting Location for a Satellite Unit and if the Satellite Unit made the referral](#)

C.31 a) Was the infant previously transported? No

b) Previous Transport Referring Hospital Not Applicable (777777)

[Click here to copy the Birth Hospital](#)
[Click here to set to Satellite if Birth Hospital is a Hosting Location for a Satellite Unit and if the Satellite Unit made the previous referral](#)

C.32 Location of Birth Demo Center D (000003)

[Click here to copy the Referring Hospital or the Hosting Location of the Referring Satellite Unit of your NICU](#)
[Click here to copy the Referring Hospital of the Previous Transport or the Hosting Location of the Referring Satellite Unit of your NICU](#)

C.33 Transport Team On-Site Leader Sub-specialist MD

Use this link to set item C.30 to the satellite NICU of the main NICU based on the location of birth.

Use this link to set item C31 to the satellite NICU of the main NICU based on the location of birth.

Use these links to set item C.32 to the co-located hospital if the referring location or the referring location of the previous transport is a satellite NICU co-located at the birth location.

Here are situational examples of how the systems update affects data entry:

For Situation B (Infant is born at the Co-Located Hospital, is transferred to a non-CPQCC member Satellite NICU, then transported to the Main NICU, and then back-transported to the non-CPQCC member Satellite NICU), if available member Centers should enter the “fake” **HCAI ID of the non-CPQCC Satellite NICU**. If no such code is available, the **HCAI code Other In-Patient Setting – California (890099)** should be used.

CCS Supplemental Form¹

Starting with the 2010 CCS Supplemental Form, the following revisions were implemented:

- In Section A, Total Live Births by Birth weight in your Center is replaced by **Total Live Births from the Co-Located Hospital**.⁵
- In Section A, Delivery Room Deaths is replaced by **Delivery Room Deaths from the Co-Located Hospital**.⁵
- In Section B, Inborn admissions to your NICU is replaced by **Infants born at Co-Located Hospital**.⁵
- In Section B, Outborn⁴ Admissions to your NICU⁵ should include infants who are transported into your NICU from all hospitals other than the Co-Located hospital.⁵
- In Section D, Total Live Births by Gestational in your Center is replaced by **Total Live Births from by Gestational Age at Co-Located Hospital**.⁵
- Per the request of the CPQCC Data Center, CCS released a revised support letter on May 9, 2016⁵ addressed to the CCS-approved Satellite NICUs to help facilitate the retrieval and reporting of data from the Co-Located Hospital. The CPQCC Data Center will continue to facilitate this process every year. Below is an excerpt:⁵

“The CPQCC Data Center has informed us that some Co-Located Hospital administrations do not grant their local NICU data reporting team access to certain required data elements. These locally restricted elements include: total live births by birthweight AND gestational age, delivery room deaths by birthweight, and inborn admissions by birthweight AND gestational age to the NICU. Every CCS-approved NICU operates in a CCS-approved Co-Located Hospital. Therefore, there are no HIPAA compliance issues with reporting these data.”⁵

CCS has worked directly with each Satellite NICU to retrieve the data from the Co-Located Hospital and continues in this process.⁵

This letter is located [here](#) and can be used⁵ to help facilitate the timely submission of the CCS Supplemental Form by the April 1st deadline if requested by Centers.

Technical Assistance

If you have any questions, concerns or recommendations, please submit a Help Ticket at [CPQCC Help Desk](#).