

**2022 SPARCS Data Submission Compliance Report -- Data Received Through March 2024
Submissions Not Meeting the Standard of 80% of 2021 Monthly Average (Feb and Dec Set at 75%)**

Facility=NORTH SHORE SURGICENTER (DTC) PFI: 004110

| File Type | Discharge Month | Prev Yr Avg | # Recds Expected (Target) | # Recds Loaded | Shortage | Pct of PrevYrAvg Submtd * | Exception On File w/SPARCS | Extension Granted | File Last Submtd |
|--------------------------------|-----------------|-------------|---------------------------|----------------|----------|---------------------------|----------------------------|-------------------|------------------|
| AS | January | 517 | 413 | 477 | | 92% | | | 2022 MAR |
| | February | | 387 | 491 | | 94% | | | 2022 MAR |
| | March | | 413 | 576 | | 111% | | | 2022 MAY |
| | April | | 413 | 487 | | 94% | | | 2023 FEB |
| | May | | 413 | 514 | | 99% | | | 2023 FEB |
| | June | | 413 | 533 | | 103% | | | 2022 AUG |
| | July | | 413 | 474 | | 91% | | | 2023 FEB |
| | August | | 413 | 506 | | 97% | | | 2023 FEB |
| | September | | 413 | 465 | | 89% | | | 2023 FEB |
| | October | | 413 | 441 | | 85% | | | 2023 FEB |
| | November | | 413 | 414 | | 80% | | | 2023 FEB |
| | December | | 387 | 463 | | 89% | | | 2023 JUN |
| Total Records Submitted: 5,841 | | | | | | | | | |