



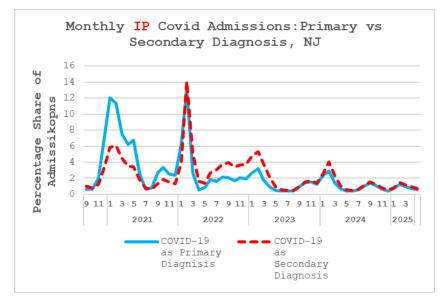
The Center for Health Analytics, Research and Transformation (CHART) at the New Jersey Hospital Association analyzed monthly hospital discharge data from March 2020 to March 2025 to examine shifts in the classification of COVID-19 diagnoses—whether primary or secondary. Primary diagnosis reflects a patient hospitalized *because* of COVID-19. Secondary diagnosis represents a patient hospitalized for another reason, but with an incidental COVID-19 infection.

The findings are presented through charts covering Inpatient (IP) admissions, Emergency Department (ED) encounters, and all patient types, including same-day medical/surgical cases.

Key Findings

Inpatient Admissions (IP)

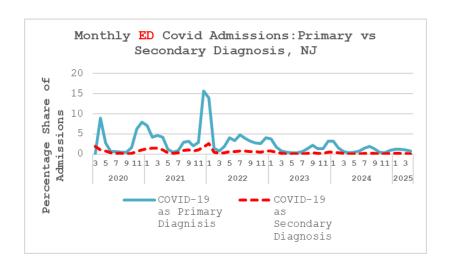
- Primary COVID-19 diagnoses dominated early in the pandemic and remained higher through 2021, despite a brief convergence with secondary diagnoses midyear.
- By early 2022, secondary diagnoses began to surpass primary ones, widening the gap through mid-2023.
- From mid-2023 onward, the percentages of primary and secondary COVID-19 diagnoses stabilized at roughly equal levels.



Emergency Department (ED) Encounters

- Primary COVID-19 diagnoses consistently outnumbered secondary ones throughout the study period.
- Secondary diagnoses remained lower, with fewer fluctuations in percentages.

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Other

- Trends for all patients combined mirrored those seen in ED encounters, likely due to the large representation of ED patients in the dataset.
- Trends by gender and race/ethnicity aligned with the overall patterns observed in IP and ED data.

General Observation

Unless there is a significant resurgence of pandemic-level conditions, the distribution of COVID-19 diagnoses among hospital patients appears to have stabilized. These insights offer context that may be valuable in understanding virus circulation and measuring the burden of disease.

Visit <u>www.njha.com/chart</u> for additional resources. The New Jersey Hospital Association (njha.com)