



PEDIATRIC QUALITY INDICATOR v4.5 BENCHMARK DATA TABLES

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Introduction

The data presented in this document are nationwide comparative rates for the AHRQ QI™ Pediatric Quality Indicators (PDI). The rates are based on analysis of 44 states from the 2010 Agency for Healthcare Research and Quality's Healthcare Cost and Utilization Project (HCUP) State Inpatient Databases (SID)¹. HCUP is a family of health care databases and related software tools and products developed through a Federal-State-Industry partnership². HCUP includes the largest collection of longitudinal hospital care data in the United States, with all-payer, encounter-level information beginning in 1988. The SID contain all-payer, encounter-level information on inpatient discharges, including clinical and resource information typically found on a billing record, such as patient demographics, up to 30 *International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM)* diagnoses and procedures, length of stay (LOS), expected payer, admission and discharge dates and discharge disposition. In 2010, the HCUP databases represent more than 95 percent of all annual discharges in the U.S. The dataset analyzed to generate the tables in this document consists of the same hospital discharge records that comprise the reference population for version 4.5 of the AHRQ QI.

The indicators are calculated using the QI software option that models the effect of missing present on admission (POA) data. The QI observed rate for provider-level indicators are scaled to the rate per 1,000 persons at risk and the area-level indicators are per 100,000. Volume and count indicator results are listed as simple counts with no scaling at all. Rates for any cells with 1-10 cases are not presented. Counts and rates in cells adjacent to cells with missing counts are obscured slightly to prevent back-calculation of the non-reported counts. The obscured counts are listed using a range of ten patients and the rates correspond to the obscured counts. This

¹ The states included in the analysis are Alaska, Arkansas, Arizona, California, Colorado, Connecticut, Florida, Georgia, Hawaii, Iowa, Illinois, Indiana, Kansas, Kentucky, Louisiana, Massachusetts, Maryland, Maine, Michigan, Minnesota, Missouri, Montana, North Carolina, Nebraska, New Jersey, New Mexico, Nevada, New York, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Vermont, Washington, Wisconsin, West Virginia, and Wyoming.

² The AHRQ QI program

would like to acknowledge the HCUP Partner organizations that participated in the HCUP SID: **Alaska** State Hospital and Nursing Home Association, **Arizona** Department of Health Services, **Arkansas** Department of Health, **California** Office of Statewide Health Planning and Development, **Colorado** Hospital Association, **Connecticut** Hospital Association, **Florida** Agency for Health Care Administration, **Georgia** Hospital Association, **Hawaii** Health Information Corporation, **Illinois** Department of Public Health, **Indiana** Hospital Association, **Iowa** Hospital Association, **Kansas** Hospital Association, **Kentucky** Cabinet for Health and Family Services, **Louisiana** Department of Health and Hospitals, **Maine** Health Data Organization, **Maryland** Health Services Cost Review Commission, **Massachusetts** Center for Health Information and Analysis, **Michigan** Health & Hospital Association, **Minnesota** Hospital Association (provides data for Minnesota and North Dakota), **Mississippi** Department of Health, **Missouri** Hospital Industry Data Institute, **Montana** MHA - An Association of Montana Health Care Providers, **Nebraska** Hospital Association, **Nevada** Department of Health and Human Services, **New Hampshire** Department of Health & Human Services, **New Jersey** Department of Health, **New Mexico** Department of Health, **New York** State Department of Health, **North Carolina** Department of Health and Human Services, **North Dakota** (data provided by the Minnesota Hospital Association), **Ohio** Hospital Association, **Oklahoma** State Department of Health, **Oregon** Association of Hospitals and Health Systems, **Oregon** Health Policy and Research, **Pennsylvania** Health Care Cost Containment Council, **Rhode Island** Department of Health, **South Carolina** Budget & Control Board, **South Dakota** Association of Healthcare Organizations, **Tennessee** Hospital Association, **Texas** Department of State Health Services, **Utah** Department of Health, **Vermont** Association of Hospitals and Health Systems, **Virginia** Health Information, **Washington** State Department of Health, **West Virginia** Health Care Authority, **Wisconsin** Department of Health Services, **Wyoming** Hospital Association

document also includes rates for PSI #17 and PQI #9 because they relate to the pediatric population. For additional detail about the AHRQ QI, consult the technical documentation at <http://www.qualityindicators.ahrq.gov>.

Table 1 lists the PDI figures calculated for the overall reference population. Subsequent tables each focus on a single indicator and present the overall figures again, along with figures stratified by gender, age group, and expected payer.

Table 1. Pediatric Quality Indicators (PDI) For Overall Population

INDICATOR	LABEL	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
PROVIDER-LEVEL INDICATORS				
NQI #1	Neonatal Iatrogenic Pneumothorax Rate	46	228,534	0.20
NQI #2	Neonatal Mortality Rate	9,267	3,656,745	2.53
NQI #3	Neonatal Blood Stream Infection Rate	1,961	82,285	23.83
PDI #1	Accidental Puncture or Laceration Rate	1,979	3,062,259	0.6
PDI #2	Pressure Ulcer Rate	57	382,754	0.15
PDI #3	Retained Surgical Item or Unretrieved Device Fragment Count	42		
PDI #5	Iatrogenic Pneumothorax Rate	385	2,779,406	0.14
PDI #6	RACHS-1 Pediatric Heart Surgery Mortality Rate	741	20,107	36.85
PDI #7	RACHS-1 Pediatric Heart Surgery Volume	23,503		
PDI #8	Perioperative Hemorrhage or Hematoma Rate	636	129,863	4.90
PDI #9	Postoperative Respiratory Failure Rate	1,117	101,810	10.97
PDI #10	Postoperative Sepsis Rate	1,444	89,058	16.21
PDI #11	Postoperative Wound Dehiscence Rate	66	62,711	1.05
PDI #12	Central Venous Catheter-Related Blood Stream Infection Rate	1,813	2,431,006	0.75
PDI #13	Transfusion Reaction Count	*****		
PSI #17	Birth Trauma Rate – Injury to Neonate	7,501	3,571,903	2.10
AREA-LEVEL INDICATORS				
PDI #14	Asthma Admission Rate	79,275	66,274,258	119.62
PDI #15	Diabetes Short-Term Complications Admission Rate	12,725	50,102,536	25.40
PDI #16	Gastroenteritis Admission Rate	46,392	73,333,491	63.26
PDI #17	Perforated Appendix Admission Rate	20,656	67,683	30,518.74
PDI #18	Urinary Tract Infection Admission Rate	26,290	73,333,470	35.85
PDI #90	Pediatric Quality Overall Composite	77,630	50,102,582	154.94
PDI #91	Pediatric Quality Acute Composite	24,882	50,102,544	49.66
PDI #92	Pediatric Quality Chronic Composite	52,748	50,102,552	105.28
PQI #9	Low Birth Weight Rate	228,405	3,655,006	6,249.10

***** Cells entries based on counts between 0 and 11 are not reported.

Table 2. NQI #1 - Neonatal Iatrogenic Pneumothorax Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	46	228,534	0.20
Females	25	113,851	0.22
Males	22	114,684	0.19
<1 year	46	228,534	0.20
Private	18	96,254	0.19
Medicare	0	251	0
Medicaid	21	116,828	0.18
Other	*****	8,166	*****
Uninsured (self-pay/no charge)	*****	7,035	*****

***** Cells entries based on counts between 0 and 11 are not reported.

Table 3. NQI #2 - Neonatal Mortality Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	9,267	3,656,745	2.53
Females	3,925	1,785,198	2.20
Males	5,342	1,871,547	2.85
<1 year	9,267	3,656,745	2.53
Private	3,384	1,718,272	1.97
Medicare	*****	4,476	*****
Medicaid	4,800	1,671,491	2.87
Other	401	113,800	3.52
Uninsured (self-pay/no charge)	672	148,706	4.52

***** Cells entries based on counts between 0 and 11 are not reported.

Table 4. NQI #3 - Neonatal Blood Stream Infection Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	1,961	82,285	23.83
Females	858	36,864	23.27
Males	1,104	45,422	24.31
<1 year	1,961	82,285	23.83
Private	720	33,693	21.37
Medicare	0	70	0
Medicaid	1,132	43,670	25.92
Other	92	3,419	26.91
Uninsured (self-pay/no charge)	17	1,433	11.86

Table 5. PDI #1 - Accidental Puncture or Laceration Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	1,979	3,062,259	0.65
Females	795	1,394,157	0.57
Males	1,183	1,668,101	0.71
<1 year	874	1,582,394	0.55
1 to 2 years	206	301,476	0.68
3 to 5 years	164	231,980	0.71
6 to 12 years	341	419,859	0.81
13 to 17 years	395	526,551	0.75
Private	893-902*	1,325,679	0.67-0.68*
Medicare	*****	6,609	*****
Medicaid	919	1,494,364	0.61
Other	120	129,165	0.93
Uninsured (self-pay/no charge)	38	106,441	0.36

***** Cells entries based on counts between 0 and 11 are not reported.

* Cell entry obscured slightly to prevent back-calculation of small cells.

Table 6. PDI #2 - Pressure Ulcer Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	57	382,754	0.15
Females	20	178,116	0.11
Males	37	204,638	0.18
<1 year	*****	50,924	*****
1 to 2 years	*****	35,877	*****
3 to 5 years	*****	31,899	*****
6 to 12 years	16	98,254	0.16
13 to 17 years	26	165,799	0.16
Private	22	153,872	0.14
Medicare	0	1,677	0.00
Medicaid	26-35*	192,118	0.14-0.18*
Other	*****	23,845	*****
Uninsured (self-pay/no charge)	0	11,242	0.00

***** Cells entries based on counts between 0 and 11 are not reported.

* Cell entry obscured slightly to prevent back-calculation of small cells.

Table 7. PDI #3 - Retained Surgical Item or Unretrieved Device Fragment Count

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	42		
Females	15		
Males	27		
<1 year	*****		
1 to 2 years	*****		
3 to 5 years	*****		
6 to 12 years	*****		
13 to 17	15		
Private	24		
Medicare	0		
Medicaid	8-17*		
Other	0		
Uninsured (self-pay/no charge)	*****		

***** Cells entries based on counts between 0 and 11 are not reported.

* Cell entry obscured slightly to prevent back-calculation of small cells.

Table 8. PDI #5 - Iatrogenic Pneumothorax Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	385	2,779,406	0.14
Females	187	1,260,091	0.15
Males	198	1,519,315	0.13
<1 year	128	1,329,762	0.10
1 to 2 years	37	294,181	0.13
3 to 5 years	38	225,064	0.17
6 to 12 years	76	412,403	0.18
13 to 17 years	106	517,996	0.20
Private	175	1,206,103	0.15
Medicare	*****	6,255	*****
Medicaid	176	1,351,332	0.13
Other	27	117,701	0.23
Uninsured (self-pay/no charge)	*****	98,014	*****

***** Cells entries based on counts between 0 and 11 are not reported.

Table 9. PDI #6 - RACHS-1 Pediatric Heart Surgery Mortality Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	741	20,107	36.85
Females	348	9,048	38.46
Males	393	11,059	35.54
<1 year	655	11,847	55.29
1 to 2 years	36	2,556	14.08
3 to 5 years	14	2,327	6.02
6 to 12 years	21	2,088	10.06
13 to 17 years	15	1,289	11.64
Private	279	8,973	31.09
Medicare	*****	15	*****
Medicaid	399	9,449	42.23
Other	52	1,276	40.75
Uninsured (self-pay/no charge)	*****	394	*****

***** Cells entries based on counts between 0 and 11 are not reported.

Table 10. PDI #7 - RACHS-1 Pediatric Heart Surgery Volume

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	23,503		
Females	10,648		
Males	12,855		
<1 year	14,982		
1 to 2 years	2,609		
3 to 5 years	2,360		
6 to 12 years	2,168		
13 to 17 years	1,384		
Private	10,339		
Medicare	19		
Medicaid	11,193		
Other	1,522		
Uninsured (self-pay/no charge)	430		

Table 11. PDI #8 - Perioperative Hemorrhage or Hematoma Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	636	129,863	4.90
Females	306	61,362	4.99
Males	329	68,500	4.80
<1 year	214	21,527	9.94
1 to 2 years	79	18,695	4.23
3 to 5 years	83	17,258	4.81
6 to 12 years	114	33,085	3.45
13 to 17 years	146	39,298	3.72
Private	309	69,470	4.45
Medicare	11	400	27.50
Medicaid	269	49,265	5.46
Other	37	8,060	4.59
Uninsured (self-pay/no charge)	11	2,669	4.12

Table 12. PDI #9 - Postoperative Respiratory Failure Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	1,117	101,810	10.97
Females	512	49,170	10.41
Males	605	52,640	11.49
<1 year	302	12,821	23.56
1 to 2 years	193	13,590	14.20
3 to 5 years	131	13,100	10.00
6 to 12 years	266	27,806	9.57
13 to 17 years	224	34,492	6.49
Private	470	55,442	8.48
Medicare	13	361	36.01
Medicaid	547	37,816	14.46
Other	77-86*	6,081	12.66-14.14
Uninsured (self-pay/no charge)	*****	2,110	*****

***** Cells entries based on counts between 0 and 11 are not reported.

* Cell entry obscured slightly to prevent back-calculation of small cells.

Table 13. PDI #10 - Postoperative Sepsis Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	1,444	89,058	16.21
Females	676	39,719	17.02
Males	768	49,339	15.57
<1 year	571	17,803	32.07
1 to 2 years	229	10,861	21.08
3 to 5 years	119	9,634	12.35
6 to 12 years	197	20,462	9.63
13 to 17 years	327	30,297	10.79
Private	553	42,962	12.87
Medicare	11	534	20.60
Medicaid	731	37,980	19.25
Other	128	5,413	23.65
Uninsured (self-pay/no charge)	20	2,168	9.23

Table 14. PDI #11 - Postoperative Wound Dehiscence Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	66	62,711	1.05
Females	28	24,968	1.12
Males	38	37,743	1.01
<1 year	33	24,719	1.34
1 to 2 years	*****	5,298	*****
3 to 5 years	*****	5,710	*****
6 to 12 years	12	14,241	0.84
13 to 17 years	11	12,743	0.86
Private	22	28,022	0.79
Medicare	0	55	0.00
Medicaid	34-43*	30,184	1.13-1.42*
Other	*****	2,804	*****
Uninsured (self-pay/no charge)	0	1,646	0.00

***** Cells entries based on counts between 0 and 11 are not reported.

* Cell entry obscured slightly to prevent back-calculation of small cells.

Table 15. PDI #12 - Central Venous Catheter-Related Blood Stream Infection Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	1,813	2,431,006	0.75
Females	823	1,118,732	0.74
Males	990	1,312,274	0.75
<1 year	930	1,346,067	0.69
1 to 2 years	268	202,444	1.32
3 to 5 years	170	155,947	1.09
6 to 12 years	235	308,004	0.76
13 to 17 years	210	418,544	0.50
Private	656	1,041,920	0.63
Medicare	14	5,446	2.57
Medicaid	996	1,202,751	0.83
Other	135	100,280	1.35
Uninsured (self-pay/no charge)	12	80,609	0.15

Table 16. PDI #13 - Transfusion Reaction Count

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	*****		
Females	*****		
Males	*****		
<1 year	0		
1 to 2 years	0		
3 to 5 years	0		
6 to 12 years	*****		
13 to 17 years	*****		
Private	*****		
Medicare	0		
Medicaid	*****		
Other	0		
Uninsured (self-pay/no charge)	0		

***** Cells entries based on counts between 0 and 11 are not reported.

Table 17. PSI #17 - Birth Trauma Rate – Injury to Neonate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	7,501	3,571,903	2.10
Females	3,371	1,741,611	1.94
Males	4,130	1,830,292	2.26
<1 year	7,501	3,571,903	2.10
Private	3,644	1,684,279	2.16
Medicare	*****	4,397	*****
Medicaid	3,313-3,322	1,626,294	2.04
Other	271	110,132	2.46
Uninsured (self-pay/no charge)	263	146,801	1.79

***** Cells entries based on counts between 0 and 11 are not reported.

* Cell entry obscured slightly to prevent back-calculation of small cells.

Area-level Indicators

Table 18. PDI #14 - Asthma Admission Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 100,000 (=OBSERVED RATE*100,000)
Overall	79,275	66,274,258	119.62
Females	30,503	32,381,819	94.20
Males	48,772	33,892,438	143.90
0 to 4 years	31,636	12,101,539	261.42
5 to 9 years	28,652	20,350,902	140.79
10 to 14 years	14,304	20,660,410	69.23
15 to 17 years	4,683	13,161,407	35.58

Table 19. PDI #15 - Diabetes Short-Term Complications Admission Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 100,000 (=OBSERVED RATE*100,000)
Overall	12,725	50,102,536	25.40
Females	6,892	24,469,553	28.17
Males	5,833	25,632,982	22.76
5 to 9 years	1,954	16,280,714	12.00
10 to 14 years	5,875	20,660,407	28.44
15 to 17 years	4,896	13,161,415	37.20

Table 20. PDI #16 - Gastroenteritis Admission Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 100,000 (=OBSERVED RATE*100,000)
Overall	46,392	73,333,491	63.26
Females	21,583	35,835,296	60.23
Males	24,809	37,498,194	66.16
0 to 4 years	29,931	19,160,778	156.21
5 to 9 years	8,901	20,350,899	43.74
10 to 14 years	4,485	20,660,406	21.71
15 to 17 years	3,075	13,161,408	23.36

Table 21. PDI #17 - Perforated Appendix Admission Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	20,656	67,683	305.18
Females	8,137	26,887	302.63
Males	12,519	40,796	306.86
0 to 4 years	2,341	3,733	627.10
5 to 9 years	6,429	17,808	361.01
10 to 14 years	7,931	27,644	286.89
15 to 17 years	3,955	18,498	213.80

Note: Denominator is based on the number of discharges with a diagnosis of appendicitis, rather than the Metro Area or county population. Rate is scaled to per 1,000 persons at risk.

Table 22. PDI #18 - Urinary Tract Infection Admission Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 100,000 (=OBSERVED RATE*100,000)
Overall	26,290	73,333,470	35.85
Females	21,522	35,835,293	60.06
Males	4,768	37,498,177	12.72
0 to 4 years	13,957	19,160,755	72.84
5 to 9 years	5,123	20,350,898	25.17
10 to 14 years	2,585	20,660,406	12.51
15 to 17 years	4,625	13,161,411	35.14

Table 23. PDI #90 - Pediatric Quality Overall Composite

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 100,000 (=OBSERVED RATE*100,000)
Overall	77,630	50,102,582	154.94
Females	39,396	24,469,584	161.00
Males	38,234	25,632,998	149.16
5 to 9 years	33,102	16,280,736	203.32
10 to 14 years	27,249	20,660,415	131.89
15 to 17 years	17,279	13,161,431	131.29

Table 24. PDI #91 - Pediatric Quality Acute Composite

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 100,000 (=OBSERVED RATE*100,000)
Overall	24,882	50,102,544	49.66
Females	16,355	24,469,557	66.84
Males	8,527	25,632,987	33.27
5 to 9 years	10,112	16,280,723	62.11
10 to 14 years	7,070	20,660,407	34.22
15 to 17 years	7,700	13,161,414	58.50

Table 25. PDI #92 - Pediatric Quality Chronic Composite

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 100,000 (=OBSERVED RATE*100,000)
Overall	52,748	50,102,552	105.28
Females	23,041	24,469,561	94.16
Males	29,707	25,632,990	115.89
5 to 9 years	22,990	16,280,725	141.21
10 to 14 years	20,179	20,660,412	97.67
15 to 17 years	9,579	13,161,415	72.78

Table 26. PQI #9 - Low Birth Weight Rate

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	228,405	3,655,006	62.49
Females	116,686	1,783,400	65.42
Males	111,719	1,871,606	59.69
0 to 4 years	228,405	3,655,006	62.49

Note: Rate is scaled to per 1,000 persons at risk.