

# Diabetes Short-Term Complications Admission Rate

## Prevention Quality Indicators #1 Technical Specifications

### Area-Level Indicator

### AHRQ Quality Indicators, Version 4.3, August 2011

Version 4.3a is a maintenance release of Version 4.3. The differences between the two versions are:

- Version 4.3a includes Version 29 of the Limited License edition of the 3M™ APR-DRG Grouper. This grouper corrects an issue found in Version 28 of the Limited License edition of the 3M™ APR-DRG Grouper. The grouper is only used with the Inpatient Quality Indicator (IQI) mortality measures. Version 4.3 includes Version 28 of the Limited License edition of the 3M™ APR-DRG Grouper, which was incorrectly assigning a Risk of Mortality (ROM) subclass for cases dated on or after 10/1/10.
- Version 4.3a allows users to calculate area-level indicators for years 2010 and 2011, correcting an issue previously identified in Version 4.3.

All other aspects of the software, including measure specifications, remain the same. Thus this document (related to Version 4.3) remains unchanged.

## Numerator

All discharges of age 18 years and older with ICD-9-CM principal diagnosis code for diabetes short-term complications (ketoacidosis, hyperosmolarity, coma) (see below).

### ICD-9-CM Diabetes short-term complications diagnosis codes:

25010	DM KETO T2, DM CONT	25022	DM W/ HYPROSM T2, DM UNCNT
25011	DM KETO T1, DM CONT	25023	DM W/ HYPROSM T1, DM UNCNT
25012	DM KETO T2, DM UNCONT	25030	DM COMA NEC TYP II, DM CNT
25013	DM KETO T1, DM UNCONT	25031	DM COMA NEC T1, DM CONT
25020	DM W/ HYPROSM T2, DM CONT	25032	DM COMA NEC T2, DM UNCONT
25021	DM W/ HYPROSM T1, DM CONT	25033	DM COMA NEC T1, DM UNCONT

See *Prevention Quality Indicators Appendices*:

- Appendix A – Admission Codes for Transfers

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Exclude cases:

- transfer from a hospital (different facility)
- transfer from a Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF)
- transfer from another health care facility
- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing), county (PSTCO=missing)

## **Denominator**

Discharges in the numerator are assigned to the denominator based on the Metro Area<sup>1</sup> or county of the patient residence, not the Metro Area or county of the hospital where the discharge occurred.<sup>2</sup>

May be combined with uncontrolled diabetes as a single indicator as a simple sum of the rates to form the Health People 2010 indicator (note that the AHRQ QI excludes transfers to avoid double counting cases).

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<sup>1</sup> The term “metropolitan area” (MA) was adopted by the U.S. Census in 1990 and referred collectively to metropolitan statistical areas (MSAs), consolidated metropolitan statistical areas (CMSAs), and primary metropolitan statistical areas (PMSAs). In addition, “area” could refer to either 1) FIPS county, 2) modified FIPS county, 3) 1999 OMB Metropolitan Statistical Area, or 3) 2003 OMB Metropolitan Statistical Area. Micropolitan Statistical Areas are not used in the QI software.

<sup>2</sup> The denominator can be specified with the diabetic population only and calculated with the QI SAS software through the condition-specific denominator at the state level feature.