

Diabetes Long-Term Complications Admission Rate Technical Specifications

Prevention Quality Indicators #3 (PQI #3)

AHRQ Quality Indicators™, Version 4.5, May 2013

Area-Level Indicator

Type of Score: Rate

Description

Admissions for a principal diagnosis of diabetes with long-term complications (renal, eye, neurological, circulatory, or complications not otherwise specified) per 100,000 population, ages 18 years and older. Excludes obstetric admissions and transfers from other institutions.

[NOTE: The software provides the rate per population. However, common practice reports the measure as per 100,000 population. The user must multiply the rate obtained from the software by 100,000 to report admissions per 100,000 population.]

Numerator

Discharges, for patients ages 18 years and older, with a principal ICD-9-CM diagnosis code for diabetes with long-term complications (renal, eye, neurological, circulatory, or complications not otherwise specified).

[NOTE: By definition, discharges with a principal diagnosis of diabetes with long-term complications are precluded from an assignment of MDC 14 by grouper software. Thus, obstetric discharges should not be considered in the PQI rate, though the AHRQ QI™ software does not explicitly exclude obstetric cases.]

ICD-9-CM Diabetes with long-term complications diagnosis codes:

25040	DMII RENL NT ST UNCNRD	25070	DMII CIRC NT ST UNCNRD
25041	DMI RENL NT ST UNCNRD	25071	DMI CIRC NT ST UNCNRD
25042	DMII RENAL UNCNRD	25072	DMII CIRC UNCNRD
25043	DMI RENAL UNCNRD	25073	DMI CIRC UNCNRD
25050	DMII OPHTH NT ST UNCNRD	25080	DMII OTH NT ST UNCNRD
25051	DMI OPHTH NT ST UNCNRD	25081	DMI OTH NT ST UNCNRD
25052	DMII OPHTH UNCNRD	25082	DMII OTH UNCNRD
25053	DMI OPHTH UNCNRD	25083	DMI OTH UNCNRD
25060	DMII NEURO NT ST UNCNRD	25090	DMII UNSPF NT ST UNCNRD
25061	DMI NEURO NT ST UNCNRD	25091	DMI UNSPF NT ST UNCNRD
25062	DMII NEURO UNCNRD	25092	DMII UNSPF UNCNRD
25063	DMI NEURO UNCNRD	25093	DMI UNSPF UNCNRD

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
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing), principal diagnosis (DX1=missing), or county (PSTCO=missing)

See *Prevention Quality Indicators Appendices*:

- Appendix A – Admission Codes for Transfers

Denominator

Population ages 18 years and older in metropolitan area[†] or county. Discharges in the numerator are assigned to the denominator based on the metropolitan area or county of the patient residence, not the metropolitan area or county where the hospital discharge occurred.[‡]

[†] 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 4) 2003 OMB Metropolitan Statistical Area. Metropolitan Statistical Areas are not used in the QI software.

[‡] The denominator can be specified with the diabetic population only and calculated with the SAS QI software through the condition-specific denominator at the state-level feature.