

AHRQ Quality Indicators™



INPATIENT QUALITY INDICATORS™ v2020 BENCHMARK DATA TABLES

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Introduction

The data presented in this document are nationwide comparative rates for Version 2020 of Agency for Healthcare Research and Quality (AHRQ) Quality Indicators™ (QI) Inpatient Quality Indicators (IQI) software. The numerators, denominators and observed rates shown in this document are based on an analysis of discharge data from the 2017 AHRQ Healthcare Cost and Utilization Project (HCUP) State Inpatient Databases (SID).

HCUP is a family of healthcare databases and related software tools and products developed through a Federal-State-industry partnership. 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 contains 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, Tenth Revision, Clinical Modification/Procedural Classification System (ICD-10-CM/PCS)* diagnoses and procedures, length of stay, expected payer, admission and discharge dates, and discharge disposition. In 2017, the HCUP databases represented more than 97 percent of all annual discharges in the United States.

The analytic dataset used to generate the tables in this document consists of the same hospital discharge records that comprise the reference population for Version 2020 of the AHRQ QI software. This reference population file was limited to community hospitals and also excludes rehabilitation and long-term acute care (LTAC) hospitals. Information on the type of hospital was obtained by the American Hospital Association (AHA) Annual Survey of Hospitals. AHA defines community hospitals as “all non-Federal, short-term, general, and other specialty hospitals, excluding hospital units of institutions.” Included among community hospitals are specialty hospitals such as obstetrics-gynecology, ear-nose-throat, orthopedic, and pediatric institutions. Also included are public hospitals and academic medical centers.

In 2017, 46 states of the SID include indicators of the diagnoses being present on admission (POA) and included the PRDAY data element. Discharges from these 46 participating States are used to develop hospital-level indicators.¹ Edit checks on POA were developed during an HCUP evaluation of POA coding in the 2011 SID at hospitals that were required to report POA to CMS (<http://www.hcup-us.ahrq.gov/reports/methods/2015-06.pdf>). The edits identify general patterns of suspect reporting of POA. The edits do not evaluate whether a valid POA value (e.g., Y or N) is appropriate for the specific diagnosis. There are three hospital-level edit checks:

1. Indication that a hospital has POA reported as Y on all diagnoses on all discharges
2. Indication that a hospital has POA reported as missing on all non-Medicare discharges
3. Indication that a hospital reported POA as missing on all nonexempt diagnoses for 15 percent or more of discharges. The cut-point of 15 percent was determined by 2 times the standard deviation plus the mean of the percentage for hospitals that are required to report POA to CMS.

Additional information on the reference population and the risk adjustment process may be found in Quality Indicator Empirical Methods, available on the AHRQ QI™ website (<http://www.qualityindicators.ahrq.gov/modules/Default.aspx>).

¹ States in the 2017 reference population for the area-level indicators include: AK, AR, AZ, CA, CO, CT, DE, DC, FL, GA, HI, IA, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, MT, NC, ND, NE, NJ, NM, NV, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, and WY.

The QI observed rates for hospital-level indicators are scaled to the rate per 1,000 persons at risk. Cell sizes less than 11 are suppressed due to confidentiality; and are designated by an asterisk (*). When only one data point in a series must be suppressed due to cell sizes, another data point is provided as a range to disallow calculation of the masked variable.

Acknowledgments

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, **Alaska** Department of Health and Social Services, **Arizona** Department of Health Services, **Arkansas** Department of Health, **California** Office of Statewide Health Planning and Development, **Colorado** Hospital Association, **Connecticut** Hospital Association, **Delaware** Division of Public Health, **District of Columbia** Hospital Association, **Florida** Agency for Health Care Administration, **Georgia** Hospital Association, **Hawaii** Laulima Data Alliance, a non-profit subsidiary of the Healthcare Association of Hawaii, University of **Hawaii**, Hilo Center for Rural Health Science, **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, **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** State Department of Health, **Missouri** Hospital Industry Data Institute, **Montana** Hospital Association, **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 Authority, **Pennsylvania** Health Care Cost Containment Council, **Rhode Island** Department of Health, **South Carolina** Revenue and Fiscal Affairs Office, **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.

Hospital-Level Indicators

Table 1. Inpatient Quality Indicators (IQI) For Overall Population: Hospital-Level Indicators

INDICATOR	LABEL	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE * 1,000)
IQI 08	Esophageal Resection Mortality Rate, per 1,000 Admissions	216	5,440	39.71
IQI 09	Pancreatic Resection Mortality Rate, per 1,000 Admissions	503	19,128	26.30
IQI 09 With Cancer	Pancreatic Resection Mortality Rate - Stratum: Presence of Pancreatic Cancer, per 1,000 Admissions	240	10,281	23.34
IQI 09 Without Cancer	Pancreatic Resection Mortality Rate – Stratum: Absence of Pancreatic Cancer, per 1,000 Admissions	263	8,847	29.73
IQI 11	Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate, per 1,000 Admissions	1,422	37,462	37.96
IQI 11 Open Repair of Ruptured	Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate - Stratum Open Repair of Ruptured, per 1,000 Admissions	498	1,307	381.03
IQI 11 Open Repair of Unruptured	Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate - Stratum Open Repair of Unruptured, per 1,000 Admissions	275	4,447	61.84
IQI 11 Endovascular Repair of Ruptured	Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate - Stratum Endovascular Repair of Ruptured, per 1,000 Admissions	382	1,969	194.01
IQI 11 Endovascular Repair of Unruptured	Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate - Stratum Endovascular Repair of Unruptured, per 1,000 Admissions	267	29,739	8.98
IQI 12	Coronary Artery Bypass Graft (CABG) Mortality Rate, per 1,000 Admissions	4,885	188,689	25.89
IQI 15	Acute Myocardial Infarction (AMI) Mortality Rate, per 1,000 Admissions	28,904	576,626	50.13
IQI 16	Heart Failure Mortality Rate, per 1,000 Admissions	29,540	1,086,786	27.18
IQI 17	Acute Stroke Mortality Rate, per 1,000 Admissions	43,113	596,754	72.25

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Inpatient Quality Indicators (IQI) Benchmark Data Tables

INDICATOR	LABEL	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE * 1,000)
IQI 17 Subarachnoid Hemorrhage	Acute Stroke Mortality Rate - Stratum Subarachnoid Hemorrhage, per 1,000 Admissions	4,273	22,426	190.54
IQI 17 Intracerebral Hemorrhage	Acute Stroke Mortality Rate - Stratum Intracerebral Hemorrhage, per 1,000 Admissions	19,325	96,303	200.67
IQI 17 Ischemic Stroke	Acute Stroke Mortality Rate - Stratum Ischemic Stroke, per 1,000 Admissions	19,515	478,025	40.82
IQI 18	Gastrointestinal Hemorrhage Mortality Rate, per 1,000 Admissions	12,120	516,129	23.48
IQI 19	Hip Fracture Mortality Rate, per 1,000 Admissions	5,283	258,341	20.45
IQI 20	Pneumonia Mortality Rate, per 1,000 Admissions	14,164	543,875	26.04
IQI 21	Cesarean Delivery Rate - Uncomplicated, per 1,000 Admissions	916,192	3,134,143	292.33
IQI 22	Vaginal Birth After Cesarean (VBAC) Delivery Rate - Uncomplicated, per 1,000 Admissions	69,637	555,788	125.29
IQI 30	Percutaneous Coronary Intervention (PCI) Mortality Rate, per 1,000 Admissions	12,740	440,428	28.93
IQI 31	Carotid Endarterectomy Mortality Rate, per 1,000 Admissions	314	70,359	4.46
IQI 32	Acute Myocardial Infarction (AMI) Mortality Rate - w/o Transfer Cases, per 1,000 Admissions	23,361	464,297	50.31
IQI 33	Primary Cesarean Delivery Rate - Uncomplicated, per 1,000 Admissions	430,617	2,578,355	167.01
IQI 34	Vaginal Birth After Cesarean (VBAC) Rate - All, per 1,000 Admissions	76,617	618,183	123.94

Table 2. IQI 08 – Esophageal Resection Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	216	5,440	39.71
Females	32	984	32.52
Males	184	4,456	41.29
18 to 39 years	****	102	****
40 to 64 years	79 -- 88	2,490	31.73 -- 35.34
65 to 74 years	84	2,112	39.77
75+ years	48	736	65.22
Private	61	2,108	28.94
Medicare	123	2,681	45.88
Medicaid	17	410	41.46
Other	****	169	****
Uninsured (self-pay/no charge)	****	72	****

**** Obscured due to small sample size

Table 3. IQI 09 – Pancreatic Resection Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	503	19,128	26.30
Females	179	9,391	19.06
Males	324	9,737	33.28
18 to 39 years	58	1,463	39.64
40 to 64 years	156	7,977	19.56
65 to 74 years	156	6,177	25.25
75+ years	133	3,511	37.88
Private	118	7,061	16.71
Medicare	282	9,381	30.06
Medicaid	50	1,692	29.55
Other	31	568	54.58
Uninsured (self-pay/no charge)	22	426	51.64

Table 4. IQI 09 – Pancreatic Resection Mortality Rate – Stratum: Presence of Pancreatic Cancer, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	240	10,281	23.34
Females	100	4,882	20.48
Males	140	5,399	25.93
18 to 39 years	****	206	****
40 to 64 years	59 -- 68	3,771	15.65 -- 18.03
65 to 74 years	89	3,875	22.97
75+ years	87	2,429	35.82
Private	55	3,301	16.66
Medicare	162	5,914	27.39
Medicaid	12	659	18.21
Other	****	256	****
Uninsured (self-pay/no charge)	****	151	****

**** Obscured due to small sample size

Table 5. IQI 09 – Pancreatic Resection Mortality Rate – Stratum: Absence of Pancreatic Cancer, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	263	8,847	29.73
Females	79	4,509	17.52
Males	184	4,338	42.42
18 to 39 years	56	1,257	44.55
40 to 64 years	94	4,206	22.35
65 to 74 years	67	2,302	29.11
75+ years	46	1,082	42.51
Private	63	3,760	16.76
Medicare	120	3,467	34.61
Medicaid	38	1,033	36.79
Other	24	312	76.92
Uninsured (self-pay/no charge)	18	275	65.45

Table 6. IQI 11 – Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	1,422	37,462	37.96
Females	424	8,107	52.30
Males	998	29,355	34.00
18 to 39 years	*****	55	*****
40 to 64 years	167 -- 176	6,259	26.68 -- 28.12
65 to 74 years	482	14,786	32.60
75+ years	763	16,362	46.63
Private	180	5,894	30.54
Medicare	1,137	29,133	39.03
Medicaid	49	1,299	37.72
Other	21	793	26.48
Uninsured (self-pay/no charge)	35	343	102.04

**** Obscured due to small sample size

Table 7. IQI 11 – Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate – Stratum: Open/Ruptured (Open Repair of Ruptured AAA), per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	498	1,307	381.03
Females	152	328	463.41
Males	346	979	353.42
18 to 39 years	*****	*****	*****
40 to 64 years	59 -- 68	258 -- 267	228.68 -- 254.68
65 to 74 years	169	498	339.36
75+ years	266	541	491.68
Private	48 -- 57	206	233.01 -- 276.70
Medicare	402	951	422.71
Medicaid	14	77	181.82
Other	*****	20	*****
Uninsured (self-pay/no charge)	22	53	415.09

**** Obscured due to small sample size

Table 8. IQI 11 – Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate – Stratum: Open/Intact (Open Repair of Unruptured AAA), per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	275	4,447	61.84
Females	87	1,297	67.08
Males	188	3,150	59.68
18 to 39 years	*****	24	*****
40 to 64 years	50 -- 59	1,243	40.23 -- 47.47
65 to 74 years	104	1,968	52.85
75+ years	118	1,212	97.36
Private	58	1,017	57.03
Medicare	196	2,999	65.36
Medicaid	14	256	54.69
Other	*****	109	*****
Uninsured (self-pay/no charge)	*****	66	*****

**** Obscured due to small sample size

Table 9. IQI 11 – Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate – Stratum: Endo/Ruptured (Endovascular Repair of Ruptured AAA), per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	382	1,969	194.01
Females	97	424	228.77
Males	285	1,545	184.47
18 to 39 years	*****	*****	*****
40 to 64 years	36 -- 45	339 -- 348	106.19 -- 129.31
65 to 74 years	118	685	172.26
75+ years	221	934	236.62
Private	42	308	136.36
Medicare	316	1,475	214.24
Medicaid	11	91	120.88
Other	*****	52	*****
Uninsured (self-pay/no charge)	*****	43	*****

**** Obscured due to small sample size

Table 10. IQI 11 – Abdominal Aortic Aneurysm (AAA) Repair Mortality Rate – Stratum: Endo/Intact (Endovascular Repair of Unruptured AAA), per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	267	29,739	8.98
Females	88	6,058	14.53
Males	179	23,681	7.56
18 to 39 years	*****	17	*****
40 to 64 years	16 -- 25	4,412	3.63 -- 5.67
65 to 74 years	91	11,635	7.82
75+ years	158	13,675	11.55
Private	25	4,363	5.73
Medicare	223	23,708	9.41
Medicaid	*****	875	*****
Other	*****	612	*****
Uninsured (self-pay/no charge)	*****	181	*****

**** Obscured due to small sample size

Table 11. IQI 12 – Coronary Artery Bypass Graft (CABG) Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	4,885	188,689	25.89
Females	1,866	47,268	39.48
Males	3,019	141,421	21.35
40 to 64 years	1,341	76,108	17.62
65 to 74 years	1,759	71,267	24.68
75+ years	1,785	41,314	43.21
Private	912	56,030	16.28
Medicare	3,416	107,800	31.69
Medicaid	305	14,027	21.74
Other	136	5,581	24.37
Uninsured (self-pay/no charge)	116	5,251	22.09

Table 12. IQI 15 – Acute Myocardial Infarction (AMI) Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	28,904	576,626	50.13
Females	12,158	219,739	55.33
Males	16,746	356,887	46.92
18 to 39 years	205	13,236	15.49
40 to 64 years	6,610	234,994	28.13
65 to 74 years	7,241	148,654	48.71
75+ years	14,848	179,742	82.61
Private	4,014	145,340	27.62
Medicare	21,003	331,032	63.45
Medicaid	1,935	55,034	35.16
Other	870	16,898	51.49
Uninsured (self-pay/no charge)	1,082	28,322	38.20

Table 13. IQI 16 – Heart Failure Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	29,540	1,086,786	27.18
Females	14,071	523,322	26.89
Males	15,469	563,464	27.45
18 to 39 years	301	27,373	11.00
40 to 64 years	4,020	294,079	13.67
65 to 74 years	5,653	245,028	23.07
75+ years	19,566	520,306	37.60
Private	2,963	116,340	25.47
Medicare	23,405	805,663	29.05
Medicaid	1,549	114,607	13.52
Other	1,206	19,924	60.53
Uninsured (self-pay/no charge)	417	30,252	13.78

Table 14. IQI 17 – Acute Stroke Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	43,113	596,754	72.25
Females	22,412	296,156	75.68
Males	20,701	300,598	68.87
18 to 39 years	1,077	16,735	64.36
40 to 64 years	11,154	190,690	58.49
65 to 74 years	9,051	143,791	62.95
75+ years	21,831	245,538	88.91
Private	7,063	115,585	61.11

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GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Medicare	28,254	382,412	73.88
Medicaid	3,791	58,440	64.87
Other	1,881	14,621	128.65
Uninsured (self-pay/no charge)	2,124	25,696	82.66

Table 15. IQI 17 – Acute Stroke Mortality Rate – Stratum: Subarachnoid Hemorrhage, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	4,273	22,426	190.54
Females	2,644	13,799	191.61
Males	1,629	8,627	188.83
18 to 39 years	284	2,217	128.10
40 to 64 years	1,841	11,473	160.46
65 to 74 years	957	4,415	216.76
75+ years	1,191	4,321	275.63
Private	1,108	7,814	141.80
Medicare	2,063	8,780	234.97
Medicaid	579	3,513	164.82
Other	173	756	228.84
Uninsured (self-pay/no charge)	350	1,563	223.93

Table 16. IQI 17 – Acute Stroke Mortality Rate – Stratum: Intracerebral Hemorrhage, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	19,325	96,303	200.67
Females	9,371	43,167	217.09
Males	9,954	53,136	187.33
18 to 39 years	557	3,689	150.99
40 to 64 years	5,646	30,954	182.40
65 to 74 years	4,205	22,430	187.47
75+ years	8,917	39,230	227.30
Private	3,102	18,653	166.30
Medicare	12,416	59,610	208.29
Medicaid	1,905	10,750	177.21
Other	779	2,848	273.53
Uninsured (self-pay/no charge)	1,123	4,442	252.81

Table 17. IQI 17 – Acute Stroke Mortality Rate – Stratum: Ischemic Stroke, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	19,515	478,025	40.82
Females	10,397	239,190	43.47
Males	9,118	238,835	38.18
18 to 39 years	236	10,829	21.79
40 to 64 years	3,667	148,263	24.73
65 to 74 years	3,889	116,946	33.25
75+ years	11,723	201,987	58.04
Private	2,853	89,118	32.01
Medicare	13,775	314,022	43.87
Medicaid	1,307	44,177	29.59
Other	929	11,017	84.32
Uninsured (self-pay/no charge)	651	19,691	33.06

Table 18. IQI 18 – Gastrointestinal Hemorrhage Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	12,120	516,129	23.48
Females	4,981	243,410	20.46
Males	7,139	272,719	26.18
18 to 39 years	309	34,901	8.85
40 to 64 years	3,706	160,452	23.10
65 to 74 years	2,441	115,190	21.19
75+ years	5,664	205,586	27.55
Private	1,662	89,491	18.57
Medicare	8,043	333,661	24.11
Medicaid	1,508	59,511	25.34
Other	409	11,429	35.79
Uninsured (self-pay/no charge)	498	22,037	22.60

Table 19. IQI 19 – Hip Fracture Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	5,283	258,341	20.45
Females	3,055	184,171	16.59
Males	2,228	74,170	30.04
65 to 74 years	564	52,636	10.72
75+ years	4,719	205,705	22.94
Private	300	14,032	21.38
Medicare	4,808	236,849	20.30

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GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Medicaid	33	2,550	12.94
Other	125	3,725	33.56
Uninsured (self-pay/no charge)	17	1,185	14.35

Table 20. IQI 20 – Pneumonia Mortality Rate, per 1,000 Admissions

INDICATOR	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	14,164	543,875	26.04
Females	7,220	290,761	24.83
Males	6,944	253,114	27.43
18 to 39 years	237	41,086	5.77
40 to 64 years	2,168	152,571	14.21
65 to 74 years	2,715	111,159	24.42
75+ years	9,044	239,059	37.83
Private	1,816	89,464	20.30
Medicare	10,844	368,355	29.44
Medicaid	778	58,347	13.33
Other	514	10,618	48.41
Uninsured (self-pay/no charge)	212	17,091	12.40

Table 21. IQI 21 – Cesarean Delivery Rate – Uncomplicated, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	916,192	3,134,143	292.33
Females	916,192	3,134,143	292.33
0 to 17 years	6,465	41,946	154.13
18 to 39 years	866,977	2,996,656	289.31
40 to 64 years	42,750	95,541	447.45
Private	472,142	1,596,987	295.65
Medicare	8,047	21,155	380.38
Medicaid	390,592	1,351,242	289.06
Other	22,662	84,508	268.16
Uninsured (self-pay/no charge)	22,749	80,251	283.47

Table 22. IQI 22 – Vaginal Birth After Cesarean (VBAC) Delivery Rate – Uncomplicated, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	69,637	555,788	125.29
Females	69,637	555,788	125.29

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GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
0 to 17 years	55	478	115.06
18 to 39 years	66,687	528,042	126.29
40 to 64 years	2,895	27,268	106.17
Private	33,309	264,618	125.88
Medicare	476	5,062	94.03
Medicaid	31,717	257,374	123.23
Other	1,957	13,710	142.74
Uninsured (self-pay/no charge)	2,178	15,024	144.97

Table 23. IQI 30 – Percutaneous Coronary Intervention (PCI) Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	12,740	440,428	28.93
Females	4,845	145,449	33.31
Males	7,895	294,979	26.76
40 to 64 years	3,753	204,046	18.39
65 to 74 years	3,772	126,062	29.92
75+ years	5,215	110,320	47.27
Private	2,168	125,020	17.34
Medicare	8,757	240,839	36.36
Medicaid	912	40,285	22.64
Other	329	13,551	24.28
Uninsured (self-pay/no charge)	574	20,733	27.69

Table 24. IQI 31 – Carotid Endarterectomy Mortality Rate, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	314	70,359	4.46
Females	117	28,647	4.08
Males	197	41,712	4.72
18 to 39 years	****	80	****
40 to 64 years	50 -- 59	16,210	3.08 -- 3.64
65 to 74 years	104	27,753	3.75
75+ years	149	26,316	5.66
Private	40	12,629	3.17
Medicare	243	52,222	4.65
Medicaid	18	3,347	5.38
Other	****	1,274	****
Uninsured (self-pay/no charge)	****	887	****

**** Obscured due to small sample size

Table 25. IQI 32 – Acute Myocardial Infarction (AMI) Mortality Rate – Without Transfer Cases, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	23,361	464,297	50.31
Females	10,027	179,623	55.82
Males	13,334	284,674	46.84
18 to 39 years	163	10,817	15.07
40 to 64 years	5,136	188,496	27.25
65 to 74 years	5,612	116,840	48.03
75+ years	12,450	148,144	84.04
Private	3,152	116,253	27.11
Medicare	17,160	267,178	64.23
Medicaid	1,524	44,563	34.20
Other	640	12,647	50.60
Uninsured (self-pay/no charge)	885	23,656	37.41

Table 26. IQI 33 – Primary Cesarean Delivery Rate – Uncomplicated, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	430,617	2,578,355	167.01
Females	430,617	2,578,355	167.01
0 to 17 years	6,043	41,468	145.73
18 to 39 years	406,200	2,468,614	164.55
40 to 64 years	18,374	68,273	269.13
Private	240,996	1,332,369	180.88
Medicare	3,479	16,093	216.18
Medicaid	165,266	1,093,868	151.08
Other	10,934	70,798	154.44
Uninsured (self-pay/no charge)	9,942	65,227	152.42

Table 27. IQI 34 – Vaginal Birth After Cesarean (VBAC) Rate – All, per 1,000 Admissions

GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Overall	76,617	618,183	123.94
Females	76,617	618,183	123.94
0 to 17 years	66	543	121.55
18 to 39 years	73,238	586,085	124.96
40 to 64 years	3,313	31,555	104.99
Private	35,917	292,709	122.71
Medicare	567	5,739	98.80
Medicaid	35,596	287,752	123.70

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GROUP	NUMERATOR	DENOMINATOR	OBSERVED RATE PER 1,000 (=OBSERVED RATE*1,000)
Other	2,104	15,265	137.83
Uninsured (self-pay/no charge)	2,433	16,718	145.53