Prevention Quality Indicators #5, Technical Specifications,
Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate
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Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate

Prevention Quality Indicators #5
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 40 years and older with ICD-9-CM principal diagnosis code for COPD or asthma in adults age 40 years and older.

ICD-9-CM COPD diagnosis codes:

4660	AC BRONCHITIS*	4919	CHRONIC BRONCHITIS NOS
490	BRONCHITIS NOS*	4920	EMPHYSEMATOUS BLEB
4910	SIMPLE CHR BRONCHITIS	4928	EMPHYSEMA NEC
4911	MUCOPURUL CHR BRONCHITIS	494	BRONCHIECTASIS (OCT00)
49120	OBS CHR BRNC W/O ACT EXA	4940	BRONCHIECTAS W/O AC EXAC (OCT00)
49121	OBS CHR BRNC W ACT EXA	4941	BRONCHIECTASIS W AC EXAC (OCT00)
4918	CHRONIC BRONCHITIS NEC	496	CHR AIRWAY OBSTRUCT NEC

*Must be accompanied by a secondary diagnosis code of COPD.

ICD-9-CM Asthma diagnosis codes:

49300	EXT ASTHMA W/O STAT ASTH	49321	CH OB ASTHMA W STAT ASTH
49301	EXT ASTHMA W STATUS ASTH	49322	CH OBS ASTH W ACUTE EXAC (OCT00)
49302	EXT ASTHMA W ACUTE EXAC (OCT00)	49381	EXERCSE IND BRONCHOSPASM (OCT03)
49310	INT ASTHMA W/O STAT ASTH	49382	COUGH VARIANT ASTHMA (OCT03)
49311	INT ASTHMA W STATUS ASTH	49390	ASTHMA W/O STATUS ASTHM
49312	INT ASTHMA W ACUTE EXAC (OCT00)	49391	ASTHMA W STATUS ASTHMAT
49320	CH OB ASTH W/O STAT ASTH	49392	ASTHMA W ACUTE EXACERBTN (OCT00)

Exclude cases:

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- 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)

See Prevention Quality Indicators Appendices:

- Appendix A – Admission Codes for Transfers

Denominator

Discharges in the numerator are assigned to the denominator based on the Metro Area[1] or county of the patient residence, not the Metro Area or county of the hospital where the discharge occurred.

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[1] 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.