Asthma in Younger Adults Admission Rate

Prevention Quality Indicators #15
Technical Specifications
Area-Level Indicator
AHRQ Quality Indicators, Version 4.3, August 2011
(Revised October, 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[TM] APR-DRG Grouper. This grouper corrects an issue found in Version 28 of the Limited License edition of the 3M[TM] 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[TM] 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 less than 40 years old with ICD-9-CM principal diagnosis code of asthma.

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)

See *Prevention Quality Indicators Appendices*:
- Appendix A – Admission Codes for Transfers

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)[1]
- with any diagnosis code of cystic fibrosis and anomalies of the respiratory system

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[1] Note. There is no specific code in the software to remove MDC 14 from this indicator because it is all ready logically removed, given the focus is on adults and a principal diagnosis code of asthma.

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

ICD-9-CM Cystic fibrosis and anomalies of the respiratory system diagnosis codes:

27700	CYSTIC FIBROS W/O ILEUS	74860	LUNG ANOMALY NOS
27701	CYSTIC FIBROS W ILEUS	74861	CONGEN BRONCHIECTASIS
27702	CYSTIC FIBROS W PUL MAN	74869	LUNG ANOMALY NEC
27703	CYSTIC FIBROSIS W GI MAN	7488	RESPIRATORY ANOMALY NEC
27709	CYSTIC FIBROSIS NEC	7489	RESPIRATORY ANOMALY NOS
74721	ANOMALIES OF AORTIC ARCH	7503	CONG ESOPH FISTULA/ATRES
7483	LARYNGOTRACH ANOMALY NEC	7593	SITUS INVERSUS
7484	CONGENITAL CYSTIC LUNG	7707	PERINATAL CHR RESP DIS
7485	AGENESIS OF LUNG		

Denominator

Discharges in the numerator are assigned to the denominator based on the Metro Area[2] or county of the patient residence, not the Metro Area or county of the hospital where the discharge occurred.

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[2] 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.