



Prevention Quality Indicator 15 (PQI 15) Asthma in Younger Adults Admission Rate

October 2016

Area-Level Indicator

Type of Score: Rate

Prepared by:

Agency for Healthcare Research and Quality

U.S. Department of Health and Human Services

www.qualityindicators.ahrq.gov

DESCRIPTION

Admissions for a principal diagnosis of asthma per 100,000 population, ages 18 to 39 years. Excludes admissions with an indication of cystic fibrosis or anomalies of the respiratory system, 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 through 39 years, with a principal ICD-09-CM diagnosis code for asthma.

[NOTE: By definition, discharges with a principal diagnosis of asthma 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.]

Asthma diagnosis codes: (ACSASTD)

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
49302	EXT ASTHMA W ACUTE EXAC	49381	EXERCSE IND BRONCHOSPASM
49310	INT ASTHMA W/O STAT ASTH	49382	COUGH VARIANT ASTHMA
49311	INT ASTHMA W STATUS ASTH	49390	ASTHMA W/O STATUS ASTHM
49312	INT ASTHMA W ACUTE EXAC	49391	ASTHMA W STATUS ASTHMAT
49320	CH OB ASTH W/O STAT ASTH	49392	ASTHMA W ACUTE EXACERBTN

NUMERATOR EXCLUSIONS

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 any-listed ICD-9-CM diagnosis codes for cystic fibrosis and anomalies of the respiratory system
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing), principal diagnosis (DX1=missing), or county (PSTCO=missing)

Appendix A – Admission Codes for Transfers

Cystic fibrosis and anomalies of the respiratory system diagnosis codes: (RESPAN)

27700	CYSTIC FIBROS W/O ILEUS	7483	LARYNGOTRACH ANOMALY NEC
27701	CYSTIC FIBROS W ILEUS	7484	CONGENITAL CYSTIC LUNG
27702	CYSTIC FIBROS W PUL MAN	7485	AGENESIS OF LUNG
27703	CYSTIC FIBROSIS W GI MAN	74860	LUNG ANOMALY NOS
27709	CYSTIC FIBROSIS NEC	74861	CONGEN BRONCHIECTASIS
51661	NEUROENDOCRINE CELL HYPERPLASIA OF INFANCY	74869	LUNG ANOMALY NEC
51662	PULMONARY INTERSTITIAL GLYCOGENESIS	7488	RESPIRATORY ANOMALY NEC
51663	SURFACTANT MUTATIONS OF THE LUNG	7489	RESPIRATORY ANOMALY NOS
51664	ALVEOLAR CAPILLARY DYSPLASIA WITH VEIN MISALIGNMENT	7503	CONG ESOPH FISTULA/ATRES
51669	OTHER INTERSTITIAL LUNG DISEASES OF THE CHILDHOOD	7593	SITUS INVERSUS
74721	ANOMALIES OF AORTIC ARCH	7707	PERINATAL CHR RESP DIS

DENOMINATOR

Population ages 18 through 39 years 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 of the hospital where the 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. Micropolitan Statistical Areas are not used in the QI software.

DENOMINATOR EXCLUSIONS

Not Applicable