AHRQ Quality Indicators™ (AHRQ QI™) ICD-10-CM/PCS Specification Version 6.0

Prevention Quality Indicator 08 (PQI 08) Heart Failure Admission Rate

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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 with a principal diagnosis of heart failure per 100,000 population, ages 18 years and older. Excludes cardiac procedure admissions, 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 EXCLUSIONS

Exclude cases:

• with any-listed ICD-10-PCS procedure codes for cardiac procedure

• 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)

Appendix A – Admission Codes for Transfers
Appendix B – Cardiac Procedure Codes

NUMERATOR

Discharges, for patients ages 18 years and older, with a principal ICD-10-CM diagnosis code for heart failure.

[NOTE: By definition, discharges with a principal diagnosis of heart failure 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 QITM software does not explicitly exclude obstetric cases.]

Heart failure diagnosis codes (MRTCHFD):

I0981	Rheumatic heart failure	I5030	Unspecified diastolic (congestive) heart failure
I110	Hypertensive heart disease with heart failure	I5031	Acute diastolic (congestive) heart failure
I130	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	I5032	Chronic diastolic (congestive) heart failure
I132	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	I5033	Acute on chronic diastolic (congestive) heart failure
I501	Left ventricular failure	I5040	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure
I5020	Unspecified systolic (congestive) heart failure	I5041	Acute combined systolic (congestive) and diastolic (congestive) heart failure
I5021	Acute systolic (congestive) heart failure	I5042	Chronic combined systolic (congestive) and diastolic (congestive) heart failure
I5022	Chronic systolic (congestive) heart failure	I5043	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure
I5023	Acute on chronic systolic (congestive) heart failure	I509	Heart failure, unspecified

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 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.