



Patient Safety Indicator 02 (PSI 02) Death Rate in Low-Mortality Diagnosis Related Groups (DRGs) July 2021 Hospital-Level Indicator Type of Score: Rate

Prepared by:

Agency for Healthcare Research and Quality

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DESCRIPTION

In-hospital deaths per 1,000 discharges for low mortality (less than 0.5%) Diagnosis Related Groups (DRGs) among patients ages 18 years and older or MDC 14 (pregnancy, childbirth, and puerperium). Excludes cases with trauma, cases with cancer, cases with an immunocompromised state, and transfers to an acute care facility.

[NOTE: The software provides the rate per hospital discharge. However, common practice reports the measure as per 1,000 discharges. The user must multiply the rate obtained from the software by 1,000 to report in-hospital deaths per 1,000 hospital discharges.]

NUMERATOR

Number of deaths (DISP=20) among cases meeting the inclusion and exclusion rules for the denominator.

DENOMINATOR

Discharges for patients ages 18 years and older or MDC 14 (pregnancy, childbirth, and puerperium) with a low-mortality (less than 0.5% mortality) MS-DRG code (*LOWMODR**).

DENOMINATOR EXCLUSIONS

Exclude cases:

- with any listed ICD-10-CM diagnosis code for trauma (*Appendix G: TRAUMID*)
- with any listed ICD-10-CM diagnosis code for cancer (*Appendix H: CANCEID*)
- with any listed ICD-10-CM diagnosis code for immunocompromised state (*Appendix I: IMMUNID*)
- with any listed ICD-10-PCS procedure code for immunocompromised state (*Appendix I: IMMUNIP*)
- transfer to an acute care facility (DISP=2)
- MDC 15 (newborns and other neonates with conditions originating in perinatal period)
- with an ungroupable DRG (DRG=999)
- with missing discharge disposition (DISP=missing), gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing), or principal diagnosis (DX1=missing)

[*Appendix G - Trauma Diagnosis Codes*](#)

[*Appendix H - Cancer Diagnosis Codes*](#)

[*Appendix I - Immunocompromised State Diagnosis and Procedure Codes*](#)

* See below for code list

Low-mortality (less than 0.5%) MS-DRG codes: (LOWMODR)

052	Spinal disorders and injuries with CC/MCC	520	Back and neck procedures except spinal fusion without CC/MCC
053	Spinal disorders and injuries without CC/MCC	537	Sprains, strains, and dislocations of hip, pelvis and thigh with CC/MCC
069	Transient ischemia without thrombolytic	538	Sprains, strains, and dislocations of hip, pelvis and thigh without CC/MCC
075	Viral meningitis with CC/MCC	582	Mastectomy for malignancy with CC/MCC
076	Viral meningitis without CC/MCC	583	Mastectomy for malignancy without CC/MCC
102	Headaches with MCC	584	Breast biopsy, local excision and Other breast procedures with CC/MCC
103	Headaches without MCC	585	Breast biopsy, local excision and Other breast procedures without CC/MCC
113	Orbital procedures with CC/MCC	600	Non-Malignant breast disorders with CC/MCC
114	Orbital procedures without CC/MCC	601	Non-Malignant breast disorders without CC/MCC
115	Extraocular procedures except orbit	614	Adrenal and pituitary procedures with CC/MCC
116	Intraocular procedures with CC/MCC	615	Adrenal and pituitary procedures without CC/MCC
117	Intraocular procedures without CC/MCC	642	Inborn and Other disorders of metabolism
121	Acute major eye infections with CC/MCC	697	Urethral stricture
122	Acute major eye infections without CC/MCC	707	Major male pelvic procedures with CC/MCC
123	Neurological eye disorders	708	Major male pelvic procedures without CC/MCC
129	Major head and neck procedures with CC/MCC or major device	711	Testes procedures with CC/MCC
130	Major head and neck procedures without CC/MCC	712	Testes procedures without CC/MCC
131	Cranial and facial procedures with CC/MCC	713	Transurethral prostatectomy with CC/MCC
132	Cranial and facial procedures without CC/MCC	714	Transurethral prostatectomy without CC/MCC
133	Other ear, nose, mouth and throat O.R. procedures with CC/MCC	717	Other male reproductive system O.R. procedures except malignancy with CC/MCC

134	Other ear, nose, mouth and throat O.R. procedures without CC/MCC	718	Other male reproductive system O.R. procedures except malignancy without CC/MCC
135	Sinus and mastoid procedures with CC/MCC	729	Other male reproductive system diagnoses with CC/MCC
136	Sinus and mastoid procedures without CC/MCC	730	Other male reproductive system diagnoses without CC/MCC
137	Mouth procedures with CC/MCC	742	Uterine and adnexa procedures for non-malignancy with CC/MCC
138	Mouth procedures without CC/MCC	743	Uterine and adnexa procedures for non-malignancy without CC/MCC
139	Salivary gland procedures	744	D&C, conization, laparoscopy and tubal interruption with CC/MCC
140	Major head and neck procedures with MCC	745	D&C, conization, laparoscopy and tubal interruption without CC/MCC
141	Major head and neck procedures with CC	746	Vagina, cervix and vulva procedures with CC/MCC
142	Major head and neck procedures without CC/MCC	747	Vagina, cervix and vulva procedures without CC/MCC
143	Other ear, nose, mouth and throat O.R. procedures with MCC	748	Female reproductive system reconstructive procedures
144	Other ear, nose, mouth and throat O.R. procedures with CC	749	Other female reproductive system O.R. procedures with CC/MCC
145	Other ear, nose, mouth and throat O.R. procedures without CC/MCC	750	Other female reproductive system O.R. procedures without CC/MCC
149	Dysequilibrium	760	Menstrual and Other female reproductive system disorders with CC/MCC
202	Bronchitis and asthma with CC/MCC	761	Menstrual and Other female reproductive system disorders without CC/MCC
203	Bronchitis and asthma without CC/MCC	864	Fever and inflammatory conditions
312	Syncope and collapse	876	O.R. procedures with principal diagnosis of mental illness
313	Chest pain	880	Acute adjustment reaction and psychosocial dysfunction
483	Major joint or limb reattachment procedures of upper extremities	881	Depressive neuroses
488	Knee procedures without principal diagnosis of infection with CC/MCC	882	Neuroses except depressive
489	Knee procedures without principal diagnosis of infection without CC/MCC	883	Disorders of personality and impulse control
506	Major thumb or joint procedures	885	Psychoses
507	Major shoulder or elbow joint procedures with CC/MCC	886	Behavioral and developmental disorders

508	Major shoulder or elbow joint procedures without CC/MCC	887	Other mental disorder diagnoses
509	Arthroscopy	904	Skin grafts for injuries with CC/MCC
513	Hand or wrist procedures, except major thumb or joint procedures with CC/MCC	905	Skin grafts for injuries without CC/MCC
514	Hand or wrist procedures, except major thumb or joint procedures without CC/MCC	906	Hand procedures for injuries
518	Back and neck procedures except spinal fusion with MCC or disc device or neurostimulator	945	Rehabilitation with CC/MCC
519	Back and neck procedures except spinal fusion with CC	946	Rehabilitation without CC/MCC