Agency for Healthcare Research and Quality
Inpatient Quality Indicators (IQIs)

ICD-9-CM and DRG Coding Updates to Version 2.1, Revision 4

December 22, 2004

The following changes were implemented in version 2.1, revision 4, of the IQI software (both SAS and SPSS) and reflect changes to indicator definitions based on updates to ICD-9-CM codes for Fiscal Year 2005 (effective 10-1-2004). All changes noted below have been incorporated into the software syntax, software documentation and the Guide to Inpatient Quality Indicators. With this software update, the IQI software definitions now incorporate ICD-9-CM codes valid from October 1, 1994 through September 30, 2005.

Indicator Module	Indicator Name (#)	Component	Change
IQI	Craniotomy Mortality (IQI #13)	Denominator (Inclusion, Craniotomy)	New DRG code (FY 2005) 543 (Craniotomy w/ implant of chemo agent or acute complex CNS principal diagnosis) was added to the denominator definition of craniotomy. Expected impact on rate: negligible
IQI	Stroke Mortality (IQI #17)	Denominator (Inclusion, Stroke)	For discharges beginning in FY 2005, ICD-9-CM code 436 "acute, but ill-defined cerebrovascular disease" is dropped from the denominator definition of stroke because the code inclusion terms exclude "cerebrovascular accident (CVA) NOS, Stroke." Note: Revision 4 adds optional data elements YEAR (year of patient discharge) and DQTR (calendar quarter of patient discharge) to the input data file specifications. If available, these data elements are used to exclude ICD-9-CM code 436 from the denominator for discharges occurring on or after 10/1/2004. However, ICD-9 code 436 will be retained in the denominator if the data elements year and quarter of discharge are not available or if the user selects the option to retain code 436 for purposes of trending over time or to maintain historical continuity in the rate. However, users are

Indicator Module	Indicator Name (#)	Component	Change
			encouraged to transition to the new definition as soon as possible. Expected impact on rate: may result in a decrease in the denominator and resulting increase in the rate. The decrease may be larger in the short-term depending on how quickly coders adapt to the new guidelines.