

# **HCUP Methods Series**

Methods Applying AHRQ Quality Indicators to Healthcare Cost and Utilization Project (HCUP) Data for the 2022 National Healthcare Quality and Disparities Report (NHQDR)

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### TABLE OF CONTENTS

INTRODUCTION	1
AHRQ QUALITY INDICATORS	1
PREPARATION OF HCUP DATABASES	2
HCUP Data on Race/Ethnicity	3
STEPS TAKEN TO APPLY AHRQ QUALITY INDICATORS TO THE HCUP DATA	5
Review and Modify the AHRQ QI Software	5 6
SPECIAL ANALYSES	6
National Inpatient Hospital Costs Associated with Quality Indicators	7 7 7
TABLES	9
Table 1. AHRQ QIs Applied to the HCUP Data for the NHQDR       10         Table 2. Sources of 2016-2019 HCUP Inpatient Data for the NHQDR       13         Table 3. Editing Essential Data Elements for State-Level Reporting of QIs in the NHQDR       14	3
REFERENCES	3
APPENDIX A: NATIONALLY WEIGHTED ANALYSIS FILES FOR THE NATIONAL HEALTHCARE QUALITY AND DISPARITIES REPORT	1
APPENDIX B: EMERGENCY DEPARTMENT RATES FOR SELECTED AHRQ QUALITY INDICATORS	1
APPENDIX C: STATISTICAL METHODS	1
APPENDIX D: CAVEATS TO THE INTREPRETATION OF HCUP-BASED QI ESTIMATES REPORTED IN THE NHQDR	1
APPENDIX E: INPATIENT RATES FOR DELIVERY MEASURES	1

#### INTRODUCTION

The Agency for Healthcare Research and Quality (AHRQ) Quality Indicators (QIs) were applied to the Healthcare Cost and Utilization Project (HCUP) hospital discharge data for selected measures in the National Healthcare Quality and Disparities Report (NHQDR). The report measures and tracks trends in quality and disparities in terms of patient safety, person-centered care, care coordination, effective treatment, healthy living, and care affordability — and access to health care. A focus on priority populations summarizes quality and disparities in care for populations at elevated risk for receiving poor health care, which includes HCUP-based measures related to racial, ethnic, and socioeconomic factors for priority populations, including changes over time and across the urban-rural continuum. The NHQDR provides a comprehensive overview of the quality of health care received by the general population and disparities in care experienced by different racial, ethnic, and socioeconomic groups.

This document describes the preparation of the 2016-2019 HCUP data for the 2022 NHQDR, the steps taken to apply the AHRQ QIs to the HCUP data, and other analyses based on HCUP data that are not specific to the QIs but are developed for use in the NHQDR.

### AHRQ QUALITY INDICATORS

The AHRQ QIs are measures of quality associated with processes of care that occur in an outpatient or an inpatient setting. The QIs rely solely on hospital inpatient administrative data and, for this reason, are screens for examining quality that may indicate the need for more indepth studies. The AHRQ QIs include four sets of measures:

- Prevention Quality Indicators (PQIs) or ambulatory care sensitive conditions identify hospital admissions that evidence suggests could have been avoided, at least in part, through high-quality outpatient care (AHRQ, 2020).
- Inpatient Quality Indicators (IQIs) reflect quality of care inside hospitals and include measures of utilization of procedures for which there are questions of overuse, underuse, or misuse (AHRQ, 2020).
- Patient Safety Indicators (PSIs) reflect quality of care inside hospitals, by focusing on surgical complications and other iatrogenic events (AHRQ, 2020).
- Pediatric Quality Indicators (PDIs) reflect quality of care inside hospitals and identify potentially avoidable hospitalizations among children (AHRQ, 2020).

Prior to the 2018 NHQDR, the reports included longitudinal reporting of QI trends based on ICD-9-CM<sup>1</sup> coding. Because of the transition from ICD-9-CM to ICD-10-CM/PCS<sup>2</sup> on October 1, 2015, the 2022 NHQDR includes QI estimates for 2016, 2017, 2018, and 2019 and does not report on trends prior to 2016.

<sup>&</sup>lt;sup>1</sup> ICD-9-CM: International Classification of Diseases, Ninth Revision, Clinical Modification.

<sup>&</sup>lt;sup>2</sup> ICD-10-CM/PCS: International Classification of Diseases, Tenth Revision, Clinical Modification and Procedure Coding System.

The following national and State-level QI estimates were constructed from the HCUP databases for the NHQDR:

- National inpatient rates by QI, overall and by subpopulations including community income, expected primary payer, and race/ethnicity
- State-level inpatient rates by QI, overall and by subpopulations including community income, expected primary payer, and race/ethnicity, for HCUP Partner organizations that agreed to participate in the NHQDR
- National rates for selected PQIs and PDIs in the emergency department (ED) setting.

The AHRQ QI measures generated for possible inclusion in the NHQDR are described in <u>Table</u> 1 at the end of this methods report.

#### **PREPARATION OF HCUP DATABASES**

The Healthcare Cost and Utilization Project (HCUP) is a family of healthcare databases and related software tools and products developed through a Federal-State-Industry partnership and sponsored by AHRQ. HCUP databases are derived from administrative data and contain encounter-level, clinical and nonclinical information including all-listed diagnoses and procedures, discharge status, patient demographics, and charges for all patients, regardless of payer (e.g., Medicare, Medicaid, private insurance, uninsured), beginning in 1988. These databases enable research on a broad range of health policy issues, including cost and quality of health services, medical practice patterns, patient safety, access to health care programs, and outcomes of treatments at the national, State and local market levels.

The following HCUP databases were used as the source of data for the NHQDR:

- The HCUP State Inpatient Databases (SID), including all inpatient stays regardless of payer from most, if not all, hospitals from participating HCUP Partner organizations in data years 2016-2019.
- The HCUP National Inpatient Sample (NIS), a nationally stratified sample of discharges from all hospitals in States that contributed data to HCUP in data years 2016-2019.
- The HCUP Nationwide Emergency Department Sample (NEDS), a nationally stratified sample of hospital-based emergency departments (EDs) (with information for both treatand-release visits and those resulting in a hospital admission) in data years 2016-2019.

The list of HCUP Partner organizations that contribute to the HCUP databases each year is provided in <u>Table 2</u>.

#### HCUP Data on Race/Ethnicity

HCUP coding includes race and ethnicity in one data element (RACE). Because of variability in the collection of race and ethnicity information in the State data, HCUP maintains a uniform set of categories based on race definitions used in the 1977 Office of Management and Budget (OMB) Directive 15 using the combined race-ethnicity format (separate categories for Hispanic and five Non-Hispanic racial groups – White, Black, Asian or Pacific Islander, American Indian or Alaska Native (AIAN), and Other).

When a State and its hospitals collect Hispanic ethnicity *separately* from race, HCUP assigns the data to the combined race/ethnicity categorization and uses Hispanic ethnicity to override any other race category to create uniform coding across States.

There is limited reporting of AIAN in the HCUP data. In addition, in some areas of the country, care for the AIAN population is provided in Indian Health Service (IHS) hospitals which are not included in HCUP. For these reasons, AIAN discharges were combined with "Other" races for the NHQDR analyses.

The resulting NHQDR reporting categories for the HCUP data include: White Non-Hispanic; African American Non-Hispanic; Asian/Pacific Islander Non-Hispanic; Other Non-Hispanic; and Hispanic (of any race).

#### Modifications to the HCUP Data

In preparation for the NHQDR and its derivative products, the HCUP databases needed to be customized as indicated below:

- 1. The HCUP databases were augmented as necessary for the NHQDR analyses:
  - *Impute for Missing Characteristics*. For missing age, sex, race/ethnicity, ZIP Code, and expected primary payer data that occurred on a small proportion of discharge records, we used a "hot deck" imputation method (which draws donors from strata of similar hospitals and patients) to assign values while preserving the variance within the data.
  - Assign Additional Measures for Reporting. We assigned median household income quartile by linking Claritas ZIP Code demographic data to patient's ZIP Code in the SID. Income quartiles were defined annually based on the distribution of the population in the United States.
- 2. Essential data elements were edited prior to use to determine if the SID had good quality data, and later informed which records and States could be used for national and State-level reporting in the NHQDR:
  - *Race/Ethnicity*. Race/ethnicity is an important reporting category for the NHQDR. Starting with the 2022 NHQDR, only one race/ethnicity edit is performed at the hospital level using the HCUP data element RACE. Hospitals that are missing 10% or more of their race data are excluded (i.e. given a weight of zero).
  - Indicators that Diagnoses are Present on Admission (POA). Present on admission (POA) data are required for the PSI module software. Edit flags for POA were already included on the SID. There are three hospital-level and two discharge-level edits. The three hospital-level edits include: (1) POA is reported as "yes/present" on all diagnoses on all discharges in the hospital; (2) POA is reported as missing on all non-Medicare discharges in the hospital; and (3) POA is reported as missing on all nonexempt diagnoses<sup>3</sup> for 15 percent or more of the discharges in the hospital. The two discharge-level edits include: (1) discharge is missing POA on all nonexempt diagnoses; and (2) Discharge is missing POA on all nonexempt secondary diagnoses. Hospitals in qualifying SID were excluded if they failed any POA edits.

<sup>&</sup>lt;sup>3</sup> Some diagnoses are exempt from having POA reported.

#### Creation of Analysis Files Derived from the HCUP Databases

Beginning with the 2022 NHQDR, two versions of the nationally weighted NHQDR analysis file were used for reporting national QI estimates. Both used the SID, but were limited to community hospitals, excluding rehabilitation and long-term acute care (LTAC) facilities. The two versions were specific to the data elements needed for the different QI modules:

- For the PQIs, IQIs, and area-based PDIs, the nationally weighted file included data from SID that included information on race/ethnicity of the patient. After hospitals that failed the race/ethnicity edits were excluded, all remaining discharges in the selected SID were weighted to the universe of community hospitals<sup>4</sup> in the United States, excluding rehabilitation and LTAC facilities.
- Because the PSIs and related PDIs require knowing if the patient safety event occurred in the hospital and the timing of procedures, a second version of the nationally weighted file was created using the following criteria: (1) the SID included the data elements indicating diagnoses were POA, (2) the SID included information on day of principal and secondary procedure days, and (3) the SID included information on the race/ethnicity of the patient. Hospitals in qualifying SID were excluded if they failed POA and race/ethnicity edits. All remaining discharges were weighted to the universe of community hospitals in the United States, excluding rehabilitation and LTAC facilities.

<u>Table 3</u> shows which SID qualified for by race/ethnicity and PSI reporting for data years 2016-2019. A comparison of the nationally weighted NHQDR analysis file to the HCUP National Inpatient Sample (NIS) data is provided in <u>Appendix A</u>.

The editing of the race/ethnicity and POA data informed which records and States could be used for State-level reporting in the NHQDR. The HCUP SID were modified to create analytic files consistent across States.

- *Subset to Community Hospitals.* For the SID, we selected community hospitals and eliminated rehabilitation and LTAC hospitals.
- Weight for Missing Hospitals. Because some statewide data organizations do not report data for all community hospitals in the State, we weighted hospitals in the SID to the State's universe of hospitals in the American Hospital Association (AHA) Annual Survey Database based on hospital characteristics (teaching status, control, urban/rural location, and bed size).
- Weight for Missing Quarters. Discharges from hospitals operating for the entire year but not contributing data for one or more quarters were weighted up to annual estimates for that institution in the SID.

Weighting also accounted for all discharges or hospitals excluded because of edit checks on race/ethnicity and POA.

<sup>&</sup>lt;sup>4</sup> Community hospitals are defined by the AHA as "all non-Federal, short-term, general, and other specialty hospitals, excluding hospital units of institutions open to the public." Specialty hospitals included in the AHA definition of "community hospitals" are: obstetrics-gynecology, ear-nose-throat, short-term rehabilitation, orthopedic, and pediatric institutions. Community hospitals can include rehabilitation and long-term acute care (LTAC) facilities. These facilities can provide acute care services to patients who need long term hospitalization). Excluded from the AHA definition of "community hospitals" are long-term non-acute care hospitals, psychiatric hospitals, and alcoholism/chemical dependency treatment facilities.

### STEPS TAKEN TO APPLY AHRQ QUALITY INDICATORS TO THE HCUP DATA

To apply the AHRQ Quality Indicators to HCUP hospital discharge data for the NHQDR, several steps were taken:

- (1) QI software review and modification
- (2) Acquisition of population-based data
- (3) Assignment of QIs to the HCUP databases
- (4) Identification of statistical methods.

#### Review and Modify the AHRQ QI Software

We used AHRQ QI software v2020.1 that features ICD-10-CM/PCS coding. The AHRQ QI software v2020.1 calculates risk-adjusted rates for a subset of hospital measures and all areabased measures. Therefore, the 2022 NHQDR includes risk-adjusted QI estimates as available in the software.

The QI software was modified for the 2022 NHQDR in several ways.

- The AHRQ QI software was designed to produce rates at various levels including hospital, local area (county or Metropolitan/Micropolitan Statistical Areas), and State. The QI software was revised to produce *national rates* for the NHQDR using weighted discharge data.
- The AHRQ QI software was limited to reporting rates by age, sex, and race/ethnicity. The NHQDR included additional patient categories (community income level of the patient's ZIP Code, primary expected payer, and location) and hospital characteristics (region, ownership, teaching status, location, and bed size).
- The AHRQ QI software was designed to produce standard errors for unweighted data. For the NHQDR, we needed to produce statistics for *weighted data* from the stratified sample of discharges in the nationally weighted analysis files and test for significant differences.
- At AHRQ's request, we added two area-based QIs particularly relevant to the structure of the NHQDR, measuring immunization-preventable pneumococcal pneumonia and immunization-preventable influenza for patients aged 65 years and older.

#### Acquire Population-Based Data for Denominators

The next step was to acquire data for the numerator and denominator populations for the QIs. The AHRQ QIs measure an event that occurs in a hospital, requiring a numerator count of the event of interest and a denominator count of the population (within a hospital or geographic area) to which the event relates.

For the numerator counts of the AHRQ QIs, we used the HCUP databases. For the denominator counts, we identified two sources for all reporting categories.

- For QIs that related to *providers*, the HCUP data were used for national and State-level discharge denominator counts.
- For QIs that related to *geographic areas*, population ZIP-Code-level counts from demographic update data provided by Claritas (a vendor that compiles and adds value to the U.S. Bureau of Census data) were used for denominator counts. Claritas uses

intra-census methods to estimate household and demographic statistics for geographic areas (Claritas).

#### Assign QI Indicators to the HCUP Databases

The four AHRQ QI program modules were applied to the prepared SID data using all available diagnoses and procedures reported by each State.

#### Adapt Statistical Methods to HCUP Data

Several statistical issues needed to be addressed when applying the AHRQ QI software to the HCUP data for the NHQDR, including the derivation of standard errors for weighted data and appropriate hypothesis tests.

- Standard Errors and Hypothesis Tests. Standard error calculations needed to take into account cluster and stratification aspects of the weighted analysis files. Standard errors were calculated for the NHQDR as described in the HCUP report entitled *Inferences with HCUP State Databases Final Report* (Houchens, et al., 2010). Using this method, we were able to calculate appropriate statistics for both national and State-level AHRQ QIs using the Statistical Analysis System (SAS) procedure called PROC SURVEYMEANS.
- Area-Based Measures Risk Adjustment Methodology. The risk adjustment methodology in the QI software was developed for county-level reporting. As in prior years', Watson Health applied a direct standardization method for risk adjustment to the area-based measures (using by 18 5-year age groups and sex) to allow for the reporting by patient characteristics not included in the QI software such as community income quartile and the urban/rural location of the patient's residence.
- Masking Rates for Statistical Reliability, Data Quality, and Confidentiality. QI estimates were included in the NHQDR if they reached a threshold defined by a relative standard error less than 30% and at least 100 weighted cases in the denominator. Estimates that did not meet this threshold were suppressed. Statistical calculations are explained in <u>Appendix C</u> to this report.

Some caution should be used in interpreting the QI statistics presented in the NHQDR. <u>Appendix D</u> details how these caveats relate to inter-State differences in data collection and other more general issues.

#### SPECIAL ANALYSES

#### National Inpatient Hospital Costs Associated with Quality Indicators

The NHQDR includes total national costs for the select PQIs and PDIs including the composites and ambulatory care sensitive conditions such as heart failure, diabetes, and asthma. Total national costs associated with these PQIs and PDIs were calculated overall and by community income quartile and race/ethnicity.

Total charges were converted to costs using the hospital-level HCUP Cost-to-Charge Ratio Files (CCR Files) based on Hospital Cost Report data from the Centers for Medicare & Medicaid Services (CMS).<sup>5</sup> Costs reflect the actual costs of production, while charges represent what the hospital billed for the stay. Hospital charges reflect the amount the hospital charged for the entire hospital stay and do not include professional (physician) fees. To account for records with missing total charges and costs in the aggregate, the average cost for the QI was used to impute the missing values for that QI. This approach compensates for stays for which charges (and thus estimated costs) are not available.

#### Benchmarks for State Performance for the Quality Indicators

Based on a recommendation from the Institute of Medicine's report on *Future Directions for the National Healthcare Quality and Disparities Reports*, benchmarks based on a straight average of the top 10 percent of reporting States were determined. For a benchmark to be calculated, rates for at least 30 States needed to be available.

# Medicaid and Uninsured Inpatient Stays and Aggregate Hospital Costs in the United States

Information on Medicaid and uninsured inpatient stays and aggregate hospital costs in the United States for 2012–2018 were developed using the HCUP National Inpatient Sample (NIS). Medicaid and uninsured discharges were identified based on the expected primary payer of Medicaid, self-pay, no charge, and charity. Discharge counts and aggregate hospital costs were reported as a percentage of the total U.S and by hospital characteristics including region, ownership, teaching status, urban-rural location, and size of the hospital based on the number of beds.

### National Rates for Inpatient Stays for Select Maternal Conditions

The nationally weighted NHQDR analysis file was used to examine differences in inpatient stays for select maternal conditions. Rates for the following measures were calculated for inpatient stays for women aged 12-55 years with any delivery diagnosis, procedure, or DRG, excluding those with any indication of abortion:

- Inpatient stays for severe maternal morbidity per 1,000 delivery hospitalizations. Severe
  maternal morbidity conditions were defined by the Center for Disease Control and
  Prevention. Information on the coding criteria is available at:
  www.cdc.gov/reproductivehealth/maternalinfanthealth/smm/severe-morbidity-ICD.htm.
  Rates were not risk-adjusted.
- Inpatient stays for venous thromboembolism or pulmonary embolism per 1,000 delivery hospitalizations. Any diagnosis was used to identify venous thromboembolism or pulmonary embolism (see <u>Appendix E</u> for detailed measures specifications). Rates were not risk-adjusted.
- Inpatient stays for postpartum hemorrhage per 1,000 delivery hospitalizations. Any diagnosis was used to identify postpartum hemorrhage (see <u>Appendix E</u> for detailed measures specifications). Rates were not risk-adjusted.
- Inpatient stays for eclampsia or preeclampsia per 1,000 delivery hospitalizations. Any diagnosis was used to eclampsia or preeclampsia (see <u>Appendix E</u> for detailed measures specifications). Rates were not risk-adjusted.

<sup>&</sup>lt;sup>5</sup> HCUP Cost-to-Charge Ratio Files. Healthcare Cost and Utilization Project (HCUP). December 2019. Agency for Healthcare Research and Quality, Rockville, MD. Available: <u>www.hcup-us.ahrq.gov/db/state/costtocharge.jsp</u>.

#### National Estimates of Emergency Department Utilization

The NEDS was used to examine national and regional differences in ED use for selected ambulatory care sensitive conditions

- ED visits for mental illness, substance use, and co-occurring mental illness and substance use. ED visits were identified by having a first-listed diagnosis related to mental illness, substance use, or co-occurring mental illness and alcohol or substance use (See <u>Appendix B</u> for detailed measures specifications). Claritas population data was used to calculate rates per 100,000 residents by age, sex, community income, urban-rural location of patient residence, and region of the United States. Rates were not risk-adjusted.
- ED visits for dental conditions. ED visits were identified by an ICD-10-CM principal diagnosis related to a dental condition (See <u>Appendix B</u> for detailed measures specifications). Claritas population data was used to calculate rates per 100,000 residents by age, sex, community income, and urban-rural location of patient residence. Rates were not risk-adjusted.
- ED visits for injuries. ED utilization for injuries was reported by trauma level and by age, sex, community income, urban-rural location of patient residence, and region of the United States (See <u>Appendix B</u> for detailed measures specifications). Rates were not risk-adjusted.
- ED visits for asthma for adults based on PQI 15 and for pediatrics based on PDI 14 (see <u>Appendix B for detailed specifications</u>).
- ED visits for heart failure based on PQI 8 (see <u>Appendix B for detailed specifications</u>).
- ED visits for dementia. ED visits in the U.S. for patients aged 65 years or older were identified by any ICD-10-CM diagnosis related to dementia (See <u>Appendix B</u> for detailed measure specifications). Rates for per ED visits and per 100,000 population aged 65 years and older were not risk-adjusted. Claritas population data was used to calculate rates per 100,000 population aged 65 years and older.

Additional details on the use of the NEDS for reporting are provided in Appendix B.

### TABLES

#### Table 1. AHRQ QIs Applied to the HCUP Data for the NHQDR

This table includes the includes the list of all AHRQ QI software v2020.1 QIs calculated using 2016-2019 HCUP inpatient data under the NHQDR task. Not all of the AHRQ QIs listed below were included in the NHQDR.

The QI specifications are consistent with the AHRQ software. For more information on QI definitions, please visit the AHRQ QI website (https://www.gualityindicators.ahrg.gov/Default.aspx).

Q QI Label Inpatient Quality Indicators IQ108 Deaths per 1,000 hospital admissions with esophageal resection for cancer, age 18 and over IQ109 Deaths per 1,000 hospital admissions with pancreatic resection, age 18 and over **IQI11** Deaths per 1,000 hospital admissions with abdominal aortic aneurysm (AAA) repair, age 18 and over Deaths per 1,000 hospital admissions with coronary IQI12 artery bypass graft (CABG), age 40 and over IQI15 Deaths per 1,000 hospital admissions with acute myocardial infarction (AMI), age 18 and over IQI16 Deaths per 1,000 hospital admissions with heart failure (HF), age 18 and over **IQI17** Deaths per 1,000 hospital admissions with acute stroke, age 18 and over **IQI18** Deaths per 1,000 hospital admissions with gastrointestinal hemorrhage, age 18 and over **IQI19** Deaths per 1,000 hospital admissions with hip fracture, age 65 and over IQI20 Deaths per 1,000 hospital admissions with pneumonia, age 18 and over IQI21 Cesarean deliveries per 1,000 deliveries Vaginal birth after cesarean (VBAC) per 1,000 **IQI22** women with previous cesarean deliveries, uncomplicated IQI30 Deaths per 1,000 hospital admissions with percutaneous coronary intervention (PCI), age 40 and over IQI31 Deaths per 1,000 hospital admissions with carotid endarterectomy (CEA), age 18 and over IQI32 Deaths per 1,000 hospital admissions with acute myocardial infarction (AMI), age 18 and over IQI33 First-time cesarean deliveries (identified by no previous cesarean delivery diagnosis on the record) per 1,000 deliveries IQI34 Vaginal birth after cesarean (VBAC) per 1,000 women with previous cesarean deliveries, all Pediatric Quality Indicators NQI03 Admissions with blood stream infection per 1,000 medical and surgical discharges of length 2 or more days, newborns **PDI01** Accidental puncture or laceration during a procedure per 1,000 medical and surgical admissions, age less than 18 years **PDI05** Admissions with iatrogenic pneumothorax per 1,000 medical and surgical admissions, age less than 18 years Perioperative hemorrhage or hematoma with PDI08 surgical drainage or evacuation per 1,000 elective surgical admissions, age less than 18 years PDI09 Postoperative respiratory failure, prolonged mechanical ventilation, or reintubation per 1,000 elective-surgery admissions, age less than 18 years PDI10 Postoperative sepsis per 1,000 surgery admissions, age less than 18 years

PDI12       Admissions with central vibloodstream infection per discharges of length 2 or 18 years         PDI14       Admissions for asthma per 2-17         PDI15       Admissions with diabetes complications per 100,000	1,000 medical and surgical more days, age less than er 100,000 population, ages with short-term <u>0 population, ages 6-17</u> gastroenteritis per 100,000 s to 17 years ct infection (UTI)per <u>3 months to 17 years</u> uality Indicator (PDI) opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 autors with short-term <u>0 population, age 18 and</u> with long-term <u>0 population, age 18 and</u>
bloodstream infection per discharges of length 2 or 18 years         PDI14       Admissions for asthma per 2-17         PDI15       Admissions for asthma per 2-17         PDI15       Admissions with diabetes complications per 100,000         PDI16       Admissions for pediatric population, ages 3 month 100,000 population, ages         PDI90       AHRQ overall Pediatric Q composite per 100,000 pc         PDI91       AHRQ acute Pediatric Qu composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Qu composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Qu composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Qu composite per 100,000 pc         PQI01       Admissions with diabetes complications per 100,000 over         PQI03       Admissions with diabetes complications per 100,000 over         PQI05       Admissions with chronic c disease (COPD) or asthma age 40 and over	1,000 medical and surgical more days, age less than er 100,000 population, ages with short-term <u>0 population, ages 6-17</u> gastroenteritis per 100,000 s to 17 years ct infection (UTI)per <u>3 months to 17 years</u> uality Indicator (PDI) opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 autors with short-term <u>0 population, age 18 and</u> with long-term <u>0 population, age 18 and</u>
discharges of length 2 or 18 years         PDI14       Admissions for asthma per 2-17         PDI15       Admissions with diabetes complications per 100,000         PDI16       Admissions for pediatric grapholic population, ages 3 monther 100,000 population, ages         PDI18       Admissions for urinary transitions for urinary transition grapholic per 100,000 population, ages         PDI90       AHRQ overall Pediatric Qu composite per 100,000 pc         PDI91       AHRQ chronic Pediatric Cu composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Cu composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Cu composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Cu composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Cu composite per 100,000 pc         PDI92       Admissions with diabetes complications per 100,000 pc         PQI01       Admissions with diabetes complications per 100,000 pc         PQI05       Admissions with chronic cu disease (COPD) asthma age 40 and over	more days, age less than er 100,000 population, ages with short-term <u>D</u> population, ages 6-17 jastroenteritis per 100,000 s to 17 years ct infection (UTI)per <u>3</u> months to 17 years uality Indicator (PDI) population, ages 6-17 ality Indicator (PDI) population, ages 6-17 Quality Indicator (PQI) population, ages 6-17 ators with short-term D population, age 18 and with long-term D population, age 18 and
18 years         PDI14       Admissions for asthma pereventions per 100,000         PDI15       Admissions with diabetes complications per 100,000         PDI16       Admissions for pediatric graphic population, ages 3 months         PDI18       Admissions for urinary transformer transforme	er 100,000 population, ages with short-term Depulation, ages 6-17 gastroenteritis per 100,000 s to 17 years ct infection (UTI)per 3 months to 17 years uality Indicator (PDI) population, ages 6-17 ality Indicator (PDI) population, ages 6-17 Quality Indicator (PQI) population, ages 6-17 ators with short-term D population, age 18 and with long-term D population, age 18 and bostructive pulmonary
2-17         PDI15       Admissions with diabetes complications per 100,000         PDI16       Admissions for pediatric g population, ages 3 monthines         PDI18       Admissions for urinary transmissions urinary transmissions urinary transmissions urinary transmissions with diabetes complications per 100,000 pc         PDI91       AHRQ acute Pediatric Qu composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Cu composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Cu composite per 100,000 pc         PDI92       Admissions with diabetes complications per 100,000 pc         PQI01       Admissions with diabetes complications per 100,000 pc         PQI03       Admissions with diabetes complications per 100,000 pc         PQI05       Admissions with chronic co disease (COPD) or asthmis age 40 and over	with short-term D population, ages 6-17 Jastroenteritis per 100,000 s to 17 years ct infection (UTI)per 3 months to 17 years uality Indicator (PDI) opulation, ages 6-17 Cality Indicator (PDI) opulation, ages 6-17 Cality Indicator (PQI) opulation, ages 6-17 cators with short-term D population, age 18 and with long-term D population, age 18 and bostructive pulmonary
PDI15         Admissions with diabetes complications per 100,000           PDI16         Admissions for pediatric g population, ages 3 months 100,000 population, ages PDI90           PDI90         Admissions for urinary tra 100,000 population, ages AHRQ overall Pediatric Q composite per 100,000 pc           PDI91         AHRQ acute Pediatric Q composite per 100,000 pc           PDI92         AHRQ chronic Pediatric C composite per 100,000 pc           PDI92         AHRQ chronic Pediatric C composite per 100,000 pc           PQI01         Admissions with diabetes complications per 100,000 over           PQI03         Admissions with diabetes complications per 100,000 over           PQI05         Admissions with chronic c disease (COPD)or asthma age 40 and over	D population, ages 6-17 gastroenteritis per 100,000 s to 17 years ct infection (UTI)per 3 months to 17 years uality Indicator (PDI) opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 sators with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
complications per 100,000           PDI16         Admissions for pediatric g population, ages 3 months 100,000 population, ages           PDI18         Admissions for urinary tra 100,000 population, ages           PDI90         AHRQ overall Pediatric Q composite per 100,000 pc           PDI91         AHRQ acute Pediatric Qu composite per 100,000 pc           PDI92         AHRQ chronic Pediatric Q composite per 100,000 pc           PDI92         AHRQ chronic Pediatric Q composite per 100,000 pc           PQI01         Admissions with diabetes complications per 100,000 over           PQI03         Admissions with diabetes complications per 100,000 over           PQI05         Admissions with chronic c disease (COPD)or asthma age 40 and over	D population, ages 6-17 gastroenteritis per 100,000 s to 17 years ct infection (UTI)per 3 months to 17 years uality Indicator (PDI) opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 sators with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
PDI16       Admissions for pediatric g         population, ages 3 months         PDI18       Admissions for urinary tra         100,000 population, ages         PDI90       AHRQ overall Pediatric Q         composite per 100,000 pc         PDI91       AHRQ acute Pediatric Qu         composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Q         composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Q         composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Q         composite per 100,000 pc         PQI01       Admissions with diabetes         complications per 100,000       over         PQI03       Admissions with diabetes         PQI05       Admissions with chronic c         disease (COPD)or asthma       age 40 and over	pastroenteritis per 100,000 s to 17 years ct infection (UTI)per 3 months to 17 years uality Indicator (PDI) opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 sators with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
population, ages 3 months           PDI18         Admissions for urinary tra 100,000 population, ages           PDI90         AHRQ overall Pediatric Q composite per 100,000 pc           PDI91         AHRQ acute Pediatric Qu composite per 100,000 pc           PDI92         AHRQ chronic Pediatric Q composite per 100,000 pc           PDI92         AHRQ chronic Pediatric Q composite per 100,000 pc           PDI92         AHRQ chronic Pediatric Q composite per 100,000 pc           PQI01         Admissions with diabetes complications per 100,000 over           PQI03         Admissions with diabetes complications per 100,000 over           PQI05         Admissions with chronic c disease (COPD)or asthma age 40 and over	s to 17 years ct infection (UTI)per 3 months to 17 years uality Indicator (PDI) opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 eators with short-term D opulation, age 18 and with long-term D population, age 18 and obstructive pulmonary
PDI18       Admissions for urinary tra 100,000 population, ages         PDI90       AHRQ overall Pediatric Q composite per 100,000 pc         PDI91       AHRQ acute Pediatric Q composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Q composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Q composite per 100,000 pc         PQI01       Admissions with diabetes complications per 100,000 over         PQI03       Admissions with diabetes complications per 100,000 over         PQI05       Admissions with chronic c disease (COPD)or asthma age 40 and over	ct infection (UTI)per 3 months to 17 years uality Indicator (PDI) opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 <b>extors</b> with short-term D population, age 18 and with long-term D population, age 18 and bostructive pulmonary
100,000 population, ages         PDI90       AHRQ overall Pediatric Q         composite per 100,000 pc         PDI91       AHRQ acute Pediatric Qu         composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Qu         composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Qu         composite per 100,000 pc         PQI01       Admissions with diabetes         complications per 100,000       over         PQI03       Admissions with chronic c         disease (COPD)or asthma       age 40 and over	3 months to 17 years uality Indicator (PDI) opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
PDI90       AHRQ overall Pediatric Q         composite per 100,000 pc         PDI91       AHRQ acute Pediatric Qu         composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Qu         composite per 100,000 pc         PDI92       AHRQ chronic Pediatric Qu         composite per 100,000 pc         PQI01       Admissions with diabetes         complications per 100,000         over         PQI03       Admissions with diabetes         complications per 100,000         over         PQI05       Admissions with chronic c         disease (COPD)or asthmatications         age 40 and over	uality Indicator (PDI) opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 ators with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
composite per 100,000 pc           PDI91         AHRQ acute Pediatric Qu composite per 100,000 pc           PDI92         AHRQ chronic Pediatric Qu composite per 100,000 pc           PQI01         Admissions with diabetes complications per 100,000 over           PQI03         Admissions with diabetes complications per 100,000 over           PQI05         Admissions with chronic c disease (COPD)or asthma age 40 and over	opulation, ages 6-17 ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 ators with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
PDI91       AHRQ acute Pediatric Quicomposite per 100,000 pc         PDI92       AHRQ chronic Pediatric Quicomposite per 100,000 pc         PQI01       Admissions with diabetes complications per 100,000 pc         PQI03       Admissions with diabetes complications per 100,000 pc         PQI03       Admissions with diabetes complications per 100,000 pc         PQI05       Admissions with chronic complications per 100,000 pc         PQI05       Admissions with chronic complications per 100,000 pc	ality Indicator (PDI) opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 ators with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
composite per 100,000 pc           PDI92         AHRQ chronic Pediatric C           composite per 100,000 pc         Prevention Quality Indic           PQI01         Admissions with diabetes complications per 100,000 over           PQI03         Admissions with diabetes complications per 100,000 over           PQI05         Admissions with chronic c disease (COPD)or asthma age 40 and over	opulation, ages 6-17 Quality Indicator (PQI) opulation, ages 6-17 eators with short-term D population, age 18 and with long-term D population, age 18 and bostructive pulmonary
PDI92       AHRQ chronic Pediatric Composite per 100,000 per composite per 100,000 per complications with diabetes complications per 100,000 over         PQI01       Admissions with diabetes complications per 100,000 over         PQI03       Admissions with diabetes complications per 100,000 over         PQI04       Admissions with diabetes complications per 100,000 over         PQI05       Admissions with chronic complications per 100,000 over         PQI05       Admissions with chronic complications per 100,000 over	Quality Indicator (PQI) opulation, ages 6-17 ators with short-term D population, age 18 and with long-term D population, age 18 and bostructive pulmonary
composite per 100,000 pc           Prevention Quality Indic           PQI01         Admissions with diabetes complications per 100,000 over           PQI03         Admissions with diabetes complications per 100,000 over           PQI05         Admissions with chronic condisease (COPD) or asthma age 40 and over	pulation, ages 6-17 eators with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
Prevention Quality Indic           PQI01         Admissions with diabetes complications per 100,000 over           PQI03         Admissions with diabetes complications per 100,000 over           PQI05         Admissions with chronic of disease (COPD)or asthma age 40 and over	ators with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
PQI01       Admissions with diabetes complications per 100,000 over         PQI03       Admissions with diabetes complications per 100,000 over         PQI05       Admissions with chronic of disease (COPD) or asthma age 40 and over	with short-term D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
PQI03 Admissions with diabetes complications per 100,000 over PQI05 Admissions with diabetes complications per 100,000 over PQI05 Admissions with chronic of disease (COPD)or asthma age 40 and over	D population, age 18 and with long-term D population, age 18 and obstructive pulmonary
PQI03 Admissions with diabetes complications per 100,000 over PQI05 Admissions with chronic of disease (COPD)or asthma age 40 and over	with long-term D population, age 18 and Dostructive pulmonary
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PQI05 Complications per 100,000 over PQI05 Admissions with chronic of disease (COPD)or asthma age 40 and over	D population, age 18 and
PQI05 Admissions with chronic of disease (COPD) or asthma age 40 and over	obstructive pulmonary
PQI05 Admissions with chronic c disease (COPD)or asthma age 40 and over	bstructive pulmonary
disease (COPD)or asthma age 40 and over	a par 100 000 population
age 40 and over	
	sion per 100,000
population, age 18 and ov	
PQI08 Admissions for heart failu	re (HF)per 100,000
population, age 18 and ov	/er
PQI11 Admissions for community	y-acquired bacterial
	opulation, age 18 and over
PQI12 Admissions for urinary tra	
100,000 population, age 1	18 and over
PQI14 Admissions for uncontroll	
complications per 100,000	) population, age 18 and
over	100.000
	er 100,000 population, age
18 to 39           PQI16         Lower extremity amputation	ons among admissions for
diabetes per 100,000 pop	
PQI17 Admissions for immunizat	tion-preventable
pneumococcal pneumonia	
age 65 and over	
PQI18 Admissions for immunizat	tion-preventable influenza
per 100,000 population, a	
PQI90 AHRQ overall Prevention	
composite per 100,000 pc	opulation, age 18 and over
PQI91 AHRQ acute Prevention C	Quality Indicator (PQI)
composite per 100,000 pc	opulation, age 18 and over
PQI92 AHRQ chronic Prevention	Quality Indicator (PQI)
composite per 100,000 pc	opulation, age 18 and over
PQI93 AHRQ diabetes Prevention	on Quality Indicator (PQI)
	opulation, age 18 and over
Patient Safety Indicators	
	admissions with expected
low-mortality, age 18 and	over or obstetric
admissions	
PSI03 Admissions with pressure	
and surgical discharges o	i lengin 3 or more days,
age 18 and over	ouroon, oducioniano -
PSI04 Deaths per 1,000 elective	
care during hospitalization	treatable complications of
admissions	i, ages 10-03 01 UDSIEIIIC
PSI05 Count of retained surgical	items or unretrieved
device fragments among	
admissions, age 18 and o	

QI	QI Label
PSI06	Admissions with iatrogenic pneumothorax per 1,000 medical and surgical admissions, age 18 and over
PSI07	Admissions with central venous catheter-related bloodstream infection per 1,000 medical and surgical discharges of length 2 or more days, age 18 and over or obstetric admissions
PSI08	Postoperative hip fracture per 1,000 surgical admissions who were not susceptible to falling, age 18 and over
PSI10	Perioperative hemorrhage or hematoma with surgical drainage or evacuation per 1,000 surgical admissions, age 18 and over
PSI11	Postoperative acute kidney injury requiring dialysis per 1,000 elective-surgery admissions, age 18 and over
PSI12	Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT) per 1,000 surgical admissions, age 18 and over
PSI13	Postoperative sepsis per 1,000 elective-surgery admissions, age 18 and over
PSI14	Reclosure of postoperative abdominal wound dehiscence per 1,000 abdominopelvic-surgery admissions of length 2 or more days, age 18 and over
PSI15	Accidental puncture or laceration during a procedure per 1,000 medical and surgical admissions, age 18 and over
PSI17	Birth trauma - injury to neonate per 1,000 live births
PSI18	Obstetric trauma per 1,000 instrument-assisted vaginal deliveries
PSI19	Obstetric trauma per 1,000 vaginal deliveries without instrument assistance

#### Table 2. Sources of 2016-2019 HCUP Inpatient Data for the NHQDR

Sponsored by the Agency for Healthcare Research and Quality (AHRQ), HCUP is a family of databases, software tools, and products developed through the collaboration of State data organizations, hospital associations, private data organizations, and the Federal government. HCUP would not be possible without the contributions of the following data collection Partners from across the United States.

The reporting of State-Specific information in the National Healthcare Quality and Disparities Report (NHQDR) is dependent on the permission from the HCUP Partner. Use of the State Inpatient Databases (SID) in the nationally weighted NHQDR analysis file is dependent on the availability of essential data elements. The States that met the inclusion criteria for developing the national-level weights in the final NHQDR analysis file are noted below.

The notations used in Table 2 are defined below:

- Yes, all: Data from the SID were used to report on all four types of QIs (PQIs, IQIs, PSIs, and PDIs).
- Yes, subset: Data from the SID were used to report only on PQIs, IQIs, and area-based PDIs.
  - SID were excluded from the nationally weighted analysis file used for PSI and related PDI reporting if they did not meet POA, race/ethnicity, and/or procedure day criteria
- No: Data from the SID were not used for national QI reporting.

HCUP Partner Organizations	Inclusion in the 2016 NHQDR National File	Inclusion in the 2017 NHQDR National File	Inclusion in the 2018 NHQDR National File	Inclusion in the 2019 NHQDR National File
<b>Alaska</b> Department of Health and Social Services <b>and</b> State Hospital and Nursing Home Association	Yes, subset	Yes, all	Yes, all	Yes, all
<b>Arizona</b> Department of Health Services	Yes, all	Yes, all	Yes, all	Yes, all
Arkansas Department of Health	Yes, all	Yes, all	Yes, all	Yes, all
<b>California</b> Office of Statewide Health Planning & Development	Yes, all	Yes, all	Yes, all	Yes, all
Colorado Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
Connecticut Hospital Association	Yes, subset	Yes, subset	Yes, subset	Yes, subset
Delaware Division of Public Health	No	Yes, subset	Yes, subset	Yes, subset
<b>District of Columbia</b> Hospital Association	No	Yes, all	Yes, all	Yes, all
Florida Agency for Health Care	Yes, all	Yes, all	Yes, all	Yes, all

 SID did not include information on the race/ethnicity of the patient or were unavailable at the time the nationally weighted analysis file was constructed.

HCUP Partner Organizations	Inclusion in the 2016 NHQDR National File	Inclusion in the 2017 NHQDR National File	Inclusion in the 2018 NHQDR National File	Inclusion in the 2019 NHQDR National File
Administration				
Georgia Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
Hawaii Health Information Corporation	Yes, all	Yes, all	Yes, all	Yes, all
Illinois Department of Public Health	Yes, all	Yes, all	Yes, all	Yes, all
Indiana Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
Iowa Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
Kansas Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
<b>Kentucky</b> Cabinet for Health and Family Services	Yes, all	Yes, all	Yes, all	Yes, all
Louisiana Department of Health	Yes, all	Yes, all	Yes, all	Yes, all
Maine Health Data Organization	Yes, all	Yes, all	Yes, all	Yes, all
<b>Maryland</b> Health Services Cost Review Commission	Yes, all	Yes, all	Yes, all	Yes, all
Massachusetts Center for Health Information and Analysis	Yes, all	Yes, all	Yes, all	Yes, all
<b>Michigan</b> Health & Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
Minnesota Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
Mississippi Department of Health	Yes, all	Yes, all	Yes, all	Yes, all
<b>Missouri</b> Hospital Industry Data Institute	Yes, all	Yes, all	Yes, all	Yes, all
Montana Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
Nebraska Hospital Association	No	No	No	No
<b>Nevada</b> Department of Health and Human Services	Yes, all	Yes, all	Yes, all	Yes, all
<b>New Hampshire</b> Department of Health & Human Services	No	No	No	Yes, subset
New Jersey Department of Health	Yes, all	Yes, all	Yes, all	Yes, all
New Mexico Department of Health	Yes, all	Yes, all	Yes, all	Yes, all
New York State Department of Health	Yes, all	Yes, all	Yes, all	Yes, all
North Carolina Department of Health and Human Services	Yes, all	Yes, all	Yes, all	Yes, all
<b>North Dakota</b> (data provided by the Minnesota Hospital Association)	No	Yes, all	Yes, all	Yes, all
Ohio Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
Oklahoma State Department of Health	Yes, subset	Yes, subset	Yes, subset	Yes, subset
Oregon Association of Hospitals and	Yes, all	Yes, all	Yes, all	Yes, all

HCUP Partner Organizations	Inclusion in the 2016 NHQDR National File	Inclusion in the 2017 NHQDR National File	Inclusion in the 2018 NHQDR National File	Inclusion in the 2019 NHQDR National File
Health Systems				
<b>Pennsylvania</b> Health Care Cost Containment Council	Yes, all	Yes, all	Yes, all	Yes, all
Rhode Island Department of Health	Yes, all	Yes, all	Yes, all	Yes, all
<b>South Carolina</b> Revenue and Fiscal Affairs Office	Yes, all	Yes, all	Yes, all	Yes, all
South Dakota Association of Healthcare Organizations	Yes, all	Yes, all	Yes, all	Yes, all
Tennessee Hospital Association	Yes, all	Yes, all	Yes, all	Yes, all
<b>Texas</b> Department of State Health Services	Yes, all	Yes, all	Yes, all	Yes, all
Utah Department of Health	No	No	Yes, all	Yes, all
<b>Vermont</b> Association of Hospitals and Health Systems	Yes, all	Yes, all	Yes, all	Yes, all
Virginia Health Information	Yes, all	Yes, all	Yes, all	Yes, all
Washington State Department of Health	Yes, all	Yes, all	Yes, all	Yes, all
<b>West Virginia</b> Department of Health and Human Resources, West Virginia Health Care Authority	Yes, subset	Yes, subset	Yes, subset	Yes, all
Wisconsin Department of Health Services	Yes, subset	Yes, subset	Yes, subset	Yes, subset
Wyoming Hospital Association	Yes, subset	Yes, subset	Yes, subset	Yes, subset

\*Yes, Subset: Subset of QIs that do not require POA reporting.

### Table 3. Editing Essential Data Elements for State-Level Reporting of QIs in the NHQDR

State	Used for reporting by race/ethnicity?	Used for reporting by PSIs?			
AK	2016-2019	2017-2019			
AR	2016-2019	2016-2019			
AZ	2016-2019	2016-2019			
CA	2016-2019	2016-2019			
CO	2016-2019	2016-2019			
СТ	2016-2019	No			
DC	2017-2019	2016-2019			
DE	2017-2019	No			
FL	2016-2019	2016-2019			
GA	2016-2019	2016-2019			
HI	2016-2019	2016-2019			
IA	2016-2019	2018-2019			
IL	2016-2019	2016-2019			
IN	2017-2019	2016-2019			
KS	2016-2019	2016-2019			
KY	2016-2019	2016-2019			
LA	No	2016-2019			
MA	2016-2019	2016-2019			
MD	2016-2019	2016-2019			
ME	2016-2019	2016-2019			
MI	2016-2019	2016-2019			
MN	2018-2019	2016-2019			
MO	2016-2019	2016-2019			
MS	2016-2019	2016-2019			
MT	No	2016-2019			
NC		2016-2019			
	2016-2019	2016-2019			
ND	No	2016-2019			
NE	No	2016-2019 No			
NH	<u>2019</u> 2016-2019	2016-2019			
NJ					
NM	2016-2019	2016-2019			
NV	2016-2019	2016-2019			
NY	2016-2019	2016-2019			
ОН	2016-2019	2016-2019			
OK	2016-2019	No			
OR	2016-2019	2016-2019			
PA	2016-2019	2016-2019			
RI	2016-2019	2016-2019			
SC	2016-2019	2016-2019			
SD	2016-2019	No			
TN	2016-2019	2016-2019			
ТХ	2016-2019	2016-2019			
UT	2018-2019	2016-2019			
VA	2016-2019	2016-2019			
VT	2016-2019	No			

State	Used for reporting by race/ethnicity?	Used for reporting by PSIs?
WA	2016-2019	2016-2019
WI	2016-2019	No
WV	No	2019
WY	2016-2019	No

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### APPENDICES

# APPENDIX A: NATIONALLY WEIGHTED ANALYSIS FILES FOR THE NATIONAL HEALTHCARE QUALITY AND DISPARITIES REPORT

Beginning with the 2022 NHQDR, two versions of the nationally weighted NHQDR analysis file were used for reporting national QI estimates. Both used the SID and were limited to community hospitals, excluding rehabilitation and LTAC facilities. The two versions were specific to the data elements needed for the different QI modules:

- For the PQIs, IQIs, and area-based PDIs, the nationally weighted file included data from SID that included information on race/ethnicity of the patient. After hospitals that failed the race/ethnicity edits were excluded, all remaining discharges in the selected SID were weighted to the universe of community hospitals in the United States, excluding rehabilitation and LTAC facilities.
- Because the PSIs and related PDIs require knowing if the patient safety event occurred in the hospital and the timing of procedures, a second version of the nationally weighted file was created using the following criteria: (1) the SID included the data elements indicating diagnoses were POA, (2) the SID included information on day of principal and secondary procedure days, and (3) the SID included information on the race/ethnicity of the patient. Hospitals in qualifying SID were excluded if they failed POA and race/ethnicity edits. All remaining discharges were weighted to the universe of community hospitals in the United States, excluding rehabilitation and LTAC facilities.

In data year 2016, there were 49 eligible SID:

- 37 SID had all necessary data elements and were used for national estimates of all QIs (PQIs, IQIs, PSIs, and PDIs)
- 6 SID did not have POA and/or procedure date data and were thus excluded from national reporting of PSIs and related PDIs
- 6 SID did not have any race/ethnicity data (or were unavailable at the time the national file was built) and were not used for any national QI estimates (Figure A-1).

In data year 2017, there were 49 eligible SID:

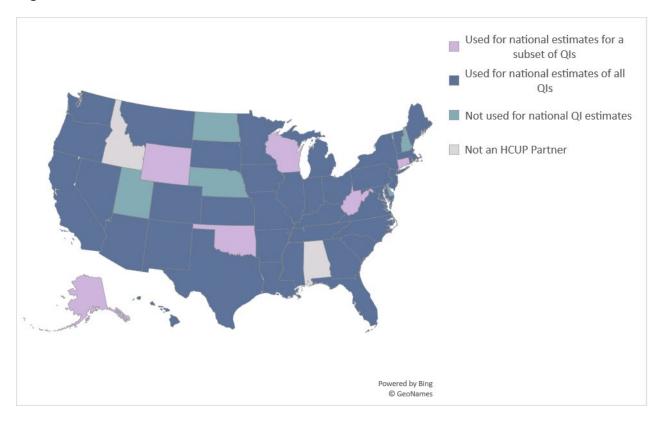
- 40 SID had all necessary data elements and were used for national estimates of all QIs (PQIs, IQIs, PSIs, and PDIs).
- 6 SID did not have POA and/or procedure date data and were thus excluded from national reporting of PSIs and related PDIs
- 3 SID did not have any race/ethnicity data (or were unavailable at the time the national file was built) and were not used for any national QI estimates (Figure A-2).

In data year 2018, there were 49 eligible SID

- 41 SID had all necessary data elements and were used for national estimates of all QIs (PQIs, IQIs, PSIs, and PDIs).
- 6 SID did not have POA and/or procedure date data and were thus excluded from national reporting of PSIs and related PDIs
- 2 SID did not have any race/ethnicity data (or were unavailable at the time the national file was built) and were not used for any national QI estimates (Figure A-3).

In data year 2019, there were 49 eligible SID

- 42 SID had all necessary data elements and were used for national estimates of all QIs (PQIs, IQIs, PSIs, and PDIs).
- 6 SID did not have POA and/or procedure date data and were thus excluded from national reporting of PSIs and related PDIs
- 1 SID did not have any race/ethnicity data (or were unavailable at the time the national file was built) and were not used for any national QI estimates (Figure A-3).



#### Figure A-1. States Used for 2016 National QI Estimates

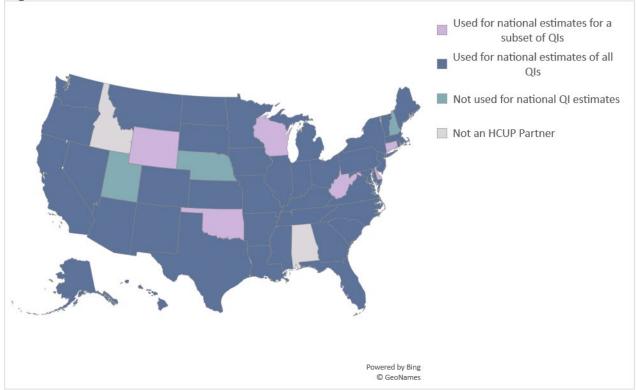
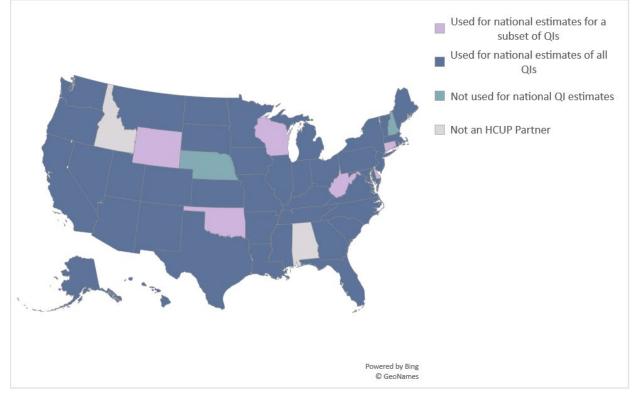


Figure A-2. States Used for 2017 National QI Estimates

Figure A-3. States Used for 2018 National QI Estimates



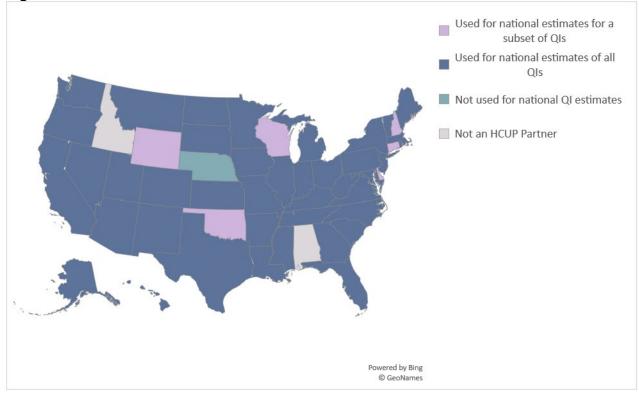


Figure A-4. States Used for 2019 National QI Estimates

#### Evaluating the 2016-2019 Nationally Weighted NHQDR Analysis File

Table A-1 demonstrates the representation of the States (plus District of Columbia) used for each year by U.S. Census region.

Census Region	20	016	20	017	2018		2019	
	All Qis	Subset of QIs						
Northeast								
Number of States in the nationally weighted analysis file	7	8	7	8	7	8	8	9
Number of States in the region	9	9	9	9	9	9	9	9
Percent of States included in the nationally weighted analysis file	77.8%	88.9%	77.8%	88.9%	77.8%	88.9%	88.9%	100%
Midwest								
Number of States in the nationally weighted analysis file	9	10	10	11	10	11	10	11
Number of States in the region	12	12	12	12	12	12	12	12
Percent of States included in the nationally weighted analysis file	75.0%	83.3%	83.3%	91.7%	83.3%	91.7%	83.3%	91.7%
South								
Number of States and District of Columbia in the nationally weighted analysis file	12	14	13	16	13	16	14	16
Number of States and District of Columbia in the region	17	17	17	17	17	17	17	17
Percent of States included in the nationally weighted analysis file	70.6%	82.4%	76.5%	94.1%	76.5%	94.1%	82.4%	94.1%
West								
Number of States in the nationally weighted analysis file	9	11	10	11	11	12	11	12
Number of States in the region	13	13	13	13	13	13	13	13
Percent of States included in the nationally weighted analysis file	69.2%	84.6%	76.9%	84.6%	84.6%	92.3%	84.6%	92.3%

#### Table A-1. Geographic Representation of the NHQDR Analysis File, 2016-2019

Total								
Number of States in the nationally weighted analysis file	37	43	40	46	41	47	42	48
Number of States and District of Columbia in the region	51	51	51	51	51	51	51	51
Percent of States included in the nationally weighted analysis file	72.5%	84.3%	78.4%	90.2%	80.4%	92.2%	82.4%	94.1%

Table A-2 compares aggregated totals of various measures as a percent of the national measure.

Measure	nat popu repres	cent of ional ulation sented - 016	nat popu repres	ent of ional Ilation sented - 017	nati popu	ent of onal lation ented - 18	nati popu repres	ent of ional ilation iented - 019
	All Other QIs	PSIs and Related PDIs	All Other QIs	PSIs and Related PDIs	All Other QIs	PSIs and Related PDIs	All Other Qls	PSIs and Related PDIs
Total resident population*	95.3%	90.2%	96.0%	90.9%	97.0%	94.3%	97.4%	92.4%
Population by race	e/ethnicity*							
White	94.4%	88.1%	95.1%	88.8%	96.3%	92.7%	96.9%	90.9%
African American	95.1%	92.3%	96.4%	93.2%	96.5%	94.8%	96.6%	93.5%
Asian/Pacific Islander	98.1%	95.4%	98.5%	95.9%	99.0%	97.5%	99.2%	96.5%
Hispanic	97.8%	95.2%	98.1%	95.4%	98.8%	97.6%	98.9%	96.2%
Population by age	*.		-					
Population under age 18	95.0%	90.0%	95.7%	90.7%	96.9%	94.5%	97.3%	92.5%
Population age 18-64	95.4%	90.3%	96.1%	91.0%	97.0%	93.4%	97.4%	92.5%
Population over age 64	95.5%	90.1%	96.2%	90.7%	96.9%	93.8%	97.3%	92.1%
Population by income**:								
Population with income under the Federal poverty level	95.5%	90.8%	96.2%	96.9%	92.0%	91.4%		ported in 9***

Table A-2. Population Representation of the NHQDR Analysis File, 2016-2019

\*Calculated using 2016-2019 Claritas data and 1977 OMB Directive 15 race definitions (e.g. no option for selecting "two or more races").

\*\*Calculated using Kaiser Family Foundation, statehealthfacts.org. Data Source: Urban Institute and Kaiser Commission on Medicaid and the Uninsured estimates based on the Census Bureau's American Community Survey, 2008-2019 (CPS: Annual Social and Economic Supplements), accessed September 24, 2021.

\*\*\* Due to known data quality issues with the 2019 CPS ASEC data, which was collected in March 2020 just at the onset of the pandemic and experienced low response rates, the Kaiser Family Foundation has chosen not to report the 2019 data.

To further evaluate the reliability of national estimates produced by the nationally weighted NHQDR analysis file it is compare to the respective National Inpatient Sample (NIS). Tables A.3–A.33 contain the distribution of discharges in both files by key demographic and clinical data elements. Based on these analyses, the 2016-2019 nationally weighted analysis files appear to provide reliable national estimates when compared with the 2016-2019 NIS files.

Inpatient Sample, 2016										
	2016 All Othe	•	2016 PSIs and Rela		2016 NIS					
REGION	Frequency	Percent	Frequency	Percent	Frequency	Percent				

6,923,516.00

8,218,875.00

14599676.00

7,325,563.00

18.68

22.17

19.76

6,599,354.00

7,934,002.00

7,123,014.00

39.39 14,019,051.00

18.50

22.24

39.30

19.97

18.68

22.17

39.39

19.76

# Table A-3. Comparison of Census Region, NHQDR Analysis File and HCUP NationalInpatient Sample, 2016

Table A-4. Comparison of Patient Age in Years at Admission, NHQDR Analysis File and
HCUP National Inpatient Sample, 2016

	2016 All Other QIs		2016 PSIs and Rela		2016 NIS		
AGE_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	580.00	0.00	
.A: Invalid	-	-	-	-	55.00	0.00	
.C: Inconsistent	-	-	-	-	6,475.00	0.02	
0-17	5,553,777.03	14.98	5,501,469.87	14.84	5,479,699.44	15.36	
18-44	8,984,366.79	24.24	8,993,052.74	24.26	8,707,322.70	24.41	
45-64	9,202,667.30	24.83	9,218,187.47	24.87	8,784,564.17	24.62	
65+	13326818.88	35.95	13354919.93	36.03	12,696,724.69	35.59	

Note: AGE was imputed when missing in the SID for the NHQDR analysis file.

### Table A-5. Comparison of Patient Sex, NHQDR Analysis File and HCUP National Inpatient Sample, 2016

	2016 All Other QIs		2016 PSIs and Rela		2016 NIS		
SEX_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	2,755.01	0.01	
.A: Invalid	-	-	-	-	504.99	0.00	
.C: Inconsistent	-	-	-	-	17,689.98	0.05	
0: Male	16078616.65	43.38	16,070,564.66	43.35	15,430,338.61	43.25	
1: Female	20989013.35	56.62	20,997,065.33	56.65	20,224,132.41	56.69	

Note: SEX was imputed when missing in the SID for the NHQDR analysis file.

1: Northeast

2: Midwest

3: South

4: West

6,923,516.00

8,218,875.00

14599676.00

7,325,563.00

## Table A-6. Comparison of Expected Primary Payer, NHQDR Analysis File and HCUP National Inpatient Sample, 2016

	2016 All Other QIs		2016 PSIs and Rela		2016 NIS		
PAY1_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	43,669.98	0.12	
.A: Invalid	-	-	-	-	3,689.98	0.01	
1: Medicare	14,852,381.54	40.07	14,874,212.33	40.13	14117652.96	39.57	
2: Medicaid	8,629,190.25	23.28	8,584,130.71	23.16	8,241,463.63	23.10	
3: Private Insurance	10,906,265.95	29.42	10,920,775.63	29.46	10,720,692.57	30.05	
4: Self-pay	1,455,888.64	3.93	1,471,263.13	3.97	1,378,048.31	3.86	
5: No Charge	116,555.15	0.31	116,815.43	0.32	111,960.07	0.31	
6: Other	1,107,348.48	2.99	1,100,432.77		1,058,243.50	2.97	

Note: PAY1 was imputed when missing in the SID for the NHQDR analysis file.

## Table A-7. Comparison of Community Income Quartile Based on the Patient's ZIP Code, NHQDR Analysis File and HCUP National Inpatient Sample, 2016

	2016 All Other QIs		201 PSIs and Rel	-	2016 NIS		
ZIPINC_QRTL_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	604,684.26	1.69	
.A: Invalid	-	-	-	-	2,570.01	0.01	
1: First Quartile (lowest income)		31.57	11,737,467.18	31.67	10,764,484.02	30.17	
2: Second Quartile		25.57	9,456,092.01	25.51	8,915,953.48	24.99	
3: Third Quartile	8,749,607.44	23.60	8,719,676.70	23.52	8,387,992.45	23.51	
4: Fourth Quartile (highest income)	, ,	19.25	7,154,394.11	19.30	6,999,736.78	19.62	

Note: ZIPINC\_QRTL was imputed when missing in the SID for the NHQDR analysis file.

 Table A-8. Comparison of Patient Race/Ethnicity, NHQDR Analysis File and HCUP

 National Inpatient Sample, 2016

	2016 All Other QIs		2016 PSIs and Rela		2016 NIS		
RACE_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	1,834,461.95	5.14	
.A: Invalid	-	-	-	-	1,094.99	0.00	
1: White	24,289,255.36	65.53	24,150,900.39	65.15	22,129,138.91	62.03	
2: Black	5,607,330.42	15.13	5,703,454.51	15.39	5,146,531.40	14.43	
3: Hispanic	4,557,685.94	12.30	4,649,835.45	12.54	4,151,120.68	11.64	
4: Asian/Pacific Islander	1,104,100.35	2.98	1,114,315.58	3.01	1,037,069.55	2.91	
5: Native American	260,304.36	0.70	200,816.20	0.54	219,704.67	0.62	

	2016 All Other		2016 PSIs and Rela	ited PDIs	2016 NIS	
RACE_I	Frequency	Percent	Frequency Percer		Frequency	Percent
6: Other	1,248,953.57	3.37	1,248,307.88	3.37	1,156,298.85	3.24

Note: RACE was imputed when missing in the SID for the NHQDR analysis file.

### Table A-9. Comparison of Location of Patient Residence, NHQDR Analysis File and HCUP National Inpatient Sample, 2016

	2016 All Other		2016 PSIs and Rela		2016 NIS	
PL_NCHS_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	165,924.82	0.47
1: Large central metropolitan	11,226,922.35	30.29	11,389,154.46	30.73	10,677,791.53	29.93
2: Large fringe metropolitan	8,886,157.64	23.97	9,247,344.81	24.95	8,511,806.80	23.86
3: Medium metropolitan	7,613,411.22	20.54	7,334,323.25	19.79	7,367,378.83	20.65
4: Small metropolitan	3,383,121.43	9.13	3,269,632.66	8.82	3,261,307.20	9.14
5: Micropolitan (nonmetropolit an)	3,380,294.75	9.12	3,342,235.48	9.02	3,249,516.34	9.11
6: Noncore (nonmetropolit an)	2,577,722.61	6.95	2,484,939.34	6.70	2,441,695.47	6.84

Note: PL\_NCHS was imputed when missing in the SID for the NHQDR analysis file.

# Table A-10. Comparison of Length of Stay, Number of Diagnoses and Procedures on the Record, Total Charges, and Total Cost, NHQDR Analysis File and HCUP National Inpatient Sample, 2016

	2016 All Other QIs			PSI	2016 PSIs and Related PDIs			2016 NIS		
Variable/Label	MIN	MAX	MEAN	MIN	MAX	MEAN	MIN	MAX	MEAN	
LOS: Length of stay (cleaned)		365.00	4.63	0.00	365.00	4.61	0.00	365.00	4.62	
NDX: Number of diagnoses on this record	0.00	72.00	10.60	0.00	72.00	10.64	0.00	72.00	10.56	
NPR: Number of procedures on this record	0.00	76.00	1.59	0.00	76.00	1.59	0.00	66.00	1.59	
TOTCHG: Total charges (cleaned)	100.0	9,999,999.0	47,340.94	100.0	9,999,999.0	47,413.24	100.0	9,999,999.0	47,018.93	

Table A-11. Comparison of Census Region, NHQDR Analysis File and HCUP NationalInpatient Sample, 2017

	2017 All Other QIs		2017 PSIs and Rela	ited PDIs	2017 NIS		
REGION	Frequency Percent		Frequency	Percent	Frequency	Percent	
1: Northeast	6,984,335.00	18.76	6,984,335.00	18.76	6,571,470.00	18.36	
2: Midwest	8,213,913.00	22.07	8,213,913.00	22.07	7,982,265.00	22.30	
3: South	14,615,323.00	39.27	14,615,323.00	39.27	14,063,640.00	39.29	
4: West	7,408,583.00	19.90	7,408,583.00	19.90	7,181,078.00	20.06	

## Table A-12. Comparison of Patient Age in Years at Admission, NHQDR Analysis File and HCUP National Inpatient Sample, 2017

	2017 All Other QIs		2017 PSIs and Rela	ted PDIs	2017 NIS		
AGE_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	435.00	0.00	
.A: Invalid	-	-	-	-	10.00	0.00	
.C: Inconsistent	-	-	-	-	1,265.00	0.00	
0-17	5,474,031.73	14.71	5,464,430.31	14.68	5,375,835.89	15.02	
18-44	8,866,071.45	23.82	8,871,038.24	23.83	8,569,788.74	23.94	
45-64	9,115,592.15	24.49	9,125,049.20	24.52	8,721,412.25	24.36	
65+	13,766,458.66	36.98	13761636.25	36.97	13,129,706.12	36.68	

Note: AGE was imputed when missing in the SID for the NHQDR analysis file.

# Table A-13. Comparison of Patient Sex, NHQDR Analysis File and HCUP NationalInpatient Sample, 2017

	2017 All Other QIs		2017 PSIs and Rela		2017 NIS		
SEX_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	2,650.00	0.01	
.A: Invalid	-	-	-	-	5.00	0.00	
.C: Inconsistent	-	-	-	-	2,095.00	0.01	
0: Male	16,250,362.63	43.66	16,246,433.12	43.65	15,607,453.13	43.60	
1: Female	20,971,791.37	56.34	20,975,720.88	56.35	20,186,249.87	56.39	

Note: SEX was imputed when missing in the SID for the NHQDR analysis file.

 Table A-14. Comparison of Expected Primary Payer, NHQDR Analysis File and HCUP

 National Inpatient Sample, 2017

	2017 All Other QIs		2017 PSIs and Rela	ited PDIs	2017 NIS	
PAY1_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	63,835.12	0.18
.A: Invalid	-	-	-	-	830.00	0.00
1: Medicare	15,246,467.72	40.96	15,228,431.07	40.91	14,513,926.28	40.54
2: Medicaid	8,645,247.30	23.23	8,617,741.00	23.15	8,270,727.84	23.10
3: Private Insurance	10,715,656.47	28.79	10,730,370.68	28.83	10,448,043.54	29.19
4: Self-pay	1,471,977.12	3.95	1,495,626.86	4.02	1,398,840.40	3.91
5: No Charge	108,362.93	0.29	111,545.81	0.30	104,305.26	0.29
6: Other	1,034,442.47	2.78	1,038,438.58		997,944.56	2.79

Note: PAY1 was imputed when missing in the SID for the NHQDR analysis file.

## Table A-15. Comparison of Community Income Quartile Based on the Patient's ZIP Code, NHQDR Analysis File and HCUP National Inpatient Sample, 2017

	2017 All Other QIs		201 PSIs and Rel	=	2017 NIS	
ZIPINC_QRTL_I	Frequency Percent		Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	579,364.49	1.62
.A: Invalid	-	-	-	-	2,245.01	0.01
1: First Quartile (lowest income)	11,508,876.50	30.92	11,584,894.34	31.12	10,680,030.04	29.83
2: Second Quartile	9,826,739.29	26.40	9,796,986.05	26.32	9,312,561.02	26.01
3: Third Quartile	8,649,828.57	23.24	8,574,265.96	23.04	8,277,358.70	23.12
4: Fourth Quartile (highest income)	7,236,709.63	19.44	7,266,007.65	19.52	6,946,893.73	19.41

Note: ZIPINC\_QRTL was imputed when missing in the SID for the NHQDR analysis file.

 Table A-16. Comparison of Patient Race/Ethnicity, NHQDR Analysis File and HCUP

 National Inpatient Sample, 2017

	2017 All Other QIs		2017 PSIs and Rela		2017 NIS	
RACE_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	1,531,207.63	4.28
.A: Invalid	-	-	-	-	450.00	0.00
1: White	24,186,983.23	64.98	23,991,274.17	64.45	22,225,089.88	62.08
2: Black	5,618,280.55	15.09	5,738,831.71	15.42	5,249,741.85	14.66
3: Hispanic	4,679,977.48	12.57	4,773,186.77	12.82	4,280,847.52	11.96
4: Asian/Pacific Islander	1,152,048.96	3.10	1,159,513.86	3.12	1,068,493.25	2.98
5: Native American	258,863.09	0.70	227,453.29	0.61	221,530.40	0.62

2017 All Other QIs		2017 PSIs and Rela	2017 NIS		
Frequency Percent		Frequency	requency Percent		Percent
1,326,000.69	3.56	1,331,894.20	3.58	1,221,092.47	3.41
	All Other Frequency	All Other Qls Frequency Percent	All Other QIs PSIs and Rela Frequency Percent Frequency	All Other QIs         PSIs and Related PDIs           Frequency         Percent         Frequency         Percent	All Other QIs         PSIs and Related PDIs         NIS           Frequency         Percent         Frequency         Percent         Frequency

Note: RACE was imputed when missing in the SID for the NHQDR analysis file.

### Table A-17. Comparison of Location of Patient Residence, NHQDR Analysis File andHCUP National Inpatient Sample, 2017

	2017 All Other		2017 PSIs and Rela		2017 NIS	
PL_NCHS_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	165,789.53	0.46
1: Large central metropolitan	11,280,064.76	30.30	11,460,507.19	30.79	10,700,675.23	29.89
2: Large fringe metropolitan	8,990,496.52	24.15	9,318,283.84	25.03	8,607,932.94	24.05
3: Medium metropolitan	7,567,370.83	20.33	7,283,783.59	19.57	7,359,152.85	20.56
4: Small metropolitan	3,436,245.52	9.23	3,327,373.68	8.94	3,274,419.19	9.15
5: Micropolitan (nonmetropolit an)	3,380,549.99	9.08	3,344,245.50	8.98	3,253,851.51	9.09
6: Noncore (nonmetropolit an)	2,567,426.37	6.90	2,487,960.20	6.68	2,436,631.76	6.81

Note: PL\_NCHS was imputed when missing in the SID for the NHQDR analysis file.

# Table A-18. Comparison of Length of Stay, Number of Diagnoses and Procedures on theRecord, Total Charges, and Total Cost, NHQDR Analysis File and HCUP NationalInpatient Sample, 2017

	2017 All Other QIs			2017 PSIs and Related PDIs			2017 NIS		
Variable/Label	MIN	MAX	MEAN	MIN	MAX	MEAN	MIN	MAX	MEAN
LOS: Length of stay (cleaned)		365.00	4.62	0.00	365.00	4.61	0.00	365.00	4.62
NDX: Number of diagnoses on this record	0.00	111.00	11.35	0.00	111.00	11.40	0.00	104.00	11.32
NPR: Number of procedures on this record	0.00	100.00	1.60	0.00	100.00	1.61	0.00	100.00	1.60
TOTCHG: Total charges (cleaned)		9,999,999.0	49,959.22	100.0	9,999,999.0	50,137.08	100.0	9,999,999.0	49,787.58

Table A-19. Comparison of Census Region, NHQDR Analysis File and HCUP NationalInpatient Sample, 2018

	2018 All Other QIs		2018 PSIs and Rela	ted PDIs	2018 NIS	
REGION	Frequency Percent		Frequency	Percent	Frequency	Percent
1: Northeast	6,949,008.00	18.70	6,949,008.00	18.70	6,466,741.00	18.20
2: Midwest	8,187,106.00	22.03	8,187,106.00	22.03	7,908,637.00	22.26
3: South	14,634,686.00	39.37	14,634,686.00	39.37	14,028,693.00	39.49
4: West	7,399,129.00	19.91	7,399,129.00	19.91	7,123,410.00	20.05

## Table A-20. Comparison of Patient Age in Years at Admission, NHQDR Analysis File and HCUP National Inpatient Sample, 2018

	2018 All Other QIs		2018 PSIs and Rela		2018 NIS	
AGE_I	Frequency Percent		Frequency	Percent	Frequency	Percent
.: Missing	9.34	0.00	-	-	435.00	0.00
.C: Inconsistent	-	-	-	-	925.00	0.00
0-17	5,411,921.35	14.56	5,386,442.28	14.49	5,266,258.29	14.82
18-44	8,817,571.37	23.72	8,824,944.03	23.74	8,438,858.29	23.75
45-64	9,012,133.16	24.25	9,026,816.71	24.29	8,582,643.71	24.16
65+	13,928,293.77	37.47	13,931,725.98	37.48	13,238,360.71	37.26

Note: AGE was imputed when missing in the SID for the NHQDR analysis file.

### Table A-21. Comparison of Patient Sex, NHQDR Analysis File and HCUP NationalInpatient Sample, 2018

	2018 All Other QIs		2018 PSIs and Rela		2018 NIS	
SEX_I	Frequency Percent		Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	2,515.00	0.01
.A: Invalid	-	-	-	-	100.00	0.00
.C: Inconsistent	-	-	-	-	2,295.00	0.01
0: Male	16,341,941.99	43.97	16,338,514.14	43.96	15,593,671.49	43.89
1: Female	20,827,987.01	56.03	20,831,414.86	56.04	19,928,899.51	56.09

,Note: SEX was imputed when missing in the SID for the NHQDR analysis file.

# Table A-22. Comparison of Expected Primary Payer, NHQDR Analysis File and HCUP National Inpatient Sample, 2018

	2018 All Other QIs		2018 PSIs and Rela	ted PDIs	2018 NIS		
PAY1_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	47,569.78	0.13	
.A: Invalid	-	-	-	-	1,744.99	0.00	
1: Medicare	15,318,514.50	41.21	15,308,154.18	41.18	14,534,046.06	40.91	
2: Medicaid	8,468,101.65	22.78	8,435,461.01	22.69	8,064,974.81	22.70	
3: Private Insurance	10,689,320.11	28.76	10,705,391.33	28.80	10,307,345.49	29.01	
4: Self-pay	1,557,109.68	4.19	1,585,748.89	4.27	1,470,850.21	4.14	
5: No Charge	116,819.07	0.31	118,925.25	0.32	112,214.89	0.32	
6: Other	1,020,063.98	2.74	1,016,248.35		988,734.78	2.78	

Note: PAY1 was imputed when missing in the SID for the NHQDR analysis file.

# Table A-23. Comparison of Community Income Quartile Based on the Patient's ZIP Code, NHQDR Analysis File and HCUP National Inpatient Sample, 2018

	2018 All Other Qis		201 PSIs and Rel	-	2018 NIS	
ZIPINC_QRTL_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	590,199.71	1.66
.A: Invalid	-	-	-	-	1,725.00	0.00
1: First Quartile (lowest income)	11,137,345.55	29.96	11,180,244.09	30.08	10,295,751.57	28.98
2: Second Quartile	9,911,772.17	26.67	9,851,110.54	26.50	9,398,242.99	26.45
3: Third Quartile	8,774,141.01	23.61	8,740,305.05	23.51	8,330,567.44	23.45
4: Fourth Quartile (highest income)	7,346,670.26	19.77	7,398,269.33	19.90	6,910,994.29	19.45

Note: ZIPINC\_QRTL was imputed when missing in the SID for the NHQDR analysis file.

 Table A-24. Comparison of Patient Race/Ethnicity, NHQDR Analysis File and HCUP

 National Inpatient Sample, 2018

	2018 All Other QIs		2018 PSIs and Rela		2018 NIS		
RACE_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	1,186,458.10	3.34	
.A: Invalid	-	-	-	-	324.99	0.00	
1: White	24,032,257.41	64.66	23,881,542.45	64.25	22,191,103.49	62.46	
2: Black	5,587,006.86	15.03	5,677,917.38	15.28	5,208,276.66	14.66	
3: Hispanic	4,814,647.51	12.95	4,905,955.17	13.20	4,404,648.69	12.40	
4: Asian/Pacific Islander	1,149,612.51	3.09	1,151,075.52	3.10	1,074,254.31	3.02	
5: Native American	259,151.84	0.70	224,976.72	0.61	230,139.47	0.65	

	2018 All Other Qis		2018 PSIs and Rela	ited PDIs	2018 NIS	
RACE_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
6: Other	1,327,252.86	3.57	1,328,461.76	3.57	1,232,275.29	3.47

Note: RACE was imputed when missing in the SID for the NHQDR analysis file.

# Table A-25. Comparison of Location of Patient Residence, NHQDR Analysis File andHCUP National Inpatient Sample, 2018

	2018 All Other QIs		2018 PSIs and Rela		2018 NIS	
PL_NCHS_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	186,070.40	0.52
1: Large central metropolitan	11,366,157.77	30.58	11,510,311.01	30.97	10,641,351.84	29.95
2: Large fringe metropolitan	8,909,031.37	23.97	9,189,246.88	24.72	8,459,544.44	23.81
3: Medium metropolitan	7,630,849.16	20.53	7,433,070.03	20.00	7,347,307.30	20.68
4: Small metropolitan	3,396,379.77	9.14	3,286,837.78	8.84	3,285,610.22	9.25
5: Micropolitan (nonmetropolit an)	3,339,967.58	8.99	3,299,709.16	8.88	3,217,495.23	9.06
6: Noncore (nonmetropolit an)	2,527,543.34	6.80	2,450,754.14	6.59	2,390,101.57	6.73

Note: PL\_NCHS was imputed when missing in the SID for the NHQDR analysis file.

# Table A-26. Comparison of Length of Stay, Number of Diagnoses and Procedures on theRecord, Total Charges, and Total Cost, NHQDR Analysis File and HCUP NationalInpatient Sample, 2018

	2018 All Other QIs			PSI	2018 PSIs and Related PDIs			2018 NIS		
Variable/Label	MIN	MAX	MEAN	MIN	MAX	MEAN	MIN	MAX	MEAN	
LOS: Length of stay (cleaned)	0.00	365.00	4.66	0.00	365.00	4.64	0.00	365.00	4.66	
NDX: Number of diagnoses on this record	0.00	104.00	11.78	0.00	104.00	11.83	0.00	97.00	11.76	
NPR: Number of procedures on this record	0.00	127.00	1.64	0.00	127.00	1.64	0.00	100.00	1.64	
TOTCHG: Total charges (cleaned)	100.0	9,999,999.0	53,227.66	100.0	9,999,999.0	53,305.26	100.0	9,999,999.0	52,947.85	

Table A-27. Comparison of Census Region, NHQDR Analysis File and HCUP NationalInpatient Sample, 2019

	2019 All Other QIs		2019 PSIs and Rela	ited PDIs	2019 NIS		
REGION	Frequency	Percent	Frequency	Percent	Frequency	Percent	
1: Northeast	6,864,301.00	18.58	6,864,301.00	18.58	6,407,407.00	18.09	
2: Midwest	8,060,040.00	21.82	8,060,040.00	21.82	7,840,492.00	22.14	
3: South	14713635.00	39.84	14713635.00	39.84	14076484.00	39.74	
4: West	7,296,955.00	19.76	7,296,955.00	19.76	7,094,640.00	20.03	

# Table A-28. Comparison of Patient Age in Years at Admission, NHQDR Analysis File and HCUP National Inpatient Sample, 2019

	2019 All Other QIs		2019 PSIs and Rela		2019 NIS		
AGE_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	6.18	0.00	1.02	0.00	335.00	0.00	
.C: Inconsistent	-	-	-	-	954.99	0.00	
0-17	5,308,435.13	14.37	5,275,173.69	14.28	5,199,464.51	14.68	
18-44	8,673,836.32	23.48	8,677,097.36	23.49	8,356,283.95	23.59	
45-64	8,858,867.14	23.99	8,876,542.65	24.03	8,440,830.71	23.83	
65+	14,093,786.24	38.16	14,106,116.27	38.19	13,421,153.83	37.89	

Note: AGE was imputed when missing in the SID for the NHQDR analysis file.

# Table A-29. Comparison of Patient Sex, NHQDR Analysis File and HCUP NationalInpatient Sample, 2019

	2019 All Other QIs		2019 PSIs and Rela		2019 NIS	
SEX_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	2,805.00	0.01
.A: Invalid	-	-	-	-	180.00	0.00
.C: Inconsistent	-	-	-	-	2,710.00	0.01
0: Male	16,350,739.40	44.27	16,347,906.27	44.26	15,641,904.81	44.16
1: Female	20,584,191.60	55.73	20,587,024.74	55.74	19,771,423.19	55.82

Note: SEX was imputed when missing in the SID for the NHQDR analysis file.

 Table A-30. Comparison of Expected Primary Payer, NHQDR Analysis File and HCUP

 National Inpatient Sample, 2019

	2019 All Other QIs		2019 PSIs and Rela	ited PDIs	2019 NIS		
PAY1_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	42,179.44	0.12	
.A: Invalid	-	-	-	-	1,945.00	0.01	
1: Medicare	15,283,246.87	41.38	15,288,441.86	41.39	14,529,614.46	41.02	
2: Medicaid	8,303,257.43	22.48	8,293,568.74	22.45	7,927,119.27	22.38	
3: Private Insurance	10,551,344.71	28.57	10,557,434.39	28.58	10,249,100.57	28.94	
4: Self-pay	1,615,464.23	4.37	1,620,912.78	4.39	1,525,964.66	4.31	
5: No Charge	112,389.86	0.30	113,575.21	0.31	109,379.93	0.31	
6: Other	1,069,227.89	2.89	1,060,998.02	2.87	1,033,719.66	2.92	

Note: PAY1 was imputed when missing in the SID for the NHQDR analysis file.

# Table A-31. Comparison of Community Income Quartile Based on the Patient's ZIP Code, NHQDR Analysis File and HCUP National Inpatient Sample, 2019

	2019 All Other		201 PSIs and Rel	-	2019 NIS	
ZIPINC_QRTL_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	591,360.66	1.67
.A: Invalid	-	-	-	-	2,025.00	0.01
1: First Quartile (lowest income)	11,488,019.79	31.10	11,599,037.38	31.40	10,584,319.17	29.88
2: Second Quartile	9,338,682.25	25.28	9,306,340.11	25.20	8,811,370.52	24.88
3: Third Quartile	8,907,237.56	24.12	8,826,705.39	23.90	8,494,419.67	23.98
4: Fourth Quartile (highest income)	7,200,991.40	19.50	7,202,848.12	19.50	6,935,527.97	19.58

Note: ZIPINC\_QRTL was imputed when missing in the SID for the NHQDR analysis file.

 Table A-32. Comparison of Patient Race/Ethnicity, NHQDR Analysis File and HCUP

 National Inpatient Sample, 2019

	2019 All Other QIs		2019 PSIs and Rela		2019 NIS		
RACE_I	Frequency	Percent	Frequency	Percent	Frequency	Percent	
.: Missing	-	-	-	-	1,131,754.09	3.20	
.A: Invalid	-	-	-	-	190.00	0.00	
1: White	23,937,952.75	64.81	23,858,165.35	64.60	22,259,442.29	62.85	
2: Black	5,661,855.17	15.33	5,708,396.97	15.46	5,277,195.01	14.90	
3: Hispanic	4,630,576.39	12.54	4,684,025.35	12.68	4,244,035.26	11.98	
4: Asian/Pacific Islander	1,147,277.58	3.11	1,149,260.01	3.11	1,071,470.14	3.03	
5: Native American	268,285.47	0.73	223,419.99	0.60	241,940.30	0.68	

	2019 All Other QIs		2019 PSIs and Related PDIs		2019 NIS	
RACE_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
6: Other	1,288,983.64	3.49	1,311,663.33	3.55	1,192,995.91	3.37

Note: RACE was imputed when missing in the SID for the NHQDR analysis file.

# Table A-33. Comparison of Location of Patient Residence, NHQDR Analysis File and HCUP National Inpatient Sample, 2019

	2019 All Other QIs		2019 PSIs and Rela		2019 NIS	
PL_NCHS_I	Frequency	Percent	Frequency	Percent	Frequency	Percent
.: Missing	-	-	-	-	203,365.27	0.57
1: Large central metropolitan	11,161,738.40	30.22	11,244,418.39	30.44	10,432,019.02	29.45
2: Large fringe metropolitan	8,854,605.49	23.97	9,110,468.65	24.67	8,546,404.17	24.13
3: Medium metropolitan	7,682,420.25	20.80	7,424,692.41	20.10	7,406,801.60	20.91
4: Small metropolitan	3,380,869.13	9.15	3,365,111.02	9.11	3,265,565.97	9.22
5: Micropolitan (nonmetropolit an)	3,361,676.59	9.10	3,327,768.43	9.01	3,209,126.27	9.06
6: Noncore (nonmetropolit an)	2,493,621.14	6.75	2,462,472.10	6.67	2,355,740.69	6.65

Note: PL\_NCHS was imputed when missing in the SID for the NHQDR analysis file.

# Table A-34. Comparison of Length of Stay, Number of Diagnoses and Procedures on theRecord, Total Charges, and Total Cost, NHQDR Analysis File and HCUP NationalInpatient Sample, 2019

	2019 All Other QIs		2019 PSIs and Related PDIs		2019 NIS				
Variable/Label	MIN	MAX	MEAN	MIN	MAX	MEAN	MIN	MAX	MEAN
LOS: Length of stay (cleaned)	0.00	365.00	4.70	0.00	365.00	4.69	0.00	365.00	4.70
NDX: Number of diagnoses on this record	0.00	110.00	12.22	0.00	110.00	12.27	0.00	108.00	12.19
NPR: Number of procedures on this record	0.00	143.00	1.65	0.00	143.00	1.66	0.00	100.00	1.66
TOTCHG: Total charges (cleaned)	100.00	9,999,999.0 0	56,753.83	100.0	9,999,999.0	56,720.06	100.00	9,980,202.0	56,614.05

# APPENDIX B: EMERGENCY DEPARTMENT RATES FOR SELECTED AHRQ QUALITY INDICATORS

The HCUP Nationwide Emergency Department Sample (NEDS) was used to examine national and regional differences in emergency department (ED) rates for selected AHRQ Prevention Quality Indicators (PQIs) and related Pediatric Quality Indicators (PDIs). The PQIs are measures of quality associated with processes and outcomes of care that occurred in an outpatient or an inpatient setting. The PQIs rely solely on hospital administrative data and, for this reason, are screens for examining quality that may indicate the need for more in-depth studies. Experts have suggested that using both inpatient and emergency room data may give a more accurate picture of avoidable visits/admissions for some ambulatory care sensitive conditions which can be identified by certain PQIs and PDIs.

The NEDS contains approximately 30 million ED events from about 950 hospital-based EDs. The NEDS includes information on ED visits that do not result in an admission (i.e., treat-and-release visits and transfers to another hospital) as well as discharge information on patients initially seen in the ED and then admitted to the same hospital. The NEDS was drawn from the SID and the State Emergency Department Databases (SEDD). Discharge-level weights included with the NEDS are used to produce national estimates. Several steps were taken to prepare the NEDS: (1) QI software review and modification, (2) acquisition of population-based data, (3) handling of missing data, and (4) identification of statistical methods.

- QI Software Review. The AHRQ QI software v2020.1 PQIs and PDIs were developed for use with hospital inpatient discharge data. No guidelines for applying the AHRQ QIs to emergency department data were available when this analysis began. About 15 percent of records in the NEDS represent an ED admission. The selected QIs rely on the first-listed diagnosis code (DX1) to identify cases with the outcome of interest. For ED admissions, DX1 is the principal diagnosis code and reflects the condition established to be chiefly responsible for a patients' admission to the hospital. Unfortunately, principal diagnosis is not clearly discernible for ED visits that do not result in admission. Coding instructions for outpatient data specify that the first-listed diagnosis is supposed to be the "reason for visit," which is different than the principal diagnosis. Even though DX1 in ED data is not necessarily the principal diagnosis, using DX1 preserves the concept from the PQI algorithm that the first code has higher priority than others. Therefore, this analysis used the first-listed diagnosis in the NEDS.
- 2. Acquisition of Population-Based Data. Similar to the development of the PQI and PDI rates based on the HCUP inpatient data, Claritas population data was used for the population denominators of the selected PQIs and PDIs.
- 3. *Preparation of HCUP Data*. Next, a "hot deck" imputation method (which draws donors from strata of similar hospitals and patients) was used to assign missing values of patient age and sex. Patient age and sex are missing on less than 0.02 percent of the records in the 2017 NEDS.
- 4. *Masking Rates for Statistical Reliability, Data Quality, and Confidentiality.* PQI and PDI estimates were included in this analysis if they reached a threshold defined by a relative standard error less than 30 percent and at least 100 weighted cases in the denominator. Estimates that did not meet this threshold were suppressed and the corresponding table cell was marked with an asterisk.

Additionally, the NEDS was used to examine national and regional differences in emergency department (ED) visit rates for three additional condition categories: mental illness, substance use, and co-occurring mental illness and substance use; dental conditions; and injuries. The complete list of ICD-10-CM diagnosis codes for these analyses are listed below.

### Mental Illness and Substance Use ICD-10-CM Diagnosis Codes

### Table B-1. Mental Illness ICD-10-CM Diagnosis Codes

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F064'	Anxiety disorder due to known physiological condition
'F4000'	Agoraphobia, unspecified
'F4001'	Agoraphobia with panic disorder
'F4002'	Agoraphobia without panic disorder
'F4010'	Social phobia, unspecified
'F4011'	Social phobia, generalized
'F40210'	Arachnophobia
'F40218'	Other animal type phobia
'F40220'	Fear of thunderstorms
'F40228'	Other natural environment type phobia
'F40230'	Fear of blood
'F40231'	Fear of injections and transfusions
'F40232'	Fear of other medical care
'F40233'	Fear of injury
'F40240'	Claustrophobia
'F40241'	Acrophobia
'F40242'	Fear of bridges
'F40243'	Fear of flying
'F40248'	Other situational type phobia
'F40290'	Androphobia
'F40291'	Gynephobia
'F40298'	Other specified phobia
'F408'	Other phobic anxiety disorders
'F409'	Phobic anxiety disorder, unspecified
'F410'	Panic disorder [episodic paroxysmal anxiety]
'F411'	Generalized anxiety disorder
'F413'	Other mixed anxiety disorders
'F418'	Other specified anxiety disorders
'F419'	Anxiety disorder, unspecified
'F422'	Mixed obsessional thoughts and acts
'F423'	Hoarding disorder
'F424'	Excoriation (skin-picking) disorder
'F428'	Other obsessive-compulsive disorder

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F429'	Obsessive-compulsive disorder, unspecified
'F4311'	Post-traumatic stress disorder, acute
'F4312'	Post-traumatic stress disorder, chronic
'F930'	Separation anxiety disorder of childhood
'F940'	Selective mutism
'R466'	Undue concern and preoccupation with stressful events
'F0633'	Mood disorder due to known physiol cond w manic features
'F0634'	Mood disorder due to known physiol cond w mixed features
'F3010'	Manic episode without psychotic symptoms, unspecified
'F3011'	Manic episode without psychotic symptoms, mild
'F3012'	Manic episode without psychotic symptoms, moderate
'F3013'	Manic episode, severe, without psychotic symptoms
'F302'	Manic episode, severe with psychotic symptoms
'F303'	Manic episode in partial remission
'F308'	Other manic episodes
'F309'	Manic episode, unspecified
'F310'	Bipolar disorder, current episode hypomanic
'F3110'	Bipolar disord, crnt episode manic w/o psych features, unsp
'F3111'	Bipolar disord, crnt episode manic w/o psych features, mild
'F3112'	Bipolar disord, crnt episode manic w/o psych features, mod
'F3113'	Bipolar disord, crnt epsd manic w/o psych features, severe
'F312'	Bipolar disord, crnt episode manic severe w psych features
'F3130'	Bipolar disord, crnt epsd depress, mild or mod severt, unsp
'F3131'	Bipolar disorder, current episode depressed, mild
'F3132'	Bipolar disorder, current episode depressed, moderate
'F314'	Bipolar disord, crnt epsd depress, sev, w/o psych features
'F315'	Bipolar disord, crnt epsd depress, severe, w psych features
'F3160'	Bipolar disorder, current episode mixed, unspecified
'F3161'	Bipolar disorder, current episode mixed, mild
'F3162'	Bipolar disorder, current episode mixed, moderate
'F3163'	Bipolar disord, crnt epsd mixed, severe, w/o psych features
'F3164'	Bipolar disord, crnt episode mixed, severe, w psych features
'F3171'	Bipolar disord, in partial remis, most recent epsd hypomanic
'F3173'	Bipolar disord, in partial remis, most recent episode manic
'F3175'	Bipolar disord, in partial remis, most recent epsd depress
'F3177'	Bipolar disord, in partial remis, most recent episode mixed
'F3181'	Bipolar II disorder
'F3189'	Other bipolar disorder
'F319'	Bipolar disorder, unspecified
'F340'	Cyclothymic disorder

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F0630'	Mood disorder due to known physiological condition, unsp
'F0631'	Mood disorder due to known physiol cond w depressv features
'F0632'	Mood disord d/t physiol cond w major depressive-like epsd
'F320'	Major depressive disorder, single episode, mild
'F321'	Major depressive disorder, single episode, moderate
'F322'	Major depressv disord, single epsd, sev w/o psych features
'F323'	Major depressv disord, single epsd, severe w psych features
'F324'	Major depressv disorder, single episode, in partial remis
'F328'	Other depressive episodes
'F3281'	Premenstrual dysphoric disorder
'F3289'	Other specified depressive episodes
'F329'	Major depressive disorder, single episode, unspecified
'F330'	Major depressive disorder, recurrent, mild
'F331'	Major depressive disorder, recurrent, moderate
'F332'	Major depressv disorder, recurrent severe w/o psych features
'F333'	Major depressv disorder, recurrent, severe w psych symptoms
'F3341'	Major depressive disorder, recurrent, in partial remission
'F338'	Other recurrent depressive disorders
'F339'	Major depressive disorder, recurrent, unspecified
'F341'	Dysthymic disorder
'F348'	Other persistent mood [affective] disorders
'F3481'	Disruptive mood dysregulation disorder
'F3489'	Other specified persistent mood disorders
'F349'	Persistent mood [affective] disorder, unspecified
'F39'	Unspecified mood [affective] disorder
'O906'	Postpartum mood disturbance
'F631'	Pyromania
'F632'	Kleptomania
'F6381'	Intermittent explosive disorder
'F6389'	Other impulse disorders
'F639'	Impulse disorder, unspecified
'F910'	Conduct disorder confined to family context
'F911'	Conduct disorder, childhood-onset type
'F912'	Conduct disorder, adolescent-onset type
'F913'	Oppositional defiant disorder
'F918'	Other conduct disorders
'F919'	Conduct disorder, unspecified
'F440'	Dissociative amnesia
'F441'	Dissociative fugue
'F442'	Dissociative stupor

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F4481'	Dissociative identity disorder
'F4489'	Other dissociative and conversion disorders
'F449'	Dissociative and conversion disorder, unspecified
'F481'	Depersonalization-derealization syndrome
'F5000'	Anorexia nervosa, unspecified
'F5001'	Anorexia nervosa, restricting type
'F5002'	Anorexia nervosa, binge eating/purging type
'F502'	Bulimia nervosa
'F508'	Other eating disorders
'F5081'	Binge eating disorder
'F5082'	Avoidant/restrictive food intake disorder
'F5089'	Other specified eating disorder
'F509'	Eating disorder, unspecified
'F9821'	Rumination disorder of infancy
'F9829'	Other feeding disorders of infancy and early childhood
'F983'	Pica of infancy and childhood
'F980'	Enuresis not due to a substance or known physiol condition
'F981'	Encopresis not due to a substance or known physiol condition
'F641'	Dual role transvestism
'F642'	Gender identity disorder of childhood
'F648'	Other sex identity disorders
'F649'	Gender identity disorder, unspecified
'F938'	Other childhood emotional disorders
'R45850'	Homicidal ideations
'F0150'	Vascular dementia without behavioral disturbance
'F0151'	Vascular dementia with behavioral disturbance
'F0280'	Dementia in oth diseases classd elswhr w/o behavrl disturb
'F0281'	Dementia in oth diseases classd elswhr w behavioral disturb
'F0390'	Unspecified dementia without behavioral disturbance
'F0391'	Unspecified dementia with behavioral disturbance
'F04'	Amnestic disorder due to known physiological condition
'F05'	Delirium due to known physiological condition
'F0781'	Postconcussional syndrome
'F0789'	Oth personality & behavrl disord due to known physiol cond
'F079'	Unsp personality & behavrl disord due to known physiol cond
'F482'	Pseudobulbar affect
'G300'	Alzheimer's disease with early onset
'G301'	Alzheimer's disease with late onset
'G308'	Other Alzheimer's disease
'G309'	Alzheimer's disease, unspecified

ICD-10-CM DIAGNOSIS	DESCRIPTION
'G3101'	Pick's disease
'G3109'	Other frontotemporal dementia
'G311'	Senile degeneration of brain, not elsewhere classified
'G3183'	Dementia with Lewy bodies
'R4181'	Age-related cognitive decline
'R54'	Age-related physical debility
'F70'	Mild intellectual disabilities
'F71'	Moderate intellectual disabilities
'F72'	Severe intellectual disabilities
'F73'	Profound intellectual disabilities
'F78'	Other intellectual disabilities
'F79'	Unspecified intellectual disabilities
'F800'	Phonological disorder
'F801'	Expressive language disorder
'F802'	Mixed receptive-expressive language disorder
'F804'	Speech and language development delay due to hearing loss
'F8081'	Childhood onset fluency disorder
'F8082'	Social pragmatic communication disorder
'F8089'	Other developmental disorders of speech and language
'F809'	Developmental disorder of speech and language, unspecified
'F810'	Specific reading disorder
'F812'	Mathematics disorder
'F8181'	Disorder of written expression
'F8189'	Other developmental disorders of scholastic skills
'F819'	Developmental disorder of scholastic skills, unspecified
'F82'	Specific developmental disorder of motor function
'F840'	Autistic disorder
'F842'	Rett's syndrome
'F843'	Other childhood disintegrative disorder
'F845'	Asperger's syndrome
'F848'	Other pervasive developmental disorders
'F849'	Pervasive developmental disorder, unspecified
'F88'	Other disorders of psychological development
'F89'	Unspecified disorder of psychological development
'F900'	Attn-defct hyperactivity disorder, predom inattentive type
'F901'	Attn-defct hyperactivity disorder, predom hyperactive type
'F902'	Attention-deficit hyperactivity disorder, combined type
'F908'	Attention-deficit hyperactivity disorder, other type
'F909'	Attention-deficit hyperactivity disorder, unspecified type
'F948'	Other childhood disorders of social functioning

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F949'	Childhood disorder of social functioning, unspecified
'F950'	Transient tic disorder
'F951'	Chronic motor or vocal tic disorder
'F952'	Tourette's disorder
'F958'	Other tic disorders
'F959'	Tic disorder, unspecified
'F984'	Stereotyped movement disorders
'F985'	Adult onset fluency disorder
'R480'	Dyslexia and alexia
'F42'	Obsessive-compulsive disorder
'F4521'	Hypochondriasis
'F4522'	Body dysmorphic disorder
'F633'	Trichotillomania
'R4681'	Obsessive-compulsive behavior
'F068'	Oth mental disorders due to known physiological condition
'F09'	Unsp mental disorder due to known physiological condition
'F488'	Other specified nonpsychotic mental disorders
'F489'	Nonpsychotic mental disorder, unspecified
'F939'	Childhood emotional disorder, unspecified
'F99'	Mental disorder, not otherwise specified
'F650'	Fetishism
'F651'	Transvestic fetishism
'F652'	Exhibitionism
'F653'	Voyeurism
'F654'	Pedophilia
'F6551'	Sexual masochism
'F6552'	Sexual sadism
'F6581'	Frotteurism
'F6589'	Other paraphilias
'F659'	Paraphilia, unspecified
'F070'	Personality change due to known physiological condition
'F21'	Schizotypal disorder
'F600'	Paranoid personality disorder
'F601'	Schizoid personality disorder
'F602'	Antisocial personality disorder
'F603'	Borderline personality disorder
'F604'	Histrionic personality disorder
'F605'	Obsessive-compulsive personality disorder
'F606'	Avoidant personality disorder
'F607'	Dependent personality disorder

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F6081'	Narcissistic personality disorder
'F6089'	Other specific personality disorders
'F609'	Personality disorder, unspecified
'F6811'	Factitious disorder w predom psych signs and symptoms
'F6812'	Factitious disorder w predom physical signs and symptoms
'F6813'	Factitious disord w comb psych and physcl signs and symptoms
'F688'	Other specified disorders of adult personality and behavior
'F69'	Unspecified disorder of adult personality and behavior
'F060'	Psychotic disorder w hallucin due to known physiol condition
'F061'	Catatonic disorder due to known physiological condition
'F062'	Psychotic disorder w delusions due to known physiol cond
'F200'	Paranoid schizophrenia
'F201'	Disorganized schizophrenia
'F202'	Catatonic schizophrenia
'F203'	Undifferentiated schizophrenia
'F205'	Residual schizophrenia
'F2081'	Schizophreniform disorder
'F2089'	Other schizophrenia
'F209'	Schizophrenia, unspecified
'F22'	Delusional disorders
'F23'	Brief psychotic disorder
'F24'	Shared psychotic disorder
'F250'	Schizoaffective disorder, bipolar type
'F251'	Schizoaffective disorder, depressive type
'F258'	Other schizoaffective disorders
'F259'	Schizoaffective disorder, unspecified
'F28'	Oth psych disorder not due to a sub or known physiol cond
'F29'	Unsp psychosis not due to a substance or known physiol cond
'F520'	Hypoactive sexual desire disorder
'F521'	Sexual aversion disorder
'F5221'	Male erectile disorder
'F5222'	Female sexual arousal disorder
'F5231'	Female orgasmic disorder
'F5232'	Male orgasmic disorder
'F524'	Premature ejaculation
'F525'	Vaginismus not due to a substance or known physiol condition
'F526'	Dyspareunia not due to a substance or known physiol cond
'F528'	Oth sexual dysfnct not due to a sub or known physiol cond
'F529'	Unsp sexual dysfnct not due to a sub or known physiol cond
'F53'	Puerperal psychosis

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F640'	Transsexualism
'F6550'	Sadomasochism, unspecified
'F66'	Other sexual disorders
'R37'	Sexual dysfunction, unspecified
'F5101'	Primary insomnia
'F5102'	Adjustment insomnia
'F5103'	Paradoxical insomnia
'F5104'	Psychophysiologic insomnia
'F5105'	Insomnia due to other mental disorder
'F5109'	Oth insomnia not due to a substance or known physiol cond
'F5111'	Primary hypersomnia
'F5112'	Insufficient sleep syndrome
'F5113'	Hypersomnia due to other mental disorder
'F5119'	Oth hypersomnia not due to a substance or known physiol cond
'F513'	Sleepwalking [somnambulism]
'F514'	Sleep terrors [night terrors]
'F515'	Nightmare disorder
'F518'	Oth sleep disord not due to a sub or known physiol cond
'F519'	Sleep disorder not due to a sub or known physiol cond, unsp
'F444'	Conversion disorder with motor symptom or deficit
'F445'	Conversion disorder with seizures or convulsions
'F446'	Conversion disorder with sensory symptom or deficit
'F447'	Conversion disorder with mixed symptom presentation
'F450'	Somatization disorder
'F451'	Undifferentiated somatoform disorder
'F4520'	Hypochondriacal disorder, unspecified
'F4529'	Other hypochondriacal disorders
'F4541'	Pain disorder exclusively related to psychological factors
'F4542'	Pain disorder with related psychological factors
'F458'	Other somatoform disorders
'F459'	Somatoform disorder, unspecified
'F54'	Psych & behavrl factors assoc w disord or dis classd elswhr
'F6810'	Factitious disorder, unspecified
'R45851'	Suicidal ideations
'T1491'	Suicide attempt (through FY 2017)
'T1491XA'	Suicide attempt, initial encounter
'T360X2A'	Poisoning by penicillins, intentional self-harm, init encntr
'T361X2A'	Poisn by cephalospor/oth beta-lactm antibiot, slf-hrm, init
'T362X2A'	Poisoning by chloramphenicol group, self-harm, init
'T363X2A'	Poisoning by macrolides, intentional self-harm, init encntr

ICD-10-CM DIAGNOSIS	DESCRIPTION
'T364X2A'	Poisoning by tetracyclines, intentional self-harm, init
'T365X2A'	Poisoning by aminoglycosides, intentional self-harm, init
'T366X2A'	Poisoning by rifampicins, intentional self-harm, init encntr
'T367X2A'	Poisoning by antifungal antibiot, sys used, self-harm, init
'T368X2A'	Poisoning by oth systemic antibiotics, self-harm, init
'T3692XA'	Poisoning by unsp systemic antibiotic, self-harm, init
'T370X2A'	Poisoning by sulfonamides, intentional self-harm, init
'T371X2A'	Poisoning by antimycobacterial drugs, self-harm, init
'T372X2A'	Poisn by antimalari/drugs act on bld protzoa, slf-hrm, init
'T373X2A'	Poisoning by oth antiprotozoal drugs, self-harm, init
'T374X2A'	Poisoning by anthelminthics, intentional self-harm, init
'T375X2A'	Poisoning by antiviral drugs, intentional self-harm, init
'T378X2A'	Poisn by oth systemic anti-infect/parasit, self-harm, init
'T3792XA'	Poisn by unsp sys anti-infect and antiparastc, slf-hrm, init
'T380X2A'	Poisoning by glucocort/synth analog, self-harm, init
'T381X2A'	Poisoning by thyroid hormones and sub, self-harm, init
'T382X2A'	Poisoning by antithyroid drugs, intentional self-harm, init
'T383X2A'	Poisn by insulin and oral hypoglycemic drugs, slf-hrm, init
'T384X2A'	Poisoning by oral contraceptives, self-harm, init
'T385X2A'	Poisoning by oth estrogens and progestogens, self-harm, init
'T386X2A'	Poisn by antigonadtr/antiestr/antiandrg, NEC, slf-hrm, init
'T387X2A'	Poisn by androgens and anabolic congeners, self-harm, init
'T38802A'	Poisn by unsp hormones and synthetic sub, self-harm, init
'T38812A'	Poisoning by anterior pituitary hormones, self-harm, init
'T38892A'	Poisoning by oth hormones and synthetic sub, self-harm, init
'T38902A'	Poisoning by unsp hormone antagonists, self-harm, init
'T38992A'	Poisoning by oth hormone antagonists, self-harm, init
'T39012A'	Poisoning by aspirin, intentional self-harm, init encntr
'T39092A'	Poisoning by salicylates, intentional self-harm, init encntr
'T391X2A'	Poisoning by 4-Aminophenol derivatives, self-harm, init
'T392X2A'	Poisoning by pyrazolone derivatives, self-harm, init
'T39312A'	Poisoning by propionic acid derivatives, self-harm, init
'T39392A'	Poisn by oth nonsteroid anti-inflam drugs, self-harm, init
'T394X2A'	Poisoning by antirheumatics, NEC, self-harm, init
'T398X2A'	Poisn by oth nonopio analges/antipyret, NEC, self-harm, init
'T3992XA'	Poisn by unsp nonopi analgs/antipyr/antirheu, slf-hrm, init
'T405X2A'	Poisoning by cocaine, intentional self-harm, init encntr
'T407X2A'	Poisoning by cannabis (derivatives), self-harm, init
'T408X2A'	Poisoning by lysergide, intentional self-harm, init encntr
'T40902A'	Poisoning by unsp psychodysleptics, self-harm, init

ICD-10-CM DIAGNOSIS	DESCRIPTION
'T40992A'	Poisoning by oth psychodysleptics, self-harm, init
'T410X2A'	Poisoning by inhaled anesthetics, self-harm, init
'T411X2A'	Poisoning by intravenous anesthetics, self-harm, init
'T41202A'	Poisoning by unsp general anesthetics, self-harm, init
'T41292A'	Poisoning by oth general anesthetics, self-harm, init
'T413X2A'	Poisoning by local anesthetics, intentional self-harm, init
'T4142XA'	Poisoning by unsp anesthetic, intentional self-harm, init
'T415X2A'	Poisoning by therapeutic gases, intentional self-harm, init
'T420X2A'	Poisoning by hydantoin derivatives, self-harm, init
'T421X2A'	Poisoning by iminostilbenes, intentional self-harm, init
'T422X2A'	Poisn by succinimides and oxazolidinediones, self-harm, init
'T423X2A'	Poisoning by barbiturates, intentional self-harm, init
'T424X2A'	Poisoning by benzodiazepines, intentional self-harm, init
'T425X2A'	Poisoning by mixed antiepileptics, self-harm, init
'T426X2A'	Poisn by oth antieplptc and sed-hypntc drugs, slf-hrm, init
'T4272XA'	Poisn by unsp antieplptc and sed-hypntc drugs, slf-hrm, init
'T428X2A'	Poisn by antiparkns drug/centr musc-tone depr, slf-hrm, init
'T43012A'	Poisoning by tricyclic antidepressants, self-harm, init
'T43022A'	Poisoning by tetracyclic antidepressants, self-harm, init
'T431X2A'	Poisoning by MAO inhib antidepressants, self-harm, init
'T43202A'	Poisoning by unsp antidepressants, self-harm, init
'T43212A'	Poisn by slctv seroton/norepineph reup inhibtr,slf-hrm, init
'T43222A'	Poisn by slctv serotonin reuptake inhibtr, self-harm, init
'T43292A'	Poisoning by oth antidepressants, self-harm, init
'T433X2A'	Poisn by phenothiaz antipsychot/neurolept, self-harm, init
'T434X2A'	Poisn by butyrophen/thiothixen neuroleptc, self-harm, init
'T43502A'	Poisoning by unsp antipsychot/neurolept, self-harm, init
'T43592A'	Poisoning by oth antipsychot/neurolept, self-harm, init
'T43602A'	Poisoning by unsp psychostimulants, self-harm, init
'T43612A'	Poisoning by caffeine, intentional self-harm, init encntr
'T43622A'	Poisoning by amphetamines, intentional self-harm, init
'T43632A'	Poisoning by methylphenidate, intentional self-harm, init
'T43692A'	Poisoning by oth psychostimulants, self-harm, init
'T438X2A'	Poisoning by oth psychotropic drugs, self-harm, init
'T4392XA'	Poisoning by unsp psychotropic drug, self-harm, init
'T440X2A'	Poisoning by anticholinesterase agents, self-harm, init
'T441X2A'	Poisoning by oth parasympathomimetics, self-harm, init
'T442X2A'	Poisoning by ganglionic blocking drugs, self-harm, init
'T443X2A'	Poisn by oth parasympath and spasmolytics, self-harm, init
'T444X2A'	Poisn by predom alpha-adrenocpt agonists, self-harm, init

ICD-10-CM DIAGNOSIS	DESCRIPTION
'T445X2A'	Poisoning by predom beta-adrenocpt agonists, self-harm, init
'T446X2A'	Poisoning by alpha-adrenocpt antagonists, self-harm, init
'T447X2A'	Poisoning by beta-adrenocpt antagonists, self-harm, init
'T448X2A'	Poisn by centr-acting/adren-neurn-block agnt, slf-hrm, init
'T44902A'	Poisn by unsp drugs aff the autonm nrv sys, slf-hrm, init
'T44992A'	Poisn by oth drug aff the autonm nervous sys, slf-hrm, init
'T450X2A'	Poisoning by antiallerg/antiemetic, self-harm, init
'T451X2A'	Poisoning by antineopl and immunosup drugs, self-harm, init
'T452X2A'	Poisoning by vitamins, intentional self-harm, init encntr
'T453X2A'	Poisoning by enzymes, intentional self-harm, init encntr
'T454X2A'	Poisoning by iron and its compounds, self-harm, init
'T45512A'	Poisoning by anticoagulants, intentional self-harm, init
'T45522A'	Poisoning by antithrombotic drugs, self-harm, init
'T45602A'	Poisoning by unsp fibrin-affct drugs, self-harm, init
'T45612A'	Poisoning by thrombolytic drug, intentional self-harm, init
'T45622A'	Poisoning by hemostatic drug, intentional self-harm, init
'T45692A'	Poisoning by oth fibrin-affct drugs, self-harm, init
'T457X2A'	Poisn by anticoag antag, vit K and oth coag, slf-hrm, init
'T458X2A'	Poisn by oth prim sys and hematolog agents, slf-hrm, init
'T4592XA'	Poisn by unsp prim sys and hematolog agent, slf-hrm, init
'T460X2A'	Poisn by cardi-stim glycos/drug simlar act, self-harm, init
'T461X2A'	Poisoning by calcium-channel blockers, self-harm, init
'T462X2A'	Poisoning by oth antidysrhythmic drugs, self-harm, init
'T463X2A'	Poisoning by coronary vasodilators, self-harm, init
'T464X2A'	Poisn by angiotens-convert-enzyme inhibtr, self-harm, init
'T465X2A'	Poisoning by oth antihypertensive drugs, self-harm, init
'T466X2A'	Poisn by antihyperlip and antiarterio drugs, self-harm, init
'T467X2A'	Poisoning by peripheral vasodilators, self-harm, init
'T468X2A'	Poisn by antivaric drugs, inc scler agents, self-harm, init
'T46902A'	Poisn by unsp agents aff the cardiovasc sys, self-harm, init
'T46992A'	Poisn by oth agents aff the cardiovasc sys, self-harm, init
'T470X2A'	Poisoning by histamine H2-receptor blockers, self-harm, init
'T471X2A'	Poisn by oth antacids & anti-gstrc-sec drugs, slf-hrm, init
'T472X2A'	Poisoning by stimulant laxatives, self-harm, init
'T473X2A'	Poisoning by saline and osmotic laxatives, self-harm, init
'T474X2A'	Poisoning by oth laxatives, intentional self-harm, init
'T475X2A'	Poisoning by digestants, intentional self-harm, init encntr
'T476X2A'	Poisoning by antidiarrheal drugs, self-harm, init
'T477X2A'	Poisoning by emetics, intentional self-harm, init encntr
'T478X2A'	Poisoning by oth agents aff GI sys, self-harm, init

ICD-10-CM DIAGNOSIS	DESCRIPTION
'T4792XA'	Poisoning by unsp agents aff the GI sys, self-harm, init
'T480X2A'	Poisoning by oxytocic drugs, intentional self-harm, init
'T481X2A'	Poisoning by skeletal muscle relaxants, self-harm, init
'T48202A'	Poisoning by unsp drugs acting on muscles, self-harm, init
'T48292A'	Poisoning by oth drugs acting on muscles, self-harm, init
'T483X2A'	Poisoning by antitussives, intentional self-harm, init
'T484X2A'	Poisoning by expectorants, intentional self-harm, init
'T485X2A'	Poisoning by oth anti-common-cold drugs, self-harm, init
'T486X2A'	Poisoning by antiasthmatics, intentional self-harm, init
'T48902A'	Poisn by unsp agents prim act on the resp sys, slf-hrm, init
'T48992A'	Poisn by oth agents prim act on the resp sys, slf-hrm, init
'T490X2A'	Poisn by local antifung/infect/inflamm drugs, slf-hrm, init
'T491X2A'	Poisoning by antipruritics, intentional self-harm, init
'T492X2A'	Poisoning by local astringents/detergents, self-harm, init
'T493X2A'	Poisn by emollients, demulcents and protect, self-harm, init
'T494X2A'	Poisn by keratolyt/keratplst/hair trmt drug, self-harm, init
'T495X2A'	Poisoning by opth drugs and preparations, self-harm, init
'T496X2A'	Poisoning by otorhino drugs and prep, self-harm, init
'T497X2A'	Poisn by dental drugs, topically applied, self-harm, init
'T498X2A'	Poisoning by oth topical agents, intentional self-harm, init
'T4992XA'	Poisoning by unsp topical agent, intentional self-harm, init
'T500X2A'	Poisoning by mineralocorticoids and antag, self-harm, init
'T501X2A'	Poisoning by loop diuretics, intentional self-harm, init
'T502X2A'	Poisn by crbnc-anhydr inhibtr,benzo/oth diuretc,slf-hrm,init
'T503X2A'	Poisn by electrolytic/caloric/wtr-bal agnt, self-harm, init
'T504X2A'	Poisoning by drugs aff uric acid metab, self-harm, init
'T505X2A'	Poisoning by appetite depressants, self-harm, init
'T506X2A'	Poisoning by antidotes and chelating agents, self-harm, init
'T507X2A'	Poisn by analeptics and opioid receptor antag, slf-hrm, init
'T508X2A'	Poisoning by diagnostic agents, intentional self-harm, init
'T50902A'	Poisoning by unsp drug/meds/biol subst, self-harm, init
'T50992A'	Poisoning by oth drug/meds/biol subst, self-harm, init
'T50A12A'	Poisn by pertuss vaccn, inc combin w pertuss, slf-hrm, init
'T50A22A'	Poisn by mixed bact vaccines w/o a pertuss, self-harm, init
'T50A92A'	Poisoning by oth bacterial vaccines, self-harm, init
'T50B12A'	Poisoning by smallpox vaccines, intentional self-harm, init
'T50B92A'	Poisoning by oth viral vaccines, intentional self-harm, init
'T50Z12A'	Poisoning by immunoglobulin, intentional self-harm, init
'T50Z92A'	Poisoning by oth vaccines and biolg substnc, self-harm, init
'T510X2A'	Toxic effect of ethanol, intentional self-harm, init encntr

ICD-10-CM DIAGNOSIS	DESCRIPTION
'T511X2A'	Toxic effect of methanol, intentional self-harm, init encntr
'T512X2A'	Toxic effect of 2-Propanol, intentional self-harm, init
'T513X2A'	Toxic effect of fusel oil, intentional self-harm, init
'T518X2A'	Toxic effect of oth alcohols, intentional self-harm, init
'T5192XA'	Toxic effect of unsp alcohol, intentional self-harm, init
'T520X2A'	Toxic effect of petroleum products, self-harm, init
'T521X2A'	Toxic effect of benzene, intentional self-harm, init encntr
'T522X2A'	Toxic effect of homologues of benzene, self-harm, init
'T523X2A'	Toxic effect of glycols, intentional self-harm, init encntr
'T524X2A'	Toxic effect of ketones, intentional self-harm, init encntr
'T528X2A'	Toxic effect of organic solvents, self-harm, init
'T5292XA'	Toxic effect of unsp organic solvent, self-harm, init
'T530X2A'	Toxic effect of carbon tetrachloride, self-harm, init
'T531X2A'	Toxic effect of chloroform, intentional self-harm, init
'T532X2A'	Toxic effect of trichloroethylene, self-harm, init
'T533X2A'	Toxic effect of tetrachloroethylene, self-harm, init
'T534X2A'	Toxic effect of dichloromethane, intentional self-harm, init
'T535X2A'	Toxic effect of chlorofluorocarbons, self-harm, init
'T536X2A'	Tox eff of halgn deriv of aliphatic hydrocrb, slf-hrm, init
'T537X2A'	Toxic eff of halgn deriv of aromatic hydrocrb, slf-hrm, init
'T5392XA'	Tox eff of unsp halgn deriv of aromat hydrocrb,slf-hrm, init
'T540X2A'	Toxic effect of phenol and phenol homolog, self-harm, init
'T541X2A'	Toxic effect of corrosive organic compounds, self-harm, init
'T542X2A'	Tox eff of corrosv acids & acid-like substnc, slf-hrm, init
'T543X2A'	Tox eff of corrosv alkalis & alk-like substnc, slf-hrm, init
'T5492XA'	Toxic effect of unsp corrosive substance, self-harm, init
'T550X2A'	Toxic effect of soaps, intentional self-harm, init encntr
'T551X2A'	Toxic effect of detergents, intentional self-harm, init
'T560X2A'	Toxic effect of lead and its compounds, self-harm, init
'T561X2A'	Toxic effect of mercury and its compounds, self-harm, init
'T562X2A'	Toxic effect of chromium and its compounds, self-harm, init
'T563X2A'	Toxic effect of cadmium and its compounds, self-harm, init
'T564X2A'	Toxic effect of copper and its compounds, self-harm, init
'T565X2A'	Toxic effect of zinc and its compounds, self-harm, init
'T566X2A'	Toxic effect of tin and its compounds, self-harm, init
'T567X2A'	Toxic effect of beryllium and its compounds, self-harm, init
'T56812A'	Toxic effect of thallium, intentional self-harm, init encntr
'T56892A'	Toxic effect of oth metals, intentional self-harm, init
'T5692XA'	Toxic effect of unsp metal, intentional self-harm, init
'T570X2A'	Toxic effect of arsenic and its compounds, self-harm, init

ICD-10-CM DIAGNOSIS	DESCRIPTION
'T571X2A'	Toxic effect of phosphorus and its compnd, self-harm, init
'T572X2A'	Toxic effect of manganese and its compounds, self-harm, init
'T573X2A'	Toxic effect of hydrogen cyanide, self-harm, init
'T578X2A'	Toxic effect of inorganic substances, self-harm, init
'T5792XA'	Toxic effect of unsp inorganic substance, self-harm, init
'T5802XA'	Toxic eff of carb monx from mtr veh exhaust, slf-hrm, init
'T5812XA'	Toxic effect of carb monx from utility gas, self-harm, init
'T582X2A'	Tox eff of carb monx fr incmpl combst dmst fuel,slf-hrm,init
'T588X2A'	Toxic effect of carb monx from oth source, self-harm, init
'T5892XA'	Toxic effect of carb monx from unsp source, self-harm, init
'T590X2A'	Toxic effect of nitrogen oxides, intentional self-harm, init
'T591X2A'	Toxic effect of sulfur dioxide, intentional self-harm, init
'T592X2A'	Toxic effect of formaldehyde, intentional self-harm, init
'T593X2A'	Toxic effect of lacrimogenic gas, self-harm, init
'T594X2A'	Toxic effect of chlorine gas, intentional self-harm, init
'T595X2A'	Tox eff of fluorine gas and hydrogen fluoride, slf-hrm, init
'T596X2A'	Toxic effect of hydrogen sulfide, self-harm, init
'T597X2A'	Toxic effect of carbon dioxide, intentional self-harm, init
'T59812A'	Toxic effect of smoke, intentional self-harm, init encntr
'T59892A'	Toxic effect of gases, fumes and vapors, self-harm, init
'T5992XA'	Toxic effect of unsp gases, fumes and vapors, slf-hrm, init
'T600X2A'	Toxic eff of organophos and carbamate insect, slf-hrm, init
'T601X2A'	Toxic effect of halogenated insecticides, self-harm, init
'T602X2A'	Toxic effect of insecticides, intentional self-harm, init
'T603X2A'	Toxic effect of herbicides and fungicides, self-harm, init
'T604X2A'	Toxic effect of rodenticides, intentional self-harm, init
'T608X2A'	Toxic effect of oth pesticides, intentional self-harm, init
'T6092XA'	Toxic effect of unsp pesticide, intentional self-harm, init
'T6102XA'	Ciguatera fish poisoning, intentional self-harm, init encntr
'T6112XA'	Scombroid fish poisoning, intentional self-harm, init encntr
'T61772A'	Other fish poisoning, intentional self-harm, init encntr
'T61782A'	Oth shellfish poisoning, intentional self-harm, init encntr
'T618X2A'	Toxic effect of oth seafood, intentional self-harm, init
'T6192XA'	Toxic effect of unsp seafood, intentional self-harm, init
'T620X2A'	Toxic effect of ingested mushrooms, self-harm, init
'T621X2A'	Toxic effect of ingested berries, self-harm, init
'T622X2A'	Toxic effect of ingested (parts of) plant(s), slf-hrm, init
'T628X2A'	Toxic effect of noxious substnc eaten as food, slf-hrm, init
'T6292XA'	Toxic eff of unsp noxious sub eaten as food, slf-hrm, init
'T63002A'	Toxic effect of unsp snake venom, self-harm, init

ICD-10-CM DIAGNOSIS	DESCRIPTION
'T63012A'	Toxic effect of rattlesnake venom, self-harm, init
'T63022A'	Toxic effect of coral snake venom, self-harm, init
'T63032A'	Toxic effect of taipan venom, intentional self-harm, init
'T63042A'	Toxic effect of cobra venom, intentional self-harm, init
'T63062A'	Toxic effect of venom of N & S American snake, slf-hrm, init
'T63072A'	Toxic effect of venom of Australian snake, self-harm, init
'T63082A'	Toxic eff of venom of African and Asian snake, slf-hrm, init
'T63092A'	Toxic effect of venom of snake, intentional self-harm, init
'T63112A'	Toxic effect of venom of gila monster, self-harm, init
'T63122A'	Toxic effect of venom of venomous lizard, self-harm, init
'T63192A'	Toxic effect of venom of reptiles, self-harm, init
'T632X2A'	Toxic effect of venom of scorpion, self-harm, init
'T63302A'	Toxic effect of unsp spider venom, self-harm, init
'T63312A'	Toxic effect of venom of black widow spider, self-harm, init
'T63322A'	Toxic effect of venom of tarantula, self-harm, init
'T63332A'	Toxic effect of venom of brown recluse spider, slf-hrm, init
'T63392A'	Toxic effect of venom of spider, intentional self-harm, init
'T63412A'	Toxic effect of venom of centipede/millipede, slf-hrm, init
'T63422A'	Toxic effect of venom of ants, intentional self-harm, init
'T63432A'	Toxic effect of venom of caterpillars, self-harm, init
'T63442A'	Toxic effect of venom of bees, intentional self-harm, init
'T63452A'	Toxic effect of venom of hornets, self-harm, init
'T63462A'	Toxic effect of venom of wasps, intentional self-harm, init
'T63482A'	Toxic effect of venom of arthropod, self-harm, init
'T63512A'	Toxic effect of contact w stingray, self-harm, init
'T63592A'	Toxic effect of contact w oth venomous fish, self-harm, init
'T63612A'	Toxic effect of contact w Portugese Man-o-war, slf-hrm, init
'T63622A'	Toxic effect of contact w oth jellyfish, self-harm, init
'T63632A'	Toxic effect of contact w sea anemone, self-harm, init
'T63692A'	Toxic eff of cntct w oth venom marine animals, slf-hrm, init
'T63712A'	Toxic effect of contact w venom marine plant, slf-hrm, init
'T63792A'	Toxic effect of contact w oth venomous plant, slf-hrm, init
'T63812A'	Toxic effect of contact w venomous frog, self-harm, init
'T63822A'	Toxic effect of contact w venomous toad, self-harm, init
'T63832A'	Toxic effect of contact w oth venomous amphib, slf-hrm, init
'T63892A'	Toxic effect of contact w oth venom animals, slf-hrm, init
'T6392XA'	Toxic effect of contact w unsp venom animal, slf-hrm, init
'T6402XA'	Toxic effect of aflatoxin, intentional self-harm, init
'T6482XA'	Toxic effect of mycotoxin food contaminants, self-harm, init
'T650X2A'	Toxic effect of cyanides, intentional self-harm, init encntr

ICD-10-CM DIAGNOSIS	DESCRIPTION
'T651X2A'	Toxic effect of strychnine and its salts, self-harm, init
'T65212A'	Toxic effect of chewing tobacco, intentional self-harm, init
'T65222A'	Toxic effect of tobacco cigarettes, self-harm, init
'T65292A'	Toxic effect of tobacco and nicotine, self-harm, init
'T653X2A'	Tox eff of nitrodrv/aminodrv of benzn/homolog, slf-hrm, init
'T654X2A'	Toxic effect of carbon disulfide, self-harm, init
'T655X2A'	Tox eff of nitro & oth nitric acids & esters, slf-hrm, init
'T656X2A'	Toxic effect of paints and dyes, NEC, self-harm, init
'T65812A'	Toxic effect of latex, intentional self-harm, init encntr
'T65822A'	Toxic eff of harmful algae and algae toxins, slf-hrm, init
'T65832A'	Toxic effect of fiberglass, intentional self-harm, init
'T65892A'	Toxic effect of oth substances, intentional self-harm, init
'T6592XA'	Toxic effect of unsp substance, intentional self-harm, init
'T71112A'	Asphyxiation due to smothering under pillow, self-harm, init
'T71122A'	Asphyxiation due to plastic bag, intentional self-harm, init
'T71132A'	Asphyx due to being trapped in bed linens, self-harm, init
'T71152A'	Asphyxiation due to smothering in furniture, self-harm, init
'T71162A'	Asphyxiation due to hanging, intentional self-harm, init
'T71192A'	Asphyx d/t mech thrt to breathe d/t oth cause, slf-hrm, init
'T71222A'	Asphyx due to being trapped in a car trunk, self-harm, init
'T71232A'	Asphyx d/t being trap in a (discarded) refrig, slf-hrm, init
'X710XXA'	Intentional self-harm by drown while in bathtub, init
'X711XXA'	Intentional self-harm by drown while in swimming pool, init
'X712XXA'	Self-harm by drown after jump into swimming pool, init
'X713XXA'	Intentional self-harm by drown in natural water, init
'X718XXA'	Oth intentional self-harm by drowning and submersion, init
'X719XXA'	Intentional self-harm by drowning and submersion, unsp, init
'X72XXXA'	Intentional self-harm by handgun discharge, init encntr
'X730XXA'	Intentional self-harm by shotgun discharge, init encntr
'X731XXA'	Intentional self-harm by hunting rifle discharge, init
'X732XXA'	Intentional self-harm by machine gun discharge, init encntr
'X738XXA'	Intentional self-harm by oth larger firearm discharge, init
'X739XXA'	Intentional self-harm by unsp larger firearm discharge, init
'X7401XA'	Intentional self-harm by airgun, initial encounter
'X7402XA'	Intentional self-harm by paintball gun, initial encounter
'X7409XA'	Self-harm by oth gas, air or spring-operated gun, init
'X748XXA'	Intentional self-harm by oth firearm discharge, init encntr
'X749XXA'	Intentional self-harm by unsp firearm discharge, init encntr
'X75XXXA'	Intentional self-harm by explosive material, init encntr
'X76XXXA'	Intentional self-harm by smoke, fire and flames, init encntr

ICD-10-CM DIAGNOSIS	DESCRIPTION
'X770XXA'	Intentional self-harm by steam or hot vapors, init encntr
'X771XXA'	Intentional self-harm by hot tap water, initial encounter
'X772XXA'	Intentional self-harm by other hot fluids, initial encounter
'X773XXA'	Intentional self-harm by hot household appliances, init
'X778XXA'	Intentional self-harm by other hot objects, init encntr
'X779XXA'	Intentional self-harm by unsp hot objects, init encntr
'X780XXA'	Intentional self-harm by sharp glass, initial encounter
'X781XXA'	Intentional self-harm by knife, initial encounter
'X782XXA'	Intentional self-harm by sword or dagger, initial encounter
'X788XXA'	Intentional self-harm by other sharp object, init encntr
'X789XXA'	Intentional self-harm by unsp sharp object, init encntr
'X79XXXA'	Intentional self-harm by blunt object, initial encounter
'X80XXXA'	Intentional self-harm by jumping from a high place, init
'X810XXA'	Self-harm by jumping or lying in front of mtr veh, init
'X811XXA'	Slf-hrm by jumping or lying in front of (subway) train, init
'X818XXA'	Slf-hrm by jumping or lying in front of moving object, init
'X820XXA'	Intentional collision of motor vehicle w mtr veh, init
'X821XXA'	Intentional collision of motor vehicle w train, init encntr
'X822XXA'	Intentional collision of motor vehicle w tree, init encntr
'X828XXA'	Oth intentional self-harm by crashing of motor vehicle, init
'X830XXA'	Intentional self-harm by crashing of aircraft, init encntr
'X831XXA'	Intentional self-harm by electrocution, initial encounter
'X832XXA'	Intentional self-harm by exposure to extremes of cold, init
'X838XXA'	Intentional self-harm by other specified means, init encntr
'F59'	Unsp behavrl synd assoc w physiol disturb and physcl factors
'F988'	Oth behav/emoth disord w onset usly occur in chldhd and adol
'F989'	Unsp behav/emotn disord w onst usly occur in chldhd and adol
'R452'	Unhappiness
'R453'	Demoralization and apathy
'R454'	Irritability and anger
'R455'	Hostility
'R456'	Violent behavior
'R457'	State of emotional shock and stress, unspecified
'R4581'	Low self-esteem
'R4582'	Worries
'R4583'	Excessive crying of child, adolescent or adult
'R4584'	Anhedonia
'R4586'	Emotional lability
'R4589'	Other symptoms and signs involving emotional state
'R460'	Very low level of personal hygiene

ICD-10-CM DIAGNOSIS	DESCRIPTION
'R461'	Bizarre personal appearance
'R462'	Strange and inexplicable behavior
'R463'	Overactivity
'R464'	Slowness and poor responsiveness
'R465'	Suspiciousness and marked evasiveness
'R467'	Verbosity and circumstantial detail obscuring rsn for cntct
'R4689'	Other symptoms and signs involving appearance and behavior
'F430'	Acute stress reaction
'F4310'	Post-traumatic stress disorder, unspecified
'F4320'	Adjustment disorder, unspecified
'F4321'	Adjustment disorder with depressed mood
'F4322'	Adjustment disorder with anxiety
'F4323'	Adjustment disorder with mixed anxiety and depressed mood
'F4324'	Adjustment disorder with disturbance of conduct
'F4325'	Adjustment disorder w mixed disturb of emotions and conduct
'F4329'	Adjustment disorder with other symptoms
'F438'	Other reactions to severe stress
'F439'	Reaction to severe stress, unspecified
'F941'	Reactive attachment disorder of childhood
'F942'	Disinhibited attachment disorder of childhood

## Table B-2: Substance Use ICD-10-CMS Diagnosis Codes

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F1010'	Alcohol abuse, uncomplicated
'F10120'	Alcohol abuse with intoxication, uncomplicated
'F10121'	Alcohol abuse with intoxication delirium
'F10129'	Alcohol abuse with intoxication, unspecified
'F1014'	Alcohol abuse with alcohol-induced mood disorder
'F10150'	Alcohol abuse w alcoh-induce psychotic disorder w delusions
'F10151'	Alcohol abuse w alcoh-induce psychotic disorder w hallucin
'F10159'	Alcohol abuse with alcohol-induced psychotic disorder, unsp
'F10180'	Alcohol abuse with alcohol-induced anxiety disorder
'F10181'	Alcohol abuse with alcohol-induced sexual dysfunction
'F10182'	Alcohol abuse with alcohol-induced sleep disorder
'F10188'	Alcohol abuse with other alcohol-induced disorder
'F1019'	Alcohol abuse with unspecified alcohol-induced disorder
'F1020'	Alcohol dependence, uncomplicated
'F10220'	Alcohol dependence with intoxication, uncomplicated
'F10221'	Alcohol dependence with intoxication delirium
'F10229'	Alcohol dependence with intoxication, unspecified

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F10230'	Alcohol dependence with withdrawal, uncomplicated
'F10231'	Alcohol dependence with withdrawal delirium
'F10232'	Alcohol dependence w withdrawal with perceptual disturbance
'F10239'	Alcohol dependence with withdrawal, unspecified
'F1024'	Alcohol dependence with alcohol-induced mood disorder
'F10250'	Alcohol depend w alcoh-induce psychotic disorder w delusions
'F10251'	Alcohol depend w alcoh-induce psychotic disorder w hallucin
'F10259'	Alcohol dependence w alcoh-induce psychotic disorder, unsp
'F1026'	Alcohol depend w alcoh-induce persisting amnestic disorder
'F1027'	Alcohol dependence with alcohol-induced persisting dementia
'F10280'	Alcohol dependence with alcohol-induced anxiety disorder
'F10281'	Alcohol dependence with alcohol-induced sexual dysfunction
'F10282'	Alcohol dependence with alcohol-induced sleep disorder
'F10288'	Alcohol dependence with other alcohol-induced disorder
'F1029'	Alcohol dependence with unspecified alcohol-induced disorder
'F10920'	Alcohol use, unspecified with intoxication, uncomplicated
'F10921'	Alcohol use, unspecified with intoxication delirium
'F10929'	Alcohol use, unspecified with intoxication, unspecified
'F1094'	Alcohol use, unspecified with alcohol-induced mood disorder
'F10950'	Alcohol use, unsp w alcoh-induce psych disorder w delusions
'F10951'	Alcohol use, unsp w alcoh-induce psych disorder w hallucin
'F10959'	Alcohol use, unsp w alcohol-induced psychotic disorder, unsp
'F1096'	Alcohol use, unsp w alcoh-induce persist amnestic disorder
'F1097'	Alcohol use, unsp with alcohol-induced persisting dementia
'F10980'	Alcohol use, unsp with alcohol-induced anxiety disorder
'F10981'	Alcohol use, unsp with alcohol-induced sexual dysfunction
'F10982'	Alcohol use, unspecified with alcohol-induced sleep disorder
'F10988'	Alcohol use, unspecified with other alcohol-induced disorder
'F1099'	Alcohol use, unsp with unspecified alcohol-induced disorder
'G621'	Alcoholic polyneuropathy
'I426'	Alcoholic cardiomyopathy
'K2920'	Alcoholic gastritis without bleeding
'K2921'	Alcoholic gastritis with bleeding
'K700'	Alcoholic fatty liver
'K7010'	Alcoholic hepatitis without ascites
'K7011'	Alcoholic hepatitis with ascites
'K702'	Alcoholic fibrosis and sclerosis of liver
'K7030'	Alcoholic cirrhosis of liver without ascites
'K7031'	Alcoholic cirrhosis of liver with ascites
'K7040'	Alcoholic hepatic failure without coma

ICD-10-CM DIAGNOSIS	DESCRIPTION
'K709'	Alcoholic liver disease, unspecified
'O99310'	Alcohol use complicating pregnancy, unspecified trimester
'O99311'	Alcohol use complicating pregnancy, first trimester
'O99312'	Alcohol use complicating pregnancy, second trimester
'O99313'	Alcohol use complicating pregnancy, third trimester
'O99314'	Alcohol use complicating childbirth
'O99315'	Alcohol use complicating the puerperium
'P043'	Newborn affected by maternal use of alcohol
'Q860'	Fetal alcohol syndrome (dysmorphic)
'F1210'	Cannabis abuse, uncomplicated
'F12120'	Cannabis abuse with intoxication, uncomplicated
'F12121'	Cannabis abuse with intoxication delirium
'F12122'	Cannabis abuse with intoxication with perceptual disturbance
'F12129'	Cannabis abuse with intoxication, unspecified
'F12150'	Cannabis abuse with psychotic disorder with delusions
'F12151'	Cannabis abuse with psychotic disorder with hallucinations
'F12159'	Cannabis abuse with psychotic disorder, unspecified
'F12180'	Cannabis abuse with cannabis-induced anxiety disorder
'F12188'	Cannabis abuse with other cannabis-induced disorder
'F1219'	Cannabis abuse with unspecified cannabis-induced disorder
'F1220'	Cannabis dependence, uncomplicated
'F12220'	Cannabis dependence with intoxication, uncomplicated
'F12221'	Cannabis dependence with intoxication delirium
'F12222'	Cannabis dependence w intoxication w perceptual disturbance
'F12229'	Cannabis dependence with intoxication, unspecified
'F12250'	Cannabis dependence with psychotic disorder with delusions
'F12251'	Cannabis dependence w psychotic disorder with hallucinations
'F12259'	Cannabis dependence with psychotic disorder, unspecified
'F12280'	Cannabis dependence with cannabis-induced anxiety disorder
'F12288'	Cannabis dependence with other cannabis-induced disorder
'F1229'	Cannabis dependence with unsp cannabis-induced disorder
'F1290'	Cannabis use, unspecified, uncomplicated
'F12920'	Cannabis use, unspecified with intoxication, uncomplicated
'F12921'	Cannabis use, unspecified with intoxication delirium
'F12922'	Cannabis use, unsp w intoxication w perceptual disturbance
'F12929'	Cannabis use, unspecified with intoxication, unspecified
'F12950'	Cannabis use, unsp with psychotic disorder with delusions
'F12951'	Cannabis use, unsp w psychotic disorder with hallucinations
'F12959'	Cannabis use, unsp with psychotic disorder, unspecified
'F12980'	Cannabis use, unspecified with anxiety disorder

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F12988'	Cannabis use, unsp with other cannabis-induced disorder
'F1299'	Cannabis use, unsp with unsp cannabis-induced disorder
'T407X1A'	Poisoning by cannabis (derivatives), accidental, init
'T407X3A'	Poisoning by cannabis (derivatives), assault, init encntr
'T407X4A'	Poisoning by cannabis (derivatives), undetermined, init
'T407X5A'	Adverse effect of cannabis (derivatives), initial encounter
'F1610'	Hallucinogen abuse, uncomplicated
'F16120'	Hallucinogen abuse with intoxication, uncomplicated
'F16121'	Hallucinogen abuse with intoxication with delirium
'F16122'	Hallucinogen abuse w intoxication w perceptual disturbance
'F16129'	Hallucinogen abuse with intoxication, unspecified
'F1614'	Hallucinogen abuse with hallucinogen-induced mood disorder
'F16150'	Hallucinogen abuse w psychotic disorder w delusions
'F16151'	Hallucinogen abuse w psychotic disorder w hallucinations
'F16159'	Hallucinogen abuse w psychotic disorder, unsp
'F16180'	Hallucinogen abuse w hallucinogen-induced anxiety disorder
'F16183'	Hallucign abuse w hallucign persisting perception disorder
'F16188'	Hallucinogen abuse with other hallucinogen-induced disorder
'F1619'	Hallucinogen abuse with unsp hallucinogen-induced disorder
'F1620'	Hallucinogen dependence, uncomplicated
'F16220'	Hallucinogen dependence with intoxication, uncomplicated
'F16221'	Hallucinogen dependence with intoxication with delirium
'F16229'	Hallucinogen dependence with intoxication, unspecified
'F1624'	Hallucinogen dependence w hallucinogen-induced mood disorder
'F16250'	Hallucinogen dependence w psychotic disorder w delusions
'F16251'	Hallucinogen dependence w psychotic disorder w hallucin
'F16259'	Hallucinogen dependence w psychotic disorder, unsp
'F16280'	Hallucinogen dependence w anxiety disorder
'F16283'	Hallucign depend w hallucign persisting perception disorder
'F16288'	Hallucinogen dependence w oth hallucinogen-induced disorder
'F1629'	Hallucinogen dependence w unsp hallucinogen-induced disorder
'F1690'	Hallucinogen use, unspecified, uncomplicated
'F16920'	Hallucinogen use, unsp with intoxication, uncomplicated
'F16921'	Hallucinogen use, unsp with intoxication with delirium
'F16929'	Hallucinogen use, unspecified with intoxication, unspecified
'F1694'	Hallucinogen use, unsp w hallucinogen-induced mood disorder
'F16950'	Hallucinogen use, unsp w psychotic disorder w delusions
'F16951'	Hallucinogen use, unsp w psychotic disorder w hallucinations
'F16959'	Hallucinogen use, unsp w psychotic disorder, unsp
'F16980'	Hallucinogen use, unsp w anxiety disorder

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F16983'	Hallucign use, unsp w hallucign persist perception disorder
'F16988'	Hallucinogen use, unsp w oth hallucinogen-induced disorder
'F1699'	Hallucinogen use, unsp w unsp hallucinogen-induced disorder
'T408X1A'	Poisoning by lysergide, accidental (unintentional), init
'T408X3A'	Poisoning by lysergide [LSD], assault, initial encounter
'T408X4A'	Poisoning by lysergide, undetermined, initial encounter
'T408X5A'	Adverse effect of lysergide [LSD] initial encounter
'T40901A'	Poisoning by unsp psychodyslept, accidental, init
'T40903A'	Poisoning by unsp psychodysleptics, assault, init encntr
'T40904A'	Poisoning by unsp psychodysleptics, undetermined, init
'T40905A'	Adverse effect of unspecified psychodysleptics, init encntr
'T40991A'	Poisoning by oth psychodyslept, accidental, init
'T40993A'	Poisoning by other psychodysleptics, assault, init encntr
'T40994A'	Poisoning by oth psychodysleptics, undetermined, init encntr
'T40995A'	Adverse effect of other psychodysleptics, initial encounter
'F1810'	Inhalant abuse, uncomplicated
'F18120'	Inhalant abuse with intoxication, uncomplicated
'F18121'	Inhalant abuse with intoxication delirium
'F18129'	Inhalant abuse with intoxication, unspecified
'F1814'	Inhalant abuse with inhalant-induced mood disorder
'F18150'	Inhalant abuse w inhalnt-induce psych disorder w delusions
'F18151'	Inhalant abuse w inhalnt-induce psych disorder w hallucin
'F18159'	Inhalant abuse w inhalant-induced psychotic disorder, unsp
'F1817'	Inhalant abuse with inhalant-induced dementia
'F18180'	Inhalant abuse with inhalant-induced anxiety disorder
'F18188'	Inhalant abuse with other inhalant-induced disorder
'F1819'	Inhalant abuse with unspecified inhalant-induced disorder
'F1820'	Inhalant dependence, uncomplicated
'F18220'	Inhalant dependence with intoxication, uncomplicated
'F18221'	Inhalant dependence with intoxication delirium
'F18229'	Inhalant dependence with intoxication, unspecified
'F1824'	Inhalant dependence with inhalant-induced mood disorder
'F18250'	Inhalant depend w inhalnt-induce psych disorder w delusions
'F18251'	Inhalant depend w inhalnt-induce psych disorder w hallucin
'F18259'	Inhalant depend w inhalnt-induce psychotic disorder, unsp
'F1827'	Inhalant dependence with inhalant-induced dementia
'F18280'	Inhalant dependence with inhalant-induced anxiety disorder
'F18288'	Inhalant dependence with other inhalant-induced disorder
'F1829'	Inhalant dependence with unsp inhalant-induced disorder
'F1890'	Inhalant use, unspecified, uncomplicated

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F18920'	Inhalant use, unspecified with intoxication, uncomplicated
'F18921'	Inhalant use, unspecified with intoxication with delirium
'F18929'	Inhalant use, unspecified with intoxication, unspecified
'F1894'	Inhalant use, unsp with inhalant-induced mood disorder
'F18950'	Inhalant use, unsp w inhalnt-induce psych disord w delusions
'F18951'	Inhalant use, unsp w inhalnt-induce psych disord w hallucin
'F18959'	Inhalant use, unsp w inhalnt-induce psychotic disorder, unsp
'F1897'	Inhalant use, unsp with inhalant-induced persisting dementia
'F18980'	Inhalant use, unsp with inhalant-induced anxiety disorder
'F18988'	Inhalant use, unsp with other inhalant-induced disorder
'F1899'	Inhalant use, unsp with unsp inhalant-induced disorder
'F1110'	Opioid abuse, uncomplicated
'F11120'	Opioid abuse with intoxication, uncomplicated
'F11121'	Opioid abuse with intoxication delirium
'F11122'	Opioid abuse with intoxication with perceptual disturbance
'F11129'	Opioid abuse with intoxication, unspecified
'F1114'	Opioid abuse with opioid-induced mood disorder
'F11150'	Opioid abuse w opioid-induced psychotic disorder w delusions
'F11151'	Opioid abuse w opioid-induced psychotic disorder w hallucin
'F11159'	Opioid abuse with opioid-induced psychotic disorder, unsp
'F11181'	Opioid abuse with opioid-induced sexual dysfunction
'F11182'	Opioid abuse with opioid-induced sleep disorder
'F11188'	Opioid abuse with other opioid-induced disorder
'F1119'	Opioid abuse with unspecified opioid-induced disorder
'F1120'	Opioid dependence, uncomplicated
'F11220'	Opioid dependence with intoxication, uncomplicated
'F11221'	Opioid dependence with intoxication delirium
'F11222'	Opioid dependence w intoxication with perceptual disturbance
'F11229'	Opioid dependence with intoxication, unspecified
'F1123'	Opioid dependence with withdrawal
'F1124'	Opioid dependence with opioid-induced mood disorder
'F11250'	Opioid depend w opioid-induc psychotic disorder w delusions
'F11251'	Opioid depend w opioid-induc psychotic disorder w hallucin
'F11259'	Opioid dependence w opioid-induced psychotic disorder, unsp
'F11281'	Opioid dependence with opioid-induced sexual dysfunction
'F11282'	Opioid dependence with opioid-induced sleep disorder
'F11288'	Opioid dependence with other opioid-induced disorder
'F1129'	Opioid dependence with unspecified opioid-induced disorder
'F1190'	Opioid use, unspecified, uncomplicated
'F11920'	Opioid use, unspecified with intoxication, uncomplicated

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F11921'	Opioid use, unspecified with intoxication delirium
'F11922'	Opioid use, unsp w intoxication with perceptual disturbance
'F11929'	Opioid use, unspecified with intoxication, unspecified
'F1193'	Opioid use, unspecified with withdrawal
'F1194'	Opioid use, unspecified with opioid-induced mood disorder
'F11950'	Opioid use, unsp w opioid-induc psych disorder w delusions
'F11951'	Opioid use, unsp w opioid-induc psych disorder w hallucin
'F11959'	Opioid use, unsp w opioid-induced psychotic disorder, unsp
'F11981'	Opioid use, unsp with opioid-induced sexual dysfunction
'F11982'	Opioid use, unspecified with opioid-induced sleep disorder
'F11988'	Opioid use, unspecified with other opioid-induced disorder
'F1199'	Opioid use, unsp with unspecified opioid-induced disorder
'P961'	Neonatal w/drawal symp from matern use of drugs of addiction
'T400X1A'	Poisoning by opium, accidental (unintentional), init encntr
'T400X2A'	Poisoning by opium, intentional self-harm, initial encounter
'T400X3A'	Poisoning by opium, assault, initial encounter
'T400X4A'	Poisoning by opium, undetermined, initial encounter
'T400X5A'	Adverse effect of opium, initial encounter
'T401X1A'	Poisoning by heroin, accidental (unintentional), init encntr
'T401X2A'	Poisoning by heroin, intentional self-harm, init encntr
'T401X3A'	Poisoning by heroin, assault, initial encounter
'T401X4A'	Poisoning by heroin, undetermined, initial encounter
'T401X5A'	Adverse effect of heroin initial encounter
'T402X2A'	Poisoning by oth opioids, intentional self-harm, init encntr
'T403X2A'	Poisoning by methadone, intentional self-harm, init encntr
'T404X2A'	Poisoning by oth synthetic narcotics, self-harm, init
'T40602A'	Poisoning by unsp narcotics, intentional self-harm, init
'T40692A'	Poisoning by oth narcotics, intentional self-harm, init
'F1910'	Other psychoactive substance abuse, uncomplicated
'F19120'	Oth psychoactive substance abuse w intoxication, uncomp
'F19121'	Oth psychoactive substance abuse with intoxication delirium
'F19122'	Oth psychoactv substance abuse w intox w perceptual disturb
'F19129'	Other psychoactive substance abuse with intoxication, unsp
'F1914'	Oth psychoactive substance abuse w mood disorder
'F19150'	Oth psychoactv substance abuse w psych disorder w delusions
'F19151'	Oth psychoactv substance abuse w psych disorder w hallucin
'F19159'	Oth psychoactive substance abuse w psychotic disorder, unsp
'F1916'	Oth psychoactv substance abuse w persist amnestic disorder
'F1917'	Oth psychoactive substance abuse w persisting dementia
'F19180'	Oth psychoactive substance abuse w anxiety disorder

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F19181'	Oth psychoactive substance abuse w sexual dysfunction
'F19182'	Oth psychoactive substance abuse w sleep disorder
'F19188'	Oth psychoactive substance abuse w oth disorder
'F1919'	Oth psychoactive substance abuse w unsp disorder
'F1920'	Other psychoactive substance dependence, uncomplicated
'F19220'	Oth psychoactive substance dependence w intoxication, uncomp
'F19221'	Oth psychoactive substance dependence w intox delirium
'F19222'	Oth psychoactv substance depend w intox w perceptual disturb
'F19229'	Oth psychoactive substance dependence w intoxication, unsp
'F19230'	Oth psychoactive substance dependence w withdrawal, uncomp
'F19231'	Oth psychoactive substance dependence w withdrawal delirium
'F19232'	Oth psychoactv sub depend w w/drawal w perceptl disturb
'F19239'	Oth psychoactive substance dependence with withdrawal, unsp
'F1924'	Oth psychoactive substance dependence w mood disorder
'F19250'	Oth psychoactv substance depend w psych disorder w delusions
'F19251'	Oth psychoactv substance depend w psych disorder w hallucin
'F19259'	Oth psychoactv substance depend w psychotic disorder, unsp
'F1926'	Oth psychoactv substance depend w persist amnestic disorder
'F1927'	Oth psychoactive substance dependence w persisting dementia
'F19280'	Oth psychoactive substance dependence w anxiety disorder
'F19281'	Oth psychoactive substance dependence w sexual dysfunction
'F19282'	Oth psychoactive substance dependence w sleep disorder
'F19288'	Oth psychoactive substance dependence w oth disorder
'F1929'	Oth psychoactive substance dependence w unsp disorder
'F1990'	Other psychoactive substance use, unspecified, uncomplicated
'F19920'	Oth psychoactive substance use, unsp w intoxication, uncomp
'F19921'	Oth psychoactive substance use, unsp w intox w delirium
'F19922'	Oth psychoactv sub use, unsp w intox w perceptl disturb
'F19929'	Oth psychoactive substance use, unsp with intoxication, unsp
'F19930'	Oth psychoactive substance use, unsp w withdrawal, uncomp
'F19931'	Oth psychoactive substance use, unsp w withdrawal delirium
'F19932'	Oth psychoactv sub use, unsp w w/drawal w perceptl disturb
'F19939'	Other psychoactive substance use, unsp with withdrawal, unsp
'F1994'	Oth psychoactive substance use, unsp w mood disorder
'F19950'	Oth psychoactv sub use, unsp w psych disorder w delusions
'F19951'	Oth psychoactv sub use, unsp w psych disorder w hallucin
'F19959'	Oth psychoactv substance use, unsp w psych disorder, unsp
'F1996'	Oth psychoactv sub use, unsp w persist amnestic disorder
'F1997'	Oth psychoactive substance use, unsp w persisting dementia
'F19980'	Oth psychoactive substance use, unsp w anxiety disorder

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F19981'	Oth psychoactive substance use, unsp w sexual dysfunction
'F19982'	Oth psychoactive substance use, unsp w sleep disorder
'F19988'	Oth psychoactive substance use, unsp w oth disorder
'F1999'	Oth psychoactive substance use, unsp w unsp disorder
'F550'	Abuse of antacids
'F551'	Abuse of herbal or folk remedies
'F552'	Abuse of laxatives
'F553'	Abuse of steroids or hormones
'F554'	Abuse of vitamins
'F558'	Abuse of other non-psychoactive substances
'F630'	Pathological gambling
'O355XX0'	Maternal care for (suspected) damage to fetus by drugs, unsp
'O355XX1'	Maternal care for damage to fetus by drugs, fetus 1
'O355XX2'	Maternal care for damage to fetus by drugs, fetus 2
'O355XX3'	Maternal care for damage to fetus by drugs, fetus 3
'O355XX4'	Maternal care for damage to fetus by drugs, fetus 4
'O355XX5'	Maternal care for damage to fetus by drugs, fetus 5
'O355XX9'	Maternal care for (suspected) damage to fetus by drugs, oth
'O99320'	Drug use complicating pregnancy, unspecified trimester
'O99321'	Drug use complicating pregnancy, first trimester
'O99322'	Drug use complicating pregnancy, second trimester
'O99323'	Drug use complicating pregnancy, third trimester
'O99324'	Drug use complicating childbirth
'O99325'	Drug use complicating the puerperium
'P0449'	Newborn affected by maternal use of other drugs of addiction
'P962'	Withdrawal symptoms from therapeutic use of drugs in newborn
'F1310'	Sedative, hypnotic or anxiolytic abuse, uncomplicated
'F13120'	Sedatv/hyp/anxiolytc abuse w intoxication, uncomplicated
'F13121'	Sedatv/hyp/anxiolytc abuse w intoxication delirium
'F13129'	Sedative, hypnotic or anxiolytic abuse w intoxication, unsp
'F1314'	Sedative, hypnotic or anxiolytic abuse w mood disorder
'F13150'	Sedatv/hyp/anxiolytc abuse w psychotic disorder w delusions
'F13151'	Sedatv/hyp/anxiolytc abuse w psychotic disorder w hallucin
'F13159'	Sedatv/hyp/anxiolytc abuse w psychotic disorder, unsp
'F13180'	Sedative, hypnotic or anxiolytic abuse w anxiety disorder
'F13181'	Sedative, hypnotic or anxiolytic abuse w sexual dysfunction
'F13182'	Sedative, hypnotic or anxiolytic abuse w sleep disorder
'F13188'	Sedative, hypnotic or anxiolytic abuse w oth disorder
'F1319'	Sedative, hypnotic or anxiolytic abuse w unsp disorder
'F1320'	Sedative, hypnotic or anxiolytic dependence, uncomplicated

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F13220'	Sedatv/hyp/anxiolytc dependence w intoxication, uncomp
'F13221'	Sedatv/hyp/anxiolytc dependence w intoxication delirium
'F13229'	Sedatv/hyp/anxiolytc dependence w intoxication, unsp
'F13230'	Sedatv/hyp/anxiolytc dependence w withdrawal, uncomplicated
'F13231'	Sedatv/hyp/anxiolytc dependence w withdrawal delirium
'F13232'	Sedatv/hyp/anxiolytc depend w w/drawal w perceptual disturb
'F13239'	Sedatv/hyp/anxiolytc dependence w withdrawal, unsp
'F1324'	Sedative, hypnotic or anxiolytic dependence w mood disorder
'F13250'	Sedatv/hyp/anxiolytc depend w psychotic disorder w delusions
'F13251'	Sedatv/hyp/anxiolytc depend w psychotic disorder w hallucin
'F13259'	Sedatv/hyp/anxiolytc dependence w psychotic disorder, unsp
'F1326'	Sedatv/hyp/anxiolytc depend w persisting amnestic disorder
'F1327'	Sedatv/hyp/anxiolytc dependence w persisting dementia
'F13280'	Sedatv/hyp/anxiolytc dependence w anxiety disorder
'F13281'	Sedatv/hyp/anxiolytc dependence w sexual dysfunction
'F13282'	Sedative, hypnotic or anxiolytic dependence w sleep disorder
'F13288'	Sedative, hypnotic or anxiolytic dependence w oth disorder
'F1329'	Sedative, hypnotic or anxiolytic dependence w unsp disorder
'F1390'	Sedative, hypnotic, or anxiolytic use, unsp, uncomplicated
'F13920'	Sedatv/hyp/anxiolytc use, unsp w intoxication, uncomplicated
'F13921'	Sedatv/hyp/anxiolytc use, unsp w intoxication delirium
'F13929'	Sedatv/hyp/anxiolytc use, unsp w intoxication, unsp
'F13930'	Sedatv/hyp/anxiolytc use, unsp w withdrawal, uncomplicated
'F13931'	Sedatv/hyp/anxiolytc use, unsp w withdrawal delirium
'F13932'	Sedatv/hyp/anxiolytc use, unsp w w/drawal w perceptl disturb
'F13939'	Sedatv/hyp/anxiolytc use, unsp w withdrawal, unsp
'F1394'	Sedative, hypnotic or anxiolytic use, unsp w mood disorder
'F13950'	Sedatv/hyp/anxiolytc use, unsp w psych disorder w delusions
'F13951'	Sedatv/hyp/anxiolytc use, unsp w psych disorder w hallucin
'F13959'	Sedatv/hyp/anxiolytc use, unsp w psychotic disorder, unsp
'F1396'	Sedatv/hyp/anxiolytc use, unsp w persist amnestic disorder
'F1397'	Sedatv/hyp/anxiolytc use, unsp w persisting dementia
'F13980'	Sedatv/hyp/anxiolytc use, unsp w anxiety disorder
'F13981'	Sedatv/hyp/anxiolytc use, unsp w sexual dysfunction
'F13982'	Sedative, hypnotic or anxiolytic use, unsp w sleep disorder
'F13988'	Sedative, hypnotic or anxiolytic use, unsp w oth disorder
'F1399'	Sedative, hypnotic or anxiolytic use, unsp w unsp disorder
'F1410'	Cocaine abuse, uncomplicated
'F14120'	Cocaine abuse with intoxication, uncomplicated
'F14121'	Cocaine abuse with intoxication with delirium

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F14122'	Cocaine abuse with intoxication with perceptual disturbance
'F14129'	Cocaine abuse with intoxication, unspecified
'F1414'	Cocaine abuse with cocaine-induced mood disorder
'F14150'	Cocaine abuse w cocaine-induc psychotic disorder w delusions
'F14151'	Cocaine abuse w cocaine-induc psychotic disorder w hallucin
'F14159'	Cocaine abuse with cocaine-induced psychotic disorder, unsp
'F14180'	Cocaine abuse with cocaine-induced anxiety disorder
'F14181'	Cocaine abuse with cocaine-induced sexual dysfunction
'F14182'	Cocaine abuse with cocaine-induced sleep disorder
'F14188'	Cocaine abuse with other cocaine-induced disorder
'F1419'	Cocaine abuse with unspecified cocaine-induced disorder
'F1420'	Cocaine dependence, uncomplicated
'F14220'	Cocaine dependence with intoxication, uncomplicated
'F14221'	Cocaine dependence with intoxication delirium
'F14222'	Cocaine dependence w intoxication w perceptual disturbance
'F14229'	Cocaine dependence with intoxication, unspecified
'F1423'	Cocaine dependence with withdrawal
'F1424'	Cocaine dependence with cocaine-induced mood disorder
'F14250'	Cocaine depend w cocaine-induc psych disorder w delusions
'F14251'	Cocaine depend w cocaine-induc psychotic disorder w hallucin
'F14259'	Cocaine dependence w cocaine-induc psychotic disorder, unsp
'F14280'	Cocaine dependence with cocaine-induced anxiety disorder
'F14281'	Cocaine dependence with cocaine-induced sexual dysfunction
'F14282'	Cocaine dependence with cocaine-induced sleep disorder
'F14288'	Cocaine dependence with other cocaine-induced disorder
'F1429'	Cocaine dependence with unspecified cocaine-induced disorder
'F1490'	Cocaine use, unspecified, uncomplicated
'F14920'	Cocaine use, unspecified with intoxication, uncomplicated
'F14921'	Cocaine use, unspecified with intoxication delirium
'F14922'	Cocaine use, unsp w intoxication with perceptual disturbance
'F14929'	Cocaine use, unspecified with intoxication, unspecified
'F1494'	Cocaine use, unspecified with cocaine-induced mood disorder
'F14950'	Cocaine use, unsp w cocaine-induc psych disorder w delusions
'F14951'	Cocaine use, unsp w cocaine-induc psych disorder w hallucin
'F14959'	Cocaine use, unsp w cocaine-induced psychotic disorder, unsp
'F14980'	Cocaine use, unsp with cocaine-induced anxiety disorder
'F14981'	Cocaine use, unsp with cocaine-induced sexual dysfunction
'F14982'	Cocaine use, unspecified with cocaine-induced sleep disorder
'F14988'	Cocaine use, unspecified with other cocaine-induced disorder
'F1499'	Cocaine use, unsp with unspecified cocaine-induced disorder

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F1510'	Other stimulant abuse, uncomplicated
'F15120'	Other stimulant abuse with intoxication, uncomplicated
'F15121'	Other stimulant abuse with intoxication delirium
'F15122'	Oth stimulant abuse w intoxication w perceptual disturbance
'F15129'	Other stimulant abuse with intoxication, unspecified
'F1514'	Other stimulant abuse with stimulant-induced mood disorder
'F15150'	Oth stimulant abuse w stim-induce psych disorder w delusions
'F15151'	Oth stimulant abuse w stim-induce psych disorder w hallucin
'F15159'	Oth stimulant abuse w stim-induce psychotic disorder, unsp
'F15180'	Oth stimulant abuse with stimulant-induced anxiety disorder
'F15181'	Oth stimulant abuse w stimulant-induced sexual dysfunction
'F15182'	Other stimulant abuse with stimulant-induced sleep disorder
'F15188'	Other stimulant abuse with other stimulant-induced disorder
'F1519'	Other stimulant abuse with unsp stimulant-induced disorder
'F1520'	Other stimulant dependence, uncomplicated
'F15220'	Other stimulant dependence with intoxication, uncomplicated
'F15221'	Other stimulant dependence with intoxication delirium
'F15222'	Oth stimulant dependence w intox w perceptual disturbance
'F15229'	Other stimulant dependence with intoxication, unspecified
'F1523'	Other stimulant dependence with withdrawal
'F1524'	Oth stimulant dependence w stimulant-induced mood disorder
'F15250'	Oth stim depend w stim-induce psych disorder w delusions
'F15251'	Oth stimulant depend w stim-induce psych disorder w hallucin
'F15259'	Oth stimulant depend w stim-induce psychotic disorder, unsp
'F15280'	Oth stimulant dependence w stim-induce anxiety disorder
'F15281'	Oth stimulant dependence w stim-induce sexual dysfunction
'F15282'	Oth stimulant dependence w stimulant-induced sleep disorder
'F15288'	Oth stimulant dependence with oth stimulant-induced disorder
'F1529'	Oth stimulant dependence w unsp stimulant-induced disorder
'F1590'	Other stimulant use, unspecified, uncomplicated
'F15920'	Other stimulant use, unsp with intoxication, uncomplicated
'F15921'	Other stimulant use, unspecified with intoxication delirium
'F15922'	Oth stimulant use, unsp w intox w perceptual disturbance
'F15929'	Other stimulant use, unsp with intoxication, unspecified
'F1594'	Oth stimulant use, unsp with stimulant-induced mood disorder
'F15950'	Oth stim use, unsp w stim-induce psych disorder w delusions
'F15951'	Oth stim use, unsp w stim-induce psych disorder w hallucin
'F15959'	Oth stimulant use, unsp w stim-induce psych disorder, unsp
'F15980'	Oth stimulant use, unsp w stimulant-induced anxiety disorder
'F15981'	Oth stimulant use, unsp w stim-induce sexual dysfunction

ICD-10-CM DIAGNOSIS	DESCRIPTION
'F15982'	Oth stimulant use, unsp w stimulant-induced sleep disorder
'F15988'	Oth stimulant use, unsp with oth stimulant-induced disorder
'F1599'	Oth stimulant use, unsp with unsp stimulant-induced disorder
'P0441'	Newborn affected by maternal use of cocaine
'T405X1A'	Poisoning by cocaine, accidental (unintentional), init
'T405X3A'	Poisoning by cocaine, assault, initial encounter
'T405X4A'	Poisoning by cocaine, undetermined, initial encounter
'T405X5A'	Adverse effect of cocaine, initial encounter

### Dental Conditions ICD-10-CM Diagnosis Codes

K000, K001, K002, K003, K004, K005, K006, K007, K008, K009, K010, K011, K023, K0251, K0252, K0253, K0261, K0262, K0263, K027, K029, K030, K031, K032, K033, K034, K035, K036, K037, K0381, K0389, K039, K0401, K0402, K041, K042, K043, K044, K045, K046, K047, K048, K0490, K0499, K0500, K0501, K0510, K0511, K0520, K05211, K05212, K05213, K05219, K05221, K05222, K05223, K05229, K0530, K05311, K05312, K05313, K05319, K05321, K05322, K05323, K05329, K054, K055, K056, K06010, K06011, K06012, K06013, K06020, K06021, K06022, K06023, K061, K062, K063, K068, K069.

### Injury ICD-10-CM Diagnosis Codes

S00-S99; T07-T34; T36-T50 with a 6th character of 1,2, 3, or 4 (except T36.9, T37.9, T39.9, T41.4, T42.7, T43.9, T45.9, T47.9, and T49.9 with a 5th character of 1, 2, 3, or 4); T51-T65; T66-T76; T79; T84.01; T84.02; and O9A.2-O9A.5.

#### Dementia ICD-10-CM Diagnosis Codes

### Table B-3: Dementia ICD-10-CM Diagnosis Codes

ICD-10-CM DIAGONSIS	DESCRIPTION
Vascular dementia	
F0150	Vascular dementia without behavioral disturbance
F0151	Vascular dementia with behavioral disturbance
Dementia in other diseas	es classified elsewhere
F0280	Dementia in other diseases classified elsewhere without behavioral disturbance
F0281	Dementia in other diseases classified elsewhere with behavioral disturbance
Unspecified dementia	
F0390	Unspecified dementia without behavioral disturbance
F0391	Unspecified dementia with behavioral disturbance
Delirium, not induced by	alcohol and other psychoactive substances
F05	Delirium due to known physiological condition
Alzheimer's disease	
G300	Alzheimer's disease with early onset
G301	Alzheimer's disease with late onset

ICD-10-CM DIAGONSIS	DESCRIPTION	
G308	Other Alzheimer's disease	
G309	Alzheimer's disease, unspecified	

### **APPENDIX C: STATISTICAL METHODS**

This appendix explains the statistical methods and gives formulas for the calculations of standard errors and hypothesis tests. These statistics are derived from weighted SID and demographic population data provided by Claritas (a vendor that compiles and adds value to Bureau of Census data). Standard error calculations for the rates were based on the HCUP report entitled *Inferences with HCUP State Databases Final Report* (Houchens, et al., 2010). We will refer to this report simply as the SID Variance Report throughout this appendix. This method takes into account the cluster and stratification aspects when calculating these statistics on weighted data using the SAS procedure PROC SURVEYMEANS. For population counts based on Claritas data, there is no sampling error.

Even though the SID databases contain nearly all discharges from nearly all hospitals in the State, we treat the files as though they were drawn from an infinite population. We do not employ finite population correction factors in estimating standard errors. We take this approach because we view the outcomes as a result of myriad processes that go into treatment decisions rather than being the result of specific, fixed processes generating outcomes for a specific population and a specific year. We consider the SID to be samples from a "super-population" for purposes of variance estimation. Further, we assume the counts (of QI events) to be binomial.

# 1. Standard Error Estimates for Weighted Discharge Rates per 100,000 Population Using the 2017 Claritas Population Data for Area-Based QIs

The observed rate was calculated as follows:

$$R = 100,000 \cdot \frac{\sum_{i=1}^{n} w_i x_i}{N} = 100,000 \cdot \frac{S}{N}.$$
 (2.1)

 $w_i$  and  $x_i$ , respectively, are the weight and variable of interest for patient i in the NHQDR analysis file or SID. To obtain the estimate of *S* and its standard error,  $SE_S$ , we followed instructions in the SID Variance Report.

The population count in the denominator is a constant. Consequently, the standard error of the rate R was calculated as:

$$SE_R = 100,000 * SE_S / N.$$
 (2.2)

Standard Error Estimates for Inpatient Rates per 1,000 Discharges Using Weighted Discharge Counts in Both the Numerator and the Denominator for Provider-based QIs

We calculated the observed rate as follows:

$$R = 1,000 \cdot \frac{\sum_{i=1}^{n} w_i x_i}{\sum_{i=1}^{n} w_i} = 1,000 \cdot \frac{S}{N}.$$
 (2.6)

Following instructions in the HCUP SID Variance Report, we used PROC SURVEYMEANS to obtain estimates of the weighted mean, S/N, and the standard error of the weighted mean,  $SE_{S/N}$ . We multiplied this standard error by 1,000.

### 2. Significance Tests

Let  $R_1$  and  $R_2$  be either observed or adjusted rates calculated for comparison groups 1 and 2, respectively. Let  $SE_1$  and  $SE_2$  be the corresponding standard errors for the two rates. We calculated the test statistic and (two-sided) p-value:

$$t = \frac{R_1 - R_2}{\int SE_1^2 + SE_2^2}$$
(2.10)  
$$p = 2* \operatorname{Prob}(Z > |t|)$$

where Z is a standard normal variate.

Note: the following functions calculate *p* in SAS and EXCEL:

SAS: p = 2 \* (1 - PROBNORM(ABS(t)));

EXCEL: = 2\*(1- NORMDIST(ABS(t),0,1,TRUE))

# APPENDIX D: CAVEATS TO THE INTREPRETATION OF HCUP-BASED QI ESTIMATES REPORTED IN THE NHQDR

Some caution should be used in interpreting the QI statistics presented in the NHQDR. These caveats relate to inter-State differences in data collection and other more general issues.

### State-Specific Rates

Organizations that collect statewide data generally collect data using the Uniform Billing formats (UB-92 or UB-04). However, not every statewide data organization collects all data elements nor codes them the same way. Uneven availability of a few data elements can underlie HCUP estimates, as noted next.

#### Number of Clinical Fields

One data collection issue relates to the number of fields that statewide data organizations permit for reporting patient diagnoses and procedures during the hospitalization.

- The mean number of diagnosis codes across all records in the 2016 SID used for the NHQDR was 10.6, while the mean number of procedure codes across all records was 1.6. Across the 2016 SID used for the NHQDR, there was a maximum of 72 diagnosis and 76 procedure fields.
- The mean number of diagnosis codes across all records in the 2017 SID used for the NHQDR was 11.33, while the mean number of procedure codes across all records was 1.61. Across the 2017 SID used for the NHQDR, there was a maximum of 111 diagnosis and 100 procedure fields.
- The mean number of diagnosis codes across all records in the 2018 SID used for the NHQDR was 11.82, while the mean number of procedure codes across all records was 1.61. Across the 2018 SID used for the NHQDR, there was a maximum of 104 diagnosis and 127 procedure fields.
- The mean number of diagnosis codes across all records in the 2019 SID used for the NHQDR was 12.19, while the mean number of procedure codes across all records was 1.66. Across the 2019 SID used for the NHQDR, there was a maximum of 110 diagnosis and 143 procedure fields.

#### Non-Resident Discharges

HCUP databases include discharges from all hospitals in a State, and may include nonresidents, including foreign patients, which can bias the results for QIs using area-based denominators (State populations). We had no way to adjust the HCUP data to consistently exclude the non-resident discharges and include discharges for residents hospitalized in other States. Therefore, non-resident discharges were retained in the SID databases for the NHQDR analyses. Based on an analysis performed with the 2016 SID, the overall percentage of nonresident discharges within a State is 4 percent with a range from 1 percent to 45 percent. Most States were below 10 percent, but six States (MO, ND, SD, TN, VT, WV) and the District of Columbia had more than 10 percent of discharges in the SID that were for non-residents. The proportion of non-resident discharges and range across States in the 2016 SID is similar to that observed in prior years. This analysis was not repeated for States in the 2017-2019 SID.

### **APPENDIX E: INPATIENT RATES FOR DELIVERY MEASURES**

### Table E-1: Delivery and Abortion ICD-10-CM diagnoses, ICD-10-PCS procedures, and DRGs

#### Any Indication of Delivery

Any diagnosis of Z37X: Z370, Z371, Z372, Z373, Z374, Z3750, Z3751, Z3752, Z3753, Z3754, Z3759, Z3760, Z3761, Z3762, Z3763, Z3764, Z3769, Z377, Z379

Any diagnosis of O80 (vaginal delivery)

Any diagnosis of O82, O7582 (C-section)

Any procedure code of 10D00Z0-10D00Z2, 10D07Z3-0D07Z8, 10E0XZZ

Any delivery DRG: 765-768 or 774-775

#### **Excluding an Indication of Abortion**

Any diagnosis of 'O00', 'O01', 'O02', 'O03', 'O04', 'O07', 'O08' Any procedure starting with '10A0' ('10A00ZZ', '10A03ZZ', '10A04ZZ', '10A07Z6', '10A07ZW', '10A07ZX', '10A07ZZ', '10A08ZZ')

#### Table E-2: Pulmonary Embolism or Deep Vein Thrombosis ICD-10-CM Diagnosis Codes

ICD-10-CM Diagnosis Codes
I2602 =Saddle embolus of pulmonary artery with acute corpulmonale
I2609 =Other pulmonary embolism with acute corpulmonale
I2692 =Saddle embolus of pulmonary artery without acute corpulmonale
I2699 =Other pulmonary embolism without acute corpulmonale
18010 =Phlebitis and thrombophlebitis of unspecified femoral vein
18011 =Phlebitis and thrombophlebitis of right femoral vein
18012 =Phlebitis and thrombophlebitis of left femoral vein
18013 =Phlebitis and thrombophlebitis of femoral vein, bilateral
180201 =Phlebitis and thrombophlebitis of unspecified deep vessels of right lower extremity
180202 =Phlebitis and thrombophlebitis of unspecified deep vessels of left lower extremity
180203 =Phlebitis and thrombophlebitis of unspecified deep vessels of lower extremities, bilateral
180209 =Phlebitis and thrombophlebitis of unspecified deep vessels of unspecified lower extremity
I80211 =Phlebitis and thrombophlebitis of right iliac vein
180212 =Phlebitis and thrombophlebitis of left iliac vein
I80213 =Phlebitis and thrombophlebitis of iliac vein, bilateral
180219 =Phlebitis and thrombophlebitis of unspecified iliac vein
180221 =Phlebitis and thrombophlebitis of right popliteal vein
180222 =Phlebitis and thrombophlebitis of left popliteal vein
180223 =Phlebitis and thrombophlebitis of popliteal vein, bilateral
180229 =Phlebitis and thrombophlebitis of unspecified popliteal vein
I80231 =Phlebitis and thrombophlebitis of right tibial vein
I80232 =Phlebitis and thrombophlebitis of left tibial vein
I80233 =Phlebitis and thrombophlebitis of tibial vein, bilateral
180239 =Phlebitis and thrombophlebitis of unspecified tibial vein

ICD-10-CM Diagnosis Codes
180291 =Phlebitis and thrombophlebitis of other deep vessels of right lower extremity
180292 =Phlebitis and thrombophlebitis of other deep vessels of left lower extremity
180293 =Phlebitis and thrombophlebitis of other deep vessels of lower extremity, bilateral
I80299 =Phlebitis and thrombophlebitis of other deep vessels of unspecified lower extremity
I82401 =Acute embolism and thrombosis of unspecified deep veins of right lower extremity
I82402 =Acute embolism and thrombosis of unspecified deep veins of left lower extremity
I82403 =Acute embolism and thrombosis of unspecified deep veins of lower extremity, bilateral
I82409 =Acute embolism and thrombosis of unspecified deep veins of unspecified lower extremity
I82411 =Acute embolism and thrombosis of right femoral vein
I82412 =Acute embolism and thrombosis of left femoral vein
I82413 =Acute embolism and thrombosis of femoral vein, bilateral
I82419 =Acute embolism and thrombosis of unspecified femoral vein
I82421 =Acute embolism and thrombosis of right iliac vein
I82422 =Acute embolism and thrombosis of left iliac vein
I82423 =Acute embolism and thrombosis of iliac vein, bilateral
I82429 =Acute embolism and thrombosis of unspecified iliac vein
I82431 =Acute embolism and thrombosis of right popliteal vein
I82432 =Acute embolism and thrombosis of left popliteal vein
I82433 =Acute embolism and thrombosis of popliteal vein, bilateral
I82439 =Acute embolism and thrombosis of unspecified popliteal vein
I824Y1 =Acute embolism and thrombosis of unspecified deep veins of right proximal lower extremity
I824Y2 =Acute embolism and thrombosis of unspecified deep veins of left proximal lower extremity
I824Y3 =Acute embolism and thrombosis of unspecified deep veins of proximal lower extremity, bilateral
I824Y9 =Acute embolism and thrombosis of unspecified deep veins of unspecified proximal lower extremity

## Table E-3: Postpartum Hemorrhage ICD-10-CM Diagnosis Codes

ICD-10-CM Code	Description
O43.212	Placenta accreta, second trimester
O43.213	Placenta accreta, third trimester
O43.219	Placenta accreta, unspecified trimester
O43.222	Placenta increta, second trimester
O43.223	Placenta increta, third trimester
O43.229	Placenta increta, unspecified trimester
O43.232	Placenta percreta, second trimester
O43.233	Placenta percreta, third trimester
O43.239	Placenta percreta, unspecified trimester
O72.0	Third-stage hemorrhage
072.1	Other immediate postpartum hemorrhage
072.2	Delayed and secondary postpartum hemorrhage
O72.3	Postpartum coagulation defects

## Table E-4: Eclampsia or Preeclampsia ICD-10-CM Diagnosis Codes

### ICD-10-CM Diagnosis Codes

Any diagnosis starting with 'O14' for pre-eclampsia

Any diagnosis starting with 'O15' for eclampsia

Any diagnosis starting with 'O11' for pre-existing hypertension with pre-eclampsia