
PSYCKES

Preventable Hospitalization Indicators

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Technical Specifications



Office of
Mental Health

PSYCKES

Preventable Hospitalization Indicators Documentation

Preventable Hospitalization Summary Indicator

Description: The percentage of Adult Medicaid enrollees/members of all ages currently identified as having 1 or more preventable Inpatient stays in the past 13 month among enrollees currently receiving services from an OMH licensed provider.

Eligible Population:

Age: 18 years and older.

Inclusion Criteria: Medicaid enrollee/member who has received one or more services from an OMH licensed provider in the 9 months prior to the report date.

Exclusion Criteria: Transfers from another facility.

Note: The preventable hospitalization indicators are based on the Agency for Health Care Research and Quality (AHRQ) Prevention Quality Indicators (PQI), which are intended to identify population rates of hospitalizations for conditions that with adequate outpatient care should be preventable. The AHRQ PQIs are considered area measures (intended to describe the rate within a certain geographic area). The PSYCKES indicators are intended to identify those NYS Medicaid members/enrollees who may benefit from better coordinated care in the community. More information regarding the AHRQ PQIs can be found at the [AHRQ Quality Indicators Website](#) ¹.

Preventable Hospitalization Indicators Documentation

Adult Asthma Preventable Hospitalization Summary Indicator

Description:	The percentage of Adult Medicaid enrollees/members of all ages currently identified as having 1 or more Asthma Inpatient stays (See Primary Diagnosis Codes in Table 1) in the past 13 month among enrollees currently receiving services from an OMH licensed provider.
Eligible Population:	
Age:	18 years and older.
Inclusion Criteria:	Medicaid enrollee/member who has received one or more services from an OMH licensed provider in the 9 months prior to the report date.
Exclusion Criteria:	Transfers from another facility and claims with major diagnostic categories of pregnancy, childbirth, or puerperium as well as cystic fibrosis and anomalies of the respiratory system in any diagnosis field.
Note:	The preventable hospitalization indicators are based on the Agency for Health Care Research and Quality (AHRQ) Prevention Quality Indicators (PQI), which are intended to identify population rates of hospitalizations for conditions that with adequate outpatient care should be preventable. The AHRQ PQIs are considered area measures (intended to describe the rate within a certain geographic area). The PSYCKES indicators are intended to identify those NYS Medicaid members/enrollees who may benefit from better coordinated care in the community. More information regarding the AHRQ PQIs can be found at the AHRQ Quality Indicators Website [↗] .

Adult Asthma Preventable Hospitalization			
Numerator:			
All non-maternal discharges of age 18 years and older with ICD-9-CM principal diagnosis code of asthma. Asthma			
ICD-9-CM diagnosis codes:			
49300	EXT ASTHMA W/O STAT ASTH	49321	CH OB ASTHMA W STAT ASTH
49301	EXT ASTHMA W STATUS ASTH	49322	CH OBS ASTH W ACUTE EXAC OCT00-
49302	EXT ASTHMA W ACUTE EXAC OCT00-	49381	EXERCSE IND BRONCHOSPASM OCT03-
49310	INT ASTHMA W/O STAT ASTH	49382	COUGH VARIANT ASTHMA OCT03-
49311	INT ASTHMA W STATUS ASTH	49390	ASTHMA W/O STATUS ASTHM
49312	INT ASTHMA W ACUTE EXAC OCT00-	49391	ASTHMA W STATUS ASTHMA
49320	CH OB ASTH W/O STAT ASTH	49392	ASTHMA W ACUTE EXACERBTN OCT00-
Exclude cases:			
<ul style="list-style-type: none"> • MDC 14 (pregnancy, childbirth, and puerperium) • MDC 15 (newborn and other neonates) • with any diagnosis code of cystic fibrosis and anomalies of the respiratory system transferring from another institution (ADMISSION_SOURCE_CD_E0138 Not In ('4','5','6')) 			
<i>ICD-9-CM diagnosis codes of cystic fibrosis and anomalies of the respiratory system</i>			
27700	CYSTIC FIBROS W/O ILEUS	7485	AGENESIS OF LUNG
27701	CYSTIC FIBROS W ILEUS	74860	LUNG ANOMALY NOS
27702	CYSTIC FIBROS W PUL MAN	74861	CONGEN BRONCHIECTASIS
27703	CYSTIC FIBROSIS W GI MAN	74869	LUNG ANOMALY NEC
27709	CYSTIC FIBROSIS NEC	7488	RESPIRATORY ANOMALY NEC
74721	ANOMALIES OF AORTIC ARCH	7489	RESPIRATORY ANOMALY NOS
7483	LARYNGOTRACH ANOMALY NEC	7503	CONG ESOPH FISTULA/ATRES
7484	CONGENITAL CYSTIC LUNG	7593	SITUS INVERSUS

Table 1: Diagnosis codes to specify Preventable Asthma Hospitalizations – based on Adult Asthma Admission Rate (PQI 15) AHRQ Quality Indicators

Preventable Hospitalization Indicators Documentation

Adult Diabetes Preventable Hospitalization Indicator

Description:	The percentage of Adult Medicaid enrollees/members of all ages currently identified as having 1 or more preventable Diabetes Inpatient stays (See Primary Diagnosis Codes in Table 2) in the past 13 month among enrollees currently receiving services from an OMH licensed provider.
Eligible Population:	
Age:	18 years and older.
Inclusion Criteria:	Medicaid enrollee/member who has received one or more services from an OMH licensed provider in the 9 months prior to the report date.
Exclusion Criteria:	Transfers from another facility and claims with major diagnostic categories of pregnancy, childbirth, or puerperium in any diagnosis field.
Note:	The preventable hospitalization indicators are based on the Agency for Health Care Research and Quality (AHRQ) Prevention Quality Indicators (PQI), which are intended to identify population rates of hospitalizations for conditions that with adequate outpatient care should be preventable. The AHRQ PQIs are considered area measures (intended to describe the rate within a certain geographic area). The PSYCKES indicators are intended to identify those NYS Medicaid members/enrollees who may benefit from better coordinated care in the community. More information regarding the AHRQ PQIs can be found at the AHRQ Quality Indicators Website [↗] .

Preventable Hospitalization Indicators Documentation

Adult Diabetes Preventable Hospitalization Indicator			
Numerator:			
All non-maternal/non-neonatal discharges of age 18 years and older with ICD-9-CM principal diagnosis code for short-term complications (ketoacidosis, hyperosmolarity, coma) or with ICD-9-CM principal diagnosis code for long-term complications (renal, eye, neurological, circulatory, or complications not otherwise specified) or uncontrolled diabetes (see below).			
Diabetes Short-term Complications ICD-9-CM diagnosis codes:			
25010	DM KETO T2, DM CONT	25022	DM W/ HYPROSM T2, DM UNCNT
25011	DM KETO T1, DM CONT	25023	DM W/ HYPROSM T1, DM UNCNT
25012	DM KETO T2, DM UNCONT	25030	DM COMA NEC TYP II, DM CNT
25013	DM KETO T1, DM UNCONT	25031	DM COMA NEC T1, DM CONT
25020	DM W/ HYPROSM T2, DM CONT	25032	DM COMA NEC T2, DM UNCONT
25021	DM W/ HYPROSM T1, DM CONT	25033	DM COMA NEC T1, DM UNCONT
Diabetes Long-term Complications ICD-9-CM diagnosis codes:			
25040	DM RENAL COMP T2 CONT	25070	DM CIRCU DIS T2 CONT
25041	DM RENAL COMP T1 CONT	25071	DM CIRCU DIS T1 CONT
25042	DM RENAL COMP T2 UNCNT	25072	DM CIRCU DIS T2 UNCNT
25043	DM RENAL COMP T1 UNCNT	25073	DM CIRCU DIS T1 UNCNT
25050	DM EYE COMP T2 CONT	25080	DM W COMP NEC T2 CONT
25051	DM EYE COMP T1 CONT	25081	DM W COMP NEC T1 CONT
25052	DM EYE COMP T2 UNCNT	25082	DM W COMP NEC T2 UNCNT
25053	DM EYE COMP T1 UNCNT	25083	DM W COMP NEC T1 UNCNT
25060	DM NEURO COMP T2 CONT	25090	DM W COMPL NOS T2 CONT
25061	DM NEURO COMP T1 CONT	25091	DM W COMPL NOS T1 CONT
25062	DM NEURO COMP T2 UNCNT	25092	DM W COMPL NOS T2 UNCNT
25063	DM NEURO COMP T1 UNCNT	25093	DM W COMPL NOS T1 UNCNT
Uncontrolled Diabetes ICD-9-CM diagnosis codes:			
25002	DM, T2, UNCONT		
25003	DM, T1, UNCONT		
Exclude cases:			
<ul style="list-style-type: none"> • transferring from another institution (ADMISSION_SOURCE_CD_E0138 Not In ('4','5','6')) • MDC 14 (pregnancy, childbirth, and puerperium) • MDC 15 (newborn and other neonates) 			

Table 2: Diagnosis codes to specify Preventable Diabetes Hospitalizations – based on AHRQ Indicators: Diabetes Short-term Complications Admission Rate (PQI 1), Diabetes Long-term Complications Admission Rate (PQI 2), Uncontrolled Diabetes Admission Rate (PQI 14)

Adult Dehydration Preventable Hospitalization Indicator

- Description:** The percentage of Adult Medicaid enrollees/members of all ages currently identified as having 1 or more Inpatient stays due to dehydration in the past 13 month among enrollees currently receiving services from an OMH licensed provider.
- Eligible Population:**
- Age:** 18 years and older.
- Inclusion Criteria:** Medicaid enrollee/member who has received one or more services from an OMH licensed provider in the 9 months prior to the report date.
- Exclusion Criteria:** Transfers from another facility and claims with major diagnostic categories of pregnancy, childbirth, or puerperium in any diagnosis field.
- Note:** The preventable hospitalization indicators are based on the Agency for Health Care Research and Quality (AHRQ) Prevention Quality Indicators (PQI), which are intended to identify population rates of hospitalizations for conditions that with adequate outpatient care should be preventable. The AHRQ PQIs are considered area measures (intended to describe the rate within a certain geographic area). The PSYCKES indicators are intended to identify those NYS Medicaid members/enrollees who may benefit from better coordinated care in the community. More information regarding the AHRQ PQIs can be found at the [AHRQ Quality Indicators Website](#) [↗].

Adult Dehydration Preventable Hospitalization	
Numerator:	
All non-maternal discharges of age 18 years and older with ICD-9-CM principal diagnosis code for hypovolemia.	
Dehydration Admission ICD-9-CM diagnosis codes:	
27650 VOL DEPLETION, UNSPECIFIED OCT06-	27652 HYPOVOLEMIA OCT06-
27651 DEHYDRATION OCT06-	2765 HYPOVOLEMIA
Exclude cases:	
<ul style="list-style-type: none">transferring from another institution (ADMISSION_SOURCE_CD_E0138 Not In ('4','5','6'))MDC 14 (pregnancy, childbirth, and puerperium)MDC 15 (newborn and other neonates)	

Table 3: Diagnosis codes to specify Preventable Dehydration Hospitalizations – based on Adult Based on Dehydration Admission Rate (PQI 10)

Production SAS/SQL syntax available upon request.