Chapter 15. Supplemental Measures

15.1. Access to Care Measures

15.1.1. Getting Appointments for Care

Measure ID

NCBD_1, 150101011

Measure Title

Adults who had an appointment for routine health in the last 6 months who sometimes or never got an appointment for routine care as soon as wanted, Medicaid

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had an appointment for routine health care in the last 6 months, Medicaid

Numerator:

Subset of the Denominator who indicated that they sometimes or never got an appointment for routine care as soon as wanted

Measure ID

NCBD_1, 150101012

Measure Title

Adults who had an appointment for routine health care in the last 12 months who sometimes or never got an appointment for routine care as soon as wanted, Medicare Managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had an appointment for routine health care in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator who indicated that they sometimes or never got an appointment for routine care as soon as wanted

Measure ID

NCBD_1, 150101013

Measure Title

Adults who had an appointment for routine health care in the last 12 months who sometimes or never got an appointment for routine care as soon as wanted, Medicare fee-for-service

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had an appointment for routine health care in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator who indicated that they sometimes or never got an appointment for routine care as soon as wanted

Measure ID

NCBD_2, 150101021

Measure Title

Children who had an appointment for routine health care in last 6 months who sometimes or never got an appointment for routine care as soon as wanted, Medicaid

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had an appointment for routine health care in the last 6 months, Medicaid

Numerator

Subset of the Denominator indicated that they sometimes or never got appointments for routine care as soon as wanted

Measure ID

NCBD_3, 150101031

Measure Title

Adults who needed care right away for an illness, injury, or condition in the last 6 months who sometimes or never got care as soon as wanted, Medicaid

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who needed care right away for an illness, injury, or condition in the last 6 months, Medicaid

Numerator

Subset of the Denominator who sometimes or never got care as soon as wanted

Measure ID

NCBD_3, 150101032

Measure Title

Adults who needed care right away for an illness, injury, or condition in the last 12 months who sometimes or never got care as soon as wanted, Medicare managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who needed care right away for an illness, injury, or condition in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator who sometimes or never got care as soon as wanted

Measure ID

NCBD_3, 150101033

Measure Title

Adults who needed care right away for an illness, injury, or condition in the last 12 months who sometimes or never got care as soon as wanted, Medicare fee-for-service

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who needed care right away for an illness, injury, or condition in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator who sometimes or never got care as soon as wanted

15.1.2. Waiting Time

Measure ID

NHAMCS_17, 150102011

Measure Title

Emergency department visits triaged as immediate or emergent at which patients waited to see a physician for one hour or more, United States

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Hospital Ambulatory Medical Care Survey (NHAMCS)

Geographic Representation: National

Years Available: 2006-2007 to 2013-2014

Population Subgroups: Age, sex, race/ethnicity, geographic location (residence)

Data Source

CDC, NCHS, NHAMCS

Denominator

Number of visits to emergency departments where the patient disposition status was triaged as immediate or emergent.

Numerator

Number of visits for which patients waited to see a physician for one hour or more among the population represented by the Denominator.

Measure ID

NHAMCS_18, 150102012

Measure Title

Emergency department visits triaged as urgent at which patients waited to see a physician for one hour or more, United States

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Hospital Ambulatory Medical Care Survey (NHAMCS)

Geographic Representation: National

Years Available: 2006-2007 to 2013-2014

Population Subgroups: Age, sex, race/ethnicity, geographic location (residence)

Data Source

CDC, NCHS, NHAMCS

Denominator

Number of visits to emergency departments where the patient disposition status was triaged as urgent.

Numerator

Number of visits for which patients waited to see a physician for one hour or more among the population represented by the Denominator.

Measure ID

NHAMCS_10, 150102013

Measure Title

Emergency department visits where the patient was transferred or admitted to the hospital and length of visit was six hours or more per 10,000 population.

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Hospital Ambulatory Medical Care Survey (NHAMCS).

Table Description

Geographic Representation: National

Years Available: 2006 -2007 to 2013 - 2014

Population Subgroups: age, sex, race/ethnicity, location (hospital), insurance

Data Source

CDC, NCHS, NHAMCS

Denominator

Number of visits to emergency departments where the patient disposition status was listed as transferred or admitted.

Numerator

Number of visits for which the length of visit was six hours or more among the population represented by the Denominator.

15.1.3. Workforce Diversity

Measure ID

150103021

Measure Title

Physicians and surgeons per 100,000 population

Measure Source

U.S. Census, American Community Survey.

Table Description

Geographic Representation: National, State

Years Available: 2007-2015

Population Subgroups: Race/ethnicity, region, and division

Data Source

U.S. Census, American Community Survey.

Denominator

U.S. population

Numerator

Number of physicians and/or surgeons as indicated by the occupation code of either OCCP or SOCP

Measure ID

150103031

Measure Title

Dentists per 100,000 population

Measure Source

U.S. Census, American Community Survey.

Table Description

Geographic Representation: National, State

Years Available: 2007-2015

Population Subgroups: Race/ethnicity, region, and division

Data Source

U.S. Census, American Community Survey.

Denominator

U.S. population

Numerator

Number of dentists as indicated by the occupation code of either OCCP or SOCP.

Measure ID

150103041

Measure Title

Registered nurses per 100,000 population

Measure Source

U.S. Census, American Community Survey.

Table Description

Geographic Representation: National, State

Years Available: 2007-2015

Population Subgroups: Race/ethnicity, region, and division

Data Source

U.S. Census, American Community Survey.

Denominator

U.S. population

Numerator

Number of registered nurses as indicated by the occupation code of either OCCP or SOCP.

Measure ID

150103051

Measure Title

Pharmacists per 100,000 population

Measure Source

U.S. Census, American Community Survey.

Table Description

Geographic Representation: National, State

Years Available: 2007-2015

Population Subgroups: Race/ethnicity, region, and division

Data Source

U.S. Census, American Community Survey.

Denominator

U.S. population

Numerator

Number of pharmacists as indicated by the occupation code of either OCCP or SOCP.

15.1.4. Focus on the Health Care Safety Net

Measure ID

HCUP_47, 150104011

Measure Title

Percent of hospital discharges where expected payer is Medicaid or uninsured

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP).

Table Description

Geographic Representation: National

Years Available: 2012-2015

Population Subgroups: bed size (hospital), geographic location (hospital), ownership of hospital, region, teaching status of hospital

Data Source

National: AHRQ, CDOM, HCUP, National Inpatient Sample (NIS)

Denominator

All discharges in community hospitals in the U.S., excluding rehabilitation and long-term, acute care hospitals

Numerator

Subset of the Denominator with an expected primary payer of Medicaid or uninsured (including self-pay, charity, and no charge).

Comments

The HCUP National Inpatient Sample (NIS) is sampled from the State Inpatient Databases (SID), which include all inpatient data that are currently contributed to HCUP. Starting with data year 2012, the design of the NIS was changed from a sample of hospitals to a sample of discharges to improve national estimates. The NIS is drawn from all States participating in HCUP, covering more than 96 percent of the U.S. population. The NIS approximates a 20-percent stratified sample of discharges from U.S. community hospitals, excluding rehabilitation and long-term acute care hospitals. The new NIS retains a large sample size, which enables analyses of rare conditions, uncommon treatments, and special patient populations.

For more information, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_48, 150104012

Measure Title

Percent of hospital costs where expected payer is Medicaid or uninsured

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP).

Table Description

Geographic Representation: National

Years Available: 2012-2015

Population Subgroups: Age, gender, race/ethnicity, expected primary payer, median household income of the patient's ZIP Code, urbanized location, region of the United States, bed size of hospital, teaching status of hospital

Data Source

National: AHRQ, CDOM, HCUP, National Inpatient Sample (NIS)

Denominator

Total hospital costs for all discharges in community hospitals in the U.S., excluding rehabilitation and long-term, acute care hospitals

Numerator

Subset of the Denominator with an expected primary payer of Medicaid or uninsured (including self-pay, charity, and no charge).

Comments

The HCUP National Inpatient Sample (NIS) is sampled from the State Inpatient Databases (SID), which include all inpatient data that are currently contributed to HCUP. Starting with data year 2012, the design of the NIS was changed from a sample of hospitals to a sample of discharges to improve national estimates. The NIS is drawn from all States participating in HCUP, covering more than 96 percent of the U.S. population. The NIS approximates a 20-percent stratified sample of discharges from U.S. community hospitals, excluding rehabilitation

and long-term acute care hospitals. The new NIS retains a large sample size, which enables analyses of rare conditions, uncommon treatments, and special patient populations.

Total hospital charges were converted to costs using HCUP Cost-to-Charge Ratios based on hospital accounting reports from the Centers for Medicare & Medicaid Services (CMS). Costs reflect the actual expenses incurred in the production of hospital services, such as wages, supplies, and utility costs; charges represent the amount a hospital billed for the case. For each hospital, a hospital-wide cost-to-charge ratio is used. Hospital charges reflect the amount the hospital billed for the entire hospital stay and do not include professional (physician) fees.

For more information, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

MEPS_42, 150104019

Measure Title

People under age 65 with any period of public insurance during the year

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Financing, Access, and Cost Trends (CFACT), Medical Expenditure Panel Survey (MEPS)

Table Description

Geographic Representation: National

Years Available: 2002-2015

Population Subgroups: Age, gender, race, ethnicity, family income, education, employment status, health insurance, Medicaid/CHIP, residence location, language spoken at home, perceived health status, activity limitations, number of chronic conditions, U.S. born.

Data Source

AHRQ, CFACT, MEPS

Denominator

U.S. civilian noninstitutionalized population under age 65

Numerator

Subset of the Denominator who reported they had public health insurance coverage some time during the year

Comments

Public insurance includes Medicare, Medicaid, and other public programs that provide hospital and/or physician coverage.

15.1.7. Patient Perceptions of Need

Measure ID

NCBD_5, 150107012

Measure Title

Adults who needed to see a specialist in the last 12 months who sometimes or never found it easy to see a specialist Medicare managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who needed to see a specialist in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator who sometimes or never found it easy to see a specialist

Measure ID

NCBD_5, 150107013

Measure Title

Adults who needed to see a specialist in the last 12 months who sometimes or never found it easy to see a specialist, Medicare fee-for-service

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who needed to see a specialist in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator who sometimes or never found it easy to see a specialist

Measure ID

NCBD_5, 150107017

Measure Title

Adults who needed to see a specialist in the last 6 months who sometimes or never found it easy to see a specialist, Medicaid

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who needed to see a specialist in the last 6 months, Medicaid

Numerator

Subset of the Denominator who sometimes or never found it easy to see a specialist

Measure ID

NCBD_6, 150107018

Measure Title

Children who needed to see a specialist in the last 6 months who sometimes or never found it easy to see a specialist

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2014-2016

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who needed to see a specialist in the last 6 months, Medicaid

Numerator

Subset of the Denominator who sometimes or never found it easy to see a specialist

Measure ID

NCBD_21, 150107051

Measure Title

Adults who had a doctor's office or clinic visit in the last 6 months and needed care, tests, or treatment who sometimes or never found it easy to get the care, tests, or treatment

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2011, 2014-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 6 months and needed care, tests, or treatment, Medicaid

Numerator

Subset of the Denominator who sometimes or never found it easy to get the care, tests, or treatment.

Comment

This measure is new from the 2017 NHQDR report.

Measure ID

NCBD_21, 150107052

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months and needed care, tests, or treatment who sometimes or never found it easy to get the care, tests, or treatment, Medicare managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2011, 2013-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months and needed care, tests, or treatment, Medicare managed care

Numerator

Subset of the Denominator who sometimes or never found it easy to get the care, tests, or treatment.

Comment

This measure is new from the 2017 NHQDR report.

Measure ID

NCBD_21, 150107053

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months and needed care, tests, or treatment who sometimes or never found it easy to get the care, tests, or treatment, Medicare fee-for-service

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2011, 2013-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months and needed care, tests, or treatment, Medicare fee-for-service

Numerator

Subset of the Denominator who sometimes or never found it easy to get the care, tests, or treatment.

Comment

This measure is new from the 2017 NHQDR report.

Measure ID

NCBD_22, 150107061

Measure Title

Children who had a doctor's office or clinic visit in the last 6 months and needed care, tests, or treatment who sometimes or never found it easy to get the care, tests, or treatment

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 6 months and needed care, tests, or treatment, Medicaid

Numerator

Subset of the Denominator who sometimes or never found it easy to get the care, tests, or treatment

Comment

This measure is new from the 2017 NHQDR report.

15.3. Person-Centered Care

15.3.1. Patient Experience of Care

Measure ID

NCBD_7, 150301012

Measure Title

Composite measure: Adults who had a doctor's office or clinic visit whose health providers sometimes or never listened carefully, explained things clearly, respected what they had to say, and spent enough time with them

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

State: AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator whose health providers sometimes or never listened carefully, explained things clearly, respected what they had to say, or spent enough time with them

Measure ID

NCBD_7, 150301013

Measure Title

Composite measure: Adults who had a doctor's office or clinic visit in the last 12 months whose health providers sometimes or never listened carefully, explained things clearly, respected what they had to say, and spent enough time with them

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

State: AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator whose health providers sometimes or never listened carefully, explained things clearly, respected what they had to say, or spent enough time with them

Measure ID

NCBD_7, 150301015

Measure Title

Composite measure: Adults who had a doctor's office or clinic visit in the last 6 months whose health providers sometimes or never listened carefully, explained things clearly, respected what they had to say, and spent enough time with them

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, education

Data Source

State: AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose health providers sometimes or never listened carefully, explained things clearly, respected what they had to say, or spent enough time with them

Measure ID

MEPS_21, 150301021

Measure Title

Children who had a doctor's office or clinic visit in the last 12 months whose health providers always listened carefully, explained things clearly, respected what they or their parents had to say, and spent enough time with them

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Financing, Access, and Cost Trends (CFACT), Medical Expenditure Panel Survey (MEPS)

Table Description

Geographic Representation: National

Years Available: 2002 to 2015

Population Subgroups: Age, gender, ethnicity, family income, health insurance, perceived health status, language spoken at home, Medicaid/CHIP, race, residence location, CSHCN(children with special health care needs), U.S. born

Data Source

National: AHRQ, CFACT, MEPS

Denominator

U.S. civilian noninstitutionalized children under age 18 who visited a doctor's office or clinic to get health care in the past 12 months, excluding those with missing or invalid responses to all of the questions that make up this composite measure

Numerator

Subset of the Denominator whose parents or guardians responded "Always" to any of the four questions making up this composite measure

Comments

Estimates are weighted and adjusted for nonresponse based on the number of questions (out of four) with a valid response.

Before 2017, NHQDR used "Sometimes or never" estimates.

Measure ID

NCBD_8, 150301022

Measure Title

Composite measure: Children who had a doctor's office or clinic visit in the last 12 months whose health providers always listened carefully, explained things clearly, respected what they or their parents had to say, and spent enough time with them

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010, 2014-2016

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 12 months

Numerator

Subset of the Denominator whose health providers always listened carefully, explained things clearly, respected what they or their parents had to say, or spent enough time with them

Measure ID

NCBD_9, 150301032

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months whose health providers sometimes or never listened carefully to them, Medicare managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator whose health providers sometimes or never listened carefully to them

Measure ID

NCBD_9, 150301033

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months whose health providers sometimes or never listened carefully to them, Medicare fee-for-service

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator whose health providers sometimes or never listened carefully to them

Measure ID

NCBD_9, 150301035

Measure Title

Adults who had a doctor's office or clinic visit in the last 6 months whose health providers sometimes or never listened carefully to them

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose health providers sometimes or never listened carefully to them

Measure ID

MEPS_21, 150301041

Measure Title

Children who had a doctor's office or clinic visit in the last 12 months whose health providers always listened carefully

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Financing, Access, and Cost Trends (CFACT), Medical Expenditure Panel Survey (MEPS)

Table Description

Geographic Representation: National

Years Available: 2002 to 2015

Population Subgroups: Age, gender, ethnicity, family income, health insurance, perceived health status, language spoken at home, Medicaid/CHIP, race, residence location, CSHCN(children with special health care needs), U.S. born

Data Source

National: AHRQ, CFACT, MEPS

Denominator

U.S. civilian noninstitutionalized children under age 18 who visited a doctor's office or clinic to get health care in the past 12 months, and had a valid response to the question, "In the last 12 months how often did doctors or other health providers listen carefully to you or your parents?"

Numerator

Subset of the Denominator whose parents or guardians responded "Always" to any of the above question.

Comments

Nonrespondents and respondents indicating "Don't Know" were excluded.

Measure ID

NCBD_10, 150301042

Measure Title

Children who had a doctor's office or clinic visit in the last 6 months whose health providers always listened carefully

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010, 2014-2016

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose health providers always listened carefully

Measure ID

NCBD_11, 150301052

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months whose doctor sometimes or never explained things in a way they could understand, Medicare managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator whose doctor sometimes or never explained things in a way they could understand

Measure ID

NCBD_11, 150301053

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months whose doctor sometimes or never explained things in a way they could understand, Medicare fee-for-service

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator whose doctor sometimes or never explained things in a way they could understand

Measure ID

NCBD_11, 150301055

Measure Title

Adults who had a doctor's office or clinic visit in the last 6 months whose doctor sometimes or never explained things in a way they could understand, Medicaid

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose doctor sometimes or never explained things in a way they could understand

Measure ID

MEPS_25, 150301061

Measure Title

Children who had a doctor's office or clinic visit in the last 12 months whose health providers always explained things in a way they or their parents could understand

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Financing, Access, and Cost Trends (CFACT), Medical Expenditure Panel Survey (MEPS)

Table Description

Geographic Representation: National

Years Available: 2002 to 2015

Population Subgroups: Age, gender ,race, ethnicity, family income, health insurance, Medicaid/CHIP, residence location, Language spoken at home, Perceived health status, CSHCN (children with special health care needs), U.S. born

Data Source

National: AHRQ, CFACT, MEPS

Denominator

U.S. civilian noninstitutionalized children under age 18 who had a doctor's office or clinic visit in the last 12 months whose parents or guardians provided a valid response to the question, "In the last 12 months how often did [the person's] doctors or other health providers explain things in a way you could understand?"

Numerator

Subset of the Denominator whose parent or guardian responded "Always" to the above question

Comments

Nonrespondents and respondents indicating "Don't Know" were excluded.

Before 2017, NHQDR used "Sometimes or never" estimates.

Measure ID

NCBD_12, 150301062

Measure Title

Children who had a doctor's office or clinic visit in the last 6 months whose

health providers always explained things clearly to their parents

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010, 2014-2016

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose health providers always explained things clearly to their parents

Measure ID

NCBD_13, 150301063

Measure Title

Children who had a doctor's office or clinic visit in the last 6 months whose health providers always explained things clearly to the child

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010, 2014-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose health providers always explained things clearly to the child

Measure ID

NCBD_14, 150301072

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months whose health providers sometimes or never showed respect for what they had to say, Medicare managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator whose health providers sometimes or never showed respect for what they had to say

Measure ID

NCBD_14, 150301073Measure

Title

Adults who had a doctor's office or clinic visit in the last 12 months whose health providers sometimes or never showed respect for what they had to say, Medicare fee-for-service

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator whose health providers sometimes or never showed respect for what they had to say

Measure ID

NCBD_14, 150301075

Measure Title

Adults who had a doctor's office or clinic visit in the last 6 months whose health providers sometimes or never showed respect for what they had to say, Medicaid

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose health providers sometimes or never showed respect for what they had to say

Measure ID

MEPS_27, 150301081

Measure Title

Children who had a doctor's office or clinic visit in the last 12 months whose health providers always showed respect for what they or their parents had to say

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Financing, Access, and Cost Trends (CFACT), Medical Expenditure Panel Survey (MEPS)

Table Description

Geographic Representation: National

Years Available: 2002 - 2015

Population Subgroups: Age, gender ,race, ethnicity, family income, health insurance, Medicaid/CHIP, residence location, Language spoken at home, Perceived health status, CSHCN(children with special health care needs), U.S. born

Data Source

AHRQ, CFACT, MEPS

Denominator

Children under age 18 who had a doctor's office or clinic visit in the last 12 months and whose parent or guardian provided a valid response to the question, "In the last 12 months how often did doctors or other health providers show respect for what you had to say?"

Numerator

Subset of the Denominator whose parent or guardian responded "Always" to the above question

Comments

Nonrespondents and respondents indicating "Don't Know" were excluded.

Measure ID

NCBD_15, 150301082

Measure Title

Children who had a doctor's office or clinic visit whose health providers always showed respect for what they or their parents had to say

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010, 2014-2016

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose health providers always showed respect for what they or their parents had to say

Measure ID

NCBD_16, 150301092

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months whose health providers sometimes or never spent enough time with them, Medicare managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator whose health providers sometimes or never spent enough time with them

Measure ID

NCBD_16, 150301093

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months whose health providers sometimes or never spent enough time with them

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator whose health providers sometimes or never spent enough time with them

Measure ID

NCBD_16, 150301095

Measure Title

Adults who had a doctor's office or clinic visit in the last 6 months whose health providers sometimes or never spent enough time with them, Medicaid

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose health providers sometimes or never spent enough time with them

Measure ID

MEPS_29, 150301101

Measure Title

Children who had a doctor's office or clinic visit in the last 12 months whose health providers always spent enough time with them

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Financing, Access, and Cost Trends (CFACT), Medical Expenditure Panel Survey (MEPS)

Table Description

Geographic Representation: National

Years Available: 2002 to 2015

Population Subgroups: Age, gender ,race, ethnicity, family income, health insurance, Medicaid/CHIP, residence location, Language spoken at home, Perceived health status, CSHCN(children with special health care needs), U.S. born

Data Source

National: AHRQ, CFACT, MEPS

Denominator

U.S. civilian noninstitutionalized children under age 18 who visited a doctor's office or clinic to get health care in the past 12 months and whose parent or guardian provided a valid response to the question, "In the last 12 months how often did doctors or other health providers spend enough time with you?"

Numerator

Subset of the Denominator who responded "Always" to the above question

Comments

Nonrespondents and respondents indicating "Don't Know" were excluded.

Before 2017, NHQDR used "Sometimes or never" estimates.

Measure ID

NCBD_17, 150301102

Measure Title

Children who had a doctor's office or clinic visit whose health providers always spent enough time with them

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: State

Years Available: 2010, 2014-2016

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose health providers always spent enough time with them

Measure ID

NCBD_18, 150301112

Measure Title

Rating of health care 0-6 on a scale from 0 to 10 (best grade) by adults who had a doctor's office or clinic visit in the last 12 months, Medicare managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator whose parents gave a rating of health care 0-6 on a scale from 0 to 10 (best grade)

Measure ID

NCBD_18, 150301113

Measure Title

Rating of health care 0-6 on a scale from 0 to 10 (best grade) by adults who had a doctor's office or clinic visit in the last 12 months, Medicare fee-for-service

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator whose parents gave a rating of health care 0-6 on a scale from 0 to 10 (best grade)

Measure ID

NCBD_18, 150301115

Measure Title

Rating of health care 0-6 on a scale from 0 to 10 (best grade) by adults who had a doctor's office or clinic visit in the last 6 months, Medicaid

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients under age 18 who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator whose parents gave a rating of health care 0-6 on a scale from 0 to 10 (best grade)

Measure ID

HCAHPS_1, 150301191

Measure Title

Adult hospital patients who always had good communication with doctors in the hospital

Measure Source

Centers for Medicare & Medicaid Services, Hospital Consumer Assessment of Healthcare Providers and Systems.

Table Description

Geographic Representation: National, State

Years Available: 2009-2016

Population Subgroups: Age, ethnicity, race, education, language spoken at home

Data Source

CMS, HCAHPS

Denominator

Adult hospital patients

Numerator

Subset of the Denominator who reported that they always had good communication with doctors in the hospital

Comments

The measure flipped from "Sometimes or never" to "Always" from 2017 NHQDR report.

Measure ID

HCAHPS_2, 150301201

Measure Title

Adult hospital patients who always had good communication with nurses in the hospital

Measure Source

Centers for Medicare & Medicaid Services, Hospital Consumer Assessment of Healthcare Providers and Systems.

Table Description

Geographic Representation: National, State

Years Available: 2009-2016

Population Subgroups: Age, ethnicity, race, education, language spoken at home

Data Source

CMS, HCAHPS

Denominator

Adult hospital patients

Numerator

Subset of the Denominator who reported that they always had good communication with nurses in the hospital

Comments

The measure flipped from "Sometimes or never" to "Always" from 2017 NHQDR report.

Measure ID

HCAHPS_6, 150301211

Measure Title

Adult hospital patients who strongly agree or agree that they understood how to manage their health after discharge

Measure Source

Centers for Medicare & Medicaid Services, Hospital Consumer Assessment of Healthcare Providers and Systems.

Table Description

Geographic Representation: National, State

Years Available: 2014-2016

Population Subgroups: Age, ethnicity, race, education, language spoken at home

Data Source

CMS, HCAHPS

Denominator

Adult hospital patients

Numerator

Subset of the Denominator who strongly agree or agree that they understood how to manage their health after discharge

Comments

The measure flipped from "Strongly disagree or disagree" to "Strongly agree or agree" from 2017 NHQDR report.

Measure ID

HCAHPS_7, 150301221

Measure Title

Adult hospital patients who strongly agree or agree that they understood the purpose for taking each of their medications after discharge

Measure Source

Centers for Medicare & Medicaid Services, Hospital Consumer Assessment of Healthcare Providers and Systems.

Table Description

Geographic Representation: National, State

Years Available: 2014-2016

Population Subgroups: Age, ethnicity, race, education, language spoken at home

Data Source

CMS, HCAHPS

Denominator

Adult hospital patients

Numerator

Subset of the Denominator who strongly agree or agree that they understood the purpose for taking each of their medications after discharge.

Comments

The measure flipped from "Strongly disagree or disagree" to "Strongly agree or agree" from 2017 NHQDR report.

15.4. Care Coordination

15.4.1. Medication Information

Measure ID

AHA_32, 150401061

Measure Title

Hospitals that electronically exchange patient data with ambulatory providers inside of their system

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 – 2016; National, 2011 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

National & State: AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital electronically exchange/share medication history with ambulatory providers inside of your system?"

Numerator

Subset of the Denominator that responded positively to the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_36, 150401071

Measure Title

Hospitals that electronically exchange patient data with ambulatory providers outside of their system

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 – 2016; National, 2009 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

National & State: AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital electronically exchange/share medication history with ambulatory providers outside of your system?"

Numerator

Subset of the Denominator that responded positively to the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures

Measure ID

AHA_31, 150401081

Measure Title

Hospitals that electronically exchange patient data with hospitals inside of their system

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 – 2016; National, 2009 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

National & State: AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital electronically exchange/share medication history with hospitals inside of your system?"

Numerator

Subset of the Denominator that responded positively to both the question of exchanging/sharing patient data and the ED notification of patient's primary care physician parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_30, 150401082

Measure Title

Hospitals that electronically exchange patient data with hospitals outside of their system

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 – 2016; National, 2009 -2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

National & State: AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital electronically exchange/share medication history with hospitals outside of your system?"

Numerator

Subset of the Denominator that responded positively to both the question of exchanging/sharing patient data and the ED notification of patient's primary care physician the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

15.4.2. Preventable Emergency Department Visits

Measure ID

150402011

Measure Title

Emergency department visit per 100,000 population

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP)

Table Description

Geographic Representation: National

Years Available: 2006 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Emergency Department Sample and AHRQ Quality Indicators, version of 4.4.

Denominator

U.S. resident population

Numerator

Total number of emergency department visits

Measure ID

HCUP_57, 150402021

Measure Title

Emergency department visits with a diagnosis related to mental health, alcohol, or substance abuse, per 100,000 population

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP)

Table Description

Geographic Representation: National

Years Available: 2007-2015

Population Subgroups: Age, gender, geographic location (residence), ~~M~~median income of patient's ZIP Code, region

Data Source

AHRQ, CDOM, HCUP, Nationwide Emergency Department Sample

Denominator

U.S. resident population age 18 and over

Numerator

Emergency department visits in the U.S. with a principal diagnosis in one of the following AHRQ Clinical Classification Software (CCS) categories for mental health and substance abuse:

Mental health CCS

- CCS 650, Adjustment disorders
- CCS 651, Anxiety disorders
- CCS 652, Attention-deficit, conduct, and disruptive behavior disorders
- CCS 655, Disorders usually diagnosed in infancy, childhood, or adolescence
- CCS 656, Impulse control disorders, NEC
- CCS 657, Mood disorders
- CCS 658, Personality disorders
- CCS 659, Schizophrenia and other psychotic disorders
- CCS 662, Suicide and intentional self-inflicted injury
- CCS 670, Miscellaneous disorders

Substance abuse CCS

- CCS 660, Alcohol-related disorders
- CCS 661, Substance-related disorders

Comments

The AHRQ CCS categorizes ICD-9-CM diagnosis codes into a manageable number of clinically meaningful categories. This clinical grouper makes it easier to quickly understand patterns of diagnoses.

The HCUP Nationwide Emergency Department Sample (NEDS) was created to enable analyses of emergency department (ED) utilization patterns and is the largest all-payer ED database that is publicly available in the United States. The NEDS is a 20-percent stratified sample of hospital-owned EDs in the United States. The NEDS is drawn from statewide data organizations that provide HCUP with data from ED visits that may or may not have resulted in hospital admission. Weights are provided to calculate national estimates.

For more information, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

15.4.3. Preventable Hospitalizations

Measure ID

HCUP_14, 150403021

Measure Title

Hospitalizations for all conditions per 100,000 population, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National, State

Years Available: National - 2005 - 2015; State - 2011-2015

Population Subgroups: Age, gender, median household income of the patient's ZIP Code, urbanized location, and region of the United States

Data Sources

National: AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS), State Inpatient Databases (SID) weighted to provide national estimates using the same methodology as the NIS prior to 2012, and AHRQ Quality Indicators, modified version 4.4

State: AHRQ, CDOM, HCUP, State Inpatient Databases (SID) and AHRQ Quality Indicators, modified version 4.4

Denominator

U.S. resident population age 18 and over

Numerator

Hospital admissions in the Denominator who qualified to be in the Numerator for any of the following PQI measures:

- PQI 1: Diabetes, short-term complications
- PQI 3: Diabetes, long-term complications
- PQI 5: Chronic obstructive pulmonary disease or asthma
- PQI 7: Hypertension
- PQI 8: Congestive heart failure
- PQI 10: Dehydration

- PQI 11: Bacterial pneumonia
- PQI 12: Urinary tract infections
- PQI 13: Angina without procedure
- PQI 14: Uncontrolled diabetes
- PQI 15: Asthma in younger adults
- PQI 16: Lower extremity amputations among patients with diabetes

Comments

This measure is based on the 12 AHRQ PQIs for angina, asthma, bacterial pneumonia, chronic obstructive pulmonary disease, congestive heart failure, dehydration, diabetes, hypertension, and urinary tract infection. Rates prior to 2005 are not reported because of International Classification of Diseases, Ninth Revision, coding changes for PQI 5 for chronic obstructive pulmonary disease.

Rates are adjusted by age and gender using the total U.S. resident population for 2010 as the standard population.

The HCUP State Inpatient Databases (SID) include a powerful set of hospital databases from HCUP Partner organizations in 47 States and the District of Columbia. Together, the SID encompasses about 97 percent of all U.S. community hospital discharges. SID contains a core set of clinical and nonclinical information on all patients, regardless of payer, including people covered by Medicare, Medicaid, and private insurance, as well as uninsured people. In addition to the core set of uniform data elements common to all SID, some databases within SID include other elements, such as the patient's race. The SID are used to create the HCUP National (Nationwide) Inpatient Sample.

For national QI estimates prior to 2012, the HCUP Nationwide Inpatient Sample (NIS) was used to calculate national QI estimates for all level of reporting except by race/ethnicity. The NIS was not used for reporting QI estimates by race/ethnicity because the availability of race/ethnicity information varied across States and hospitals within States. In addition, the 20 percent sample of the hospitals in the NIS did not provide enough statistical power to detect differences in QI estimates between whites and the other specific racial groups. To facilitate analyses by race/ethnicity, a separate nationally weighted analysis file was constructed from the SID and hospitals with good reporting of race/ethnicity using a sampling and weighting strategy similar to the NIS.

For national QI estimates for data years 2012 forward, the HCUP National Inpatient Sample (NIS) was not used because the database had been redesigned into a sample of discharges (instead of hospitals) with a revised definition for the target universe that excluded acute long-term care facilities. For consistent QI estimates before and after data year 2012, nationally weighted analysis files were constructed from the SID using a sampling and weighting strategy similar to the 2000-2011 NIS. In 2012, two analysis files were constructed, one for national estimates not reported by race/ethnicity and a second for reporting by race/ethnicity. In 2013 and 2014, only one nationally weighted analysis file was created.

For more information on the sampling approach and included States by data year, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_49, 150403031

Measure Title

Hospitalizations for all conditions, excluding COPD, per 100,000 population, age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs).

Table Description

Geographic Representation: National

Years Available: 2000-2015

Population Subgroups: Age, gender, race/ethnicity, expected primary payer, median household income of the patient's ZIP Code, urbanized location, region of the United States, bed size of hospital, teaching status of hospital

Data Source

National: AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS), State Inpatient Databases (SID) weighted to provide national estimates using the same methodology as the NIS prior to 2012, and AHRQ Quality Indicators, modified version 4.4

Denominator

U.S. resident population age 18 and over

Numerator

Hospital admissions of adults which qualified to be in the Numerator for any of the following PQI measures:

- PQI 1: Diabetes, short-term complications
- PQI 3: Diabetes, long-term complications
- PQI 7: Hypertension
- PQI 8: Congestive heart failure
- PQI 10: Dehydration
- PQI 11: Bacterial pneumonia
- PQI 12: Urinary tract infections
- PQI 13: Angina without procedure
- PQI 14: Uncontrolled diabetes

- PQI 15: Asthma in younger adults
- PQI 16: Lower extremity amputations among patients with diabetes

Comments

This measure is based on the 11 AHRQ PQIs for angina, asthma, bacterial pneumonia, congestive heart failure, dehydration, diabetes, hypertension, and urinary tract infection.

For consistency of longitudinal reporting, the modified overall composite does not include AHRQ PQI 5 for chronic obstructive pulmonary disease because it is affected by International Classification of Diseases, Ninth Revision coding changes.

Rates are adjusted by age and gender using the total U.S. resident population for 2010 as the standard population; when reporting is by age, the adjustment is by gender only; when reporting is by gender, the adjustment is by age only.

The HCUP State Inpatient Databases (SID) include a powerful set of hospital databases from HCUP Partner organizations in 47 States and the District of Columbia. Together, the SID encompasses about 97 percent of all U.S. community hospital discharges. SID contains a core set of clinical and nonclinical information on all patients, regardless of payer, including people covered by Medicare, Medicaid, and private insurance, as well as uninsured people. In addition to the core set of uniform data elements common to all SID, some databases within SID include other elements, such as the patient's race. The SID are used to create the HCUP National (Nationwide) Inpatient Sample.

For national QI estimates prior to 2012, the HCUP Nationwide Inpatient Sample (NIS) was used to calculate national QI estimates for all level of reporting except by race/ethnicity. The NIS was not used for reporting QI estimates by race/ethnicity because the availability of race/ethnicity information varied across States and hospitals within States. In addition, the 20 percent sample of the hospitals in the NIS did not provide enough statistical power to detect differences in QI estimates between whites and the other specific racial groups. To facilitate analyses by race/ethnicity, a separate nationally weighted analysis file was constructed from the SID and hospitals with good reporting of race/ethnicity using a sampling and weighting strategy similar to the NIS.

For national QI estimates for data years 2012 forward, the HCUP National Inpatient Sample (NIS) was not used because the database had been redesigned into a sample of discharges (instead of hospitals) with a revised definition for the target universe that excluded acute long-term care facilities. For consistent QI estimates before and after data year 2012, nationally weighted analysis files were constructed from the SID using a sampling and weighting strategy similar to the 2000-2011 NIS. In 2012, two analysis files were constructed, one for national estimates not reported by race/ethnicity and a second for reporting by race/ethnicity. In 2013 and 2014, only one nationally weighted analysis file was created.

For more information on the sampling approach and included States by data year, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_63, 150403041

Measure Title

Hospitalizations for all conditions per 100,000 population, age 6-17

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National, State

Years Available: National - 2000-2015; State - 2011-2015

Population Subgroups: Age, gender, race/ethnicity, expected primary payer, median household income of the patient's ZIP Code, urbanized location, region of the United States, bed size of hospital, teaching status of hospital

Data Source

National: AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS), State Inpatient Databases (SID) weighted to provide national estimates using the same methodology as the NIS prior to 2012, and AHRQ Quality Indicators, modified version 4.4

State: State Inpatient Databases (SID) and AHRQ Quality Indicators, modified version 4.4

Denominator

U.S. resident population of children ages 6 to 17 years

Numerator

Hospitalizations of children ages 3 months to 17 years who qualified to be in the Numerator for any of the following PDI measures:

- PDI 14: Asthma
- PDI 15: Diabetes, short-term complications
- PDI 16: Gastroenteritis
- PQI 17: Urinary tract infection

Comments

This measure is based on the 4 AHRQ PDIs for asthma, diabetes, gastroenteritis, and urinary tract infection.

Rates are adjusted by age and gender using the total U.S. resident population for 2010 as the standard population; when reporting is by age, the adjustment is by gender only; when reporting is by gender, the adjustment is by age only.

The HCUP State Inpatient Databases (SID) include a powerful set of hospital databases from HCUP Partner organizations in 47 States and the District of Columbia. Together, the SID encompasses about 97 percent of all U.S. community hospital discharges. SID contains a core set of clinical and nonclinical information on all patients, regardless of payer, including people covered by Medicare, Medicaid, and private insurance, as well as uninsured people. In addition to the core set of uniform data elements common to all SID, some databases within SID include other elements, such as the patient's race. The SID are used to create the HCUP National (Nationwide) Inpatient Sample.

For national QI estimates prior to 2012, the HCUP Nationwide Inpatient Sample (NIS) was used to calculate national QI estimates for all level of reporting except by race/ethnicity. The NIS was not used for reporting QI estimates by race/ethnicity because the availability of race/ethnicity information varied across States and hospitals within States. In addition, the 20 percent sample of the hospitals in the NIS did not provide enough statistical power to detect differences in QI estimates between whites and the other specific racial groups. To facilitate analyses by race/ethnicity, a separate nationally weighted analysis file was constructed from the SID and hospitals with good reporting of race/ethnicity using a sampling and weighting strategy similar to the NIS.

For national QI estimates for data years 2012 forward, the HCUP National Inpatient Sample (NIS) was not used because the database had been redesigned into a sample of discharges (instead of hospitals) with a revised definition for the target universe that excluded acute long-term care facilities. For consistent QI estimates before and after data year 2012, nationally weighted analysis files were constructed from the SID using a sampling and weighting strategy similar to the 2000-2011 NIS. In 2012, two analysis files were constructed, one for national estimates not reported by race/ethnicity and a second for reporting by race/ethnicity. In 2013 and 2014, only one nationally weighted analysis file was created.

For more information on the sampling approach and included States by data year, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_15, 150403051

Measure Title

Hospitalizations for acute conditions, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National, State

Years Available: National - 2000 to 2015; State - 2011-2015

Population Subgroups: Age, gender, median household income of the patient's ZIP Code, urbanized location, and region of the United States

Data Sources

National: AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS), State Inpatient Databases (SID) weighted to provide national estimates using the same methodology as the NIS prior to 2012, and AHRQ Quality Indicators, modified version 4.4

State: AHRQ, CDOM, HCUP, State Inpatient Databases (SID) and AHRQ Quality Indicators, modified version 4.4

Denominator

U.S. resident population age 18 and over

Numerator

Adults with hospitalizations who qualified for any individual PQI acute care Numerator (PQI 10, PQI 11, and PQI 12)

Comments

This measure is based on the three AHRQ PQIs for dehydration, bacterial pneumonia, and urinary tract infection.

The HCUP State Inpatient Databases (SID) include a powerful set of hospital databases from HCUP Partner organizations in 47 States and the District of Columbia. Together, the SID encompasses about 97 percent of all U.S. community hospital discharges. SID contains a core set

of clinical and nonclinical information on all patients, regardless of payer, including people covered by Medicare, Medicaid, and private insurance, as well as uninsured people. In addition to the core set of uniform data elements common to all SID, some databases within SID include other elements, such as the patient's race. The SID are used to create the HCUP National (Nationwide) Inpatient Sample.

For national QI estimates prior to 2012, the HCUP Nationwide Inpatient Sample (NIS) was used to calculate national QI estimates for all level of reporting except by race/ethnicity. The NIS was not used for reporting QI estimates by race/ethnicity because the availability of race/ethnicity information varied across States and hospitals within States. In addition, the 20 percent sample of the hospitals in the NIS did not provide enough statistical power to detect differences in QI estimates between whites and the other specific racial groups. To facilitate analyses by race/ethnicity, a separate nationally weighted analysis file was constructed from the SID and hospitals with good reporting of race/ethnicity using a sampling and weighting strategy similar to the NIS.

For national QI estimates for data years 2012 forward, the HCUP National Inpatient Sample (NIS) was not used because the database had been redesigned into a sample of discharges (instead of hospitals) with a revised definition for the target universe that excluded acute long-term care facilities. For consistent QI estimates before and after data year 2012, nationally weighted analysis files were constructed from the SID using a sampling and weighting strategy similar to the 2000-2011 NIS. In 2012, two analysis files were constructed, one for national estimates not reported by race/ethnicity and a second for reporting by race/ethnicity. In 2013 and 2014, only one nationally weighted analysis file was created.

For more information on the sampling approach and included States by data year, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_64, 150403061

Measure Title

Hospitalizations for acute conditions per 100,000 population, age 6-17

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National, State

Years Available: National - 2000-2015; State - 2011-2015

Population Subgroups: Age, gender, race/ethnicity, expected primary payer, median household income of the patient's ZIP Code, urbanized location, region of the United States, bed size of hospital, teaching status of hospital

Data Source

National: AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS), State Inpatient Databases (SID) weighted to provide national estimates using the same methodology as the NIS prior to 2012, and AHRQ Quality Indicators, modified version 4.4

State: State Inpatient Databases (SID) and AHRQ Quality Indicators, modified version 4.4

Denominator

U.S. resident population of children ages 6 to 17 years

Numerator

Subset of the Denominator who qualified to be in the Numerator for any of the following PDI measures:

- PDI 16: Gastroenteritis
- PQI 17: Urinary tract infection

Comments

This measure is based on the 2 AHRQ PDIs for gastroenteritis and urinary tract infection.

Rates are adjusted by age and gender using the total U.S. resident population for 2010 as the standard population; when reporting is by age, the adjustment is by gender only; when reporting is by gender, the adjustment is by age only.

The HCUP State Inpatient Databases (SID) include a powerful set of hospital databases from HCUP Partner organizations in 47 States and the District of Columbia. Together, the SID encompasses about 97 percent of all U.S. community hospital discharges. SID contains a core set of clinical and nonclinical information on all patients, regardless of payer, including people covered by Medicare, Medicaid, and private insurance, as well as uninsured people. In addition to the core set of uniform data elements common to all SID, some databases within SID include other elements, such as the patient's race. The SID are used to create the HCUP National (Nationwide) Inpatient Sample.

For national QI estimates prior to 2012, the HCUP Nationwide Inpatient Sample (NIS) was used to calculate national QI estimates for all level of reporting except by race/ethnicity. The NIS was not used for reporting QI estimates by race/ethnicity because the availability of race/ethnicity information varied across States and hospitals within States. In addition, the 20 percent sample of the hospitals in the NIS did not provide enough statistical power to detect differences in QI estimates between whites and the other specific racial groups. To facilitate analyses by race/ethnicity, a separate nationally weighted analysis file was constructed from the SID and hospitals with good reporting of race/ethnicity using a sampling and weighting strategy similar to the NIS.

For national QI estimates for data years 2012 forward, the HCUP National Inpatient Sample (NIS) was not used because the database had been redesigned into a sample of discharges (instead of hospitals) with a revised definition for the target universe that excluded acute long-term care facilities. For consistent QI estimates before and after data year 2012, nationally weighted analysis files were constructed from the SID using a sampling and weighting strategy similar to the 2000-2011 NIS. In 2012, two analysis files were constructed, one for national estimates not reported by race/ethnicity and a second for reporting by race/ethnicity. In 2013 and 2014, only one nationally weighted analysis file was created.

For more information on the sampling approach and included States by data year, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_16, 150403081

Measure Title

Hospitalizations for all chronic conditions per 100,000 population, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National, State

Years Available: National - 2005 to 2015; State - 2011-2014

Population Subgroups: Age, gender, geographic location (residence), income, region

Data Source

National: AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS), State Inpatient Databases (SID) weighted to provide national estimates using the same methodology as the NIS prior to 2012, and AHRQ Quality Indicators, modified version 4.4

State: AHRQ, CDOM, HCUP, State Inpatient Databases (SID) and AHRQ Quality Indicators, modified version 4.4

Denominator

U.S. resident population age 18 and over

Numerator

Number of hospitalizations who qualified for any individual PQI Numerator considered chronic (PQI 1, PQI 3, PQI 5, PQI 7, PQI 8, and PQI 13-16) (see Comments)

Comments

This measure is based on the nine AHRQ PQIs for angina, asthma, chronic obstructive pulmonary disease, congestive heart failure, diabetes, and hypertension. Rates prior to 2005 are not reported because of International Classification of Diseases, Ninth Revision, coding changes for PQI 5 for chronic obstructive pulmonary disease.

Rates are adjusted by age and gender using the total U.S. resident population for 2010 as the standard population; when reporting is by age, the adjustment is by gender only; when reporting is by gender, the adjustment is by age only.

The HCUP State Inpatient Databases (SID) include a powerful set of hospital databases from HCUP Partner organizations in 47 States and the District of Columbia. Together, the SID encompasses about 97 percent of all U.S. community hospital discharges. SID contains a core set of clinical and nonclinical information on all patients, regardless of payer, including people covered by Medicare, Medicaid, and private insurance, as well as uninsured people. In addition to the core set of uniform data elements common to all SID, some databases within SID include other elements, such as the patient's race. The SID are used to create the HCUP National (Nationwide) Inpatient Sample.

For national QI estimates prior to 2012, the HCUP Nationwide Inpatient Sample (NIS) was used to calculate national QI estimates for all level of reporting except by race/ethnicity. The NIS was not used for reporting QI estimates by race/ethnicity because the availability of race/ethnicity information varied across States and hospitals within States. In addition, the 20 percent sample of the hospitals in the NIS did not provide enough statistical power to detect differences in QI estimates between whites and the other specific racial groups. To facilitate analyses by race/ethnicity, a separate nationally weighted analysis file was constructed from the SID and hospitals with good reporting of race/ethnicity using a sampling and weighting strategy similar to the NIS.

For national QI estimates for data years 2012 forward, the HCUP National Inpatient Sample (NIS) was not used because the database had been redesigned into a sample of discharges (instead of hospitals) with a revised definition for the target universe that excluded acute long-term care facilities. For consistent QI estimates before and after data year 2012, nationally weighted analysis files were constructed from the SID using a sampling and weighting strategy similar to the 2000-2011 NIS. In 2012, two analysis files were constructed, one for national estimates not reported by race/ethnicity and a second for reporting by race/ethnicity. In 2013 and 2014, only one nationally weighted analysis file was created.

For more information on the sampling approach and included States by data year, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_50, 150403091

Measure Title

Hospitalizations for chronic conditions, excluding COPD, per 100,000 population, age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs).

Table Description

Geographic Representation: National

Years Available: 2000-2015

Population Subgroups: Age, gender, race/ethnicity, expected primary payer, median household income of the patient's ZIP Code, urbanized location, region of the United States, bed size of hospital, teaching status of hospital

Data Source

National: AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS), State Inpatient Databases (SID) weighted to provide national estimates using the same methodology as the NIS prior to 2012, and AHRQ Quality Indicators, modified version 4.4

Denominator

U.S. resident population age 18 and over

Numerator

Hospital admissions of adults which qualified to be in the Numerator for any of the following PQI measures:

- PQI 1: Diabetes, short-term complications
- PQI 3: Diabetes, long-term complications
- PQI 7: Hypertension
- PQI 8: Congestive heart failure
- PQI 13: Angina without procedure
- PQI 14: Uncontrolled diabetes
- PQI 15: Asthma in younger adults
- PQI 16: Lower extremity amputations among patients with diabetes

Comments

This measure is based on the 8 AHRQ PQIs for angina, asthma, congestive heart failure, diabetes, and hypertension.

For consistency of longitudinal reporting, the modified chronic composite does not include AHRQ PQI 5 for chronic obstructive pulmonary disease because it is affected by International Classification of Diseases, Ninth Revision coding changes.

Rates are adjusted by age and gender using the total U.S. resident population for 2010 as the standard population; when reporting is by age, the adjustment is by gender only; when reporting is by gender, the adjustment is by age only.

The HCUP State Inpatient Databases (SID) include a powerful set of hospital databases from HCUP Partner organizations in 47 States and the District of Columbia. Together, the SID encompasses about 97 percent of all U.S. community hospital discharges. SID contains a core set of clinical and nonclinical information on all patients, regardless of payer, including people covered by Medicare, Medicaid, and private insurance, as well as uninsured people. In addition to the core set of uniform data elements common to all SID, some databases within SID include other elements, such as the patient's race. The SID are used to create the HCUP National (Nationwide) Inpatient Sample.

For national QI estimates prior to 2012, the HCUP Nationwide Inpatient Sample (NIS) was used to calculate national QI estimates for all level of reporting except by race/ethnicity. The NIS was not used for reporting QI estimates by race/ethnicity because the availability of race/ethnicity information varied across States and hospitals within States. In addition, the 20 percent sample of the hospitals in the NIS did not provide enough statistical power to detect differences in QI estimates between whites and the other specific racial groups. To facilitate analyses by race/ethnicity, a separate nationally weighted analysis file was constructed from the SID and hospitals with good reporting of race/ethnicity using a sampling and weighting strategy similar to the NIS.

For national QI estimates for data years 2012 forward, the HCUP National Inpatient Sample (NIS) was not used because the database had been redesigned into a sample of discharges (instead of hospitals) with a revised definition for the target universe that excluded acute long-term care facilities. For consistent QI estimates before and after data year 2012, nationally weighted analysis files were constructed from the SID using a sampling and weighting strategy similar to the 2000-2011 NIS. In 2012, two analysis files were constructed, one for national estimates not reported by race/ethnicity and a second for reporting by race/ethnicity. In 2013 and 2014, only one nationally weighted analysis file was created.

For more information on the sampling approach and included States by data year, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_65, 150403101

Measure Title

Hospitalizations for chronic conditions per 100,000 population, age 6-17

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National, State

Years Available: National - 2000-2015; State - 2011-2015

Population Subgroups: Age, gender, race/ethnicity, expected primary payer, median household income of the patient's ZIP Code, urbanized location, region of the United States, bed size of hospital, teaching status of hospital

Data Source

National: AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS), State Inpatient Databases (SID) weighted to provide national estimates using the same methodology as the NIS prior to 2012, and AHRQ Quality Indicators, modified version 4.4

State: State Inpatient Databases (SID) and AHRQ Quality Indicators, modified version 4.4

Denominator

U.S. resident population of children ages 6 to 17 years

Numerator

Subset of the Denominator who qualified to be in the Numerator for any of the following PDI measures:

- PDI 14: Asthma
- PDI 15: Diabetes, short-term complications

Comments

This measure is based on the 2 AHRQ PDIs for asthma and diabetes.

Rates are adjusted by age and gender using the total U.S. resident population for 2010 as the standard population; when reporting is by age, the adjustment is by gender only; when reporting is by gender, the adjustment is by age only.

The HCUP State Inpatient Databases (SID) include a powerful set of hospital databases from HCUP Partner organizations in 47 States and the District of Columbia. Together, the SID encompasses about 97 percent of all U.S. community hospital discharges. SID contains a core set of clinical and nonclinical information on all patients, regardless of payer, including people covered by Medicare, Medicaid, and private insurance, as well as uninsured people. In addition to the core set of uniform data elements common to all SID, some databases within SID include other elements, such as the patient's race. The SID are used to create the HCUP National (Nationwide) Inpatient Sample.

For national QI estimates prior to 2012, the HCUP Nationwide Inpatient Sample (NIS) was used to calculate national QI estimates for all level of reporting except by race/ethnicity. The NIS was not used for reporting QI estimates by race/ethnicity because the availability of race/ethnicity information varied across States and hospitals within States. In addition, the 20 percent sample of the hospitals in the NIS did not provide enough statistical power to detect differences in QI estimates between whites and the other specific racial groups. To facilitate analyses by race/ethnicity, a separate nationally weighted analysis file was constructed from the SID and hospitals with good reporting of race/ethnicity using a sampling and weighting strategy similar to the NIS.

For national QI estimates for data years 2012 forward, the HCUP National Inpatient Sample (NIS) was not used because the database had been redesigned into a sample of discharges (instead of hospitals) with a revised definition for the target universe that excluded acute long-term care facilities. For consistent QI estimates before and after data year 2012, nationally weighted analysis files were constructed from the SID using a sampling and weighting strategy similar to the 2000-2011 NIS. In 2012, two analysis files were constructed, one for national estimates not reported by race/ethnicity and a second for reporting by race/ethnicity. In 2013 and 2014, only one nationally weighted analysis file was created.

For more information on the sampling approach and included States by data year, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

15.4.4. Potentially Harmful Services Without Benefit

Measure ID

IHS_2, 150404012

Measure Title

Hospital Admissions for perforated appendices within admissions for appendicitis, per 1,000 population age 18 and older.

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2003-2016

Population Subgroups: Age, sex

Data Source

Indian Health Service (IHS), Office of Information Technology/National Patient Information Reporting System (NPIRS), National Data Warehouse (NDW)

Denominator

Inpatient Discharges containing a diagnosis code for appendicitis.

Numerator

Subset of the Denominator for inpatient discharges containing a diagnosis code for perforation or abscess of appendix

Comments

Indian Health Service Areas of Portland and California excluded due to having no inpatient facilities

Measure ID

IHS_4, 150404021

Measure Title

Hospital admissions for urinary tract infections per 100,000 population age 18 and older.

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2003-2016

Population Subgroups: Age, sex

Data Source

Indian Health Service (IHS), Office of Information Technology/National Patient Information Reporting System (NPIRS), National Data Warehouse (NDW)

Denominator

Area Health Resource File, 2000 Bridged Race Census AI/AN population, age 18 years and over, extrapolated and smoothed to current year.

Numerator

Discharges with principal diagnosis of urinary tract infection, without mention of kidney or urinary tract disorder, or immune compromised.

Comments

Indian Health Service Areas of Portland and California excluded due to having no inpatient facilities.

15.4.5. Electronic Health Records in Hospitals or in Physician Practices

Measure ID

AHA_33, 150405011

Measure Title

Hospitals with computerized system that supports medication lists

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2012 - 2016; National, 2012 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for medication management for comparing a patient's inpatient and preadmission medication lists, providing an updated medication lists at the time of discharge, checking the inpatient prescriptions against an internal formulary, tracking automatically medications with an electronic medication administration, and prescribing electronically discharge medication orders?"

Numerator

Subset of the Denominator that responded positively to all components of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_37, 150405012

Measure Title

Hospitals with computerized system that supports drug decision

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2012 - 2016; National, 2012 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which supports drug decision?"

Numerator

Subset of the Denominator that responded positively to the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_34, 150405013

Measure Title

Hospitals with computerized system that supports computerized provider order entry (CPOE) of medications

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2012 - 2016; National, 2012 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for computerized provider order entry of medications?"

Numerator

Subset of the Denominator that responded positively to the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_35, 150405014

Measure Title

Hospitals with computerized system that supports pharmaceutical bar coding

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2012 - 2016; National, 2012 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_3, 150405021

Measure Title

Hospitals with computerized system that supports electronic clinical documentation including patient demographics

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 – 2016; National, 2011 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for medication management for comparing a patient's inpatient and preadmission medication lists, providing an updated medication lists at the time of discharge, checking the inpatient prescriptions against an internal formulary, tracking automatically medications with an electronic medication administration, and prescribing electronically discharge medication orders?"

Numerator

Subset of the Denominator that responded positively to all components of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_4, 150405022

Measure Title

Hospitals with computerized system that supports electronic clinical documentation including physician notes

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 - 2016; National, 2011 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for medication management for comparing a patient's inpatient and preadmission medication lists, providing an updated medication lists at the time of discharge, checking the inpatient prescriptions against an internal formulary, tracking automatically medications with an electronic medication administration, and prescribing electronically discharge medication orders?"

Numerator

Subset of the Denominator that responded positively to all components of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_5, 150405023

Measure Title

Hospitals with computerized system that supports electronic clinical documentation including nursing notes

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 - 2016; National, 2011 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for medication management for comparing a patient's inpatient and preadmission medication lists, providing an updated medication lists at the time of discharge, checking the inpatient prescriptions against an internal formulary, tracking automatically medications with an electronic medication administration, and prescribing electronically discharge medication orders?"

Numerator

Subset of the Denominator that responded positively to all components of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_6, 150405024

Measure Title

Hospitals with computerized system that supports electronic clinical documentation including problem lists

Measure Source**: American Hospital Association (AHA) Survey, Information Technology (IT) Supplement**

Table Description

Geographic Representation: National, State

Years Available: State, 2011 - 2016; National, 2011 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for medication management for comparing a patient's inpatient and preadmission medication lists, providing an updated medication lists at the time of discharge, checking the inpatient prescriptions against an internal formulary, tracking automatically medications with an electronic medication administration, and prescribing electronically discharge medication orders?"

Numerator

Subset of the Denominator that responded positively to all components of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_7, 150405025

Measure Title

Hospitals with computerized system that supports electronic clinical documentation including medication list

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 - 2016; National, 2011 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for medication management for comparing a patient's inpatient and preadmission medication lists, providing an updated medication lists at the time of discharge, checking the inpatient prescriptions against an internal formulary, tracking automatically medications with an electronic medication administration, and prescribing electronically discharge medication orders?"

Numerator

Subset of the Denominator that responded positively to all components of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_8, 150405026

Measure Title

Hospitals with computerized system that supports electronic clinical documentation including discharge summaries

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 - 2016; National, 2011 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for medication management for comparing a patient's inpatient and preadmission medication lists, providing an updated medication lists at the time of discharge, checking the inpatient prescriptions against an internal formulary, tracking automatically medications with an electronic medication administration, and prescribing electronically discharge medication orders?"

Numerator

Subset of the Denominator that responded positively to all components of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_9, 150405027

Measure Title

Hospitals with computerized system that supports electronic clinical documentation including advanced directives

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2011 - 2016; National, 2011 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for medication management for comparing a patient's inpatient and preadmission medication lists, providing an updated medication lists at the time of discharge, checking the inpatient prescriptions against an internal formulary, tracking automatically medications with an electronic medication administration, and prescribing electronically discharge medication orders?"

Numerator

Subset of the Denominator that responded positively to all components of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_2, 150405028

Measure Title

Hospitals with computerized system that supports electronic clinical documentation

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2012 - 2016; National, 2012 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for medication management for comparing a patient's inpatient and preadmission medication lists, providing an updated medication lists at the time of discharge, checking the inpatient prescriptions against an internal formulary, tracking automatically medications with an electronic medication administration, and prescribing electronically discharge medication orders?"

Numerator

Subset of the Denominator that responded positively to all components of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_11, 150405031

Measure Title

Hospitals with computerized system that allows for results viewing including laboratory reports

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for computerized provider order entry of medications"

Numerator

Subset of the Denominator that responded positively to the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_12, 150405032

Measure Title

Hospitals with computerized system that allows for results viewing including radiology reports

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_13, 150405033

Measure Title

Hospitals with computerized system that allows for results viewing including radiology images

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_14, 150405034

Measure Title

Hospitals with computerized system that allows for results viewing including diagnostic test results

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_15, 150405035

Measure Title

Hospitals with computerized system that allows for results viewing including diagnostic test images

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_16, 150405036

Measure Title

Hospitals with computerized system that allows for results viewing including consultant reports

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_24, 150405041

Measure Title

Hospitals with computerized system that allows for decision support including clinical guidelines

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_25, 150405042

Measure Title

Hospitals with computerized system that allows for decision support including clinical reminders

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_26, 150405043

Measure Title

Hospitals with computerized system that allows for decision support including drug allergy alerts

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_27, 150405044

Measure Title

Hospitals with computerized system that allows for decision support including drug-drug interaction alerts

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_28, 150405045

Measure Title

Hospitals with computerized system that allows for decision support including drug-lab interaction alerts

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_29, 150405046

Measure Title

Hospitals with computerized system that allows for decision support including drug dosing support

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_23, 150405047

Measure Title

Hospitals with computerized system that allows for decision support

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_18, 150405051

Measure Title

Hospitals with computerized system that allows for computerized provider order entry including laboratory test

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_19, 150405052

Measure Title

Hospitals with computerized system that allows for computerized provider order entry including radiology test

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_21, 150405053

Measure Title

Hospitals with computerized system that allows for computerized provider order entry including consultant request

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_22, 150405054

Measure Title

Hospitals with computerized system that allows for computerized provider order entry including nursing orders

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_17, 150405055

Measure Title

Hospitals with computerized system that allows for computerized provider order entry

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_10, 150405056

Measure Title

Hospitals with computerized system that allows for results viewing

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_20, 150405057

Measure Title

Hospitals with computerized system that allows for computerized provider order entry including medications

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2013 - 2016; National, 2013 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

AHA_1, 150405061

Measure Title

Hospitals with fully implemented electronic medical record system

Measure Source

American Hospital Association (AHA) Survey, Information Technology (IT) Supplement

Table Description

Geographic Representation: National, State

Years Available: State, 2014 - 2016; National, 2014 - 2016

Population Subgroups: Hospital bed size, control, geographic location, graduate medical education program, hospital type, medical school affiliation, member of Council of Teaching Hospitals, region

Data Source

AHA Survey, IT Supplement

Denominator

Number of hospitals that responded to the question, "Does your hospital currently have a computerized system which allows for bar coding or radio frequency identification for closed-loop medication tracking for medication administration and pharmacy verification?"

Numerator

Subset of the Denominator that responded positively to both parts of the question

Comments

The 2012 AHA IT Supplement was sent to 6,241 non-Federal acute care hospitals in the United States, including non-AHA member hospitals. The response rate was 51.9 percent. If data are missing, the hospital is not included in the Numerator or Denominator of measures.

Measure ID

NAMCS_1, 150405071

Measure Title

Office-based physicians with a computerized system ordering prescriptions electronically to the pharmacy.

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system ordering prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_2, 150405072

Measure Title

Office-based physicians with a computerized system for sending prescriptions electronically to the pharmacy.

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_3, 150405073

Measure Title

Office-based physicians with a computerized system for providing warnings of drug interactions or contraindications.

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS),

National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_4, 150405074

Measure Title

Office-based physicians with a computerized system for providing reminders.

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_5, 150405075

Measure Title

Office-based physicians with a computerized system for providing clinical decision support.

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_7, 150405076

Measure Title

Office-based physicians with a computerized system for recording patient demographic information.

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_8, 150405077

Measure Title

Office-based physicians with a computerized system for providing clinical notes.

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_9, 150405078

Measure Title

Office-based physicians who have an electronic medical records system (not including billing).

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_14, 150405081

Measure Title

Office-based physicians who have a computerized system for discharge summaries

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_15, 150405083

Measure Title

Office-based physicians who have a computerized system for receiving follow-up information from other providers

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

Measure ID

NAMCS_16, 150405084

Measure Title

Office-based physicians who have a computerized system for hospital discharge summary

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Ambulatory Medical Care Survey (NAMCS).

Table Description

Geographic Representation: National

Years Available: 2012 - 2015

Population Subgroups: age of physician, geographic location (practice), practice size, region, specialty

Data Source

CDC, NCHS, NAMCS

Denominator

Physicians in the United States providing direct patient care in office-based practices and clinicians in community health centers. Physicians with specialties in radiology, anesthesiology, and pathology are excluded.

Numerator

Subset of physicians in the Denominator with a computerized system for sending prescriptions electronically to the pharmacy.

Comments

Since 2008, a supplemental mail survey on EHR systems has been conducted in addition to the core NAMCS, which is an in-person survey. In 2008 and 2009, samples of physicians in the core NAMCS and the supplemental mail survey, stratified by specialty, were chosen from selected geographic areas. Starting in 2010, the NAMCS EHR mail-survey sample size was increased fivefold to produce stand-alone estimates without needing to be combined with the core NAMCS. The 2012-2015 estimates are from the NAMCS EHR survey.

15.5. Effectiveness of Care

15.5.2. Hospitalizations for Diabetes

Measure ID

IHS_1, 150502022

Measure Title

Hospital admissions for uncontrolled diabetes, per 100,000 population age 18 and over.

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000-2016

Population Subgroups: Age, sex

Data Source

Indian Health Service (IHS), Office of Information Technology/National Patient Information Reporting System, National Data Warehouse

Denominator

Area Health Resource File, 2000 Bridged Race Census AI/AN population, age 18 years and over, extrapolated and smoothed to current year.

Numerator

Discharges with a principal diagnosis of uncontrolled diabetes and without mention of short-term or long-term complications

Comments

Indian Health Service Areas of Portland and California excluded due to having no inpatient facilities

Measure ID

IHS_3, 150502023

Measure Title

Hospital admissions for short term complications of diabetes per 100,000 population age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000-2016

Population Subgroups: Age, sex

Data Source

Indian Health Service (IHS), Office of Information Technology/National Patient Information Reporting System (NPIRS), National Data Warehouse (NDW)

Denominator

Area Health Resource File, 2000 Bridged Race Census AI/AN population, age 18 years and over, extrapolated and smoothed to current year.

Numerator

Discharges with principal diagnosis of short term complications of diabetes.

Comments

Indian Health Service Areas of Portland and California excluded due to having no inpatient facilities.

15.5.3. HIV/AIDS

Measure ID

150503011

Measure Title

New AIDS cases per 100,000 population age 13 and over

Measure Source

National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Division of HIV/AIDS (DHAP), National HIV/AIDS Surveillance System (NHSS)

Table Description

Geographic Representation: National, State

Years Available: 2000 to 2014

Population Subgroups: Age, sex, race/ethnicity

Data Sources

CDC, NCHHSTP, DHAP, NHSS

Denominator

U.S. population age 13 and over

Numerator

Reported new AIDS cases among adolescents and adults age 13 and over

Comments

This measure is referred to as measure HIV-4 in Healthy People 2020 documentation. Data were downloaded from NCHHSTP AtlasPlus, https://www.cdc.gov/nchhstp/atlas/index.htm.

Measure ID

HRSA_1, 150503017

Measure Title

Ryan White HIV/AIDS Program HIV patients prescribed HIV antiretroviral therapy (ART) during the measurement year

Measure Source

Health Resources and Services Administration (HRSA), HIV/AIDS Bureau

Table Description

Geographic Representation: State

Years Available: 2015

Population Subgroups: Age, income, insurance, sex, and race/ethnicity

Data Source

Health Resources and Services Administration (HRSA), HIV/AIDS Bureau

Denominator

Number of patients, regardless of age, with a diagnosis of HIV with at least one medical visit in the measurement year. Measurement year is January 1 - December 31.

Numerator

Number of patients from the Denominator prescribed HIV antiretroviral therapy (ART) during the measurement year. HIV antiretroviral therapy is described as the prescription of at least one U.S. Food and Drug Administration approved HIV antiretroviral medication.

Comments

The Ryan White HIV/AIDS Program (RWHAP) provides HIV care and treatment to over 500,000 annually. Each year, Ryan White Program providers are required to submit the Ryan White Services Report (RSR). In 2009, the Ryan White Program Services Report (RSR) was initiated to collect client-level data to provide additional information on the characteristics of the funded grantees, their providers, and the clients served with program funds. The data reported to RWHAP assesses client service needs and establishes practical outcome measures for the program.

Measure ID

HRSA_2, 150503018

Measure Title

Ryan-White HIV/AIDS Program HIV patients with at least 2 medical care visit dates at least 90 days apart during the year

Measure Source

Health Resources and Services Administration (HRSA), HIV/AIDS Bureau

Table Description

Geographic Representation: National, State

Years Available: National 2010 to 2015; State 2010 to 2015

Population Subgroups: Age, income, insurance, sex, and race/ethnicity

Data Source

Health Resources and Services Administration (HRSA), HIV/AIDS Bureau

Denominator

Number of patients, regardless of age, with a diagnosis of HIV with at least one medical visit in the measurement year. Measurement year is January 1 - December 31.

Numerator

Number of patients with at least two medical visits 90 days apart during the measurement year with the first visit prior to September 1st.

Comments

RWHAP and RSR comment.

Measure ID

HRSA_3, 150503019

Measure Title

Ryan White HIV/AIDS Program patients with a HIV viral load less than 200 copies/mL at last HIV viral load test during the measurement year

Measure Source

Health Resources and Services Administration (HRSA), HIV/AIDS Bureau

Table Description

Geographic Representation: National, State

Years Available: National 2010 to 2015; State 2010 to 2015

Population Subgroups: Age, income, insurance, sex, and race/ethnicity

Data Source

Health Resources and Services Administration (HRSA), HIV/AIDS Bureau

Denominator

Number of patients, regardless of age, with a diagnosis of HIV with at least one medical visit in the measurement year. Measurement year is January 1 - December 31.

Numerator

Number of patients with at least two medical visits 90 days apart during the measurement year with the first visit prior to September 1st.

Comments

RWHAP and RSR comment.

15.5.4. Mental Health and Substance Abuse

Measure ID

NSDUH_6, 150504021

Measure Title

Adults who received mental health treatment or counseling in the last 12 months

Measure Source

Substance Abuse and Mental Health Services Administration (SAMHSA), Office of Applied Studies, National Survey on Drug Use and Health (NSDUH)

Table Description

Geographic Representation: National, State

Years Available: National: 2002-2015; State: 2011-2015

Population Subgroups: Age, education, income, location (residence), race/ethnicity, sex

Data Source

SAMHSA, Office of Applied Studies, National Survey on Drug Use and Health (NSDUH)

Denominator

US civilian noninstitutionalized population age 18 and over

Numerator

Subset of the Denominator who reported receipt of mental health treatment or counseling in the past year

Measure ID

NSDUH_7, 150504031

Measure Title

Adults who received outpatient mental health treatment or counseling in the last 12 months

Measure Source

Substance Abuse and Mental Health Services Administration (SAMHSA)

Table Description

Geographic Representation: National, State

Years Available: National: 2002-2015; State: 2011-2015

Population Subgroups: Age, education, income, location (residence), race/ethnicity, sex

Data Source

SAMHSA, Office of Applied Studies, National Survey on Drug Use and Health (NSDUH)

Denominator

U.S. civilian noninstitutionalized population age 18 and over

Numerator

Subset of the Denominator who reported receipt of outpatient mental health treatment or counseling in the past year

Measure ID

NSDUH_8, 150504041

Measure Title

Adults who received prescription medications for mental health treatment in the last 12 months

Measure Source

Substance Abuse and Mental Health Services Administration (SAMHSA)

Table Description

Geographic Representation: National, State

Years Available: National: 2002-2015; State: 2011-2015

Population Subgroups: Age, education, income, location (residence), race/ethnicity, sex

Data Source

SAMHSA, Office of Applied Studies, National Survey on Drug Use and Health (NSDUH)

Denominator

US civilian noninstitutionalized population age 18 and over

Numerator

Subset of the Denominator who reported receipt of counseling or prescription medications for treatment of a mental health condition or problem in the past year

15.5.5 Respiratory Diseases

Measure ID

MEPS_71, 150505021

Measure Title

People with current asthma

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Financing, Access, and Cost Trends (CFACT), Medical Expenditure Panel Survey (MEPS)

Table Description

Geographic Representation: National

Years Available: 2003 - 2015

Population Subgroups: age, gender, race, ethnicity, family income, education, employment status, health insurance, Medicaid/CHIP, residence location, language spoken at home, perceived health status, activity limitations, number of chronic conditions, U.S. born.

Data Source

AHRQ, CFACT, MEPS

Denominator

U.S. civilian noninstitutionalized population

Numerator

Subset of the Denominator with current asthma defined as people ever told by doctor or other health professional that he or she has asthma, and were reported to still have asthma or to have had an asthma attack in the past 12 months.

Comments

Estimates are age-adjusted to the 2000 U.S. standard population using five age groups: 0-17, 18-44, 45-64, 65-74, and 75 and over.

15.6. Healthy Living

15.6.1. Maternal and Child Health

Measure ID

NVSS_14, 150601011

Measure Title

Infant deaths per 1,000 live births, all birth weights

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Vital Statistics System (NVSS)-Linked Birth and Infant Death Data

Table Description

Geographic Representation: National

Years Available: National: 2000-2014

Population Subgroups: Age, sex, location, race, ethnicity

Data Source

CDC, NCHS, NVSS

Denominator

All of live births.

Numerator

Subset of the Denominator who died within the first year

Measure ID

NIS_1, 150601021

Measure Title

Children ages 19-35 months who received a full series of *Haemophilus influenzae* type B vaccine

Measure Source

Healthy People 2020

Table Description

Geographic Representation: National, State

Years Available: National: 2009-2015; State: 2011-2015

Population Subgroups: Income, race/ethnicity, sex

Data Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Center for Immunization and Respiratory Diseases (NCIRD), National Immunization Survey (NIS)

Denominator

U.S. civilian noninstitutionalized population of children ages 19-35 months

Numerator

Subset of the Denominator receiving a full series of the *Haemophilus influenzae* B antigen

Comments

This measure is referred to as measure IID-7.2 in Healthy People 2020 documentation.

Measure ID

NIS_2, 150601031

Measure Title

Children ages 19-35 months who received 4 or more doses of pneumococcal conjugate vaccine

Measure Source

Healthy People 2020

Table Description

Geographic Representation : National, State

Years Available: National: 2010-2015; State: 2011-2015

Population Subgroups: Income, race/ethnicity, sex

Data Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Center for Immunization and Respiratory Diseases (NCIRD), National Immunization Survey (NIS)

Denominator

U.S. civilian noninstitutionalized population of children ages 19-35 months

Numerator

Subset of the Denominator receiving 4 or more doses of pneumococcal conjugate

Comments

This measure is referred to as measure IID-7.7 in Healthy People 2020 documentation.

Measure ID

NVSS_9, 150601061

Measure Title

Cesarean delivery among low risk women with no prior cesarean births

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Vital Statistics System (NVSS)

Table Description

Geographic Representation: National

Years Available: 2007-2015

Population Subgroups: Age, geographic location (residence), race/ethnicity, sex

Data Source

CDC, NCHS, NVSS-N

Denominator

Live births to low risk women with no prior cesarean births

Numerator

Children born via cesarean delivery

Measure ID

NVSS_9, 150601071

Measure Title

Cesarean delivery among low risk women with prior cesarean births

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Vital Statistics System (NVSS)

Table Description

Geographic Representation: National

Years Available: 2007-2015

Population Subgroups: Age, geographic location (residence), race/ethnicity, sex

Data Source

CDC, NCHS, NVSS-N

Denominator

Live births to low risk women with prior cesarean births

Numerator

Children born via cesarean delivery

Measure ID

NVSS_8,150601081

Measure Title

Total cesarean births

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Vital Statistics System (NVSS)

Table Description

Geographic Representation: National

Years Available: 2009-2015

Population Subgroups: Age, geographic location (residence), race/ethnicity, sex

Data Source

CDC, NCHS, NVSS-N

Denominator

Live births to U.S. residents

Numerator

Subset of the Denominator who were born via cesarean delivery

Measure ID

NVSS_10,150601091

Measure Title

Total preterm births

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Vital Statistics System (NVSS)

Table Description

Geographic Representation: National

Years Available: 2007-2015

Population Subgroups: Age, geographic location (residence), race/ethnicity, sex

Data Source

CDC, NCHS, NVSS-N

Denominator

Live births to U.S. residents

Numerator

Subset of the Denominator who were preterm

Comments

Preterm birth is the birth of an infant prior to 37 weeks of pregnancy.

Measure ID

NVSS_11,150601101

Measure Title

Late preterm or live births at 34 to 36 weeks of gestation

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Vital Statistics System (NVSS)

Table Description

Geographic Representation: National

Years Available: 2007-2015

Population Subgroups: Age, geographic location (residence), race/ethnicity, sex

Data Source

CDC, NCHS, NVSS-N

Denominator

Live births to U.S. residents

Numerator

Subset of the Denominator who were born at 34 to 36 weeks of gestation

Measure ID

NVSS_17, 150601131

Measure Title

Women who completed a pregnancy in the last 12 months who received prenatal care in the first trimester

Measure Source

Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Vital Statistics System (NVSS)

Table Description

Geographic Representation: National

Years Available: National 2008-2013

Data Source

CDC, NCHS, NVSS-N

Denominator

Live births occurring to residents in those States that use the 2003 revised birth certificate

Numerator

Subset of the Denominator who received prenatal care in the first trimester

Comments

Excluded from these analyses are the following States that did not use the 2003 Revision to Birth Certificate: Alabama, Alaska, Arizona, Arkansas, Connecticut, Hawaii, Louisiana, Maine, Massachusetts, Minnesota, Mississippi, New Jersey, North Carolina, Rhode Island, Virginia, West Virginia, and Wisconsin.

15.6.2 Lifestyle Modification

Measure ID

MEPS_72, 150602011

Measure Title

Adults with obesity

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Financing, Access, and Cost Trends (CFACT), Medical Expenditure Panel Survey (MEPS)

Table Description

Geographic Representation: National

Years Available: 2002 - 2015

Population Subgroups: age, gender, race, ethnicity, family income, education, employment status, health insurance, Medicaid/CHIP, residence location, language spoken at home, perceived health status, activity limitations, number of chronic conditions, U.S. born.

Data Source

AHRQ, CFACT, MEPS

Denominator

U.S. civilian noninstitutionalized population age 18 and over

Numerator

Adults with a body mass index (BMI) of 30 or greater, excluding pregnant women

Comments

Race, ethnicity, family income, and education characteristics are those of the family

reference person and are used to characterize the entire family unit.

Measure ID

NCBD_20, 150602021

Measure Title

Adults who had a doctor's office or clinic visit in the last 6 months who sometimes or never got advice to quit smoking from provider, Medicaid

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2014-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare managed care or Medicare fee-for-service

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 6 months, Medicaid

Numerator

Subset of the Denominator who sometimes or never got advice to quit smoking from provider

Measure ID

NCBD_20, 150602022

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months who sometimes or never got advice to quit smoking from provider, Medicare managed care

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare managed care

Numerator

Subset of the Denominator who sometimes or never got advice to quit smoking from provider

Measure ID

NCBD_20, 150602023

Measure Title

Adults who had a doctor's office or clinic visit in the last 12 months who sometimes or never got advice to quit smoking from provider, Medicare fee-for-service

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Quality Improvement and Patient Safety (CQuIPS), National CAHPS Benchmarking Database (NCBD).

Table Description

Geographic Representation: States

Years Available: 2010-2011, 2013-2016

Population Subgroups: race, ethnicity, and education

Data Source

AHRQ, CQuIPS, NCBD

Denominator

Ambulatory care patients age 18 and over who had a doctor's office or clinic visit in the last 12 months, Medicare fee-for-service

Numerator

Subset of the Denominator who sometimes or never got advice to quit smoking from provider.

Measure ID

MEPS_73, 150602031

Measure Title

Adults who do not now spend half an hour or more in moderate or vigorous physical activity at least five times a week

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Financing, Access, and Cost Trends (CFACT), Medical Expenditure Panel Survey (MEPS)

Table Description

Geographic Representation: National

Years Available: 2011-2015

Population Subgroups: age, gender, race, ethnicity, family income, education, employment status, health insurance, Medicaid/CHIP, residence location, language spoken at home, perceived health status, activity limitations, number of chronic conditions, U.S. born.

Data Source

AHRQ, CFACT, MEPS

Denominator

U.S. civilian noninstitutionalized population age 18 and over

Numerator

Subset of the Denominator who did not spend half an hour or more in moderate or vigorous physical activity at least five times a week

Comments

Estimates are age-adjusted to the 2000 U.S. standard population using three age groups: 18-44, 45-64, and 65 and over.

15.7. Affordable Care

15.7.1. Financial Burden of Health Care Cost

Measure ID

HCUP_19, 150701041

Measure Title

Distribution of levels I and II trauma center utilizations per 100 emergency department visits related to severe injuries

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP)

Table Description

Geographic Representation: National

Years Available: 2009-2015

Population Subgroups: Age, geographic location (residence), income, region, sex

Data Source

AHRQ, CDOM, HCUP, Nationwide Emergency Department Sample (NEDS)

Denominator

Emergency department visits related to severe injuries

Numerator

Subset of the Denominator who utilized level I and II trauma centers

Comments

Trauma centers treat both adults and children. Designation of trauma center levels I, II, and III is based on criteria developed by the American College of Surgeons' Committee on Trauma (ACS/COT). Injury severity score is assigned by the ICD Programs for Injury Categorization (ICDPIC) Stata program, with ranges from 1 to 75 (with 75 being the most severe). For this analysis, injuries with a severity score of 16 or greater are considered severe.

A sensitivity analysis performed using the 2014 SID determined that the best approach to developing 2015 rates based solely on ICD-9-CM data was to use the first nine months of HCUP data (January 1 through September 30, 2015). On October 1, 2015 (the start of fiscal year 2016),

the U.S. transitioned to using ICD-10-CM. Numerator and Denominator counts for the 2015 estimates included only the first nine months of HCUP data. A copy of the sensitivity analysis is available on the HCUP User Support Web site (HCUP-US) at https://www.hcup-us.ahrq.gov/datainnovations/icd10_resources.jsp.

The HCUP Nationwide Emergency Department Sample (NEDS) was created to enable analyses of emergency department (ED) utilization patterns and is the largest all-payer ED database that is publicly available in the United States. The NEDS is a 20-percent stratified sample of hospital-owned EDs in the United States. The NEDS is drawn from statewide data organizations that provide HCUP with data from ED visits that may or may not have resulted in hospital admission. Weights are provided to calculate national estimates.

For more information, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_20, 150701042

Measure Title

Distribution of level III trauma center utilizations per 100 emergency department visits related to severe injuries

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP)

Table Description

Geographic Representation: National

Years Available: 2009-2015

Population Subgroups: Age, geographic location (residence), income, region, sex

Data Source

AHRQ, CDOM, HCUP, Nationwide Emergency Department Sample (NEDS)

Denominator

Emergency department visits related to severe injuries

Numerator

Subset of the Denominator who utilized trauma level III centers

Comments

Trauma centers treat both adults and children. Designation of trauma center levels I, II, and III is based on criteria developed by the American College of Surgeons' Committee on Trauma (ACS/COT). Injury severity score is assigned by the ICD Programs for Injury Categorization (ICDPIC) Stata program, with ranges from 1 to 75 (with 75 being the most severe). For this analysis, injuries with a severity score of 16 or greater are considered severe.

A sensitivity analysis performed using the 2014 SID determined that the best approach to developing 2015 rates based solely on ICD-9-CM data was to use the first nine months of HCUP data (January 1 through September 30, 2015). On October 1, 2015 (the start of fiscal year 2016), the U.S. transitioned to using ICD-10-CM. Numerator and Denominator counts for the 2015 estimates included only the first nine months of HCUP data. A copy of the sensitivity analysis is available on the HCUP User Support Web site (HCUP-US) at https://www.hcup-us.ahrq.gov/datainnovations/icd10_resources.jsp.

The HCUP Nationwide Emergency Department Sample (NEDS) was created to enable analyses of emergency department (ED) utilization patterns and is the largest all-payer ED database that is publicly available in the United States. The NEDS is a 20-percent stratified sample of hospital-owned EDs in the United States. The NEDS is drawn from statewide data organizations that provide HCUP with data from ED visits that may or may not have resulted in hospital admission. Weights are provided to calculate national estimates.

For more information, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

Measure ID

HCUP_21, 150701043

Measure Title

Distribution of non-trauma center utilizations per 100 emergency department visits related to severe injuries

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP)

Table Description

Geographic Representation: National

Years Available: 2009-2015

Population Subgroups: Age, geographic location (residence), income, region, sex

Data Source

AHRQ, CDOM, HCUP, Nationwide Emergency Department Sample (NEDS)

Denominator

Emergency department visits related to severe injuries

Numerator

Subset of the Denominator who utilized non-trauma centers

Comments

Trauma centers treat both adults and children. Designation of trauma center levels I, II, and III is based on criteria developed by the American College of Surgeons' Committee on Trauma (ACS/COT). Injury severity score is assigned by the ICD Programs for Injury Categorization (ICDPIC) Stata program, with ranges from 1 to 75 (with 75 being the most severe). For this analysis, injuries with a severity score of 16 or greater are considered severe.

A sensitivity analysis performed using the 2014 SID determined that the best approach to developing 2015 rates based solely on ICD-9-CM data was to use the first nine months of HCUP data (January 1 through September 30, 2015). On October 1, 2015 (the start of fiscal year 2016), the U.S. transitioned to using ICD-10-CM. Numerator and Denominator counts for the 2015 estimates included only the first nine months of HCUP data. A copy of the sensitivity analysis is available on the HCUP User Support Web site (HCUP-US) at https://www.hcup-us.ahrq.gov/datainnovations/icd10_resources.jsp.

The HCUP Nationwide Emergency Department Sample (NEDS) was created to enable analyses of emergency department (ED) utilization patterns and is the largest all-payer ED database that is publicly available in the United States. The NEDS is a 20-percent stratified sample of hospital-owned EDs in the United States. The NEDS is drawn from statewide data organizations that provide HCUP with data from ED visits that may or may not have resulted in hospital admission. Weights are provided to calculate national estimates.

For more information, see the HCUP Methods Series Report on Methods Applying AHRQ Quality Indicators to HCUP Data (https://www.hcup-us.ahrq.gov/reports/methods/methods.jsp).

15.7.3. Affordable Hospitalization Cost

Measure ID

150703011

Measure Title

Cost for hospitalizations for dehydration, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for dehydration, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703021

Measure Title

Cost for hospitalizations for urinary tract infection (UTI), adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for urinary tract infection, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703031

Measure Title

Cost for hospitalizations for urinary tract infection (UTI), children ages 3 months to 17 years

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for urinary tract infection, children ages 3 months to 17 years.

Numerator

Not applicable.

Measure ID

150703041

Measure Title

Cost for hospitalizations for pediatric gastroenteritis, children ages 3 months to 17 years

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for pediatric gastroenteritis, children ages 3 months to 17 years.

Numerator

Not applicable.

Measure ID

150703051

Measure Title

Cost for hospitalizations for hypertension, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for hypertension, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703061

Measure Title

Cost for hospitalizations for angina without cardiac procedure, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2005 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for angina without cardiac procedure, adults age 18 and over

Numerator

Not applicable.

Measure ID

150703071

Measure Title

Cost for hospitalizations for chronic obstructive pulmonary disease (COPD), adults age 40 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2005 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for chronic obstructive pulmonary disease (COPD), adults age 40 and over

Numerator

Not applicable.

Measure ID

150703081

Measure Title

Cost for hospitalizations for bacterial pneumonia, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for bacterial pneumonia, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703091

Measure Title

Cost for hospital admissions for all conditions, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2005 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for all conditions, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703101

Measure Title

Cost for hospital admissions for all conditions, excluding COPD, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for all conditions, excluding COPD, adults age 18 and over

Numerator

Not applicable.

Measure ID

150703111

Measure Title

Cost for hospital admissions for all conditions, children ages 6-17

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for all conditions, children ages 6-17.

Numerator

Not applicable.

Measure ID

150703121

Measure Title

Cost for hospital admissions for acute conditions, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for acute conditions, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703131

Measure Title

Cost for hospital admissions for acute conditions, children ages 6-17

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for acute conditions, children ages 6-17.

Numerator

Not applicable.

Measure ID

150703141

Measure Title

Cost for hospital admissions for chronic conditions, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2005 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for chronic conditions, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703151

Measure Title

Cost for hospital admissions for chronic conditions, excluding COPD, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2005 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for chronic conditions, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703161

Measure Title

Cost for hospital admissions for chronic conditions, children ages 6-17

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for chronic conditions, children ages 6-17.

Numerator

Not applicable.

Measure ID

150703181

Measure Title

Cost for hospitalizations for congestive heart failure (CHF), adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for congestive heart failure (CHF), adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703191

Measure Title

Cost for hospitalizations for uncontrolled diabetes without complications, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for uncontrolled diabetes without complications, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703201

Measure Title

Cost for hospitalizations for short-term complications of diabetes, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2005 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for short-term complications of diabetes, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703211

Measure Title

Cost for hospitalizations for short-term complications of diabetes, children ages 6-17

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for short-term complications of diabetes, children ages 6-17.

Numerator

Not applicable.

Measure ID

150703221

Measure Title

Cost for hospitalizations for diabetes with long-term complications, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for diabetes with long-term complications, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703231

Measure Title

Cost for hospitalizations for lower-extremity amputation among patients with diabetes, adults age 18 and over

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for lower-extremity amputation among patients with diabetes, adults age 18 and over.

Numerator

Not applicable.

Measure ID

150703241

Measure Title

Cost for hospitalizations for asthma, adults ages 18-39

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Prevention Quality Indicators (PQIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for asthma, adults ages 18-39.

Numerator

Not applicable.

Measure ID

150703251

Measure Title

Cost for hospitalizations for asthma, children ages 2-17

Measure Source

Agency for Healthcare Research and Quality (AHRQ), Center for Delivery, Organization, and Markets (CDOM), Healthcare Cost and Utilization Project (HCUP), Pediatric Quality Indicators (PDIs)

Table Description

Geographic Representation: National

Years Available: 2000 to 2015

Population Subgroups: National total only

Data Source

AHRQ, CDOM, HCUP, Nationwide Inpatient Sample (NIS) and AHRQ Quality Indicators, version of 4.4.

Denominator

Not applicable. The table includes weighted number of discharges, total cost and average cost per discharge for asthma, children ages 2-17.

Numerator

Not applicable.