"Linking Clinical Data to Administrative Data"
AHRQ Contract with MHA

Potential Benefits to Participants in the Project

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Potential Benefits to Participants

◆ Evaluation and improvement of data quality

◆ Evaluation of comparative performance as a guide to quality improvement

◆ Optional opportunity to explore value of enhanced coding of symptoms and clinical findings

Importance of Data Quality

◆ Distinction between conditions present on admission (comorbidities) and hospital-acquired complications will become increasingly important in quality assessment and in hospital reimbursement

◆ Underreporting or improper designation of hospital-acquired complications may result in distorted performance profiles and in financial penalties

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Evaluation of Data Quality (1)

◆ Rates chronic conditions are not reported as POA

◆ Comparison of rates chronic conditions and associated combination codes are reported as POA

◆ Comparison of rates of reported hospital-acquired complications in high-risk patients discharged dead and discharged alive
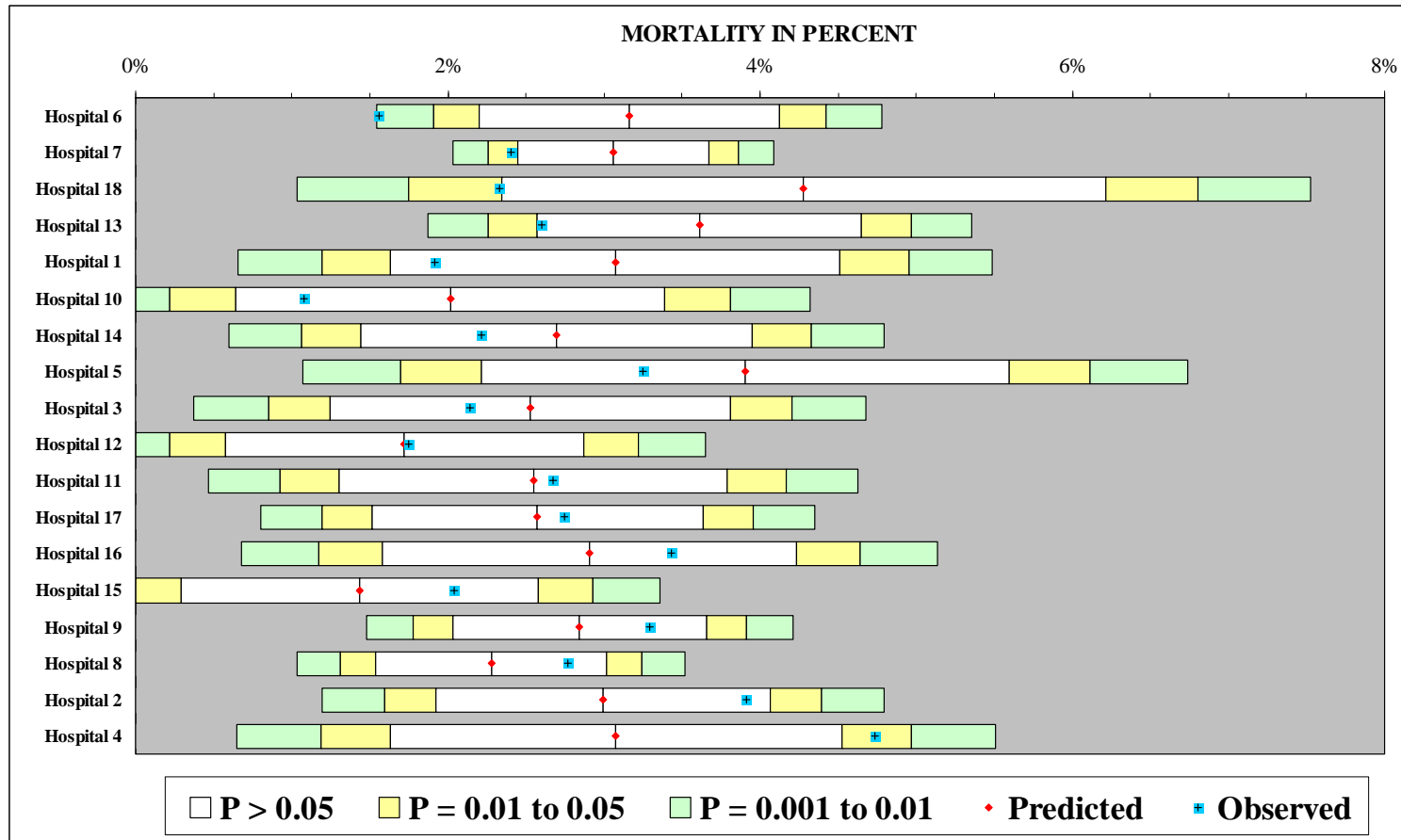
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Evaluation of Data Quality (2)

◆ Rates conditions reported as POA are associated with normal diagnostic admission laboratory data

◆ Rates cases with prolonged risk-adjusted lengths of stay do not have at least one reported hospital-acquired complication

Evaluation of Comparative Performance

◆ Evaluation of measured post-operative complication rates with and without validation using POA code and associated laboratory data

◆ Evaluation of hospital's comparative risks of death and post-operative complications and its risk-adjusted outcome rates with and without enhancement of its analytic database

Risk-Adjusted Mortality - CABG Surgery

Risk-Adjusted Mortality Rates

◆ Acute Myocardial Infarction

◆ Congestive Heart Failure

◆ Acute Cerebrovascular Accident

◆ Gastrointestinal Hemorrhage

◆ Pneumonia

◆ Coronary Artery Bypass Graft Surgery

◆ Percutaneous Transluminal Coronary Angioplasty

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Risk-Adjusted Post-Op Complications

◆ Respiratory Failure

◆ Pulmonary Embolism / Deep Vein Thrombosis

◆ Sepsis

◆ Acute Myocardial Infarction

Enhanced Coding of Clinical Findings

◆ Some ICD-9-CM codes for important symptoms and clinical findings often are underreported, in many cases because coding regulations preclude their use in conjunction with many diagnostic codes

◆ Examples are: coma (780.01), severe malnutrition (260, 261, 262), tachycardia (785.0), tachypnea (786.06), fever (780.6), hypotension (458.9), pleural effusion (511.9)

Collection of Supplementary Codes

◆ Permits evaluation of additional improvement in risk-adjustment of clinical outcomes

◆ Prepares facility for future enhancements to billing databases with revisions of coding standards and analytic practices

◆ Collection of supplementary codes is not required for participation in this project

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