



## Indicators of Inpatient Care in Texas Hospitals, 2004

THCIC will release the *2004 Indicators of Inpatient Care* report in August 2006. Hospitals will be given the opportunity to review and comment on the report prior to its release. THCIC has mailed letters to the THCIC hospital primary contact on June 6<sup>th</sup>, providing each reporting hospital with information allowing access to a restricted website for viewing the data in the report. Only hospitals that reported 2004 data to THCIC will receive access. This site will be available for review beginning June 15, 2006 and ending August 13, 2006. Questions regarding access may be directed to Bryan Shepherd at 512-458-7111 ext 6453.

### **Changes in *Indicators of Inpatient Care in Texas Hospitals for 2004***

The data used to create the report for 2004 included variables derived from Version 20 of the 3M APR-DRG Grouper. These variables are used in the risk adjustment of the mortality indicators and some utilization indicators. Version 15 of the APR-DRG Grouper was used for grouping the data used for earlier reports.

Two indicators, Pediatric Heart Surgery Volume and Pediatric Heart Surgery Mortality, have been dropped from the report for 2004. These indicators are part of a new set of indicators, Pediatric Quality Indicators, specific to children currently being reviewed by THCIC. Pediatric populations, patients under age 18, have also been excluded from the following 13 indicators:

- Esophageal Resection Volume and Mortality
- Pancreatic Resection Volume and Mortality
- Abdominal Aortic Aneurysm (AAA) Repair Volume and Mortality
- Carotid Endarterectomy Volume and Mortality
- Coronary Artery Bypass Graft Volume
- Percutaneous Transluminal Coronary Angioplasty (PTCA) Volume
- Hip Replacement Mortality
- Laparoscopic Cholecystectomy
- Bilateral Cardiac Catheterization

Procedure codes have been added to the Esophageal Resection and AAA Repair indicators. A procedure code was dropped from the PTCA indicators. Diagnosis codes were dropped from the inclusion criteria for Esophageal Resection and Pancreatic Resection volume indicators. Because of these changes volumes and rates for 2004 should not be compared with those for earlier years.

## New Pediatric Quality Indicators

Pediatric Quality Indicators (PedQIs), indicators specific to children, have been released by the Agency for Healthcare Research and Quality (AHRQ). The indicators have been drawn from AHRQ's Inpatient Quality Indicators (IQIs), Patient Safety Indicators (PSIs), and Prevention Quality Indicators (PQIs). They focus on potentially preventable complications and iatrogenic events for pediatric patients treated in hospitals, and on preventable hospitalizations among pediatric patients. The indicators were initially released in February 2006, with the risk-adjustment module released in May.

The indicators included in the PedQIs are:

### Provider-level Pediatric Quality Indicators (13 Indicators)

- Accidental Puncture or Laceration
- Decubitus Ulcer
- Foreign Body Left During Procedure
- Iatrogenic Pneumothorax in Neonates at Risk
- Iatrogenic Pneumothorax in Non-neonates
- Pediatric Heart Surgery Mortality
- Pediatric Heart Surgery Volume
- Postoperative Hemorrhage or Hematoma
- Postoperative Respiratory Failure
- Postoperative Sepsis Wound Dehiscence
- Postoperative Wound Dehiscence
- Selected Infections Due to Medical Care
- Transfusion Reaction

### Area-level Pediatric Quality Indicators (5 Indicators)

- Asthma Admission Rate
- Diabetes Short-Term Complication Rate
- Gastroenteritis Admission Rate
- Perforated Appendix Admission Rate
- Urinary Tract Infection Admission Rate

The children's hospitals have been reviewing the indicators since November 2005. The National Association of Children's Hospitals and Related Institutions (NACHRI) and Child Health Corporation of America (CHCA) have been instrumental in this review. NACHRI earlier worked with some children's hospitals in a validation of the PSIs. This validation used a secure, web-based chart review tool developed by NACHRI that allowed the hospitals to review individual charts to determine whether a patient was appropriately included in an indicator. This chart review tool is also being used to validate the PedQIs. Using data submitted to NACHRI or CHCA, each participating hospital will receive a list of patients included in one of the indicators. Hospitals will use this list to pull patient charts, sampling a minimum of 10 cases for each of the PedQIs. The review is expected to begin in mid-June and to be completed by the end of July. The results of this review will be provided to AHRQ to help refine the current PedQIs and potentially guide the creation of new indicators in the future.

Participation in the PedQI review is open to any hospital supplying data to NACHRI or CHCA. Eight Texas children's hospitals are participating in the review of the PedQIs. 20 non-Texas hospitals have already responded to NACHRI that they would also like to participate in the review or would like additional information.

## Release of 2Q2005 Public Use Data File (PUDF)

THCIC will release the 2q2005 PUDF on June 23<sup>rd</sup>. Those wishing to purchase the PUDF may download the order form and “data user agreement” at

<http://www.dshs.state.tx.us/thcic/Hospitals/HospitalData.shtm>.

## Hospital Discharge Data Training Session

The next training session for submission, correction, and certification of THCIC data is scheduled for *Friday, July 14, 2006, from 9:00 am – 2:00 pm.*

The session will be held in Austin at the Department of State Health Services, 1100 W. 49<sup>th</sup> Street, Room K-100. If you plan to attend please contact Tiffany Overton at [Tiffany.Overton@dshs.state.tx.us](mailto:Tiffany.Overton@dshs.state.tx.us), 512-458-7111 x 2352, and provide the following information about yourself and your facility.

THCIC ID \_\_\_\_\_  
Hospital/Organization \_\_\_\_\_  
City \_\_\_\_\_  
Registrant Name \_\_\_\_\_  
Title \_\_\_\_\_  
Phone Number \_\_\_\_\_  
E-mail Address \_\_\_\_\_

You can attend one or all of them the training sessions. The PowerPoint presentations will be on the THCIC website

<http://www.dshs.state.tx.us/thcic/hospitals/HospitalReportingRequirements.shtm>. Please print these presentations and bring them with you to the session. The tentative schedule follows:

- 9:00 Payer Source Data
- 9:15 Upload and Download of Data Using the Secured Server
- 10:15 Data Submission and KeyClaim Software
- 11:00 Data Correction, DCS Software
- 12:00 Lunch
- 1:00 Data Certification, CertView Software

## Important Phone Numbers

Commonwealth Clinical Systems (CCS)

THCIC Helpdesk – 888-308-4953 or [THCICHelp@comclin.net](mailto:THCICHelp@comclin.net)

CCS web site – [www.thcichelp.com](http://www.thcichelp.com)

HyperTerminal Phone Number – 434-297-0367 (For Data Submission, Corrections and Uploading Certification Comments)

Secured Web Page – <https://sys1.comclin.com/thcic/>

THCIC web site – [www.dshs.state.tx.us/thcic](http://www.dshs.state.tx.us/thcic)

DSHS-Center for Health Statistics – 512-458-7261

**THCIC Staff** – 512-458-7111

Bruce Burns	extension 6431	Rules and policy issues, 837 format issues
Sylvia Cook	extension 6438	Hospital reports, data use
Bryan Shepherd	extension 6453	Hospital reports
Dee Roes	extension 3374	Hospital compliance, data sales
Tiffany Overton	extension 2352	Hospital training (submission, correction, and certification)

**THCIC fax** – 512-458-7740

Reminders and Deadlines

The hospital discharge data **schedule** may be downloaded from  
<http://www.dshs.state.tx.us/THCIC/hospitals/schedule.shtm>.

- ❖ 6/23/2006 – Release of the 2q2005 PUDF
- ❖ 7/14/2006 – Hospital Training in Austin