

AHRQ Pediatric Quality Indicators (PDIs), 2005-2014 plus 2015-Q1-Q3 (January-September) ^{1 2}
Area-Level Indicators for California
Office of Statewide Health Planning and Development (OSHPD)



The Agency for Healthcare Research and Quality (AHRQ) has developed four types of Quality Indicators (QIs), measures of healthcare quality, that make use of hospital inpatient discharge data. **Pediatric Quality Indicators (PDIs)** use indicators from other AHRQ QI modules with adaptations for use among children. Similar to Prevention Quality Indicators, the PDIs identify hospital admissions that evidence suggests may have been avoided through access to high-quality outpatient care.

Area-Level (Statewide, County) hospitalization rates are provided for the following PDI measures:

- PDI #14 Asthma (Age 2-17)
- PDI #15 Diabetes Short-term Complications (Age 6-17)
- PDI #16 Gastroenteritis (Age 3 months-17 years)
- PDI #17 Perforated Appendix (ruptured appendix; Age 1-17)
- PDI #18 Urinary Tract Infection (Age 3 months-17 years)
- PQI #9 Low Birth Weight (<2,500 grams)
- PDI #90 Pediatric Quality Overall Composite (includes PDIs #14, 15, 16, and 18; Age 6-17)
- PDI #91 Pediatric Quality Acute Composite (includes PDIs #16 and 18; Age 6-17)
- PDI #92 Pediatric Quality Chronic Composite (includes PDIs #14 and 15; Age 6-17)

The technical specifications for the above indicators can be found at www.qualityindicators.ahrq.gov/Modules/PDI_TechSpec.aspx.

How to use the Excel PDI multi-year tool:

The Excel PDI multi-year product allows you to select the data for a specific year or specific county. Use the pull-down arrow in the cells located just below the "Year" and "County" headers to make your selection.

Technical Notes:

The age-sex risk-adjusted rates are calculated per 100,000 state or county population with the exception of PDI #17-Perforated Appendix (per 1,000 appendicitis cases) and PQI #9-Low Birth Weight (per 1,000 newborns). The program calculates age-sex risk-adjusted rates regardless of the number of cases available (above a minimum of three). **However, PDI rates based on only a few cases should be interpreted with caution.** Blank rates in PDI #17 indicate that less than three appendicitis cases (denominator) were diagnosed. Except for PDI #17 and PQI #9, the PDI module excludes cases where a patient's ZIP code could not be assigned to a California county (i.e. ZIP code was reported as unknown, foreign, homeless, or out-of-state). For PDI #17 and PQI #9, the county is represented as "Unassigned."

¹ Due to a change in the reporting of diagnoses/procedures from ICD-9-CM to ICD-10-CM/PCS (effective October 1, 2015) **AND** the inability of the PDI software to handle both code sets concurrently, OSHPD is only releasing the PDI data for the first 3 quarters of 2015 (January-September). The population denominator also has been adjusted by 25% to account for the missing quarter. Full year reporting is expected to resume with the release of the 2016 data, although comparability with prior data is unlikely.

² **CAUTION** is advised when comparing the 2015-Q1-Q3 (January-September) rates with the annual rates from prior years. Per AHRQ, "seasonality" could have an effect on the 2015 data. For example, patients may have a financial incentive to push elective procedures into the (missing) fourth quarter due to health coverage. Also, medical conditions, like influenza, pneumonia, and COPD may be more prevalent during that season. The impact of "seasonality" on the data is not currently known.

Data Sources:

Numerator = AHRQ, Pediatric Quality Indicators, Version 5.0.2; OSHPD CA Patient Discharge Data.

Denominator = AHRQ, Population File, Version 5.0.2, U.S. Census Bureau.

Risk-Adjusted Rate = The risk-adjusted rate is the rate the state/county would have if it had an age-sex case-mix like the reference population. The reference population is the 2012 State Inpatient Database (numerator), a large national file of hospital discharges from 45 states, and the 2012 U.S. Census population of those states (denominator).

More information about the AHRQ Quality Indicators is available at www.qualityindicators.ahrq.gov.

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