

Inpatient Hospital Visits

The following health care utilization indicators are defined in this section:

- I. Inpatient visits related to drug poisoning
 1. Drug-Related Visits
 - a. Number of Drug-Related Visits
 - b. *Proportion of Visits Related to Drugs*
 2. Opioid-Related Visits
 - a. Number of Opioid-Related Visits
 - b. *Proportion of Visits Related to Opioids*
 3. Non-Heroin Opioid-Related Visits
 - a. Number of Non-heroin Opioid-Related Visits
 - b. *Proportion of Visits Related to Non-heroin Opioids*
 4. Heroin-Related Visits
 - a. Number of Heroin-Related Visits
 - b. *Proportion of Visits Related to Heroin*

- II. Inpatient visits related to neonates/infants and maternal drug use
 1. Neonatal Abstinence Syndrome
 - a. Number of Neonatal Abstinence Syndrome Visits
 - b. *Proportion of Visits related to Neonatal Abstinence Syndrome*
 2. Substance Exposed Infants
 - a. Number of Substance Exposed Infant Visits
 - b. *Proportion of Visits related to Substance Exposed Infants*

Indicator group	Drug-Related Visits												
Indicator names	a. Number of Drug-Related Inpatient Visits b. <i>Proportion of Inpatient Visits Related to Drugs</i>												
Indicator definition	All unintentional, self-harm, assault, or undetermined acute drug poisoning (sometimes called drug overdose) inpatient hospitalizations regardless of discharge status. Inpatient hospitalizations related to subsequent encounters or sequelae, adverse effects, or underdosing are excluded. Drugs are defined as any medicine or substance that have a physiological effect when ingested, injected, or absorbed into the body. This indicator includes legal and illicit drugs and excludes poisonings due to alcohol alone.												
Numerator	Inpatient hospitalizations with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 960.0-979.9; E850.0-E858.9, E950.0-E950.5, E962.0, E980.0-E980.5; T36.OX1A-T50.94XD, excluding codes where the visit type (7 th) character is D or S and codes where the intent (5 th or 6 th) character is 5 or 6.												
Denominator	All inpatient hospitalizations with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)												
Measures of Frequency	Annual count of inpatient hospitalizations; Annual proportion of inpatient hospitalizations; Quarterly count of inpatient hospitalizations; Quarterly proportion of inpatient hospitalizations												
Data Resource	Louisiana Hospital Inpatient Discharge Database (LaHIDD); reported to LDH/OPH/BHI by legislative mandate												
Period for case definition	Annual: calendar year (1 January – 31 December) based on date of discharge Quarter: 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December												
Geography/Demographic Group Variations													
Race	White			Black			Other			All Races		Age Groups	Total
Gender	M	F	Total	M	F	Total	M	F	Total	All Males	All Females		
Geography													
State	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	√	√	√	√
Region			√			√			√	√	√	√	√
Parish			√			√			√	√	√	√	√
Limitations of indicator	This indicator was specifically designed to capture acute drug poisonings, and therefore intentionally excludes secondary and sequelae-related inpatient hospitalizations that might better estimate the overall burden of drug poisonings on the hospital system. Searching all diagnosis codes for drug poisoning ICD-CM codes ensures the inclusion of all possible drug poisoning related inpatient hospitalizations, including those for which the drug poisoning was of secondary concern.												
Limitations of data resource	Acute care hospitals are required to report to LAHIDD, but not all do. It receives data from 57% of hospitals and 77.5% of hospital beds in Louisiana. Population based rates cannot be calculated because the data is not representative of the population.												

Text in italics indicates additional indicators that are in development

Indicator group	Opioid-Related Visits												
Indicator names	a. Number of Opioid-Related Inpatient Visits <i>b. Proportion of Inpatient Visits Related to Opioids</i>												
Indicator definition	All unintentional, self-harm, assault, or undetermined acute opioid poisoning (sometimes called opioid overdose) inpatient hospitalizations regardless of discharge status. Inpatient hospitalizations related to subsequent encounters or sequelae, adverse effects, or underdosing are excluded. Opioids include natural and semi-synthetic opioids (e.g. codeine, morphine, oxycodone, hydrocodone, etc.), heroin, methadone, and other synthetic opioids (e.g. fentanyl, carfentanil, etc.). This indicator includes legal and illicit opioids.												
Numerator	Inpatient hospitalizations with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 965.00-965.09; E850.0-E850.2; T40.0X1A-T40.4X5A, T40.601A-T40.694A, excluding codes where the visit type (7 th) character is D or S and codes where intent (5 th or 6 th) character is 5 or 6.												
Denominator	All inpatient hospitalizations with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)												
Measures of Frequency	Annual count of inpatient hospitalizations; Annual proportion of inpatient hospitalizations; Quarterly count of inpatient hospitalizations; Quarterly proportion of inpatient hospitalizations												
Data Resource	Louisiana Hospital Inpatient Discharge Database (LaHIDD); reported to LDH/OPH/BHI by legislative mandate												
Period for case definition	Annual: calendar year (1 January – 31 December) based on date of discharge Quarter: 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December												
Geography/Demographic Group Variations													
Race	White			Black			Other			All Races		Age Groups	Total
Gender	M	F	Total	M	F	Total	M	F	Total	All Males	All Females		
Geography													
State	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	√	√	√	√
Region			√			√			√	√	√	√	√
Parish			√			√			√	√	√	√	√
Limitations of indicator	This indicator was specifically designed to capture acute opioid poisonings, and therefore intentionally excludes secondary and sequelae-related inpatient hospitalizations that might better estimate the overall burden of opioid poisonings on the hospital system. Searching all diagnosis codes for opioid poisoning ICD-CM codes ensures the inclusion of all possible opioid poisoning related inpatient hospitalizations, including those for which the opioid poisoning was of secondary concern.												
Limitations of data resource	Acute care hospitals are required to report to LAHIDD, but not all do. It receives data from 57% of hospitals and 77.5% of hospital beds in Louisiana. Population based rates cannot be calculated because the data is not representative of the population.												

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Indicator group	Non-Heroin Opioid-Related Visits												
Indicator names	a. Number of Non-Heroin Opioid-Related Visits <i>b. Proportion of Visits Related to Non-Heroin Opioids</i>												
Indicator definition	All unintentional, self-harm, assault, or undetermined acute non-heroin opioid poisoning (sometimes called non-heroin opioid overdose) inpatient hospitalizations regardless of discharge status. Inpatient hospitalizations related to subsequent encounters or sequelae, adverse effects, or underdosing are excluded. Non-heroin opioids include natural and semi-synthetic opioids (e.g. codeine, morphine, oxycodone, hydrocodone, etc.), methadone, and other synthetic opioids (e.g. fentanyl, carfentanil, etc.). This indicator includes legal and illicit opioids.												
Numerator	Inpatient hospitalizations with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 965.00, 965.02, 965.09; E850.0, E850.2; T40.0X1A-T40.0X4A, T40.2X1A-T40.4X4A, T40.601A-T40.694A, excluding codes where the visit type (7 th) character is D or S and codes where the intent (5 th or 6 th) character is 5 or 6.												
Denominator	All inpatient hospitalizations with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)												
Measures of Frequency	Annual count of inpatient hospitalizations; Annual proportion of inpatient hospitalizations; Quarterly count of inpatient hospitalizations; Quarterly proportion of inpatient hospitalizations												
Data Resource	Louisiana Hospital Inpatient Discharge Database (LaHIDD); reported to LDH/OPH/BHI by legislative mandate												
Period for case definition	Annual: calendar year (1 January – 31 December) based on date of discharge Quarter: 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December												
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Race	White			Black			Other			All Races		Age Groups	Total
Gender	M	F	Total	M	F	Total	M	F	Total	All Males	All Females		
Geography													
State	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	√	√	√	√
Region			√			√			√	√	√	√	√
Parish			√			√			√	√	√	√	√
Limitations of indicator	This indicator was specifically designed to capture acute non-heroin opioid poisonings, and therefore intentionally excludes secondary and sequelae-related inpatient hospitalizations that might better estimate the overall burden of non-heroin opioid poisonings on the hospital system. Searching all diagnosis codes for non-heroin opioid poisoning ICD-CM codes ensures the inclusion of all possible non-heroin opioid poisoning related inpatient hospitalizations, including those for which the non-heroin opioid poisoning was of secondary concern.												
Limitations of data resource	Acute care hospitals are required to report to LAHIDD, but not all do. It receives data from 57% of hospitals and 77.5% of hospital beds in Louisiana. Population												

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	based rates cannot be calculated because the data is not representative of the population.
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Indicator group	Heroin-Related Visits												
Indicator names	a. Number of Heroin-Related Visits <i>b. Proportion of Inpatient Hospitalizations Related to Heroin</i>												
Indicator definition	All unintentional, self-harm, assault, or undetermined acute heroin opioid poisoning (sometimes called heroin opioid overdose) Inpatient Hospitalizations regardless of discharge status. Inpatient hospitalizations related to subsequent encounters or sequelae, adverse effects, or underdosing are excluded. Heroin is an illicit opioid.												
Numerator	Inpatient hospitalizations with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 965.01; E850.1; T40.1X1A, T40.1X2A, T40.1X3A, T40.1X4A												
Denominator	All inpatient hospitalizations with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)												
Measures of Frequency	Annual count of inpatient hospitalizations; Annual proportion of inpatient hospitalizations; Quarterly count of inpatient hospitalizations; Quarterly proportion of inpatient hospitalizations												
Data Resource	Louisiana Hospital Inpatient Discharge Database (LaHIDD); reported to LDH/OPH/BHI by legislative mandate												
Period for case definition	Annual: calendar year (1 January – 31 December) based on date of discharge Quarter: 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December												
Geography/Demographic Group Variations													
Race	White			Black			Other			All Races		Age Groups	Total
Gender	M	F	Total	M	F	Total	M	F	Total	All Males	All Females		
Geography													
State	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	√	√	√	√
Region			√			√			√	√	√	√	√
Parish			√			√			√	√	√	√	√
Limitations of indicator	This indicator was specifically designed to capture acute heroin poisonings, and therefore intentionally excludes secondary and sequelae-related inpatient hospitalizations that might better estimate the overall burden of heroin poisonings on the hospital system. Searching all diagnosis codes for heroin poisoning ICD-CM codes ensures the inclusion of all possible heroin poisoning related inpatient hospitalizations, including those for which the heroin poisoning was of secondary concern.												
Limitations of data resource	Acute care hospitals are required to report to LAHIDD, but not all do. It receives data from 57% of hospitals and 77.5% of hospital beds in Louisiana. Population based rates cannot be calculated because the data is not representative of the population.												

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Indicator group	Neonatal Abstinence Syndrome Visits												
Indicator names	a. Neonatal Abstinence Syndrome Inpatient Hospitalizations b. <i>Proportion of Inpatient Hospitalizations Related to Neonatal Abstinence Syndrome</i>												
Indicator definition	Any visit of an infant with a diagnosis of neonatal abstinence syndrome. Neonatal Abstinence Syndrome is defined as a birth to 1 month old infant exhibiting withdrawal symptoms from maternal drug use. Ideally, infants with withdrawal symptoms from therapeutic drug use are excluded from this definition, but these infants are occasionally included due to the lack of specificity of the ICD-9-CM codes.												
Numerator	Inpatient hospitalizations with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 779.5; P96.1												
Denominator	All inpatient hospitalizations with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)												
Measures of Frequency	Annual count of inpatient hospitalizations; Annual proportion of inpatient hospitalizations; Quarterly count of inpatient hospitalizations; Quarterly proportion of inpatient hospitalizations												
Data Resource	Louisiana Hospital Inpatient Discharge Database (LaHIDD); reported to LDH/OPH/BHI by legislative mandate												
Period for case definition	Annual: calendar year (1 January – 31 December) based on date of discharge Quarter: 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December												
Geography/Demographic Group Variations													
Race	White			Black			Other			All Races		Age Groups	Total
Gender	M	F	Total	M	F	Total	M	F	Total	All Males	All Females		
Geography													
State	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	√	√	NA	√
Region			√			√			√	√	√	NA	√
Parish			√			√			√	√	√	NA	√
Limitations of indicator	The diagnosis of NAS is largely subjective and varies by hospital system. Mothers and infants are always not tested for substances and some systems don't include cases where the infant was not admitted to the ICU. Therefore the numbers across the state are not necessarily comparable, as there is no standard methodology for assigning the ICD-CM codes of interest. The ICD-9-CM code is less specific than the ICD-10-CM code and the codes do not directly match. Because of this, numbers before and after October, 2015 are not comparable.												
Limitations of data resource	Acute care hospitals are required to report to LAHIDD, but not all do. It receives data from 57% of hospitals and 77.5% of hospital beds in Louisiana. Population based rates cannot be calculated because the data is not representative of the population.												

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Indicator group	Substance Exposed Infants Visits												
Indicator names	a. Substance Exposed Infants Inpatient Hospitalizations (Adj)* b. <i>Proportion of Inpatient Hospitalizations Related to Substance Exposed Infants</i>												
Indicator definition	Any hospital visit where an infant is diagnosed as “substance exposed”. This term refers to an infant who is exposed to a narcotic or hallucinogen (ICD-9-CM) or drug of addiction (ICD-10-CM) prior to birth through the mother’s usage. The infant does not need to display symptoms, nor does the exposure need to be detected to qualify as a SEI.												
Numerator	Inpatient hospitalizations with the following ICD-9-CM or ICD-10-CM codes in any diagnosis field: 760.72, 760.73*; P04.49												
Denominator	All inpatient hospitalizations with a discharge in the time period relevant to the measure (the past three months for quarterly, the twelve months for annually)												
Measures of Frequency	Annual count of inpatient hospitalizations; Annual proportion of inpatient hospitalizations; Quarterly count of inpatient hospitalizations; Quarterly proportion of inpatient hospitalizations												
Data Resource	Louisiana Hospital Inpatient Discharge Database (LaHIDD); reported to LDH/OPH/BHI by legislative mandate												
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Geography													
State	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	<i>(v)</i>	<i>(v)</i>	√	√	√	NA	√
Region			√			√			√	√	√	NA	√
Parish			√			√			√	√	√	NA	√
Limitations of indicator	The diagnosis of a substance exposed infant is largely subjective and varies by hospital system. Mothers and infants are always not tested for substances and some systems don’t include cases where the infant was not admitted to the ICU. Therefore the numbers across the state are not necessarily comparable, as there is no standard methodology for assigning the ICD-CM codes of interest. The ICD-10-CM code is less specific than the ICD-9-CM codes and the codes do not directly match. Because of this, numbers before and after October, 2015 are not comparable.*												
Limitations of data resource	Acute care hospitals are required to report to LAHIDD, but not all do. It receives data from 57% of hospitals and 77.5% of hospital beds in Louisiana. Population based rates cannot be calculated because the data is not representative of the population.												

*The original substance exposed infant indicator for ICD-9-CM only included 760.72, and not 760.73. In an effort to bring the ICD-9-CM and ICD-10-CM numbers closer together, the 760.73 was added to adjust the indicator.

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