

**Inpatient Hospital Visits**

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

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

*Text in italics* indicates additional indicators that are in development

<b>Indicator group</b>	Neonatal Opioid Withdrawal Syndrome (NOWS) Visits													
<b>Indicator names</b>	a. Neonatal Opioid Withdrawal Syndrome Inpatient Hospitalizations (ICD-9) b. Neonatal Opioid Withdrawal Syndrome Inpatient Hospitalizations (ICD-10) c. <i>Proportion of Inpatient Hospitalizations Related to Neonatal Abstinence Syndrome</i>													
<b>Indicator definition</b>	Any visit of an infant with a diagnosis of neonatal abstinence syndrome. Neonatal Opioid Withdrawal 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. Due to changes in the ICD-CM coding system in October 2015, and subsequent incomparability between the two versions this indicator has been split into two indicators: ICD-9-CM (2010—2015Q3) and ICD-10-CM (2013Q4—).													
<b>Numerator</b>	Inpatient hospitalizations with the following ICD-9-CM or ICD-10-CM codes in <b>any</b> diagnosis field:  779.5; P96.1													
<b>Denominator</b>	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)													
<b>Measures of Frequency</b>	Annual count of inpatient hospitalizations; Annual proportion of inpatient hospitalizations; Quarterly count of inpatient hospitalizations; Quarterly proportion of inpatient hospitalizations													
<b>Data Resource</b>	Louisiana Hospital Inpatient Discharge Database (LaHIDD); reported to LDH/OPH/BHI by legislative mandate													
<b>Period for case definition</b>	<b>Annual:</b> calendar year (1 January – 31 December) based on date of discharge <b>Quarter:</b> 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December													
<b>Geography/Demographic Group Variations</b>														
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	√	√	√	√	√	√	√	√	√	√	√	NA	√	
Region			√			√			√	√	√	NA	√	
Parish			√			√			√	√	√	NA	√	
<b>Limitations of indicator</b>	The diagnosis of NOWS 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.													

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**LOUISIANA OPIOID SURVEILLANCE INITIATIVE**

Bureau of Health Informatics



<b>Limitations of data resource</b>	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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<b>Indicator group</b>	Substance Exposed Infants Visits
<b>Indicator names</b>	a. Substance Exposed Infants Inpatient Hospitalizations (ICD-9) b. Substance Exposed Infants Inpatient Hospitalizations (ICD-10) c. <i>Proportion of Inpatient Hospitalizations Related to Substance Exposed Infants</i>
<b>Indicator definition</b>	Any hospital visit where an infant is diagnosed as “substance exposed”. This term refers to an infant who is exposed to a narcotic (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. Due to changes in the ICD-CM coding system in October 2015, and subsequent incomparability between the two versions this indicator has been split into two indicators: ICD-9-CM (2010—2015Q3) and ICD-10-CM (2013Q4—).
<b>Numerator</b>	Inpatient hospitalizations with the following ICD-9-CM or ICD-10-CM codes in <b>any</b> diagnosis field: 760.72; P04.49
<b>Denominator</b>	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)
<b>Measures of Frequency</b>	Annual count of inpatient hospitalizations; Annual proportion of inpatient hospitalizations; Quarterly count of inpatient hospitalizations; Quarterly proportion of inpatient hospitalizations
<b>Data Resource</b>	Louisiana Hospital Inpatient Discharge Database (LaHIDD); reported to LDH/OPH/BHI by legislative mandate
<b>Period for case definition</b>	<b>Annual:</b> calendar year (1 January – 31 December) based on date of discharge <b>Quarter:</b> 1 January – 31 March, 1 April – 30 June, 1 July – 30 September, 1 October – 31 December

<b>Geography/Demographic Group Variations</b>													
	White			Black			Other			All Races		Age Groups	Total
	M	F	Total	M	F	Total	M	F	Total	All Males	All Females		
Geography													
State	√	√	√	√	√	√	√	√	√	√	√	NA	√
Region			√			√			√	√	√	NA	√
Parish			√			√			√	√	√	NA	√

<b>Limitations of indicator</b>	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
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