

Delayed or Missed Care Variable Definitions

Possible Poverty of Homelessness

- One or more of these ICD9 diagnosis codes ever before the end of the most recent time frame:
 - o V600 - Lack of housing
 - o V601 - Inadequate housing
 - o V602 - Inadequate material resources

OR

- The patient's social history documentation from the electronic health record (EHR) contained the word "SHELTER" or "HOMELESS" at least once ever before the end of the most recent time frame

Indication of Mental Health

- One or more ED visits (includes admits) with a mental health problem-related diagnosis during the baseline time frame

OR

- One or more DRG defined mental disease/disorder related hospitalizations during the baseline time frame

OR

- Categorized into one of the following mental health hierarchy categories using information from the baseline time frame and from before the end of the most recent time frame:
 - o Bipolar Disorder (ever on problem list or diagnosis in baseline time frame)
 - o Schizophrenia and Psychotic Disorders (ever on problem list or diagnosis in the baseline time frame)
 - o Substance Use (ever on the problem list)
 - o Behavior or Personality Disorder (ever on the problem list)

Frailty

- Three or more ACG frailty conditions ever before the end of the most recent time frame

No Show Appointments

- Two or more no show appointments (E&M and non-E&M) to any specialty in the EHR during the baseline time frame

Polypharmacy

- Five or more unique prescribed therapeutic pharmaceutical classes ordered in the EHR during the baseline time frame

OR

- Five or more unique oral and injectable drug classes (clinical count) billed in pharmacy claims during the baseline time frame

Uncontrolled Hypertension

- Most recent systolic blood pressure in the EHR greater than 140 OR a most recent diastolic blood pressure greater than 90

AND

- Diagnosis of hypertension in the EHR or in claims during the baseline time frame
 - o Defined using CCS categories
- OR
- Patient on the hypertension registry in the EHR ever before the end of the most recent time frame
- OR
- Tu-defined hypertension in claims during the baseline time frame

Uncontrolled Diabetes

- Most recent A1C value in the EHR that was greater than or equal to 9 during the baseline time frame

AND

- Diabetes diagnosis in the EHR or in claims ever before the end of the most recent time frame
 - o Defined using elixhauser definition (complicated or uncomplicated diabetes)
- OR
- Patient on the diabetes registry in the EHR ever before the end of the most recent time frame
- OR
- Hebert-defined diabetes in claims ever before the end of the most recent time frame

Cardiovascular Disease or Stroke

- Ever before the end of the most recent time frame had a condition in the EHR or in claims in one of the following CCS categories:
 - o Acute myocardial infarction
 - o Cardiomyopathy and Structural Heart Disease
 - o Cerebrovascular disease
 - o Conduction disorder or cardiac dysrhythmia
 - o Congestive heart failure
 - o Coronary atherosclerosis
 - o Heart valve disorder
 - o Pulmonary heart disease

OR

- Newton-defined stroke in claims ever before the end of the most recent time frame

Hearing Loss

- Hearing loss diagnosis or other ear and sense organ disorders in claims (or EHR if EHR-only) during the baseline time frame

End Stage Liver Disease (added 4/28/21)

- Ever before the end of the most recent time frame had Vong-defined end stage liver disease in claims (or EHR if EHR-only)

End Stage Renal Disease or CKD (Stage 4 or 5) (added 4/28/21)

- Ever before the end of the most recent time frame had 'UW defined' end stage renal disease (icd9=5856) or had 'UW defined' Stage 4 (icd9=5854) or 5 (icd9=5855) chronic kidney disease in claims (or EHR if EHR-only)

Unplanned Hospitalization (added 4/28/21)

- Unplanned hospitalization during the baseline time frame in claims. If EHR-only, this will only count UW unplanned hospitalizations

Emergency Department Visit not Resulting in Admission (added 4/28/21)

- Emergency department visit during the baseline time frame in claims. If EHR-only, this will only count UW ED Visits.