Healthcare Cost and Utilization Project (HCUP)

Overview of HCUP Databases, Tools, & Resources

Agency for Healthcare Research and Quality
The largest collection of multiyear, all-payer, encounter-level data:
- Inpatient
- Emergency department
- Ambulatory surgery hospital-based administrative data
HCUP Database Participation
2009 Data Year

Key:
- Nonparticipating
- Partners Providing Inpatient Data Only
- Partners Providing Inpatient & Ambulatory Surgery Data
- Partners Providing Inpatient & Emergency Department Data
- Partners Providing Inpatient, Ambulatory Surgery, & Emergency Department Data
Current HCUP Partners

- Arizona Department of Health Services
- Arkansas Department of Health
- California Office of Statewide Health Planning and Development
- Colorado Hospital Association
- Connecticut Integrated Health Information (Chime, Inc.)
- Florida Agency for Health Care Administration
- Georgia Hospital Association
- Hawaii Health Information Corporation
- Illinois Department of Public Health
- Indiana Hospital and Health Association
- Iowa Hospital Association
- Kansas Hospital Association
Current HCUP Partners

- **Kentucky** Cabinet for Health and Family Services
- **Louisiana** Department of Health and Hospitals
- **Maine** Health Data Organization
- **Maryland** Health Services Cost Review Commission
- **Massachusetts** Division of Health Care Finance and Policy
- **Michigan** Health and Hospital Association
- **Minnesota** Hospital Association
- **Missouri** Hospital Industry Data Institute
- **Nebraska** Hospital Association
- **Nevada** Division of Health Care Financing and Policy, Department of Health and Human Services
- **New Hampshire** Department of Health and Human Services
Current HCUP Partners

- **New Jersey** Department of Health and Senior Services
- **New Mexico** Health Policy Commission
- **New York** State Department of Health
- **North Carolina** Department of Health and Human Services
- **Ohio** Hospital Association
- **Oklahoma** Health Care Information Center for Health Statistics
- **Oregon** Association of Hospitals and Health Systems
- **Pennsylvania** Health Care Cost Containment Council
- **Rhode Island** Department of Health
- **South Carolina** State Budget and Control Board
- **South Dakota** Association of Health Care Organizations
- **Tennessee** Hospital Association
Current HCUP Partners

- **Texas** Department of State Health Services
- **Utah** Department of Health
- **Vermont** Association of Hospitals and Health Systems
- **Virginia** Health Information
- **Washington** State Department of Health
- **West Virginia** Health Care Authority
- **Wisconsin** Department of Health and Family Services
- **Wyoming** Hospital Association

Continuing to recruit additional States to join the HCUP Partnership
Overview of HCUP Data
From Patient Hospital Visit to HCUP Record

ED Visit
Scheduled Admission
Transfer

Reception → Admit → Care → Discharge

Patient Perspective

Data Perspective

Patient Record

Patient Record

Discharge Summary

Medical Coder → Billing Dept

Bill Generated
Patient enters hospital

Hospital creates billing record

AHRQ standardizes data to create uniform HCUP databases

States store data in varying formats

Hospital sends billing data and any additional data elements to data organizations
### What HCUP Is and Is Not

<table>
<thead>
<tr>
<th>HCUP is...</th>
<th>HCUP is NOT...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discharge database for health care encounters</td>
<td>A survey</td>
</tr>
<tr>
<td>All payer, including uninsured patients</td>
<td>Specific to a single payer, e.g., Medicare</td>
</tr>
<tr>
<td>Hospital, ambulatory surgery, emergency department data</td>
<td>Office visits, pharmacy, laboratory, radiology</td>
</tr>
<tr>
<td>All hospital discharges</td>
<td>Only a sample</td>
</tr>
<tr>
<td>Accessible multiple ways: raw data, regular reports, online</td>
<td>Just another database</td>
</tr>
</tbody>
</table>
Six Types of HCUP Databases

- State Inpatient Databases (SID)
- State Emergency Department Databases (SEDD)
- State Ambulatory Surgery Databases (SASD)
- Nationwide Inpatient Sample (NIS)
- Nationwide Emergency Department Sample (NEDS)
- Kids’ Inpatient Database (KID)
HCUP State Databases

- **SID**: All inpatient hospital discharge data (including admissions that started in the ED) from participating HCUP States
- **SEDD**: Emergency department data (treat and release) from participating HCUP States
- **SASD**: Ambulatory surgery data (hospital based and some freestanding) from participating HCUP States
What Data Elements Are Included in the Core File?

- Patient demographics (age, sex)
- Diagnoses and procedures (ICD-9-CM, DRG)
- Expected payer
- Length of stay
- Patient disposition
- Admission source and type
- Admission month
- Weekend admission
Some Data Elements
Vary by State

- Race/ethnicity
- Patient county
- Patient ZIP Code
- Severity of illness
- Birth weight
- Procedure date (days from admission)
- Primary payer details
- Secondary payer
- Detailed charges
- Patient identifiers encrypted
- Physician identifiers encrypted
- Physician specialty
- Hospital identifier unencrypted
### Example: Payer Detail Varies by State

#### PAY1_X

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>Medicare</td>
</tr>
<tr>
<td>D</td>
<td>Medicaid</td>
</tr>
<tr>
<td>B</td>
<td>Blue Cross and Blue Shield</td>
</tr>
<tr>
<td>I, S</td>
<td>Other Insurance Comp; Self Ins</td>
</tr>
<tr>
<td>H</td>
<td>HMO-PPO</td>
</tr>
<tr>
<td>P</td>
<td>Self-pay</td>
</tr>
<tr>
<td>Z</td>
<td>Free</td>
</tr>
<tr>
<td>W</td>
<td>Workers' Comp</td>
</tr>
<tr>
<td>C</td>
<td>CHAMPUS</td>
</tr>
<tr>
<td>E, N</td>
<td>Other Government</td>
</tr>
<tr>
<td>L, O</td>
<td>Other</td>
</tr>
<tr>
<td>3, 5, A, F, G, J, K, Y</td>
<td>Unknown</td>
</tr>
<tr>
<td>Other values</td>
<td>Other values</td>
</tr>
</tbody>
</table>

#### PAY1 (Standardized)

<table>
<thead>
<tr>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Medicare</td>
</tr>
<tr>
<td>2</td>
<td>Medicaid</td>
</tr>
<tr>
<td>3</td>
<td>Private Insurance</td>
</tr>
<tr>
<td>4</td>
<td>Self-pay</td>
</tr>
<tr>
<td>5</td>
<td>No charge</td>
</tr>
<tr>
<td>6</td>
<td>Other</td>
</tr>
<tr>
<td>A</td>
<td>Invalid</td>
</tr>
</tbody>
</table>
### Example: Race Detail Varies by State

<table>
<thead>
<tr>
<th>RACE_X</th>
<th>RACE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Value</td>
<td>Description</td>
</tr>
<tr>
<td>1</td>
<td>White</td>
</tr>
<tr>
<td>2</td>
<td>Black</td>
</tr>
<tr>
<td>3</td>
<td>Hispanic</td>
</tr>
<tr>
<td>4</td>
<td>Hawaiian</td>
</tr>
<tr>
<td>5</td>
<td>Chinese</td>
</tr>
<tr>
<td>6</td>
<td>Filipino</td>
</tr>
<tr>
<td>7</td>
<td>Japanese</td>
</tr>
<tr>
<td>8</td>
<td>Other Asian</td>
</tr>
<tr>
<td>9</td>
<td>Other Pacific Islander</td>
</tr>
<tr>
<td>10</td>
<td>Native American</td>
</tr>
<tr>
<td>11</td>
<td>Mixed or Other</td>
</tr>
</tbody>
</table>
## HCUP State Files vs. Data Files

### Received Directly From State

<table>
<thead>
<tr>
<th>HCUP State Files</th>
<th>Partner State Files</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subset of data elements</td>
<td>All data elements</td>
</tr>
<tr>
<td>Value-added data elements</td>
<td>May not have same value-added elements</td>
</tr>
<tr>
<td>Uniformly coded across States</td>
<td>Not uniformly coded across States</td>
</tr>
<tr>
<td>Standard data quality checks</td>
<td>Variability in quality checks by State</td>
</tr>
<tr>
<td>Lag time</td>
<td>More timely</td>
</tr>
</tbody>
</table>
Two Methods To Obtain HCUP Data

HCUP Central Distributor
www.hcup-us.ahrq.gov/tech_assist/centdist.jsp

HCUP Partner States
http://www.hcup-us.ahrq.gov/partners.jsp
States Releasing State Databases
Through HCUP Central Distributor

1990 – 2008*

- Arizona
- Arkansas
- California
- Colorado
- Florida
- Hawaii
- Iowa
- Kentucky
- Maine
- Maryland
- Massachusetts
- Michigan
- Nebraska
- Nevada
- New Jersey
- New York
- North Carolina
- Oregon
- Rhode Island
- South Carolina
- South Dakota
- Utah
- Vermont
- Washington
- West Virginia
- Wisconsin

* Not all States participated in all years and for all databases.
Impact of the HealthChoice Program on Cesarean Section and Vaginal Birth After C-Section Deliveries: A Retrospective Analysis (1995 to 2000)

Misra A, 2008
Example of Findings in Maryland

- Overall increase in use of primary and repeat cesarean sections in Maryland hospitals
- However, HealthChoice limited this increase for Medicaid enrollees relative to privately insured

Table 1 continued

<table>
<thead>
<tr>
<th>Year</th>
<th>MEDICAID (Total deliveries = 17,463)</th>
<th>PRIVATE (Total deliveries = 42,288)</th>
<th>MEDICAID (Total deliveries = 20,728)</th>
<th>PRIVATE (Total Deliveries = 42,570)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of discharge</td>
<td>1995 (Total deliveries = 63,570)</td>
<td>2000 (Total deliveries = 65,173)</td>
<td>1995 (Total deliveries = 42,288)</td>
<td>2000 (Total deliveries = 42,570)</td>
</tr>
<tr>
<td>(Outcome)</td>
<td>Primary cesarean section</td>
<td>Repeat cesarean section</td>
<td>Primary cesarean section</td>
<td>Repeat cesarean section</td>
</tr>
<tr>
<td>Number of patients</td>
<td>1,000</td>
<td>778</td>
<td>3,523</td>
<td>2,002</td>
</tr>
<tr>
<td>Other complications</td>
<td>0.29%</td>
<td>0.14%</td>
<td>0.39%</td>
<td>0.20%</td>
</tr>
<tr>
<td>Obesity</td>
<td>0.00%</td>
<td>0.00%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Gestational diabetes</td>
<td>0.05%</td>
<td>0.01%</td>
<td>0.08%</td>
<td>0.02%</td>
</tr>
</tbody>
</table>

Source: 1995 and 2000 Healthcare cost and utilization project databases, AHRQ. a All cohort differences were statistically significant at P < 0.01. b Percentage of primary cesarean, repeat cesarean, and VBAC deliveries by Medicaid and private insurances. c Percentage of total deliveries by year
**HCUP National Databases**

- **NIS**
  - Inpatient hospital discharge data (including admissions that started in the ED) from a sample of hospitals in participating HCUP States

- **KID**
  - Pediatric inpatient hospital discharge data (including admissions that started in the ED) from a sample of pediatric discharges in participating HCUP States

- **NEDS**
  - Emergency department data (treat and release and admitted) from a sample of hospitals in participating HCUP States
NIS: Stratified Sample of Hospitals From SID

5 NIS Strata

- U.S. Region
- Urban/Rural
- Teaching Status
- Ownership/Control
- Bed Size

State Inpatient Databases
- N = ~ 4K hospitals
- ~ 32M records

Stratified Sample of Hospitals
- N = ~ 1K hospitals
- ~ 8M records

Nationwide Inpatient Sample
- N = ~ 1K hospitals
- ~ 8M records

State is NOT included as a stratum
## Statewide Data Systems Participating in NIS

<table>
<thead>
<tr>
<th>Data Year</th>
<th># of States</th>
<th>States</th>
</tr>
</thead>
<tbody>
<tr>
<td>1988</td>
<td>8</td>
<td>CA, CO, FL, IA, IL, MA, NJ, WA</td>
</tr>
<tr>
<td>1989-1992</td>
<td>11</td>
<td>+ AZ, PA, WI</td>
</tr>
<tr>
<td>1993-1994</td>
<td>17</td>
<td>+ CT, KS, MD, NY, OR, SC</td>
</tr>
<tr>
<td>1995-1996</td>
<td>19</td>
<td>+ MO, TN</td>
</tr>
<tr>
<td>1997-1998</td>
<td>22</td>
<td>+ HI, UT, GA</td>
</tr>
<tr>
<td>1999</td>
<td>24</td>
<td>+ ME, VA</td>
</tr>
<tr>
<td>2000</td>
<td>28</td>
<td>+ KY, NC, TX, WV</td>
</tr>
<tr>
<td>2001</td>
<td>33</td>
<td>+ MI, MN, NE, RI, VT</td>
</tr>
<tr>
<td>2002</td>
<td>35</td>
<td>+ NV, OH, SD [AZ not available]</td>
</tr>
<tr>
<td>2003</td>
<td>37</td>
<td>+ AZ, IN, NH [ME not available]</td>
</tr>
<tr>
<td>2004</td>
<td>37</td>
<td>+ AR [PA not available]</td>
</tr>
<tr>
<td>2005</td>
<td>37</td>
<td>+OK [VA not available]</td>
</tr>
<tr>
<td>2006</td>
<td>38</td>
<td>+VA</td>
</tr>
<tr>
<td>2007</td>
<td>40</td>
<td>+ME, WY</td>
</tr>
</tbody>
</table>
KID: Stratified Sample of Discharges From SID

3 Strata

State Inpatient Databases
N = ~ 4K hospitals
~ 6M records

Uncomplicated Births

Complicated Births

Pediatric Nonbirths

Kids’ Inpatient Database
N = ~ 4K hospitals
~ 3M records

State is NOT included as a stratum

10% stratified sample of uncomplicated births

80% stratified sample of other ped discharges

~ 3M records
NEDS: Stratified Sample of Hospitals From SEDD and SID

5 NEDS Strata

- U.S. Region
- Urban/Rural
- Teaching Status
- Ownership/Control
- Trauma

Similar to the NIS and KID strata: State is NOT included as a stratum

SEDD & SID

N = ~ 2K hospital-based EDs
~ 116M ED visits

NEDS

N = ~ 1K hospital-based EDs
~ 26M ED visits
Utilization and cost of hospital inpatient, ED, and ambulatory care
- Trends in health care utilization and costs
- Quality of care
- Impact of health policy changes
- Diffusion of medical technology
- Medical practice variation
- Medical treatment effectiveness
HCUP Family of Databases, Tools, and Products

HCUP Databases
- SID
- NIS
- KID
- SEDD
- NEDS
- SASD

Research Products

User Support

Research Publications
Most HCUP Tools Can Be Applied to Any Administrative Database

Clinical Classification Software

- Procedure Classes
- Chronic Condition Indicator
- Comorbidity
- Utilization Flags
- AHRQ QIs

Other Administrative Databases

- SID
- NEDS
- NIS
- KID
- SEED
- SASD
- Other Administrative Databases
Groups ICD-9-CM codes into clinically meaningful categories

CCS for ICD-9-CM

ICD-9-CM Codes

CCS 6: Hepatitis

CCS 2: Septicemia

0031 0202 0223 0362
0380 0381 03810
03842 03843 03844
03849 0388 0389 0545 449 7907
0700 0701 0702 07020
07021 07022 07023
0703 07030 07031
07032 07033 07034
07041 07042 07043
07044 07049 0705
07051 07052 07053
07054 07059 0706
07070 07071 0709
57140 57141 57149
5731 5732 5733
ICD-9-CM Procedure Codes

Groups ICD-9-CM codes into one of four categories to distinguish between diagnostic/therapeutic procedures
ICD-9-CM Diagnosis Codes

Chronic

Nonchronic

Groups ICD-9-CM diagnosis codes into chronic or nonchronic categories
The Comorbidity Software is based on the ICD-9-CM coding scheme.

This software creates 29 variables that identify major comorbidities.
Utilization Flags

Reveal additional information about use of health care services

Utilization Flag Software

ICD-9-CM codes
+ UB-04 codes

Emergency Room

Chest X Ray / CT Scan

Intensive Care Unit
AHRQ Quality Indicators

- Most widely used HCUP tool
- Used for reporting hospital quality of care
- Includes benchmarks against which to compare your numbers
HCUP Supplemental Files Can Only Be Applied to HCUP Databases

- Cost-to-Charge Ratio Files
- Hospital Market Files
- HCUP Supplemental Files for Revisit Analyses
- Nationwide Inpatient Sample (NIS) Hospital Ownership Files
- American Hospital Association (AHA) Linkage Files
- Nationwide Inpatient Sample Trends (NIS-Trends) Files
- Kids’ Inpatient Database Trends (KID-Trends) File
The Cost-to-Charge Ratio Files enable conversion of charge data to cost data on the NIS, KID, and SID.

### Table

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HOSPID</td>
<td>AFICC</td>
<td>GAPICCC</td>
</tr>
<tr>
<td>2</td>
<td>xxxx</td>
<td>xxxx</td>
<td>xxxx</td>
</tr>
<tr>
<td>3</td>
<td>xxxx</td>
<td>xxxx</td>
<td>xxxx</td>
</tr>
<tr>
<td>4</td>
<td>xxxx</td>
<td>xxxx</td>
<td>xxxx</td>
</tr>
<tr>
<td>5</td>
<td>xxxx</td>
<td>xxxx</td>
<td>xxxx</td>
</tr>
<tr>
<td>6</td>
<td>xxxx</td>
<td>xxxx</td>
<td>xxxx</td>
</tr>
<tr>
<td>7</td>
<td>xxxx</td>
<td>xxxx</td>
<td>xxxx</td>
</tr>
</tbody>
</table>
The HMS Files contain various measures of hospital market competition. They are available free of charge from the HCUP Central Distributor.
The HCUP Supplemental Files for Revisit Analyses are discharge-level files designed to facilitate analyses that need to track patients across time and hospital settings in the SID, SASD, and SEDD.
Additional HCUP Supplemental Files

- **Trends Files (NIS and KID)**
  - Discharge-level files that provide the user with both the trend weights and data elements that are consistently defined across data years

- **NIS Hospital Ownership File**
  - Hospital-level files designed to facilitate analysis of the NIS by hospital ownership categories

- **AHA Linkage Files**
  - Enable researchers to link hospital identifiers in some State databases to the AHA Annual Survey Databases
Online Tools

- **MONAHRQ**
  - Web-based software tool that enables organizations to input their own hospital administrative data and generate a data-driven Web site

- **HCUPnet**
  - Free, interactive online query system
  - [http://hcup.ahrq.gov/hcupnet](http://hcup.ahrq.gov/hcupnet)
Free, interactive online query system

Lets users generate tables of outcomes by diagnoses and procedures

Allows data to be cross-classified by patient and hospital characteristics

http://hcup.ahrq.gov/hcupnet
What percentage of hospitalizations for children are uninsured, by State?

What are the most expensive conditions treated in U.S. hospitals?

What is the trend in admissions for depression?

Are there sufficient cases for my analysis?

How do my estimates compare with HCUPnet (validation)?
Questions?

Verbal Questions

To ask a question, click on the Raise Hand button in the Participants Panel and the Host will notify you and unmute your line.

If you do not see a telephone icon next to your name, please hang up and dial in again. This information is located on the ‘Info’ tab of your WebEx browser. Please enter your Attendee ID number when you redial.

Electronic Questions

Type your question into the Q&A box on the right-hand side of your screen.
Welcome to HCUPnet

HCUPnet is a free, on-line query system based on data from the Healthcare Cost and Utilization Project (HCUP). It provides access to health statistics and information on hospital inpatient and emergency department utilization.

Start your query here -

Statistics on Hospital Stays

- National Statistics on All Stays
  - Create your own statistics for national and regional estimates on hospital use for all patients from the HCUP Nationwide Inpatient Sample (NIS).
  - Overview of the Nationwide Inpatient Sample (NIS)

- National Statistics on Children
  - Create your own statistics for hospital use of children from the HCUP Kids' Inpatient Database (KID).

- National Statistics on Mental Health Hospitalizations
  - Create your own statistics for mental health hospitalizations and substance abuse.

State Statistics on All Stays

- Create your own statistics on stays in hospitals for participating States from the HCUP State Inpatient Databases (SID).
  - Overview of the State Inpatient Databases (SID)

Statistics on Emergency Department Use (Beta Version)

- National Statistics on All ED Visits
  - Create your own statistics for national and regional estimates on emergency department visits for all patients from the HCUP Nationwide Emergency Department Sample (NED).
  - Overview of the Nationwide Emergency Department Sample (NED)

- State Statistics on All ED Visits
  - Create your own statistics on emergency department visits for participating States from the HCUP State Emergency Department Databases (SEDD) and the SID.
  - Overview of the State Emergency Department Databases (SEDD)

Quick National or State Statistics

- Ready-to-use tables on commonly requested information from the HCUP Nationwide Inpatient Sample (NIS), the HCUP Kids' Inpatient Database (KID), and the HCUP State Inpatient Databases (SID).

- Quick National or State Statistics on All ED Visits
  - Ready-to-use tables on commonly requested information from the NEDS, SEDD, and SID.

HCUPnet Demonstration

What is HCUPnet?

- Brief description: what is HCUPnet?
- Want to purchase data or do your own analysis?

The statistics in HCUPnet would not be possible without statewide data collection projects that provide data to HCUP.

HCUPnet is based on aggregate statistics tables to access data and protect individual records. If a query is not possible, HCUPnet will not allow you to choose certain parameters. If there is a query you'd like to see that HCUPnet does not support, please write us at hcup@ahrq.dhs.gov.
How would you describe yourself?

- Lay person, data novice
  Try this if you are unfamiliar with health care data, but if you don’t find what you’re looking for, try the Researcher path below.

- Researcher, medical professional

[Arrow pointing to "Researcher, medical professional"]
Select the type of query you want:

- Statistics on specific diagnoses or procedures
  Information on specific diagnoses and procedures for a single year (select year on the next page)

- Statistics on all hospital stays
  Information on all stays for a specific year, not by diagnoses or procedures (select year on the next page)

- Trends
  National trends on all stays, diagnoses, and procedures from 1993 to 2007

- Rank order specific diagnoses or procedures
  Rank diagnoses or procedures by key outcomes and measures such as number of discharges and total charges
Select year:

- 2007
- 2006
- 2005
- 2004
- 2003
- 2002
- 2001
- 2000
- 1999
- 1998
- 1997
Do you want information on:

- Diagnoses grouped by Clinical Classifications Software (CCS)?
  You can search for specific conditions and groups of conditions under this option.

- Specific diagnoses by ICD-9-CM?
  You will need to use an ICD-9-CM coding manual to identify ICD-9-CM codes for this option.

- Diagnosis Related Groups (DRG)?
  You can search for specific DRGs under this option.

- Major Diagnostic Categories (MDC)?
  You can search for specific MDCs under this option.

- Procedures grouped by Clinical Classifications Software (CCS)?
  You can search for specific procedures and groups of procedures under this option.

- Specific procedures by ICD-9-CM?
  You will need to use an ICD-9-CM coding manual to identify ICD-9-CM codes for this option.

- Related conditions and procedures?
Do you want:

- Principal diagnosis
  
  The condition that is the chief reason for the hospital stay, as determined after evaluation during this stay.

  This option allows you to request information on all outcomes and measures for these discharges.

- All-listed diagnoses
  
  Includes all diagnoses.

  This option provides you only the number of discharges who received this diagnosis (no details on length of stay, charges, or discharge status). The unit of analysis remains the discharge: if a particular CCS category occurs multiple times during the same discharge, it is still counted only once.

Definitions

The **principal diagnosis** is that condition established after study to be chiefly responsible for occasioning the admission of the patient to the hospital for care. The principal diagnosis is always the reason for admission. (Definition according to the Uniform Bill (UB-92).)  

**All-listed diagnoses** include the principal diagnosis plus additional conditions that coexist at the time of admission, or that develop during the stay, and which have an effect on the treatment or length of stay in the hospital.
You will need access to an ICD-9-CM coding manual to use this option -

Enter each ICD-9-CM code, separated by commas (e.g., 4870, 4871, 4878), or specify a range of ICD-9-CM codes (4870-4878). Then select >>Next>>:

00818

Do you want statistics for:
- Each code separately
- All codes combined

Note: When you query all-listed diagnoses or procedures for multiple ICD-9-CM codes and request statistics on all codes combined, individual discharges may be counted more than once if multiple ICD-9-M codes appear on a discharge record. This means the unit of analysis is unique ICD-9-CM codes rather than discharges. No standard errors will be provided for combined codes.

>> Next >>
Select outcomes and measures for which you want statistics

Check one or more

- [x] Number of discharges
- [ ] Percent died in the hospital
- [ ] Length of stay, mean
- [ ] Length of stay, median
- [ ] Hospital charges, mean
- [ ] Hospital charges, median
- [ ] Aggregate charges (the "national bill")
- [ ] Hospital costs, mean
- [ ] Hospital costs, median
- [ ] Aggregate costs

>> Next >>
Select patient and hospital characteristics

Check one or more

☑ All patients in all hospitals
☐ Patient age, in categories
☐ Patient age, mean
☐ Gender
☐ Payer (insurance status)
☐ Median income of patients' ZIP code
☐ Location of patient's residence (large central metro, suburbs, medium or small metro, and non-metro)

☑ Region of the U. S.
☐ Hospital ownership (public, for-profit, not-for-profit)?
☐ Hospital teaching status (teaching vs. not)?
☐ Hospital location (metropolitan vs. non-metropolitan)?
☐ Hospital bedsize (small vs. medium vs. large)?

 Definitions

Patient age in years, calculated on the basis of the admission date to the hospital.

Gender is coded as male or female.

Payer is the expected payer for the hospital stay. To make coding uniform across all HICUP data sources, Payer combines detailed categories into more general groups. 

Median income is the median household income of the patient's ZIP code of residence.

Location of patient's residence is based on an urban-rural designation of the patient's county of residence.

Region is the four regions defined by the Bureau of the Census: Northeast, Midwest, South, and West.

Ownership/Control was obtained from the American Hospital Association (AHA) Annual Survey of Hospitals and includes categories from:

Teaching status indicates whether the hospital in which the stay occurred is a teaching or a non-teaching hospital.

Location indicates whether the hospital is in a metropolitan area ("urban") or non-metropolitan area ("rural").

Bedsize indicates the size of the hospital in terms of how many short-term, acute care beds are in the hospital. Bedsize categories (1993-1997) Bedsize categories (1998 and after)

Race/ethnicity of the patient as listed in the medical record. Not every state provides this information, thus race/ethnicity is not available for every state or for the national estimates.

Children's hospitals are defined based on information from the National Association of Children's Hospitals and Related Institutions (NACHRI). Children's hospitals can be general, specialty, or a children's unit in a general hospital.
Results

- Display a printer-friendly version (Try printing in landscape for best results)
- Save as an Excel spreadsheet
- Repeat this query on another database
- Run a new query

2007 National statistics - principal diagnosis only

Patient and hospital characteristics for ICD-9-CM principal diagnosis code 008.45 Int Inf Clistrdium Dfcile

<table>
<thead>
<tr>
<th></th>
<th>Total number of discharges</th>
<th>Standard errors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total number of discharges</td>
<td>Standard errors</td>
</tr>
<tr>
<td>All discharges</td>
<td>104,123 (100.00%)</td>
<td>3,214</td>
</tr>
<tr>
<td>Region Northeast</td>
<td>24,500 (23.53%)</td>
<td>1,491</td>
</tr>
<tr>
<td>Midwest</td>
<td>27,696 (26.00%)</td>
<td>1,698</td>
</tr>
<tr>
<td>South</td>
<td>35,795 (34.38%)</td>
<td>2,092</td>
</tr>
<tr>
<td>West</td>
<td>16,132 (15.49%)</td>
<td>920</td>
</tr>
</tbody>
</table>

Weighted national estimates from HCUP Nationwide Inpatient Sample (NIS), 2007. Agency for Healthcare Research and Quality (AHRQ), based on data collected by individual States and provided to AHRQ by the States. Total number of weighted discharges in the U.S. based on HCUP NIS = 35,541,948. Statistics based on estimates with a relative standard error (standard error / weighted estimate) greater than 0.30 or with standard error = 0 in the nationwide statistics (NIS, NEDS, and KID) are not reliable. These statistics are suppressed and are designated with an asterisk (*). The estimates of standard errors in HCUPnet were calculated using SUDAAN® software. These estimates may differ slightly if other software packages are used to calculate variances.

If you want to test whether apparent differences are significant, use the Z-Test Calculator. A p-value of less than 0.05 is generally considered statistically significant.
Misleading Regional Data Without Adjusting for Population Differences

Does the South have the highest prevalence of CDAD hospital stays?
Population Counts Vary For Some Characteristics and Groupings

<table>
<thead>
<tr>
<th>Age</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1 year</td>
<td>NA</td>
</tr>
<tr>
<td>0-17</td>
<td>73,859,664</td>
</tr>
<tr>
<td>18-44</td>
<td>113,258,030</td>
</tr>
<tr>
<td>45-64</td>
<td>75,759,830</td>
</tr>
<tr>
<td>65-84</td>
<td>32,748,720</td>
</tr>
<tr>
<td>85+</td>
<td>5,373,724</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>148,293,813</td>
</tr>
<tr>
<td>Female</td>
<td>152,706,155</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Large Metro</td>
<td>161,033,264</td>
</tr>
<tr>
<td>Small Metro</td>
<td>89,706,119</td>
</tr>
<tr>
<td>Micropolitan</td>
<td>30,108,263</td>
</tr>
<tr>
<td>Nonurban</td>
<td>20,152,322</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Median income</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quartile 1</td>
<td>78,898,125</td>
</tr>
<tr>
<td>Quartile 2</td>
<td>73,098,292</td>
</tr>
<tr>
<td>Quartile 3</td>
<td>74,087,136</td>
</tr>
<tr>
<td>Quartile 4</td>
<td>74,907,340</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Region</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northeast</td>
<td>54,917,435</td>
</tr>
<tr>
<td>Midwest</td>
<td>66,414,030</td>
</tr>
<tr>
<td>South</td>
<td>109,596,119</td>
</tr>
<tr>
<td>West</td>
<td>70,072,384</td>
</tr>
</tbody>
</table>

Adjusting for population differences makes a big difference for age, region, and location.
Rate of CDAD Stays Highest in the Northeast and Lowest in the West

<table>
<thead>
<tr>
<th>Region</th>
<th>Population Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northeast</td>
<td>54,917,435</td>
</tr>
<tr>
<td>Midwest</td>
<td>66,414,030</td>
</tr>
<tr>
<td>South</td>
<td>109,596,119</td>
</tr>
<tr>
<td>West</td>
<td>70,072,384</td>
</tr>
</tbody>
</table>

The rate per 10,000 population is as follows:

- Northeast: 14.9
- Midwest: 12.4
- South: 9.6
- West: 7.7
Select the type of query you want:

- Statistics on specific diagnoses or procedures
  Information on specific diagnoses and procedures for a single year (select year on the next page)

- Statistics on all hospital stays
  Information on all stays for a specific year, not by diagnoses or procedures (select year on the next page)

- Trends
  National trends on all stays, diagnoses, and procedures from 1993 to 2007

- Rank order specific diagnoses or procedures
  Rank diagnoses or procedures by key outcomes and measures such as number of discharges and total charges
Results

- Display a printer-friendly version (Try printing in landscape for best results)
- Save as an Excel spreadsheet
- Repeat this query on another database
- Show Graphs of Trend Data
- Run a new query

National statistics

HCUPnet provides trend information for the 15 year period: 1993-2007

<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>008.45 Int Inf Clstrdium Dfcile</td>
<td>24,215</td>
<td>26,435</td>
<td>24,977</td>
<td>23,575</td>
<td>25,200</td>
<td>25,885</td>
<td>30,060</td>
<td>32,763</td>
<td>36,647</td>
<td>46,722</td>
<td>48,877</td>
<td>60,137</td>
<td>76,416</td>
<td>90,063</td>
<td>104,123</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>008.45 Int Inf Clstrdium Dfcile</td>
<td>739</td>
<td>766</td>
<td>740</td>
<td>716</td>
<td>735</td>
<td>817</td>
<td>917</td>
<td>1,031</td>
<td>1,165</td>
<td>1,744</td>
<td>1,731</td>
<td>1,982</td>
<td>2,697</td>
<td>3,504</td>
<td>3,214</td>
</tr>
</tbody>
</table>
National statistics

HCUPnet provides trend Information for the 15 year period: 1993-2007

![Graph showing total number of discharges from 1993 to 2007 for ICD-9-CM principal diagnosis code 008.45, Int Inf Clstrdium Dficle.]

<table>
<thead>
<tr>
<th>Year</th>
<th>Total number of discharges</th>
</tr>
</thead>
<tbody>
<tr>
<td>1993</td>
<td>21,215</td>
</tr>
<tr>
<td>1994</td>
<td>26,435</td>
</tr>
<tr>
<td>1995</td>
<td>24,977</td>
</tr>
<tr>
<td>1996</td>
<td>25,373</td>
</tr>
<tr>
<td>1997</td>
<td>25,520</td>
</tr>
<tr>
<td>1998</td>
<td>30,906</td>
</tr>
<tr>
<td>1999</td>
<td>36,476</td>
</tr>
<tr>
<td>2000</td>
<td>46,722</td>
</tr>
<tr>
<td>2001</td>
<td>48,777</td>
</tr>
<tr>
<td>2002</td>
<td>60,137</td>
</tr>
<tr>
<td>2003</td>
<td>76,416</td>
</tr>
<tr>
<td>2004</td>
<td>104,123</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>008.45, Int Inf Clstrdium Dficle</td>
<td>21,215</td>
<td>26,435</td>
<td>24,977</td>
<td>25,373</td>
<td>25,520</td>
<td>30,906</td>
<td>36,476</td>
<td>46,722</td>
<td>48,777</td>
<td>60,137</td>
<td>76,416</td>
<td>104,123</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of discharges - Standard Errors

<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>008.45, Int Inf Clstrdium Dficle</td>
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<td>766</td>
<td>740</td>
<td>716</td>
<td>735</td>
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<td>917</td>
<td>1,031</td>
<td>1,165</td>
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<td>1,731</td>
<td>1,982</td>
<td>2,697</td>
<td>3,504</td>
<td>3,214</td>
</tr>
</tbody>
</table>

Weighted national estimates from HCUP Nationwide Inpatient Sample (NIS), Agency for Healthcare Research and Quality (AHRQ), based on data collected by individual States and provided to AHRQ by the States. Statistics based on estimates with a relative standard error (standard error / weighted estimate) greater than 0.30 or with standard error = 0 in the nationwide statistics (NIS, NEDS, and KID) are not reliable. These statistics are suppressed and are designated with an asterisk (*). The estimates of standard errors in HCUPnet were calculated using SUDAAN software. These estimates may differ slightly if other software packages are used to calculate results.
### Statistics on Hospital Stays

<table>
<thead>
<tr>
<th>National Statistics on All Stays</th>
<th>National Statistics on Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Create your own statistics for national and regional estimates on hospital use for all patients from the HCUP Nationwide Inpatient Sample (NIS). Overview of the Nationwide Inpatient Sample (NIS).</td>
<td>Create your own statistics for national estimates on use of hospitals by children (age 0-17 years) from the HCUP Kids' Inpatient Database (KID). Overview of the Kids' Inpatient Database (KID).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>National Statistics on Mental Health Hospitalizations</th>
<th>National and State Statistics on Hospital Stays by Payer - Medicare, Medicaid, Private, Uninsured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interested in acute care hospital stays for mental health and substance abuse? Create your own national statistics from the NIS.</td>
<td>Interested in hospital stays billed to a specific payer? Create your own statistics for a payer, alone or compared to other payers from the NIS, KID, and SID.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State Statistics on All Stays</th>
<th>Quick National or State Statistics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Create your own statistics on stays in hospitals for participating States from the HCUP State Inpatient Databases (SID). Overview of the State Inpatient Databases (SID)</td>
<td>Ready-to-use tables on commonly requested information from the HCUP Nationwide Inpatient Sample (NIS), the HCUP Kids' Inpatient Database (KID), or the HCUP State Inpatient Databases (SID).</td>
</tr>
</tbody>
</table>

### Statistics on Emergency Department Use (Beta Version)

<table>
<thead>
<tr>
<th>National Statistics on All ED Visits</th>
<th>Quick National or State Statistics on All ED Visits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Create your own statistics for national and regional estimates on emergency department visits for all patients from the HCUP Nationwide Emergency Department Sample (NEDS). Overview of the Nationwide Emergency Department Sample (NEDS).</td>
<td>Ready-to-use tables on commonly requested information from the NEDS, SEDD, and SID.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State Statistics on All ED Visits</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Create your own statistics on emergency department visits for participating States from the HCUP State Emergency Department Databases (SEDD) and the SID. Overview of the State Emergency Department Databases (SEDD)</td>
<td></td>
</tr>
</tbody>
</table>

### Hospitals Like Mine (Beta Version)

<table>
<thead>
<tr>
<th>Statistics on U.S. Hospitals</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Create your own statistics on various types of hospitals that resemble the hospital you visit or the hospital you study - What types of patients are seen? What services are offered? How do these types of hospitals score on various quality measures? Based on the Nationwide Inpatient Sample (NIS), the AHA survey, and Hospital Compare.</td>
<td></td>
</tr>
</tbody>
</table>

### AHRQ Quality Indicators (QIs)

<table>
<thead>
<tr>
<th>QI Summary Tables</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Ready-to-use national information on measures of health care quality based on the NIS, using the AHRQ Quality Indicators (QIs).</td>
<td></td>
</tr>
<tr>
<td>AHRQ Quality Indicators Home Page</td>
<td></td>
</tr>
</tbody>
</table>
What types of emergency department (ED) visits/stays are you interested in?

1. Treat-and-release ED visits
   - visits to the ED that end in discharge -- no inpatient admission
2. ED visits that result in admission
3. All ED visits
   - "Treat-and-release ED visits" and "ED visits that result in admission"
Select the type of query you want:

1. Statistics on specific diagnoses
   - Information on specific diagnoses
2. Statistics on all ED visits
   - Information on all stays, not by diagnoses
3. Rank order specific diagnoses
   - Rank diagnoses by key outcomes and measures such as number of visits/discharges and total charges

HCUPnet Home | Select types of visits | Select type of query

Definitions
Follow the Specific Diagnoses link if you're interested in detailed statistics about specific conditions or diseases affecting hospitalized patients.
Follow the All ED Visits link if you're interested in statistics about all patients in general, not specific diagnoses or procedures.
Follow the Rank Order link if you'd like to rank diagnoses or procedures by such factors as number of discharges, charges, or in-hospital mortality rate. >more>
Select year:

<table>
<thead>
<tr>
<th>Nationwide Emergency Department Sample (NEDS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ 2007</td>
</tr>
<tr>
<td>☐ 2006</td>
</tr>
</tbody>
</table>
Do you want information on:

1. Diagnoses grouped by Clinical Classifications Software (CCS)?
   You can search for specific conditions and groups of conditions under this option.

2. Specific diagnoses by ICD-9-CM?
   You will need to use an ICD-9-CM coding manual to identify ICD-9-CM codes for this option.

3. Related conditions and procedures?
Do you want:

1. First-listed diagnosis
   - The condition that is listed first.
   - This option allows you to request information on all outcomes and measures for these discharges.

2. All-listed diagnoses
   - Includes all diagnoses.
   - This option provides you only the number of discharges who received this diagnosis (no details on length of stay, charges, or discharge status). The unit of analysis remains the discharge: if a particular CCS category occurs multiple times during the same discharge, it is still counted only once.
Browse all CCS Categories  See the ICD codes that comprise CCS categories.

**Hold the control key down and click to make multiple selections**

127 Chronic obstructive pulmonary disease and bronchiectasis

128 Asthma

129 Aspiration pneumonitis, food/vomitus

130 Pleurisy, pneumothorax, pulmonary collapse

131 Respiratory failure, insufficiency, arrest (adult)

132 Lung disease due to external agents

133 Other lower respiratory disease

134 Other upper respiratory disease

9 Diseases of the Digestive System

[OR]

Search for CCS category

Enter the name of a diagnosis to search for the category:

[Submit button]
Select patient and hospital characteristics

Check one or more

- All patients in all hospitals
- Patient age, in categories
- Gender
- Payer (insurance status)
- Median income of patients’ ZIP code
- Location of patient’s residence (large central metro, suburbs, medium or small metro, and non-metro)
- Region of the U.S.
- Hospital ownership (public, for-profit, not-for-profit)?
- Hospital teaching status (teaching vs. not)?
- Hospital location (metropolitan vs. non-metropolitan)?

Definitions

Patient age: In years, calculated on the basis of the admission date to the hospital.

Gender: coded as male or female.

Payer: is the primary expected payer for the ED visit. To make coding uniform across all HCUP data sources, Payer combines detailed categories into more general groups (more)

Median income: is the median household income of the patient’s ZIP code of residence (more)

Location of patient’s residence: is based on an urban-rural designation of the patient’s county of residence (more)

Region: is the four regions defined by the Bureau of the Census: Northeast, Midwest, South, and West (more)

Ownership/Control: was obtained from the American Hospital Association (AHA) Annual Survey of Hospitals and includes categories for (more)

Teaching status: indicates whether the hospital in which the stay occurred is a teaching or a non-teaching hospital (more)

Location: indicates whether the hospital is in a metropolitan area (“urban”) or non-metropolitan area (“rural”) (more)

Trauma center designation: Trauma center is defined here as Level I, II or III trauma center -- Level I and II centers have comprehensive resources and are able to care for the most severely injured. Level I centers also provide leadership in education and research. Level III centers have some resources and transfer agreements with Level I and II centers. The Trauma Information Exchange Program (TIEP) is a program of the American Trauma Society in collaboration with the Johns Hopkins Center for Injury Research and Policy and is funded by the Centers for Disease Control and Prevention. The TIEP inventory of trauma centers identifies all trauma centers in the U.S. (more)
Results

- Display a printer-friendly version (Try printing in landscape for best results)
- Save as an Excel spreadsheet
- Repeat this query on another database
- Run a new query

2007 National statistics - all-listed

You have chosen all-listed diagnoses. The only possible measure for all-listed diagnoses is the number of discharges who received the diagnoses you selected. If you want to see statistics on length of stay or charges, go back and select "principal diagnosis."

Patient and hospital characteristics for CCS all-listed diagnosis category

128 Asthma

<table>
<thead>
<tr>
<th></th>
<th>All ED visits (those that resulted in admission to the hospital and those that did not)</th>
<th>Only hospital visits that originated in the ED</th>
<th>Only ED visits that ended in discharge (no hospital admission)</th>
<th>Standard errors</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All ED Visits</td>
<td>Admitted to the hospital from the ED</td>
<td>Discharged from the ED</td>
<td></td>
</tr>
<tr>
<td>All discharges</td>
<td>5,857,521 (100.00%)</td>
<td>4,399,802 (75.11%)</td>
<td>175,955</td>
<td>41,639 (0.55%)</td>
</tr>
<tr>
<td>Age group</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;1</td>
<td>102,156 (1.74%)</td>
<td>82,036 (80.30%)</td>
<td>8,478</td>
<td>2,332 (1.01%)</td>
</tr>
<tr>
<td>1-17</td>
<td>1,620,383 (27.66%)</td>
<td>1,430,151 (88.82%)</td>
<td>84,931</td>
<td>15,651 (0.58%)</td>
</tr>
<tr>
<td>18-44</td>
<td>2,200,272 (37.56%)</td>
<td>1,828,649 (83.11%)</td>
<td>74,828</td>
<td>12,108 (0.51%)</td>
</tr>
<tr>
<td>45-54</td>
<td>1,234,822 (21.08%)</td>
<td>779,654 (63.14%)</td>
<td>36,982</td>
<td>14,167 (0.71%)</td>
</tr>
<tr>
<td>55-64</td>
<td>580,362 (9.91%)</td>
<td>237,386 (40.90%)</td>
<td>16,361</td>
<td>10,615 (0.74%)</td>
</tr>
<tr>
<td>65+</td>
<td>119,003 (2.03%)</td>
<td>32,612 (27.40%)</td>
<td>3,731</td>
<td>3,040 (0.74%)</td>
</tr>
<tr>
<td>Missing</td>
<td>522 (0.01%)</td>
<td>315 (60.31%)</td>
<td>100</td>
<td>51 (8.08%)</td>
</tr>
</tbody>
</table>
Statistics on Hospital Stays

National Statistics on All Stays
Create your own statistics for national and regional estimates on hospital use for all patients from the HCUP Nationwide Inpatient Sample (NIS). Overview of the Nationwide Inpatient Sample (NIS)

National Statistics on Mental Health Hospitalizations
Interested in acute care hospital stays for mental health and substance abuse? Create your own national statistics from the NIS.

State Statistics on All Stays
Create your own statistics on stays in hospitals for participating States from the HCUP State Inpatient Databases (SID). Overview of the State Inpatient Databases (SID)

National Statistics on Children
Create your own statistics for national estimates on use of hospitals by children (age 0-17 years) from the HCUP Kids' Inpatient Database (KID).

National and State Statistics on Hospital Stays by Payer - Medicare, Medicaid, Private, Uninsured
Interested in hospital stays billed to a specific payer? Create your own statistics for a payer, alone or compared to other payers from the NIS, KID, and SID.

Quick National or State Statistics
Ready-to-use tables on commonly requested information from the HCUP Nationwide Inpatient Sample (NIS), the HCUP Kids' Inpatient Database (KID), or the HCUP State Inpatient Databases (SID).

Statistics on Emergency Department Use (Beta Version)

National Statistics on All ED Visits
Create your own statistics for national and regional estimates on emergency department visits for all patients from the HCUP Nationwide Emergency Department Sample (NEDS). Overview of the Nationwide Emergency Department Sample (NEDS)

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Hospitals Like Mine (Beta Version)

Statistics on U.S. Hospitals
Create your own statistics on various types of hospitals that resemble the hospital you visit or the hospital you study - What types of patients are seen? What services are offered? How do these types of hospitals score on various quality measures? Based on the Nationwide Inpatient Sample (NIS), the AHA survey, and Hospital Compare.

AHRQ Quality Indicators (QIs)

Ready-to-use national information on measures of health care quality based on the NIS, using the AHRQ Quality Indicators (QIs). AHRQ Quality Indicators Home Page

What is HCUP?
Brief description - what is HCUP? Want to purchase data to do your own analysis?

The statistics in HCUP.net would not be possible without statewide data collection projects that provide data to HCUP.

HCUPnet is based on aggregate statistics tables to speed up data transfer and protect individual records, so not all possible queries can be addressed. If a query is not possible, HCUPnet will not allow you to choose certain parameters. If there is a query you'd like to see that HCUPnet does not support, please write us at hcup@ahrq.hhs.gov.

Select the type of query you want:

- **Statistics on specific diagnoses or procedures**
  Information on specific diagnoses and procedures for a single year (select year on the next page)

- **Statistics on all hospital stays**
  Information on all stays for a specific year, not by diagnoses or procedures (select year on the next page)

- **Trends**
  State trends on all stays, diagnoses, and procedures

- **Rank order specific diagnoses or procedures**
  Rank diagnoses or procedures by key outcomes and measures such as number of discharges and total charges
Select State and year:

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Information:
Statistics are based on hospitals that meet the definition of "community hospital" -- nonfederal, short-term, general and other specialty hospitals, including public hospitals and academic medical centers. Excluded are federal, rehabilitation, and psychiatric hospitals, as well as alcoholism/chemical dependency treatment facilities.
Do you want information on:

- Diagnoses grouped by Clinical Classifications Software (CCS)?
  You can search for specific conditions and groups of conditions under this option.
- Specific diagnoses by ICD-9-CM?
  You will need to use an ICD-9-CM coding manual to identify ICD-9-CM codes for this option.
- Diagnosis Related Groups (DRG)?
  You can search for specific DRGs under this option.
- Major Diagnostic Categories (MDC)?
  You can search for specific MDCs under this option.
- Procedures grouped by Clinical Classifications Software (CCS)?
  You can search for specific procedures and groups of procedures under this option.
- Specific procedures by ICD-9-CM?
  You will need to use an ICD-9-CM coding manual to identify ICD-9-CM codes for this option.
- Related conditions and procedures?
Do you want:

- Principal diagnosis
  The condition that is the chief reason for the hospital stay, as determined after evaluation during this stay.
  This option allows you to request information on all outcomes and measures for these discharges.
- All-listed diagnoses
  Includes all diagnoses.
  This option provides you only the number of discharges who received this diagnosis (no details on length of stay, charges, or discharge status). The unit of analysis remains the discharge: if a particular CCS category occurs multiple times during the same discharge, it is still counted only once.
Browse all CCS Categories

See the ICD codes that comprise CCS categories.

Hold the control key down and click to make multiple selections

- 3 Endocrine, Nutritional, and Metabolic Diseases and Immunity Disorders
  - 48 Thyroid disorders
  - 49 Diabetes mellitus without complication
- 50 Diabetes mellitus with complications
  - 51 Other endocrine disorders
  - 52 Nutritional deficiencies
  - 53 Disorders of lipid metabolism
  - 54 Gout and other crystal arthropathies
  - 55 Fluid and electrolyte disorders

[OR]

Search for CCS category

Enter the name of a diagnosis to search for the category.

Search

any   all   phrase
Select outcomes and measures for which you want statistics

Check one or more

- Number of discharges
- Percent died in the hospital
- Length of stay, mean
- Discharge status
- Hospital charges, mean
- Hospital charges, median
- Hospital costs, mean
- Hospital costs, median
- Aggregate costs

Definitions

- The unit of analysis for HCUP data is the hospital discharge (i.e., the hospital stay), not a person or patient.
- Length of stay is the number of nights the patient remained in the hospital for this stay.
- Hospital charges is the amount the hospital charged for the entire hospital stay. It does not include professional (MD) fees.
- Aggregate charges or the “national bill” is the sum of all charges for all hospital stays in the U.S.
- Costs Total charges were converted to costs using cost-to-charge ratios based on hospital accounting reports from the Centers for Medicare and Medicaid Services (CMS).
- Aggregate costs are the sum of all costs for all hospital stays. See Costs and Aggregate charges for details.
- Died generally indicates in-hospital mortality. Some unknown number of cases may have died outside the hospital, but still be included in HCUPnet.
- Discharge status indicates the disposition of the patient at discharge from the hospital, e.g., routine (home), to another short-term hospital, to a nursing home, to home health care, or against medical advice (AMA).
- The definition of admission source was changed in 2007 and not all data sources had adopted the change at that time; therefore, information on source of admission is not available for 2007.
- Emergency admission indicates the patient was admitted to the hospital through the emergency department.
- Admission from another hospital indicates the patient was admitted to this hospital from another short-term, acute-care hospital.
- Admission from long term care facility indicates the patient was admitted from a long term facility such as a nursing home.
Select patient and hospital characteristics

Check one or more

- All patients in all hospitals
- Patient age, in categories
- Gender
- Payer (insurance status)
- Race/ethnicity
- Hospital ownership (public, for-profit, not-for-profit)?
- Hospital teaching status (teaching vs. not)?
- Hospital location (metropolitan vs. non-metropolitan)?
- Hospital bedsize (small vs. medium vs. large)?

Definitions

**Patient age** in years, calculated on the basis of the admission date to the hospital.

**Gender** is coded as male or female.

**Payer** is the expected payer for the hospital stay. To make coding uniform across all HCUP data sources, Payer combines detailed categories into more general groups.

**Median income** is the median household income of the patient's ZIP code of residence.

**Location of patient's residence** is based on an urban-rural designation of the patient's county of residence.

**Region** is the four regions defined by the Bureau of the Census: Northeast, Midwest, South, and West.

**Ownership/control** was obtained from the American Hospital Association (AHA) Annual Survey of Hospitals and includes categories for.

**Teaching status** indicates whether the hospital in which the stay occurred is a teaching or a non-teaching hospital.

**Location** indicates whether the hospital is in a metropolitan area ("urban") or non-metropolitan area ("rural").

**Bedsize** indicates the size of the hospital in terms of how many short-term, acute care beds are in the hospital. Bedsize categories (1993-1997) Bedsize categories (1998 and after)

**Race/ethnicity** of the patient as listed in the medical record. Not every state provides this information, thus race/ethnicity is not available for every State or for the national estimates.

**Children's hospitals** are defined based on information from the National Association of Children's Hospitals and Related Institutions (NACHRI). Children's hospitals can be general, specialty, or a children's unit in a general hospital.
Results

- Display a printer-friendly version (Try printing in landscape for best results)
- Save as an Excel spreadsheet
- Repeat this query on another database
- Run a new query

State statistics - 2007 Florida - principal diagnosis only

Outcomes by patient and hospital characteristics for CCS principal diagnosis category
50 Diabetes mellitus with complications

<table>
<thead>
<tr>
<th>Total number of discharges</th>
<th>Costs, $ (mean)</th>
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<tbody>
<tr>
<td>All discharges</td>
<td>32,118 (100.00%) 7,959</td>
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<tr>
<td>Payer</td>
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<tr>
<td>Medicare</td>
<td>14,663 (45.65%) 8,961</td>
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<tr>
<td>Medicaid</td>
<td>4,494 (13.89%) 8,052</td>
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<tr>
<td>Private insurance</td>
<td>6,737 (20.98%) 7,315</td>
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<tr>
<td>Uninsured</td>
<td>4,895 (15.24%) 6,281</td>
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<tr>
<td>Other</td>
<td>1,320 (4.14%) 6,044</td>
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</tbody>
</table>

State statistics from HCUP State Inpatient Database 2007, Agency for Healthcare Research and Quality (AHRQ), based on data collected by the Florida Agency for Health Care Administration and provided to AHRQ. Values based on 10 or fewer discharges or fewer than 2 hospitals in the State statistics (SID) are suppressed to protect confidentiality of patients and are designated with an asterisk (*).

See the ICD codes that comprise CCS categories.
Statistics on Hospital Stays

**National Statistics on All Stays**
Create your own statistics for national and regional estimates on hospital use for all patients from the HCUP Nationwide Inpatient Sample (NIS). Overview of the Nationwide Inpatient Sample (NIS)

**National Statistics on Mental Health Hospitalizations**
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**National and State Statistics on Hospital Stays by Payer - Medicare, Medicaid, Private, Uninsured**
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**Quick National or State Statistics**
Ready-to-use tables on commonly requested information from the HCUP Nationwide Inpatient Sample (NIS), the HCUP Kids' Inpatient Database (KID), or the HCUP State Inpatient Databases (SID).

Statistics on Emergency Department Use (Beta Version)

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Hospitals Like Mine (Beta Version)

**Statistics on U.S. Hospitals**
Create your own statistics on various types of hospitals that resemble the hospital you visit or the hospital you study - What types of patients are seen? What services are offered? How do these types of hospitals score on various quality measures? Based on the Nationwide Inpatient Sample (NIS), the AHA survey, and Hospital Compare.

AHRQ Quality Indicators (QIs)

**QI Summary Tables**
Ready-to-use national information on measures of health care quality based on the NIS, using the AHRQ Quality Indicators (QIs). AHRQ Quality Indicators Home Page
Indicator Selection

For which indicators would you like national benchmarks?

Prevention Quality Indicators - PQIs (ambulatory care sensitive conditions)
- Detailed statistics for 2007
- Detailed statistics for 2006
- Detailed statistics for 2005
- Detailed statistics for 2004
- Detailed statistics for 2000

Inpatient Quality Indicators - IQIs (mortality and utilization)
- Detailed statistics for 2007
- Detailed statistics for 2006
- Detailed statistics for 2005
- Detailed statistics for 2004
- Detailed statistics for 2000

Patient Safety Indicators - PSIs (potentially avoidable complications and adverse events)
- Detailed statistics for 2007
- Detailed statistics for 2006
- Detailed statistics for 2005
- Detailed statistics for 2004
- Detailed statistics for 2000

Pediatric Quality Indicators - PDIs (measures of health care quality for children)
- Detailed statistics for 2007
- Detailed statistics for 2006
- Detailed statistics for 2005
- Detailed statistics for 2004
- Detailed statistics for 2000

Definitions

PQIs are measures that can be used with hospital inpatient discharge data to identify "ambulatory care sensitive conditions." These are conditions for which good outpatient care can potentially prevent the need for hospitalization or for which early intervention can prevent complications or more severe disease. [more]

IQIs are a set of measures that reflect quality of care inside hospitals. [more]

PSIs are measures that can be used with hospital inpatient discharge data to identify potentially preventable complications and adverse events. [more]

PDIs focus on children and reflect both quality of care inside hospitals and identify potentially avoidable hospitalizations among children.
Select one of the following Prevention Quality Indicators (PQIs)

- Dehydration
- Bacterial pneumonia
- Urinary infection
- Perforated appendix
- Angina without procedure
- Chronic obstructive pulmonary disease (COPD)
- Adult asthma
- Congestive heart failure (CHF)
- Diabetes short term complications
- Diabetes long term complications
- Diabetes uncontrolled without complications
- Lower-extremity amputation among patients with diabetes
- Hypertension
- Low birth weight

These PQIs were calculated using Version 3.1 of the PQI software and the Nationwide Inpatient Sample (NIS), 2007. For details, see the Guide to the Prevention Quality Indicators, Version 3.1. The AHRQ Quality Indicators undergo continued refinement. For more information on the AHRQ Quality Indicators and for the latest version of the PQIs, visit the Quality Indicator website.
National Quality Indicators - 2007 national statistics

Admissions for diabetes with long-term complications (excluding obstetric admissions and transfers from other institutions) per 100,000 population, age 18 and over (PQI 3)
Adjusted rates by patient and hospital characteristics, 2007

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<tr>
<td>Total U.S.</td>
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<td><strong>Patient characteristic:</strong></td>
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<td>Age groups for conditions affecting any age</td>
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<td>18-44&lt;sup&gt;c&lt;/sup&gt;</td>
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<td>65 and over</td>
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<td>Age groups for conditions affecting primarily elderly</td>
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<td>275.560</td>
</tr>
<tr>
<td>70-74</td>
<td>318.397</td>
</tr>
<tr>
<td>75-79</td>
<td>366.294</td>
</tr>
<tr>
<td>80-84</td>
<td>406.107</td>
</tr>
<tr>
<td>85 and over</td>
<td>360.843</td>
</tr>
<tr>
<td>Gender:</td>
<td></td>
</tr>
<tr>
<td>Male&lt;sup&gt;c&lt;/sup&gt;</td>
<td>142.132</td>
</tr>
<tr>
<td>Female</td>
<td>108.821</td>
</tr>
<tr>
<td>Median income of patient’s ZIP code:</td>
<td></td>
</tr>
<tr>
<td>First quartile (lowest income)</td>
<td>183.004</td>
</tr>
<tr>
<td>Second quartile</td>
<td>128.804</td>
</tr>
<tr>
<td>Third quartile</td>
<td>103.675</td>
</tr>
<tr>
<td>Fourth quartile (highest income)&lt;sup&gt;c&lt;/sup&gt;</td>
<td>81.619</td>
</tr>
</tbody>
</table>
### HCUPnet Capabilities

<table>
<thead>
<tr>
<th>CAN PRODUCE...</th>
<th>CANNOT PRODUCE...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Simple statistics</td>
<td>More complicated queries</td>
</tr>
<tr>
<td>Sample size calculations</td>
<td>Multivariate analyses</td>
</tr>
<tr>
<td>Trends information</td>
<td>Statistics involving certain variables</td>
</tr>
<tr>
<td>Rank ordering of diagnoses and procedures</td>
<td>Statistics that may violate confidentiality (patient-, provider-, hospital-level data)</td>
</tr>
<tr>
<td>Significance testing</td>
<td></td>
</tr>
</tbody>
</table>
HCUP Supports High-Impact Health Services, Policy, and Clinical Research

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If you have questions or technical assistance requests after the Web conference, please e-mail: quality_tools@ahrq.hhs.gov.

Web Addresses

- HCUP: http://www.hcup-us.ahrq.gov
- HCUPnet: http://hcupnet.ahrq.gov/