# **Potentially Preventable Visits**

# Methodology

For this dashboard, DSHS analyzed 2023 ED visits data using a methodology involving specific diagnosis codes from the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), which is developed by the World Health Organization.

The ICD-10-CM principal diagnostic codes listed on Table A were used to determine avoidable ED visits. The avoidable ED visits ICD-10-CM diagnosis codes were obtained by converting the emergency room collaborative avoidable visits International Classification of Diseases, Ninth Revision, Clinical Modification diagnosis codes from the Statewide Collaborative Quality Improvement Project: Reducing Avoidable Emergency Room Visits, Final Remeasurement Report by the California Department of Health Care Services' Medi-Cal Managed Care Division.

All avoidable ED visits are for patients who were treated and sent home because their condition did not require hospital admission. Thus, only DSHS Outpatient ED Public Use Data Files were analyzed.

However, for mental health and substance abuse (MHSA) avoidable ED visits, both DSHS Inpatient and Outpatient ED Public Use Data Files were analyzed using the MHSA ICD-10-CM diagnoses codes. The lesser-known certainty of disease processes for patients with MHSA diagnoses or conditions yields difficulty in determining MHSA ED visits that are truly avoidable.

Furthermore, it should be noted that data for people for whom Medicaid was identified as the payer for their ED visit at the time of the visit, may differ from data collected and reported by the Texas Health and Human Services Commission's Medicaid program.

Table A. Avoidable ED Visits ICD-10-CM Codes<sup>1</sup>

B354 Tinea corporis B355 Tinea imbricata B37 Candidiasis B370 Candidal stomatitis B3783 Candidal cheilitis B373 Candidiasis of vulva and vagina B3742 Candidal balanitis B3749 Other urogenital candidiasis B372 Candidiasis of skin and nail B378 Candidiasis of other sites B3784 Candidal otitis externa B3781 Candidal esophagitis B3782 Candidal enteritis	
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B3784 Candidal otitis externa B3781 Candidal esophagitis	
B3781 Candidal esophagitis	
B3782 Candidal enteritis	
B3789 Other sites of candidiasis	
B379 Candidiasis, unspecified	
B86 Scabies	
<b>B880</b> Other acariasis	
B889 Infestation, unspecified	
H10 Conjunctivitis	
H100 Mucopurulent conjunctivitis	
H1033 Unspecified acute conjunctivitis, bilateral	
H10239 Serous conjunctivitis, except viral, unspecified eye	
H10019 Acute follicular conjunctivitis, unspecified eye	
H10029 Other mucopurulent conjunctivitis, unspecified eye	
<b>H10229</b> Pseudomembranous conjunctivitis, unspecified eye	
H1013 Acute atopic conjunctivitis, bilateral	
H104 Chronic conjunctivitis	
H10409 Unspecified chronic conjunctivitis, unspecified eye	
H10429 Simple chronic conjunctivitis, unspecified eye	
H10439 Chronic follicular conjunctivitis, unspecified eye	
H1044 Vernal conjunctivitis	
H1045 Other chronic allergic conjunctivitis	
H1089 Other conjunctivitis	
H105 Blepharoconjunctivitis	
H10509 Unspecified blepharoconjunctivitis, unspecified eye	

<sup>&</sup>lt;sup>1</sup> Source: ICD-10-CM codes obtained from converting emergency room collaborative avoidable visits International Classification of Diseases, Ninth Revision, Clinical Modification diagnosis codes. California Department of Health Care Services, Medi-Cal Managed Care Division. Statewide Collaborative Quality Improvement Project: Reducing Avoidable Emergency Room Visits, Final Remeasurement Report: January 1, 2010 – December 31, 2010. Published June 2012.

H10529 Angular blepharoconjunctivitis, unspecified eye H109 Unspecified conjunctivitis H1089 Other conjunctivitis H101149 Xeroderma of unspecified eye, unspecified eyelid H66 Suppurative and unspecified otitis media H660 Acute suppurative otitis media H66019 Acute suppurative otitis media without spontaneous rupture ear drum, unspecified ear H6613 Chronic tubotympanic suppurative otitis media, bilateral H6623 Chronic atticoantral suppurative otitis media, bilateral H663X9 Other chronic suppurative otitis media, unspecified ear H6640 Suppurative otitis media, unspecified ear H6690 Otitis media, unspecified, unspecified ear H70099 Acute mastoiditis with other complications, unspecified ear H70099 Acute mastoiditis with other complications, unspecified sites H660 Acute upper respiratory infections of multiple and unspecified sites H660 Acute upper respiratory infection, unspecified H660 Acute upper respiratory infection, unspecified H660 Acute bronchitis H660 Acute bronchitis, unspecified
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J060 Acute laryngopharyngitis J069 Acute upper respiratory infection, unspecified J20 Acute bronchitis
J069 Acute upper respiratory infection, unspecified J20 Acute bronchitis
J20 Acute bronchitis
1200 Acute bronchitis unspecified
Acute proficilitis, unspecified
Chronic rhinitis, nasopharyngitis and pharyngitis
Chronic rhinitis
Chronic pharyngitis
Chronic nasopharyngitis
Chronic sinusitis
Chronic maxillary sinusitis
Chronic frontal sinusitis
Chronic ethmoidal sinusitis
Chronic sphenoidal sinusitis
Chronic pansinusitis
Other chronic sinusitis
Chronic sinusitis, unspecified
Chronic tonsillitis and adenoiditis
Chronic disease of tonsils and adenoids, unspecified
J3501 Chronic tonsillitis
D3502 Chronic adenoiditis
Chronic tonsillitis and adenoiditis
Hypertrophy of tonsils with hypertrophy of adenoids
Hypertrophy of tonsils
Hypertrophy of adenoids

ICD-10-CM	Description
J358	Other chronic diseases of tonsils and adenoids
J35 <b>9</b>	Chronic disease of tonsils and adenoids, unspecified
N30	Cystitis
N302	Other chronic cystitis
N303	Trigonitis
N304	Irradiation cystitis
N309	Cystitis, unspecified
N300	Acute cystitis
N3000	Acute cystitis without hematuria
N3001	Acute cystitis with hematuria
N3010	Interstitial cystitis (chronic) without hematuria
N3011	Interstitial cystitis (chronic) with hematuria
N3020	Other chronic cystitis without hematuria
N3021	Other chronic cystitis with hematuria
N3030	Trigonitis without hematuria
N3031	Trigonitis with hematuria
N3081	Other cystitis with hematuria
H308	Other chorioretinal inflammations
N3040	Irradiation cystitis without hematuria
N3041	Irradiation cystitis with hematuria
N3080	Other cystitis without hematuria
N3090	Cystitis, unspecified without hematuria
N3091	Cystitis, unspecified with hematuria
N390	Urinary tract infection, site not specified
N72	Inflammatory disease of cervix uteri
N760	Acute vaginitis
N761	Subacute and chronic vaginitis
N762	Acute vulvitis
N763	Subacute and chronic vulvitis
N764	Abscess of vulva
N765	Ulceration of vagina
N766	Ulceration of vulva
N7689	Other specified inflammation of vagina and vulva
N7681	Mucositis (ulcerative) of vagina and vulva
N768	Other specified inflammation of vagina and vulva
N76	Other inflammation of vagina and vulva
N978	Female infertility of other origin
L298	Other pruritus
L299	Pruritus, unspecified
L740	Miliaria rubra
L741	Miliaria crystallina
L742	Miliaria profundal

ICD-10-CM	Description
M545	Low back pain
M5489	Other dorsalgia
M549	Dorsalgia, unspecified
M533	Sacrococcygeal disorders, not elsewhere classified
M5408	Panniculitis affecting regions of neck/back, sacral/sacrococcygeal region
G441	Vascular headache, not elsewhere classified
R51	Headache
	Encounter for follow-up examination after completed treatment for conditions other
<b>Z09</b>	than malignant neoplasm
<b>Z0</b> 8	Encounter for follow-up examination after completed treatment for malignant neoplasm
Z027	Encounter for issue of medical certificate
Z0271	Encounter for disability determination
Z0279	Encounter for issue of other medical certificate
<b>Z760</b>	Encounter for issue of repeat prescription
Z048	Encounter for examination and observation for other reasons
Z021	Encounter for pre-employment examination
Z022	Encounter for exam for admission to residential institution
Z023	Encounter for examination for recruitment to armed forces
Z024	Encounter for examination for driving license
Z025	Encounter for examination for participation in sport
Z026	Encounter for examination for insurance purposes
Z027	Encounter for issue of medical certificate
Z0271	Encounter for disability determination
Z020	Encounter for exam for admission to educational institution
<b>Z</b> 02	Encounter for administrative examination
<b>Z0</b> 49	Encounter for examination and observation for unspecified reason
Z0289	Encounter for other administrative examinations
Z029	Encounter for administrative examinations, unspecified
<b>Z00</b>	Encounter for general examination without complaint, suspected or reported diagnosis
Z0000	Encounter for general adult medical exam without abnormal findings
Z008	Encounter for other general examination
Z0289	Encounter for other administrative examinations
Z0281	Encounter for paternity testing
Z0283	Encounter for blood-alcohol and blood-drug test
Z021	Encounter for pre-employment examination
Z023	Encounter for examination for recruitment to armed forces
Z0289	Encounter for other administrative examinations
	Encounter for examination for normal comparison and control in clinical research
Z006	program
Z005	Encounter for exam of potential donor of organ and tissue
	Encounter for other special examination without complaint, suspected or reported
Z01	diagnosis

ICD-10-CM	Description
Z0100	Encounter for exam of eyes and vision without abnormal findings
Z0101	Encounter for exam of eyes and vision with abnormal findings
Z011	Encounter for examination of ears and hearing
Z01110	Encounter for hearing exam following failed hear screening
Z0112	Encounter for hearing conservation and treatment
Z0110	Encounter for exam of ears and hearing without abnormal findings
Z01118	Encounter for exam of ears and hearing with other abnormal findings
Z0120	Encounter for dental exam and cleaning without abnormal findings
Z0121	Encounter for dental exam and cleaning with abnormal findings
Z014	Encounter for gynecological examination
Z01411	Encounter for gynecological exam (general) (routine) with abnormal findings
Z01419	Encounter for gynecological exam (general) (routine) without abnormal findings
Z0142	Encounter for cervical smear to confirm normal smear following initial abnormal smear
Z32	Encounter for pregnancy test and childbirth and childcare instruction
Z3200	Encounter for pregnancy test, result unknown
Z3202	Encounter for pregnancy test, result negative
Z3201	Encounter for pregnancy test, result positive
Z01810	Encounter for preprocedural cardiovascular examination
Z01811	Encounter for preprocedural respiratory examination
Z01818	Encounter for other preprocedural examination
Z01812	Encounter for preprocedural laboratory examination
Z0189	Encounter for other specified special examinations
Z0183	Encounter for blood typing

# THCIC Data Masking/Suppression in the Emergency **Department Public Use Data File**

(masking = modified, suppression = blank/null/`)

## MHSA and HIVALC Masking

#### **Definitions**

#### **MHSA**

Stands for Mental Health and Substance Abuse (MHSA). THCIC masks records of patient visits occurring at a designated Substance Abuse and Mental Health Services Administration (SAMHSA) healthcare facility per federal masking requirements. Any records with one or more diagnosis codes among the 26 inpatient diagnosis codes (admitting diagnosis, princ diag code, and oth diag code 1 – oth diag code24) and 25 outpatient diagnosis codes (princ diag code, and oth diag code 1 – oth diag code24) starting with the values listed below are masked.

"F" - mental health disorders in general

"R45851" - suicidal ideations

"T1491" - suicide attempts

"X6" - "X8" - intentional self-harms, ICD-10 Version 2019

#### HIVALC

Stands for HIV, Alcohol, and other substance use/abuse. THCIC masks records with HIV diagnosis codes (26 for in patient and 25 for outpatient, just as MHSA) and/or diagnosis codes for alcohol and other substance abuse/use; while HIVALC records bear the same masking as MHSA records, the age of these patients are grouped separately and differently from the rest of the records.

HIV: "B20" – "B24", "R75", "Z21", "O987", "B9735" ALC (alcohol and other substance abuse/use): "F1", "F55", "Z720", "O9931" – "O9933"

#### **Federal and State Statues**

SAMHSA passed rules for the protection of MHSA patients covered under the federal statutes, 42 USC §290dd-2 and 42 CFR Part 2 rules:

- 42 USC §290dd-2
- 42 CFR Part 2 (aligned with HIPAA and HITECH) Fact Sheet 42 CFR Part 2 Final Rule

The combination of the federal confidentiality law, HIPPA 1996, and state law, Texas Health and Safety Code, Section 81 addresses the confidentiality of HIV patient information:

Health Insurance Portability and Accountability Act of 1996 Texas Health and Safety Code, Sections 81

#### Information/Variables to be Masked

The federal rules require that patient names, identifiers (ZIP code, city, address, county, and any geographic identifiers below the state level), sex, and dates (date of birth, statement from dates, statement through dates and procedure dates) be modified and/or masked.



## Low Count and HIVALC Masking/Suppression

#### **Low Count**

#### Counts by Hospital (THCIC ID)

- If a hospital has < 5 discharges of a particular gender, including 'unknown',
  - the entire ZIP code (PAT\_ZIP) is suppressed
  - provider name (PROVIDER\_NAME) is suppressed
  - provider ID (THCIC\_ID) is changed to "999998"
- If a hospital has < 10 discharges of a race,
  - race is changed to "Other"
  - ethnicity is suppressed
- If a hospital has < 50 discharges in a quarter,
  - the entire ZIP code is suppressed
  - provider ID is changed to "999999"

#### Counts by Zip Code

- If there are < 30 discharges in a ZIP code,
  - the last 2 digits of the discharges' ZIP codes are suppressed

#### Counts by County

- If a county has < 5 discharges for that quarter,
  - the county code is suppressed

#### **Counts by Country**

- If a country has < 5 discharges for that quarter,
  - the country code is suppressed

#### Oth<u>er</u>

- If the patients are from states other than Texas or adjacent states
  - the ZIP code is changed to "88888" (done in section I.)

#### HIVALC

#### HIVALC records have the following masking rules applied:

- age is represented by 5 age group codes rather than the 22 groups of the general non-HIVALC patient population
- gender is suppressed
- the entire ZIP code (back quote), county (blank), public health region (blank), country
- (back quote) are suppressed
- physician IDs are suppressed if < 5 physicians per CCS procedure code 1

#### **Useful Websites**

https://www.icd1odata.com/ICD1oCM/Codes

https://icd.who.int/browse10/2019/en#/X60-X84

https://www.dshs.texas.gov/sites/default/files/hivstd/info/edmat/HIVandTexasLaw.pdf

