**TECHNICAL SPECIFICATIONS**

* Measure Name: Follow-up After Emergency Department Visits for Asthma
* Measure Description: This measure seeks to capture important aspects of follow up after asthma-related ED visits, including prompt follow up with primary care clinicians or asthma specialists as recommended by the NHLBI 2007 guidelines. This measure characterizes care that follows Emergency Department (ED) visits with a primary or secondary diagnosis of asthma for children ages 3-21 that occur in the Reporting Year and who are enrolled in the health plan for two consecutive months following the ED visit.

Specifically, this measure describes the connection with primary or asthma-specific subspecialty care following pediatric asthma-related ED visits.

* Numerator Statement: Evidence of connection to the primary care medical system or asthma-specific subspecialty care following ED visits that have a primary or secondary diagnosis of asthma among eligible children. Specifically: visit(s) to a primary care or asthma-specific specialty provider that occurred within 14 days following and asthma-related pediatric ED visit.

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| **Table 1. Follow-up Clinician Types\*** |
| Allergy and Immunology |
| Family Medicine |
| Internal Medicine |
| Pediatrics  |
| NOTE: Pulmonary medicine is included under Pediatrics and/or Internal Med. |
| NOTE: Defined used taxonomy codes from NPPES |

\*According to the NPIs primary specialization noted in NPPES. Taxonomy codes are listed in the excel file tab “NPPES codes (numerator)”

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| **Table 2. Codes to Identify Ambulatory or Preventative Care Visits** |
| Description | CPT | HCPCS |
| Office or other outpatient services | 99201-99205, 99211-99215, 99241-99245 |  |
| Home services | 99341-99345, 99347-99350 |  |
| Preventive medicine | 99381-99385, 99391-99395, 99401-99404, 99411-99412, 99420, 99429 | G0438, G0439 |

* Numerator Exclusions: Events occurring in patients who meet numerator but not denominator criteria (including 2 months of continuous enrollment following the month in which the ED visit occurred (minimum is 3 months total).

* Denominator Statement: All ED visits in which asthma was a primary or second diagnosis in children ages 3-21 years who are continuously enrolled for at least the 2 months following the ED visit. See Excel tab “ED visits (denominator)” for codes to identify ED visits. See Excel tab “Asthma ICD codes (denominator)” for codes to identify asthma related ED visits.
* Denominator Exclusions: Children who have not been consecutively enrolled with the reporting entity for at least two months following the ED visit.
* Data and Sources: Administrative Data (e.g. claims data)
	1. General data elements include:
		1. Age
		2. Race and ethnicity
		3. Insurance type (Medicaid, Private, Uninsured)
		4. Zip code or State and County of residence
	2. Administrative data with billing and diagnosis codes, utilized to identify:
		1. Asthma-related visits to an emergency department, outpatient office, primary care provider or hospitalization
		2. Insurance plan identifier
		3. Zip code or State and County of residence
		4. Race and ethnicity (from hospital administrative data or charts if not in administrative data from plan)
		5. NPPES taxonomy codes for NPI Billing, Rendering and Providing providers.
* Calculation
	1. Step 1: Identify claims of patients ages 3-21 on the service date of the claim.
	2. Step 2: From those identified in Step 1, identify for ED visits using ED visit CPT and Revenue codes (Excel spreadsheet tab “ED visits (denominator)”.
	3. Step 3: From those identified in Step 2, identify asthma-related visits (events) using ICD codes in the first or second diagnostic spot (Excel tab “Asthma ICD code (denominator)”).
	4. Step 4: From those identified in Step 3, assess eligibility for events that occur in each month by confirming that the child was continuously enrolled for 2 months following the month in which the ED visit occurs (3 months total including the index month).
	5. Step 5: From those identified in Step 4: Analyze the data month by month in chronological order. Exclude those children who have not been enrolled in the health plan for the two months following the month of the ED visit;
		1. The denominator is all events identified in this Step.
	6. Step 6: Calculate the numerator: Of those events identified in Step 5, identify those with a subsequent outpatient visit to an eligible provider among those with eligible outpatient visits (See Excel numerator tabs) within 14 days following the ED visit.
	7. Step 7: Calculate measure performance as 100 x (numerator/denominator) to 2nd decimal place.