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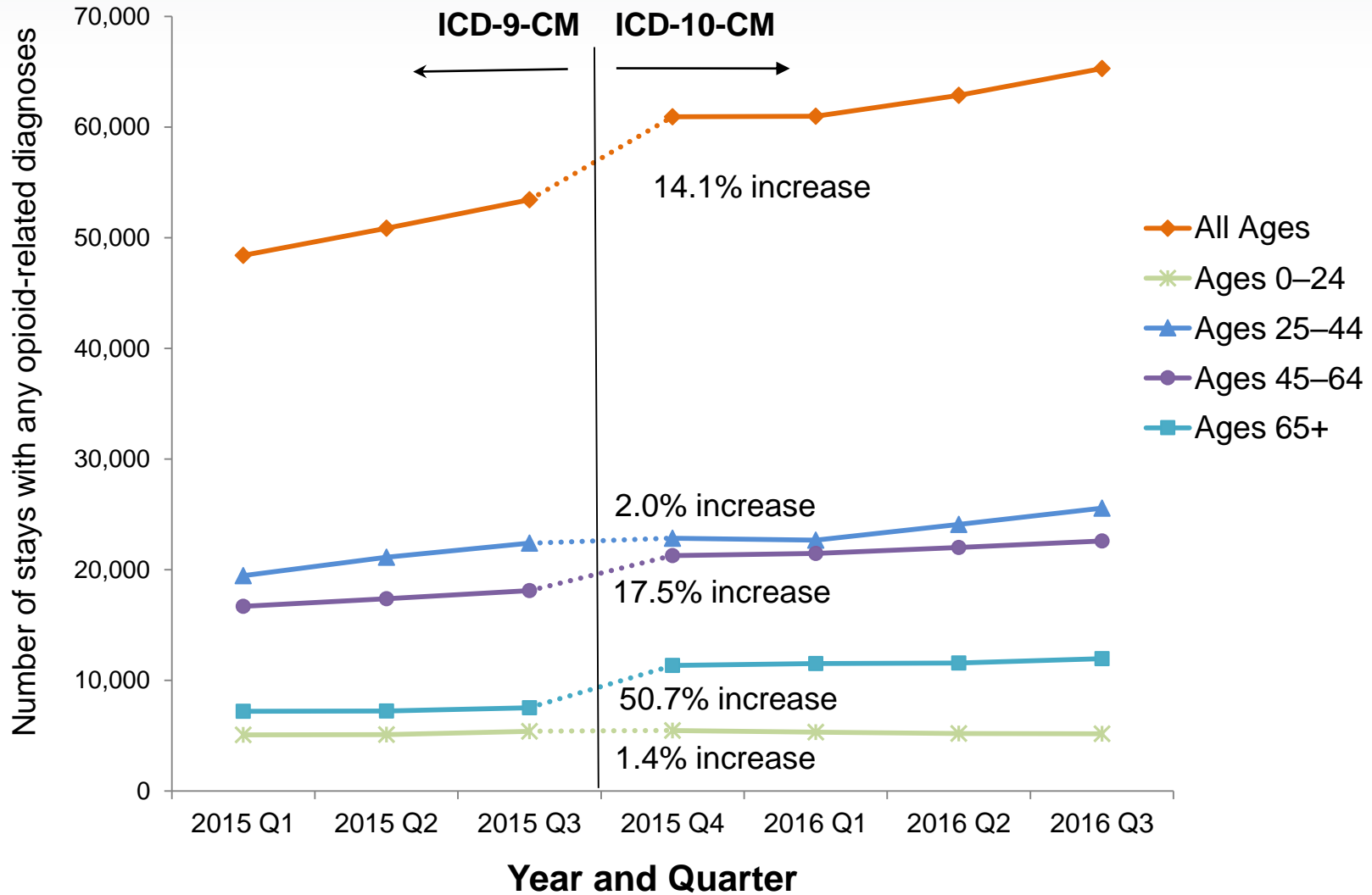
Tracking the Impact of the Opioid Epidemic on Hospital Utilization Before and After the Transition to the ICD-10-CM Coding System

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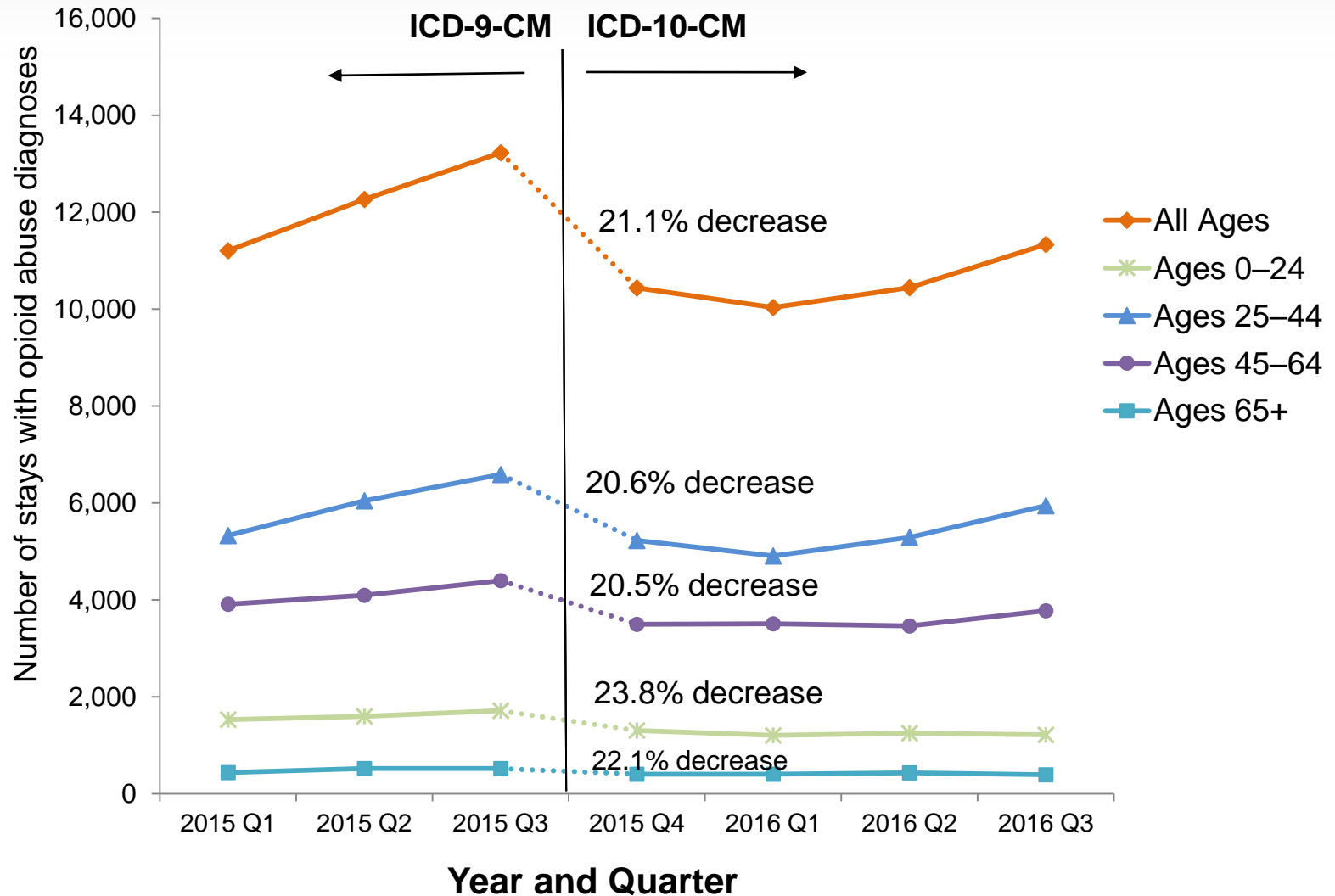
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- Trend analyses of opioid-related stays are important.
- In Oct. 2015 (FY 2016), U.S. transitioned from ICD-9-CM to ICD-10-CM/PCS coding.
- Did the transition disrupt trends (sudden shifts)?
- Does aggregating individual opioid-related ICD codes into broad categories help minimize the disruption?

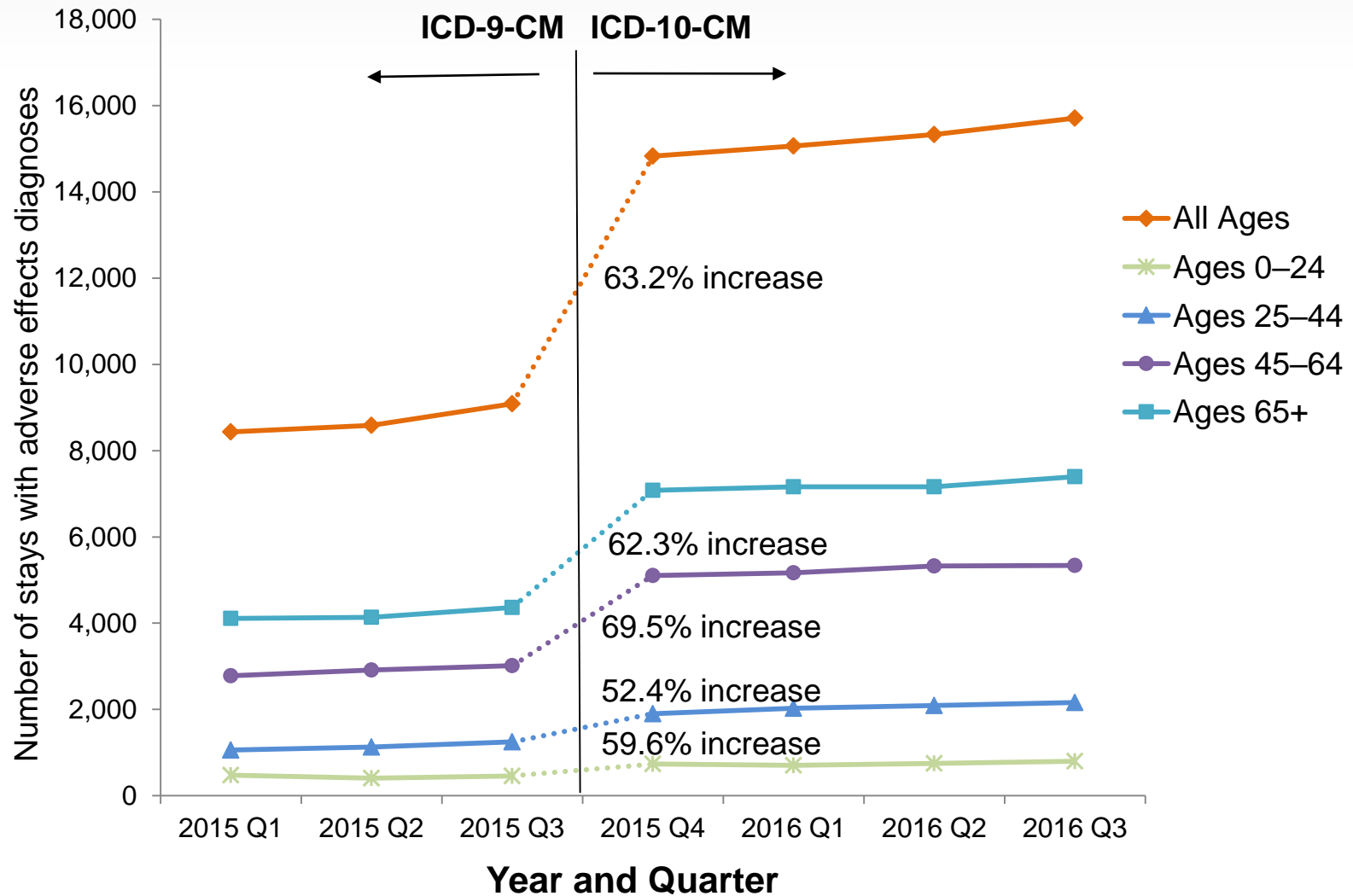
Inpatient stays with *any* opioid-related diagnosis by patient age, 2015 quarter 1 through 2016 quarter 3



Inpatient stays with *opioid abuse* diagnoses by patient age, 2015 quarter 1 through 2016 quarter 3



Inpatient stays with *opioid* adverse effects diagnoses by patient age, 2015 quarter 1 through 2016 quarter 3





Recommendations



- Review the codes you use to define samples & create variables.
- Examine the frequencies of codes under each system.
- Present data in ways that highlight the ICD transition, or report results separately for ICD-9-CM & ICD-10-CM/PCS.
- Refer to AHRQ's new webpage on ICD-10-CM/PCS coding:

www.hcup-us.ahrq.gov/datainnovations/icd10_resources.jsp



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- **Maryland** Health Services Cost Review Commission
- **Minnesota** Hospital Association
- **Missouri** Hospital Industry Data Institute
- **New Jersey** Department of Health
- **Ohio** Hospital Association
- **Vermont** Association of Hospitals and Health Systems
- **Virginia** Health Information
- **Wisconsin** Department of Health Services