County-level data on hospitalizations

SOURCE: HCUP hospital discharge data system administered by AHRQ

https://hcupnet.ahrq.gov/#setup

These data are normally used by hospitals and for health services research, but AHRQ has recently begun providing by patient residence so it’s easier to use for assessing community health.

No endorsements or guarantees, just an FYI –Carol Gilbert 1/24/2017
Choose TUTORIAL, do it (takes 1 minute) then try this (see next slide)
Choose COMMUNITY
Choose your state
Choose Major Diagnostic Categories
Choose 14 Pregnancy, Childbirth & the Puerperium

Choose “create analysis” and wait for report. It might make sense to subtract live births (which you know from vital records) from hospitalizations to get sort of an “excess hospitalizations” count.
Other hospitalizations potentially interesting to MCH

• Under Choose your Analysis, select Diagnosis/Procedure
• Under Choose how to classify, select Diagnoses (CCS)

  • Choose a chronic condition such as diabetes, anemia, asthma

  • Choose mental behavioral health conditions such as mood disorders, substance-related disorders, suicide and intentional self-inflicted injury (again, only hospitalizations, so not all suicides, and includes non-fatal attempts)

  • Choose an MCH outcome such as sexually transmitted infections, breast cancer, cervical cancer, spontaneous abortion (remember these are only hospitalizations, not all cases), early labor, fetal distress
Other hospitalizations potentially interesting to MCH

• Under Choose your Analysis, select
  • Prevention Quality Indicators or
  • Pediatric Quality Indicators

• Under Choose your diagnosis, select
  • Composite PDIs
  • Acute PDIs
  • Chronic PDIs

*Remember, these were designed to measure quality of health care, not underlying community health*
Disclaimers:

• The most recent year is 2013
• As usual, smaller counties’ data will be suppressed
• You can’t combine years, counties (except as regions), or diagnoses, which would help with suppression problems
• You can’t get rates per 100,000 population or costs unless you choose “all stays”
• You can’t specify demographics such as age ranges or gender
• Interpretation for community health is tricky because health care quality, insurance coverage, and underlying health all impact hospitalization

It says more searches will be possible in the future, so hopefully some of these will improve.