

## Standard Definitions for Patient Outcome Data Elements

### Outcome: **Unplanned Hospitalization**

Data Element	Definition	Additional Information/ Examples
<b>Unplanned Hospitalization</b>	When an active home infusion patient requires an unplanned, inpatient admission to an acute care hospital for any reason.	<ul style="list-style-type: none"> <li>• Patients under “observation” at an acute care facility are not considered hospitalized.</li> <li>• Patients are considered hospitalized when the inpatient benefit is being billed for services.</li> </ul>
<b>“Infusion Related” Unplanned Hospitalization</b>	An unplanned hospitalization is <b>“related”</b> to the infusion therapy when it occurs in response to an event associated with the infused medication, access device, administration method, or the diagnosis and/or symptoms being treated.	<p>The following are examples of events would be considered “infusion related” if they result in an unplanned hospitalization.</p> <ul style="list-style-type: none"> <li>• A patient is admitted to the hospital after developing severe shortness of breath during an infusion of IgG.</li> <li>• A patient is hospitalized for possible treatment of a suspected deep vein thrombosis associated with the access device.</li> <li>• A patient is hospitalized for symptoms of worsening cellulitis despite 2 weeks of treatment with IV anti-infectives.</li> <li>• A patient is hospitalized with a suspected access device related blood stream infection after reporting to the Emergency Department with fever and chills.</li> </ul>
<b>“Infusion Unrelated” Unplanned Hospitalization</b>	An unplanned hospitalization is <b>“unrelated”</b> to the infusion therapy when it occurs in response to an event that is NOT associated with the infused medication, access device, administration method or the diagnosis and/or symptoms being treated.	<p>The following are examples of events would be considered “unrelated” to the infusion therapy if they result in an unplanned hospitalization.</p> <ul style="list-style-type: none"> <li>• A patient is admitted to the hospital for treatment of injuries resulting from a car accident.</li> <li>• A patient receiving IgG weekly is hospitalized after reporting to the emergency department for extreme emesis and dehydration post chemotherapy treatment received in the oncology clinic.</li> </ul>

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<b>Unplanned Hospitalization Reasons</b>	<p>For <b><i>“Infusion Related”</i></b> events only, select the best, most applicable reason for the unplanned hospitalization.</p> <ul style="list-style-type: none"> <li>• Adverse Event- Infused Drug Related</li> <li>• Adverse Event- Equipment Related</li> <li>• Adverse Event – Access Device Infection</li> <li>• Adverse Event – Access Device Related - Other than Infection</li> <li>• Change in Eligibility</li> <li>• Insufficient response</li> <li>• Unknown Reason</li> <li>• Other: _____</li> </ul>	<p><b><i>“Change in eligibility”</i></b> includes, but is not limited to: unsafe home environment, lack of caregiver support, reimbursement challenges, loss of IV access, desire for home treatment or unable to comply with home treatment orders.</p> <p style="text-align: center;">❖ ❖</p> <p><b><i>“Insufficient Response”</i></b> includes exacerbations of diagnosis and/or symptoms being treated with home infusion therapy.</p>
<b>Unplanned Hospitalization Outcomes</b>	<p>Select the outcome that best describes the impact of the unplanned hospitalization on the home infusion episode.</p> <ul style="list-style-type: none"> <li>• Resumption of home infusion services with therapy changes</li> <li>• Resumption of home infusion services without therapy changes</li> <li>• Home infusion services discontinued</li> <li>• Pending/ remains hospitalized at time of reporting</li> </ul>	<p>Use <b><i>“Home Infusion Services Discontinued”</i></b> for patients that remain hospitalized, but are discharged based on a company policy requiring discharge from infusion services if care is not resumed within a specific number of days after hospitalization.</p> <p>When hospitalized patients remain active or in a “hold” status with the home infusion provider, use the outcome: <b><i>“Pending/remains hospitalized”</i></b>.</p>

### BACKGROUND

The Standard Definitions for Patient Outcome Data Elements are presented by the National Home Infusion Association (NHIA) to home and specialty infusion providers for use when collecting data related to patient events as part of ongoing quality improvement activities. These definitions were developed by a volunteer-based Outcomes Task Force comprised of individual provider and business-firm members committed to the utilization of quality data to advance the infusion industry. Standardized definitions will allow providers to engage in industry-wide benchmarking and research activities, generating the necessary data for demonstrating the quality and value associated with administering infused medications in the home setting. Providers are encouraged to adopt the NHIA Patient Outcome Definitions to become eligible for participation in future industry-wide quality data initiatives.

### IMPLEMENTATION CONSIDERATIONS

Providers may use additional, more detailed reasons than those proposed in the above *“Unplanned Hospitalization”* definition. The NHIA data elements are designed to consolidate data into broader categories to facilitate comparisons across different providers. For example: The reason *“Change in Eligibility”* encompasses many elements that impact whether or not a patient can receive home infusion services, such as caregiver status, reimbursement challenges, or loss of IV access. Providers may wish to use more specific reasons at an organizational level; however the more detailed data would be mapped to the broader category for national reporting purposes.

NHIA recognizes that individual providers use a variety of software systems and processes to collect data, and understands that differences exist with regard to the clinical terminology used today. NHIA knows that some adaptation may need to occur to achieve standardization with these outcome data elements; however the Outcomes Task Force made every effort to develop data definitions that are broad enough to accommodate variations in software and data collection processes between providers.

### REPORTING DATA

Currently, no standardized reporting methods for the above Patient Outcome Data Elements are being proposed by NHIA. Individual providers should continue to evaluate and determine the best way to internally collect, analyze, summarize and utilize patient outcome data to improve quality and patient care practices. Efforts to create industry-wide quality measures to standardize the reporting of patient outcomes across multiple providers and provider types are underway.

### QUESTIONS/ COMMENTS

Questions or comments regarding the Standard Definitions for Patient Outcome Data Elements should be directed to Connie Sullivan, Sr. Director of Education and Data (NHIA) and Vice President of Research (NHIF) at [connie.sullivan@nhia.org](mailto:connie.sullivan@nhia.org).

For additional information about the NHIA Data Initiative, please visit the NHIA website at <http://www.nhia.org/data/index.cfm>.