Informational Episode of Care:
Diabetic Ketoacidosis (DKA)
Episode Design Summary
July 2019
EPISODE DEFINITION

EPISODE SUBTYPES

There are no subtypes for this episode type.

EPISODE TRIGGER(S)

A DKA Episode is triggered by the following:

- An Emergency Department (ED) visit where the primary diagnosis is related to Diabetic Ketoacidosis (e.g., diabetes mellitus with ketoacidosis, diabetes mellitus with hyperosmolarity with coma).
- An acute inpatient admission where the primary diagnosis is related to Diabetic Ketoacidosis (e.g., diabetes mellitus with ketoacidosis, diabetes mellitus with hyperosmolarity with coma).

See the Appendix for a list of triggering codes.

EPISODE DURATION

- Episode begins on the date of admission to the ED or the hospital.
- Episode ends 30 days after discharge from ED or acute inpatient hospital discharge.

EPISODE SERVICES

The episode will include the following services rendered within the duration of the episode:

- During the trigger event:
  - All relevant diagnostic and treatment services beginning with, and during, the ED admission.
  - All relevant diagnostic and treatment services beginning with, and during, the inpatient stay.
- All cause readmissions from facility discharge through day 3.
- Relevant readmission(s) from day 4 through day 30.
- Within 30 days post-discharge: related services (i.e., outpatient facility services, professional services, related medications, treatment for complications.)

PRINCIPAL ACCOUNTABLE PROVIDER
• The Principal Accountable Provider (PAP) for a DKA episode is the facility where the initial DKA event is triggered.

EPISODE EXCLUSIONS

Episodes meeting any of the following criteria will be excluded:

GLOBAL EXCLUSIONS

• Medicaid and Medicare dual enrollment (i.e., “dual-eligible”) during the episode.
• Beneficiaries who do not have continuous Medicaid enrollment for the duration of the episode.
• Beneficiaries enrolled in a PASSE at any point during episode duration.
• Beneficiaries with Third Party Liability.
• Beneficiaries with select comorbid conditions.
• Beneficiaries leaving against medical advice.
• Beneficiaries expiring.
• Beneficiaries admitted to hospice care.
• Episodes that are a result from trauma.
• Beneficiaries who are pregnant during episode duration.
• PAP not located in Arkansas or neighboring states.
• Episode end exceeds reporting period.
• High/low cost outlier.

EPISODE SPECIFIC EXCLUSIONS

• Beneficiaries with the following comorbidity within 365 days prior to the diabetic ketoacidosis:
  o Heart Failure
• Beneficiaries not on insulin identified by no insulin drug claims from 90 days prior to the episode through the episode end date.
• Beneficiaries with a concurrent diagnosis of septicemia.

EPISODE ADJUSTMENTS
For the purposes of determining a PAP’s performance, the total reimbursement attributable to the PAP for a DKA Episode is adjusted based on the following:

- Acute myocardial infarction
- Age: 4 years old and younger
- Age: 40 years old and older

EPISODE METRICS

QUALITY AND UTILIZATION MEASURES (INFORMATIONAL)

The following quality measures are tracked for informational/reporting purposes:

- Rate of episodes treated and released in the emergency department.
- Percent of episodes with ICU care during the acute inpatient hospital admission.
- Percent of episodes in which outpatient physician follow-up visits are completed within 7 and 30 days post-discharge.
- Percent of episodes with outpatient endocrinology care 6 months prior through the end of the episode.
- Percent of episodes excluded for leaving Against Medical Advice (AMA).
- Rate of inpatient admissions.
- Length of stay for inpatient admission.
- Repeat DKA event within 14 days post discharge.
- Percent of beneficiaries with three or more DKA episodes within a year.
- Percent of episodes excluded for no insulin prescription.

Note: All metrics are based on paid Medicaid claims data.
## APPENDIX

### EPISODE TRIGGERING DIAGNOSIS CODES

<table>
<thead>
<tr>
<th>ICD-10-DX Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>E08.01</td>
<td>DIABETES MELLITUS DUE TO UNDERLYING CONDITION WITH HYPEROSMOLARITY WITH COMA</td>
</tr>
<tr>
<td>E08.10</td>
<td>DIABETES MELLITUS DUE TO UNDERLYING CONDITION WITH KETOACIDOSIS WITHOUT COMA</td>
</tr>
<tr>
<td>E08.11</td>
<td>DIABETES MELLITUS DUE TO UNDERLYING CONDITION WITH KETOACIDOSIS WITH COMA</td>
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<td>DRUG OR CHEMICAL INDUCED DIABETES MELLITUS WITH HYPEROSMOLARITY WITH COMA</td>
</tr>
<tr>
<td>E09.10</td>
<td>DRUG OR CHEMICAL INDUCED DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA</td>
</tr>
<tr>
<td>E09.11</td>
<td>DRUG OR CHEMICAL INDUCED DIABETES MELLITUS WITH KETOACIDOSIS WITH COMA</td>
</tr>
<tr>
<td>E10.10</td>
<td>TYPE 1 DIABETES MELLITUS WITH KETOACIDOSIS WITHOUT COMA</td>
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<td>TYPE 1 DIABETES MELLITUS WITH KETOACIDOSIS WITH COMA</td>
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