

# Domain 1 Patient Engagement Data Request

## Suffolk Care Collaborative 3dii Asthma Project

*Request: Please return the attached SCC excel template via BOX by April 12, 2019*

*For BOX questions or access related inquiries, please contact Janine Muccio, Janine.Muccio@stonybrookmedicine.edu*

**Patient Group: Medicaid Patient Data (Medicaid may be Primary, Secondary or Tertiary Insurance)**

**Time Period: April 1, 2018 – March 31, 2019**

### **Project 3dii: Promoting Asthma Self-Management Program**

*Patient Engagement Definition:* As per the definition of actively engaged, patient engagement refers to the number of participating patients based on home assessment log, patient registry, or other IT platform. A count of patients who meet the criteria over a 1-year measurement period. Duplicate counts of patients are not allowed. The count is not additive across DSRIP years. The evidence-based medicine guidelines for asthma management that will count for this program are the New York State Guidelines.

**Age range: 25 years or younger**

**Please see excel template for formatting specifications.**

Requested Data Elements:

- |   |  |
|---|--|
| 1. CIN #  | mild persistent asthma, uncomplicated;   |
| 2. Patient Last Name  | J45.40 moderate persistent asthma,   |
| 3. Patient First Name   | uncomplicated; J45.50 severe persistent  |
| 4. DOB  | asthma uncomplicated; J45.22 mild  |
| 5. Patient Resident Zip Code  | intermittent asthma with status  |
| 6. Location/Site Name   | asthmaticus; J45.32 mild persistent asthma   |
| 7. Service Site Zip Code  | with status asthmaticus; J45.42 moderate   |
| 8. Provider Name  | persistent asthma with status asthmaticus;   |
| 9. Provider NPI Number  | J45.52 severe persistent asthma with status  |
| 10. Visit Date  | asthmaticus; J45.21 mild intermittent  |
| 11. Primary Payor Name  | asthma with (acute) exacerbation; J45.31   |
| 12. Primary Payor Patient ID Number   | mild persistent asthma with (acute)  |
| 13. Secondary Payor Name  | exacerbation; J45.41 moderate persistent   |
| 14. Secondary Payor Patient ID Number   | asthma with (acute) exacerbation; J45.51   |
| 15. Tertiary Payor Name   | severe persistent asthma with (acute)  |
| 16. Tertiary Payor Patient ID Number  | exacerbation; J45.990 exercise induced   |
| 17. <b>Asthma ICD-9 diagnosis Code (principal or secondary)</b><br>493.00,493.01,493.02,493.10,493.11,493.12<br>,493.20,493.21,493.22,493.81, 493.82,<br>493.90, 493.91, 493.92 | bronchospasm; J45.991 cough variant<br>asthma; J45.902 unspecified asthma with<br>status asthmaticus; J45.901 unspecified<br>asthma with (acute) exacerbation; J45.909<br>unspecified asthma, uncomplicated;<br>J45.998 other asthma |
| 18. <b>Asthma ICD-10 Diagnosis Code (principal or secondary)</b> J45.20 mild<br>intermittent asthma, uncomplicated; J45.30  |  |

**Please note the patient engagement metrics and definitions are subject to change by NYS DOH.**