



## Ministry of Health

### BC Chronic Disease and Selected Procedure Case Definitions

**Author:** Chronic Disease Information Working Group

**Date Created:** June 29, 2015

**Last Updated:** February 01, 2018

**Version:** v2016

**Email:** [hlth.cdrwg@gov.bc.ca](mailto:hlth.cdrwg@gov.bc.ca)

## **GLOSSARY**

### **Cumulative Prevalence**

It is also known as Prevalence for Life. Cases meet case definition criteria to qualify in a given year, and are then carried forward to show as a case every year thereafter. This measure is helpful for determining prevalence related to life-long chronic disease, but less useful for conditions that may be episodic (e.g., mood disorders, substance use problem, etc.).

### **Episodic Prevalence**

Cases meet case definition criteria to qualify in a given year, and are then carried forward in all subsequent years with at least one condition-related code including ICD diagnostic codes, procedure codes or drugs in any specific year.

### **Annual Prevalence**

Cases meet case definition criteria to qualify in each given year. Can be used as a quality measure to understand how it compares to cumulative prevalence or how it behaves over time.

### **Annual Service Utilization Prevalence**

Cases meet case definition criteria in a given year by virtue of one hospital diagnosis (MRDX) or one physician claim with diagnosis (first position only). Cases are not carried forward from year to year. This utilization prevalence measure is useful for describing the number of people or proportion of the population using services directly related to the disease.

### **Annual Prevalence with 365 Days follow-up**

Cases meet case definition criteria to qualify in each given year with complete 365 days follow-up time. Can be used as a quality measure to understand how it compares to cumulative prevalence or how it behaves over time.

## CASE DEFINITION – HYPERTENSION

Case Definition Type: Cumulative Prevalence  Episodic Prevalence  Annual Prevalence  Annual Service Utilization Prevalence   
 Annual Prevalence with 365 Days Follow-up

Case Definition: The case definition for Hypertension requires one hospitalization or two physician visits in one year with diagnostic code(s) specified below. The case definition applies to persons aged 20 and older.

Signed-off BC Case Definition: Yes  - V2016 No

Algorithm: 1H or 2P in 1Y with ICD code(s) specified below.

Notes: None

Age Restriction: Age 20 +

Data Source(s):

| Data Source     | ICD Code/Procedure Code/Rx | ICD Code/Procedure Code Position   | Diagnosis Type  | Hospital Care Level   |
|-----------------|----------------------------|--|---|---|
| Hospital ICD-10 | I10, I11, I12, I13, I15    | First Position Only <input type="checkbox"/><br>All Positions <input checked="" type="checkbox"/><br>Others <input type="checkbox"/><br>N/A <input type="checkbox"/> | M-Most Responsible Diagnosis <input checked="" type="checkbox"/><br>1-Pre-Admit Comorbidity <input checked="" type="checkbox"/><br>2-Post-Admit Comorbidity <input checked="" type="checkbox"/><br>3-Secondary Diagnosis <input checked="" type="checkbox"/><br>4-Morphology Code <input checked="" type="checkbox"/><br>5-Admitting Diagnosis <input checked="" type="checkbox"/><br>6-Proxy Most Responsible Diagnosis <input checked="" type="checkbox"/><br>9-External Cause of Injury Code <input checked="" type="checkbox"/><br>0-Newborn <input checked="" type="checkbox"/><br>W,X,Y- Service Transfer Diagnosis <input checked="" type="checkbox"/> | Acute Care <input checked="" type="checkbox"/><br>Rehabilitation <input checked="" type="checkbox"/><br>Day Surgery <input checked="" type="checkbox"/> |
| Hospital ICD-9  | 401, 402, 403, 404, 405    | First Position Only <input type="checkbox"/><br>All Positions <input checked="" type="checkbox"/><br>Others <input type="checkbox"/><br>N/A <input type="checkbox"/> | M-Most Responsible Diagnosis <input checked="" type="checkbox"/><br>1-Pre-Admit Comorbidity <input checked="" type="checkbox"/><br>2-Post-Admit Comorbidity <input checked="" type="checkbox"/><br>3-Secondary Diagnosis <input checked="" type="checkbox"/><br>4-Morphology Code <input checked="" type="checkbox"/><br>5-Admitting Diagnosis <input checked="" type="checkbox"/><br>6-Proxy Most Responsible Diagnosis <input checked="" type="checkbox"/><br>9-External Cause of Injury Code <input checked="" type="checkbox"/><br>0-Newborn <input checked="" type="checkbox"/>  | Acute Care <input checked="" type="checkbox"/><br>Rehabilitation <input checked="" type="checkbox"/><br>Day Surgery <input checked="" type="checkbox"/> |

|                        |                         |  |   |     |
|------------------------|-------------------------|--|---|-----|
|                        |                         |  | W,X,Y- Service Transfer Diagnosis <input checked="" type="checkbox"/> |     |
| Physician Claims ICD-9 | 401, 402, 403, 404, 405 | First Position Only <input type="checkbox"/><br>All Positions <input checked="" type="checkbox"/><br>Others <input type="checkbox"/><br>N/A <input type="checkbox"/> | N/A   | N/A |
| PharmaNet Drug History | N/A                     | N/A  | N/A   | N/A |

Diagnostic Code:

| ICD-9/10 | Description                          |
|----------|--------------------------------------|
| I10      | Essential (primary) hypertension     |
| I11      | Hypertensive heart disease           |
| I12      | Hypertensive renal disease           |
| I13      | Hypertensive heart and renal disease |
| I15      | Secondary hypertension               |
| 401      | Essential hypertension               |
| 402      | Hypertensive heart disease           |
| 403      | Hypertensive renal disease           |
| 404      | Hypertensive heart and renal disease |
| 405      | Secondary hypertension               |

Procedure Code: N/A

Drug List: N/A