Healthcare Cost and Utilization Project (HCUP) Maternal Health Chartbook 2010–2019



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Alaska Hospital and Healthcare Association Arizona Department of Health Services

Arkansas Department of Health

California Department of Health Care Access and Information

Colorado Hospital Association
Connecticut Hospital Association
Delaware Division of Public Health
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Florida Agency for Health Care Administration

Georgia Hospital Association
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Hawaii University of Hawaii I at Hilo
Illinois Department of Public Health
Indiana Hospital Association
Iowa Hospital Association

Kentucky Cabinet for Health and Family Services

Louisiana Department of Health **Maine** Health Data Organization

Kansas Hospital Association

Maryland Health Services Cost Review Commission
Massachusetts Center for Health Information and Analysis

Michigan Health & Hospital Association

Minnesota Hospital Association

Mississippi State Department of Health Missouri Hospital Industry Data Institute Montana Hospital Association Nebraska Hospital Association

Nevada Department of Health and Human Services **New Hampshire** Department of Health & Human Services

New Jersey Department of Health New Mexico Department of Health New York State Department of Health

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Ohio Hospital Association

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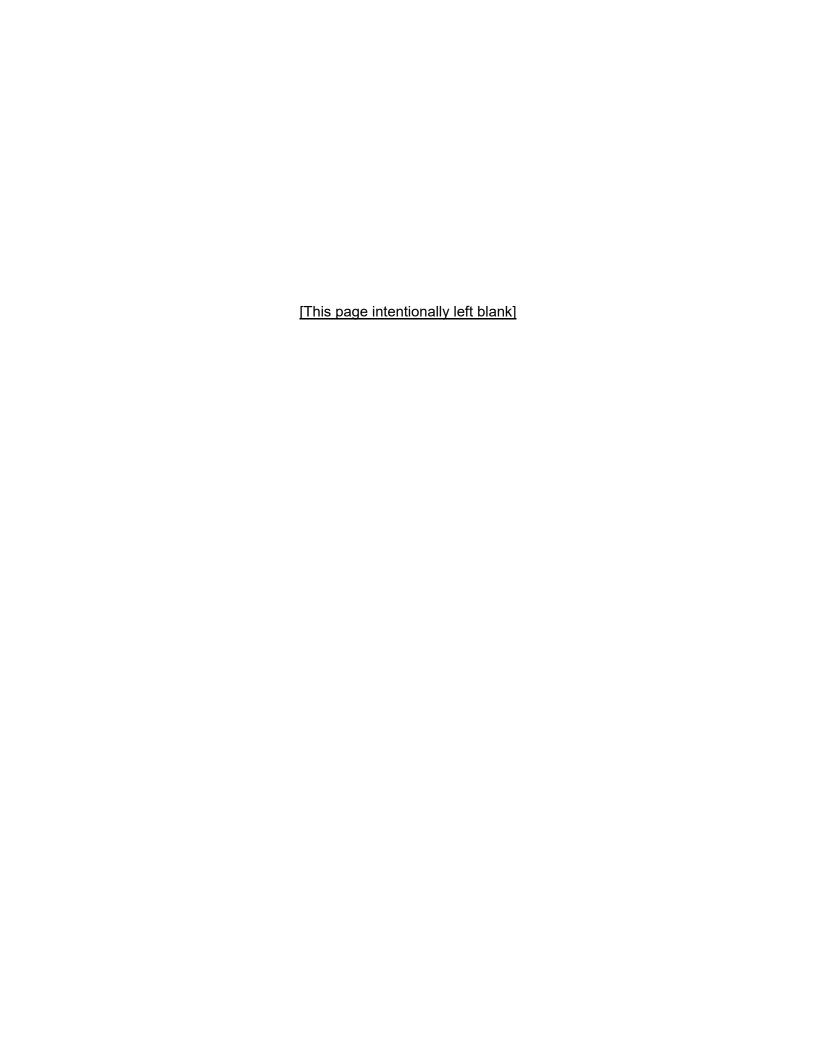
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Introduction

The Healthcare Cost and Utilization Project (HCUP) is a family of healthcare databases and related software tools and products developed through a Federal-State-Industry partnership and sponsored by the Agency for Healthcare Research and Quality (AHRQ). HCUP databases bring together the data collection efforts of State data organizations, hospital associations, private data organizations, and the Federal government to create a national information resource of encounter-level healthcare data. HCUP includes the largest collection of longitudinal hospital care data in the United States, with all-payer, encounter-level information beginning in 1988. These databases help to facilitate research on a broad array of health policy issues, including the cost and quality of health services, patterns in medical practice, access to healthcare programs, and treatment outcomes at the national, State, and local market levels.

This Maternal Health Chartbook is designed to help policymakers, researchers, payers, and healthcare providers understand trends in delivery-related hospital stays during the pre-COVID-19 pandemic period from 2010 to 2019. The chartbook presents trends in healthcare utilization for five conditions: diabetes, hypertension, mental health disorders, substance use disorders, and severe maternal morbidity (SMM). The chartbook includes a section for each of these coexisting conditions. Within each section, the chartbook presents the annual rates for each condition per 10,000 delivery stays. In addition, the chartbook presents overall rates for each condition by primary expected payer and by patient characteristics. This chartbook is intended to serve as a benchmark for maternal healthcare in community hospitals prior to the changes in healthcare utilization that began with the COVID-19 pandemic in 2020.

Background

The HCUP National (Nationwide) Inpatient Sample (NIS)^a is a nationwide database of hospital inpatient stays that is drawn from a sampling frame that contains community acute care hospitals (i.e., short-term, non-Federal, non-rehabilitation hospitals) and comprises more than 95 percent of all hospital discharges in the United States. The vast size of the NIS allows for the study of various topics at the national and regional levels for specific subgroups of patients. It also enables analyses that support public health professionals, administrators, policymakers, and clinicians in their decision making regarding hospital care.

The HCUP databases are an ideal source of data for monitoring maternal healthcare utilization, regardless of the expected payer. In addition, they are a valuable resource for examining the outcomes of maternal healthcare when it is complicated by coexisting conditions that may pose a risk to delivery outcomes. These coexisting physical and mental health conditions may be present prior to or during pregnancy. For example, hypertensive disorders are a leading cause of pregnancy-related mortality in the United States. These disorders can lead to severe pregnancy complications such as preeclampsia and eclampsia. Women with chronic diabetes have an increased risk for developing gestational diabetes, which is associated with a higher risk of birth defects, stillbirths, and preterm births. Anxiety and depression are common mental health disorders that can occur throughout one's life. These conditions are associated with a higher risk of preterm births and low birthweight births. A substance use disorder (SUD) during pregnancy is particularly harmful to the mother and to the newborn. For example, prenatal opioid use may lead to neonatal abstinence syndrome (NAS), which is a group of conditions that are commonly caused by the abrupt cessation of prescription or illegal opioids at birth following repeated prenatal exposure. Finally, severe maternal morbidity (SMM) which includes unexpected, life-threatening complications during hospitalization for delivery, is associated with poor health outcomes and maternal mortality.

^a For more information about the HCUP NIS, please visit: https://hcup-us.ahrq.gov/db/nation/nis/nisdbdocumentation.jsp.

Tracking healthcare use for maternal health conditions among pregnant women is essential for monitoring progress toward eliminating healthcare disparities, guiding policy decisions, allocating Federal resources, and ultimately improving the well-being of pregnant women and their newborns. This activity aligns with the goals outlined in the Surgeon General's Call to Action to Improve Maternal Health, which suggests the need to "support research to understand, prevent, and reduce adverse maternal health outcomes among racial and ethnic minority women, those who are socioeconomically disadvantaged, and those in rural, remote and/or underserved areas." Examining health outcomes that are stratified by the different types of expected payers of healthcare addresses a need raised in a recent congressional mandate for "research that examines the potential cost-savings to the public health system of providing a special enrollment period for pregnant individuals, as well as the impact of a special enrollment period on the private insurance market."

Executive Summary

Overview

This Maternal Health Chartbook from the Healthcare Cost and Utilization Project (HCUP) presents statistics on complications among delivery-related hospital care due to five conditions: diabetes, hypertension, mental health disorders, substance use disorders, and severe maternal morbidity. These conditions were chosen because of their importance in maternal health. Condition-specific rates are stratified by expected payer to better elucidate how health insurance types are associated with maternal outcomes. Chartbook data come from discharge records for patients who were assigned female at birth and aged 12–55 years at admission and use weighted estimates from the 2010–2019 National Inpatient Sample (NIS).

Annually in the NIS, there were approximately 3.6 million delivery stays at community hospitals in the United States between 2010 and 2019. For half of these delivery stays, private insurance was the expected payer (50 percent). For the rest of these stays, the expected payer was Medicaid (44 percent), self-pay/no charge (2 percent), Medicare (1 percent), or other expected payers (3 percent).

Because of the large sample size of the national HCUP databases, small differences can be statistically significant but not clinically important. Thus, only differences greater than or equal to 10 percent are discussed in the text.

Summary of Findings

Overall

- Hypertension was the most common selected coexisting condition among delivery stays from 2010 to 2019.
- The selected maternal health conditions—diabetes, hypertension, mental health disorders, substance use disorders, and severe maternal morbidity were most common for Black non-Hispanic women followed by women aged 35–55 years.
- From 2016 to 2019, among the five maternal health conditions selected, the rate of delivery stays
 involving mental health disorders increased the most, especially for women from the lowest communitylevel income areas (a 62 percent increase) and for women aged 20–24 years (a 57 percent increase).

Among Delivery Stays With Medicaid as the Expected Payer

- Hypertension was the most common selected coexisting condition associated with deliveries billed to Medicaid, followed by diabetes.
- Among delivery stays with Medicaid as the expected payer, the rate of delivery stays involving a
 selected coexisting maternal health condition was highest for White non-Hispanic women with
 substance use disorders, followed by Black non-Hispanic women with hypertension.
- From 2016 to 2019, the rate of deliver stays involving mental health disorders increased the most (a 44 percent increase) for stays billed to Medicaid. The rate of increase for delivery stays involving mental health disorders was highest for women from the lowest community-level income areas (a 61 percent increase), for women aged 20–24 years (a 53 percent increase), and for women from the most socially vulnerable areas (a 52 percent increase).

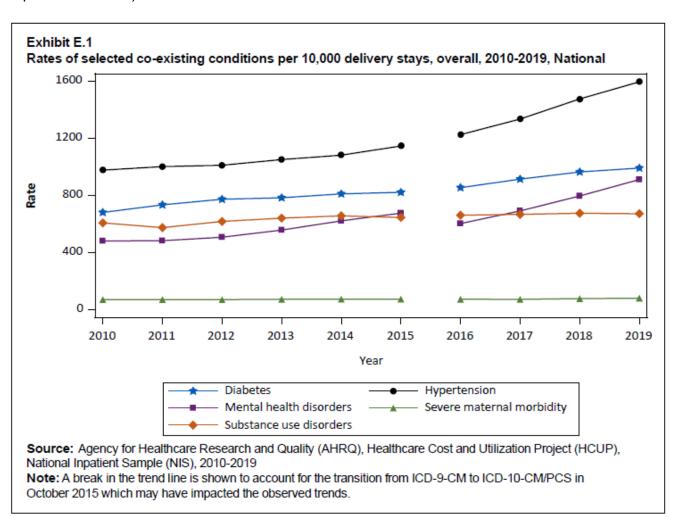
Among Delivery Stays With Private Insurance as the Expected Payer

 Hypertension was the most common selected coexisting condition associated with deliveries billed to private insurance, followed by diabetes and mental health disorders.

- Among stays with private insurance as the expected payer, the rate of delivery stays involving hypertension was highest for Hispanic women, followed by women from large metro areas.
- From 2016 to 2019, for delivery stays billed to private insurance, delivery stays involving mental health disorders had the largest rate increase (a 61 percent increase) across the selected coexisting conditions. The increase was greatest among deliveries for women from the lowest community-level income areas (a 73 percent increase), for women who delivered at a Midwestern hospital (a 70 percent increase), and for women aged 20–24 years (a 67 percent increase).

Among Delivery Stays With Self-Pay/No Charge as the Expected Payer

- Hypertension was the most common selected coexisting maternal condition associated with deliveries with self-pay/no charge as the expected payer, followed by diabetes and substance use disorder.
- Among stays with self-pay/no charge as the expected payer, the rate of delivery stays involving a selected coexisting maternal health condition was highest for Black non-Hispanic women with hypertension, followed by women aged 35–55 years with diabetes.
- From 2016 to 2019, the rate delivery stays involving a mental health disorder increased 55 percent. The rate increase was highest among delivery stays at Northeastern hospitals (a 138 percent increase), for women from large metro areas (an 88 percent increase), and for women aged 12–19 years (an 82 percent increase).



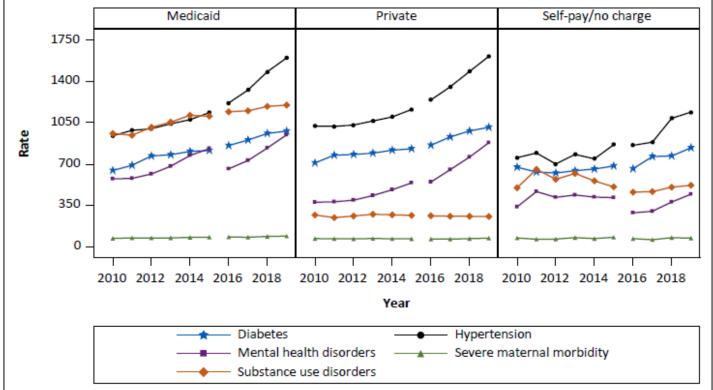
Data for Exhibit E.1	
Rates of selected co-existing conditions by 10,000 delivery stays, overall, 2010-2019, Nati	onal

Condition	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Diabetes	679.5	732.6	771.8	782.2	809.2	820.3	852.6	912.4	962.7	989.8
Hypertension	975.5	999.9	1009.6	1049.3	1080.1	1144.1	1223.5	1332.8	1473.5	1593.0
Mental health disorders	479.7	481.7	506.2	556.1	620.6	674.8	601.7	689.9	794.6	909.5
Severe maternal morbidity	69.8	69.8	69.5	71.9	72.4	73.1	72.0	71.5	76.7	79.7
Substance use disorders	606.5	572.9	616.8	639.6	655.6	644.1	660.0	666.3	673.8	670.5

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Exhibit E.2

Rates of selected co-existing conditions per 10,000 delivery stays, by primary expected payer, 2010-2019. National



Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Data for Exhibit E.2
Rates of selected co-existing conditions by 10,000 delivery stays, by primary expected payer, 2010-2019, National

Condition	Expected Payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Diabetes	644.6	688.8	767.8	778.2	806.6	814.1	855.9	902.5	958.4	978.3
	Hypertension	938.6	984.6	998.6	1040.2	1075.5	1135.1	1216.5	1326.6	1481.5	1599.0
Medicaid	Mental health disorders	573.5	577.9	615.1	680.5	772.0	829.8	658.6	729.2	835.4	947.1
	Severe maternal morbidity	69.9	73.2	72.6	73.7	77.8	79.9	80.7	79.4	86.0	89.0
	Substance use disorders	672.6	631.7	623.1	642.9	657.1	682.7	659.0	762.9	767.8	837.0
	Diabetes	708.3	774.4	780.4	791.5	817.0	828.2	858.4	928.6	979.2	1011.0
	Hypertension	1020.8	1018.3	1029.7	1064.4	1098.1	1161.3	1242.1	1353.7	1483.2	1612.0
Private	Mental health disorders	375.2	379.4	392.9	432.4	481.3	539.7	546.7	651.4	757.9	880.1
	Severe maternal morbidity	67.7	66.6	65.3	68.4	66.5	66.0	63.7	63.5	67.3	71.5
	Substance use disorders	267.8	245.0	258.9	274.0	269.0	264.2	260.7	257.3	256.4	254.4
	Diabetes	672.6	631.7	623.1	642.9	657.1	682.7	659.0	762.9	767.8	837.0
	Hypertension	753.1	793.1	699.9	780.9	743.3	863.2	857.6	884.6	1086.4	1139.5
Self-pay/no charge	Mental health disorders	336.6	466.0	417.2	436.9	419.1	414.9	285.9	299.3	377.5	443.8
	Severe maternal morbidity	72.6	62.6	63.5	76.3	68.0	78.6	67.6	57.9	75.7	71.4
	Substance use disorders	497.7	654.7	570.3	619.4	556.5	505.9	461.0	465.7	503.3	519.1
	Diabetes	1154.8	1067.1	1140.2	1164.1	1148.8	1419.5	1203.3	1361.1	1315.7	1288.7
	Hypertension	1565.4	1487.4	1500.6	1721.6	1698.4	1851.2	1946.3	2140.0	2211.0	2421.5
Medicare (not shown)	Mental health disorders	2327.2	2086.2	1989.3	2181.0	2341.5	2470.9	2124.2	2290.3	2323.6	2594.1
	Severe maternal morbidity	204.1	135.2	175.0	190.4	236.4	190.7	205.8	229.4	210.2	203.7
	Substance use disorders	2035.0	1771.2	1750.1	1774.6	1938.4	1898.8	1782.4	1819.9	1781.2	1787.6

Data for Exhibit E.2

Rates of selected co-existing conditions by 10,000 delivery stays, by primary expected payer, 2010-2019, National

Condition	Expected Payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Diabetes	648.4	664.0	731.6	722.6	754.7	754.6	778.7	785.9	806.7	853.2
	Hypertension	931.1	964.7	957.8	1012.0	963.9	1042.9	1120.2	1242.0	1346.0	1421.7
Other (not shown)	Mental health disorders	533.8	465.1	465.5	543.3	542.2	583.3	593.0	727.3	851.0	977.6
	Severe maternal morbidity	73.9	65.8	73.7	72.7	58.8	65.6	60.7	68.6	71.0	73.1
	Substance use disorders	557.5	422.5	454.9	460.8	377.6	393.6	406.3	469.7	410.6	444.6

Data Presentation

Data presented in this chartbook are limited to hospital stays for female patients aged 12–55 years. Each maternal condition-specific section includes line graphs and data tables that illustrate the unadjusted rates of each condition per 10,000 delivery stays. The chartbook includes exhibits for overall rates and rates by expected payer, and by patient characteristics (age, race, residence location type, community-level median income, community-level social vulnerability index, and region in which the patient was hospitalized). Expected payer data represent the type of payer the hospital expects to be the source of payment for the hospital bill. HCUP combines the detailed payer categories into general groups to facilitate comparisons across states. For this chartbook, the following expected payer groups are presented: Medicaid, private insurance, and self-pay/no charge (which is generally considered to indicate uninsured patients). Data for Medicare and other expected payers can be found in the appendix. Data by patient race were only available starting in 2018 due to higher percentages of missing data on race in prior years of the NIS. Tables showing all rates and associated standard errors are available in Appendix C. Data were suppressed for rates based on fewer than 11 unweighted discharges or a relative standard error (standard error/weighted estimate) greater than 0.30 or equal to 0. Suppressed rates are indicated with a dash (-) in the accompanying data tables of each exhibit.

Trends in co-existing maternal health conditions among delivery stays are presented for 2010–2019. On October 1, 2015, the United States transitioned from the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) to the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and the ICD-10 Procedure Coding System (ICD-10-PCS). The exhibits demarcate this transition with a break in the trend line between data years 2015 and 2016. Further, 2015 rates are based on the first three quarters of data with ICD-9-CM codes only (January 1, 2015, to September 30, 2015).

This chartbook is based on data from HCUP's National (Nationwide) Inpatient Sample (NIS)^b database (2010–2019), which provides a national perspective of care provided in community acute care hospitals (i.e., short-term, non-Federal, non-rehabilitation hospitals).

The HCUP NIS is a nationwide database of hospital inpatient stays. The NIS is drawn from a sampling frame that contains hospitals comprising more than 95 percent of all discharges in the United States. The vast size of the NIS allows for the study of various topics at the national and regional levels for specific subgroups of patients. In addition, NIS data are standardized across years to facilitate ease of use. Over time, the sampling frame for the NIS has changed; thus, the number of States contributing to the NIS varies from year to year. The NIS is intended for national estimates only; no State-level estimates can be produced. The unweighted sample size for the 2019 NIS is 7,083,805 (weighted, this represents 35,419,023 inpatient stays). The unweighted sample size for the 2010 NIS is 7,800,441 (weighted, this represents 37,352,013 inpatient stays).

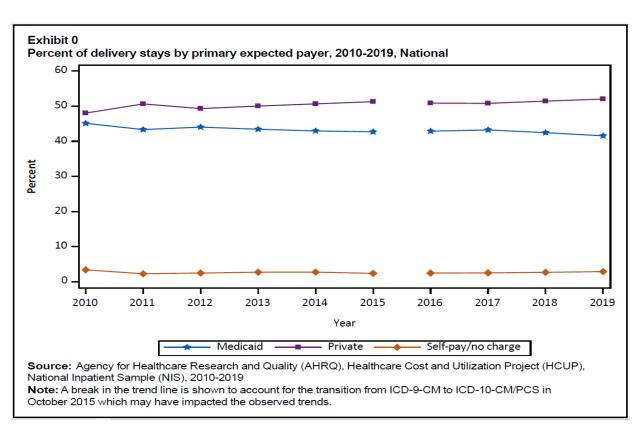
^b For more information about the HCUP NIS, visit: https://hcup-us.ahrq.gov/db/nation/nis/nisdbdocumentation.jsp

Section 0: Overview: Delivery Stays and Expected Payers

Background

Insurance coverage plays a pivotal role in healthcare outcomes for many conditions in the United States (U.S.) and coverage for maternal health conditions is no exception. The type of health insurance that a person has (i.e., public, private, etc.) affects maternal outcomes because insurance type influences the healthcare-seeking behavior of pregnant women and determines the consistency and quality of the prenatal care they receive. For example, the Affordable Care Act (ACA) included pregnancy, childbirth, and newborn care as essential health benefits requiring coverage by all Marketplace plans. Data from the Medical Expenditure Panel Survey (MEPS) suggest that the share of recent mothers who were uninsured at the time of birth decreased 43 percent after passage of the ACA.

Still, a better understanding of the frequency and type of complications experienced during delivery stays across expected payers for these stays may help providers to better prepare for future healthcare needs. Although insurance status is not captured, data from the Agency for Healthcare Research and Quality (AHRQ) Healthcare Cost and Utilization Project (HCUP) Nationwide (National) Inpatient Sample (NIS) can provide a glimpse into maternal healthcare needs by examining hospitalization trends for delivery stays by expected payers.



Data for Exhibit 0 Percent of delivery stays by primary expected payer, 2010-2019, National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Medicaid	45.1	43.3	44.0	43.4	42.9	42.7	42.9	43.2	42.5	41.5
Private	48.0	50.6	49.3	50.0	50.6	51.3	50.9	50.8	51.4	52.0
Self-pay/no charge	3.4	2.3	2.5	2.7	2.7	2.4	2.5	2.5	2.7	2.9

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

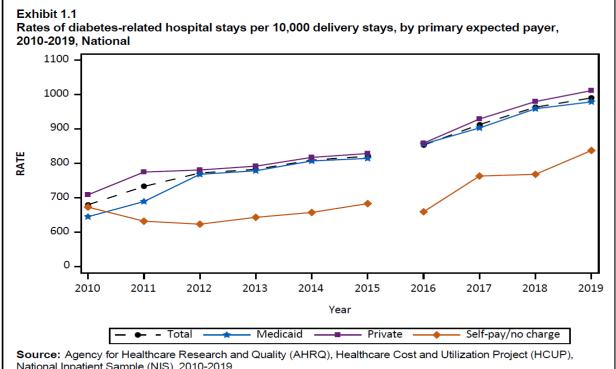
Section 1: Coexisting Condition—Diabetes

Background

Diabetes is an important risk factor for healthy pregnancies. ¹⁰ The disease affects how the body turns blood sugar into energy primarily through the production of the hormone insulin. There are three types of diabetes. Type 1 diabetes occurs when the body does not produce insulin. This is a less common form of diabetes. Type 2 diabetes occurs when the body produces insulin but does not use it well. Gestational diabetes is a form of diabetes that develops during pregnancy. Type 2 diabetes is the most common form of the condition. It is often first diagnosed in adulthood while the less common type 1 diabetes is often diagnosed in childhood. Uncontrolled diabetes of any type during pregnancy can lead to preeclampsia, which is a major complication risk to the mother. High blood sugar in the prenatal period is also associated with birth defects, stillbirths, and preterm births. ¹¹ The data presented in this section include any type of diabetes diagnosis.

Highlights Among Diabetes-Related Delivery Stays

- The rate of diabetes among in-hospital delivery stays increased 19 percent from 2010 to 2014 and 16 percent from 2016 to 2019, complicating more than 300,000 delivery stays annually during 2016–2019 (exhibit 1.1).
- During 2018–2019, the racial and ethnic differences in the rate of diabetes among delivery stays with self-pay/no charge as the expected payer were smaller than the differences among delivery stays billed to Medicaid or private insurance.
 - Specifically, among delivery stays with self-pay/no charge as the expected payer, rates of diabetes for Asian/Pacific Islander (API) non-Hispanic women were 60 percent higher than those of White non-Hispanic women. Among delivery stays billed to Medicaid or private insurance, the diabetes rate for API non-Hispanic women was twice the rate for Black non-Hispanic and White non-Hispanic women, respectively (exhibit 1.3).
- Although the rate of delivery stays involving diabetes was highest for stays billed to Medicaid or private insurance, the highest rate increase from 2016 to 2019 (a 27 percent increase) was observed for stays with self-pay/no charge as the expected payer (exhibit 1.1).
- Among delivery stays with self-pay/no charge as the expected payer, diabetes rates for women from non-metro areas increased 47 percent from 2016 to 2019 – the largest increase across all patient location types and expected payers (exhibit 1.4).



National Inpatient Sample (NIS), 2010-2019

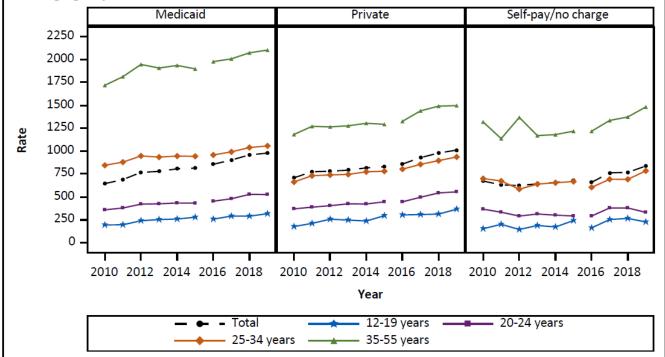
Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Data for Exhibit 1.1
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019,
National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	679.5	732.6	771.8	782.2	809.2	820.3	852.6	912.4	962.7	989.8
Medicaid	644.6	688.8	767.8	778.2	806.6	814.1	855.9	902.5	958.4	978.3
Private	708.3	774.4	780.4	791.5	817.0	828.2	858.4	928.6	979.2	1011.0
Self-pay/no charge	672.6	631.7	623.1	642.9	657.1	682.7	659.0	762.9	767.8	837.0

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Exhibit 1.2
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National



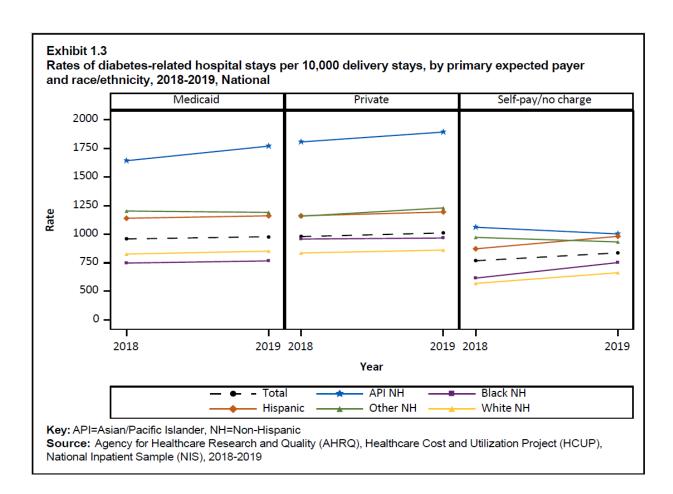
Data for Exhibit 1.2 Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	679.5	732.6	771.8	782.2	809.2	820.3	852.6	912.4	962.7	989.8
	12-19	189.8	200.0	243.9	250.3	252.5	278.1	265.4	292.5	292.3	321.4
Total	20-24	363.7	381.9	414.4	421.4	430.1	433.6	447.6	482.2	529.4	530.3
	25-34	734.9	782.7	813.3	814.4	834.3	838.8	856.5	904.1	943.6	974.1
	35-55	1334.4	1411.1	1466.5	1454.9	1486.4	1475.2	1519.9	1608.1	1657.6	1671.8
	Total	644.6	688.8	767.8	778.2	806.6	814.1	855.9	902.5	958.4	978.3
	12-19	193.5	194.8	239.5	252.1	258.3	277.4	256.6	290.1	289.3	316.5
Medicaid	20-24	358.4	378.6	420.5	424.4	433.0	431.3	452.5	479.6	527.1	525.8
	25-34	845.3	879.3	947.3	934.6	945.9	942.7	957.9	991.8	1038.7	1056.3
	35-55	1718.4	1812.9	1946.3	1907.3	1935.7	1898.1	1977.1	2007.6	2073.5	2103.4

Data for Exhibit 1.2 Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	708.3	774.4	780.4	791.5	817.0	828.2	858.4	928.6	979.2	1011.0
	12-19	175.8	210.5	256.1	246.7	236.0	294.7	302.6	306.9	311.8	365.3
Private	20-24	368.9	387.8	403.6	424.2	422.3	445.9	446.0	495.9	542.8	555.2
	25-34	663.1	731.1	739.3	745.4	773.8	780.1	803.0	855.2	896.1	935.6
	35-55	1181.4	1270.7	1264.6	1276.1	1303.8	1292.7	1325.0	1439.6	1491.0	1497.2
	Total	672.6	631.7	623.1	642.9	657.1	682.7	659.0	762.9	767.8	837.0
	12-19	152.3	200.0	143.5	187.4	171.4	241.1	161.1	252.5	264.7	225.7
Self-pay/no charge	20-24	365.5	332.3	290.4	312.8	300.4	291.0	290.6	379.0	379.1	330.8
	25-34	700.2	673.5	583.7	639.7	654.1	667.5	604.0	692.7	691.5	784.0
	35-55	1318.5	1136.0	1368.1	1168.8	1180.2	1217.6	1216.8	1334.5	1372.6	1482.1
	Total	1154.8	1067.1	1140.2	1164.1	1148.8	1419.5	1203.3	1361.1	1315.7	1288.7
	12-19										
Medicare (not shown)	20-24	586.9	542.7	574.9	446.0	666.7	750.8	686.4	671.9	730.2	787.2
	25-34	1219.9	1084.8	1126.2	1158.0	1040.7	1266.0	1118.6	1205.3	1208.9	1170.4
	35-55	1759.0	1923.7	2130.5	2105.3	2032.0	2475.1	1979.9	2226.7	2087.7	1952.9
	Total	648.4	664.0	731.6	722.6	754.7	754.6	778.7	785.9	806.7	853.2
	12-19	223.7	252.4	319.7	314.0	310.4	163.0	295.9	260.3	274.4	192.0
Other (not shown)	20-24	390.0	390.8	456.4	413.2	499.6	396.1	425.5	424.9	500.4	462.9
·	25-34	745.3	712.1	735.9	757.2	737.4	750.7	754.2	799.4	781.9	829.0
	35-55	1314.2	1380.3	1546.8	1417.7	1482.9	1574.8	1537.5	1345.1	1383.1	1551.5

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.



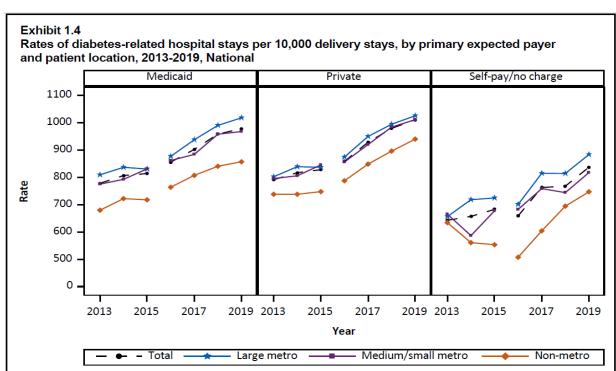
Data for Exhibit 1.3 Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National										
Expected payer	Race/Ethnicity	2018	2019							
	Total	962.7	989.8							
Total	API NH	1717.9	1806.1							
	Black NH	818.1	835.6							
	Hispanic	1132.8	1161.3							
	White NH	828.4	853.8							
	Other NH	1166.9	1197.3							
	Total	958.4	978.3							
	API NH	1641.7	1769.1							
Medicaid	Black NH	747.8	766.8							
Medicald	Hispanic	1139.1	1160.4							
	White NH	826.5	852.1							
	Other NH	1202.3	1190.3							

Data for Exhibit 1.3 Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	979.2	1011.0
	API NH	1805.7	1892.0
Directo	Black NH	957.4	966.7
Private	Hispanic	1160.5	1194.0
	White NH	835.7	861.5
	Other NH	1157.1	1229.6
	Total	767.8	837.0
	API NH	1060.7	1002.4
Self-pay/no charge	Black NH	616.4	752.1
	Hispanic	872.4	981.3
	White NH	570.2	663.7
	Other NH	971.9	932.4
	Total	1315.7	1288.7
	API NH	2086.3	1788.6
Madiagra (not abour)	Black NH	1196.8	1083.5
Medicare (not shown)	Hispanic	1331.4	1637.0
	White NH	1370.8	1248.4
	Other NH	1257.3	1643.2
	Total	806.7	853.2
	API NH	1702.4	1772.0
Other (metallers)	Black NH	830.6	798.3
Other (not shown)	Hispanic	941.3	938.1
	White NH	716.4	757.3
	Other NH	822.1	1058.4

Key: API=Asian/Pacific Islander, NH=Non-Hispanic

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019



Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

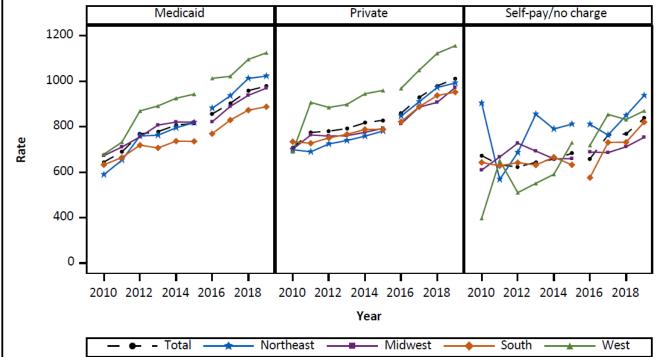
Data for Exhibit 1.4

Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National											
Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019			
	Total	782.2	809.2	820.3	852.6	912.4	962.7	989.8			
Total	Large metro	801.1	836.3	833.0	872.1	942.8	986.6	1017.1			
Total	Medium/small metro	784.9	796.4	835.6	853.9	896.7	964.7	982.8			
	Non-metro	710.0	727.3	736.7	772.1	821.5	862.9	895.6			
	Total	778.2	806.6	814.1	855.9	902.5	958.4	978.3			
Medicaid	Large metro	809.2	836.9	830.5	877.0	937.7	990.4	1018.1			
Wedicald	Medium/small metro	775.2	792.6	831.1	861.8	884.1	958.0	967.7			
	Non-metro	679.7	722.2	717.7	764.0	807.4	840.7	857.3			
	Total	791.5	817.0	828.2	858.4	928.6	979.2	1011.0			
Private	Large metro	802.2	839.2	836.8	874.3	949.8	994.5	1025.6			
Fiivale	Medium/small metro	795.9	805.7	845.6	856.1	920.1	984.0	1011.4			
	Non-metro	738.3	738.1	747.8	787.5	848.4	896.2	940.0			

Data for Exhibit 1.4
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	642.9	657.1	682.7	659.0	762.9	767.8	837.0
Self-pay/no charge	Large metro	656.3	718.2	724.7	701.0	814.8	814.3	883.6
Charge	Medium/small metro	665.2	586.7	677.7	682.5	758.8	744.3	817.4
	Non-metro	634.2	560.9	553.5	507.6	604.0	694.5	747.0
	Total	1164.1	1148.8	1419.5	1203.3	1361.1	1315.7	1288.7
Medicare (not	Large metro	1099.9	1201.5	1339.1	1246.0	1373.5	1298.5	1230.7
shown)	Medium/small metro	1319.8	1089.7	1555.6	1158.4	1362.5	1351.7	1264.7
	Non-metro	1087.4	1089.9	1398.0	1196.8	1301.1	1291.4	1529.7
	Total	722.6	754.7	754.6	778.7	785.9	806.7	853.2
Other (not	Large metro	716.9	793.1	788.4	835.7	900.1	842.8	925.0
shown)	Medium/small metro	736.7	756.8	711.7	747.0	709.2	799.1	809.2
	Non-metro	720.5	644.1	782.5	701.0	650.8	700.6	718.9

Exhibit 1.5
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National



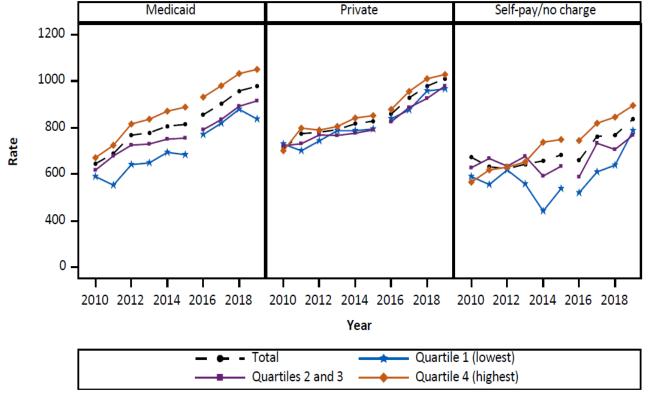
Data for Exhibit 1.5
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	679.5	732.6	771.8	782.2	809.2	820.3	852.6	912.4	962.7	989.8
	Northeast	667.0	675.7	740.0	756.2	777.7	801.0	859.8	918.9	988.6	1001.8
Total	Midwest	692.7	743.9	761.4	777.9	791.6	803.6	818.2	884.7	914.9	966.6
	South	678.2	694.1	732.7	733.1	762.5	761.1	789.9	855.1	898.1	914.6
	West	677.8	816.5	864.1	8.088	919.8	944.3	978.6	1025.7	1096.2	1129.0
	Total	644.6	688.8	767.8	778.2	806.6	814.1	855.9	902.5	958.4	978.3
	Northeast	588.9	653.0	759.2	762.2	794.9	818.2	881.0	935.5	1012.1	1022.1
Medicaid	Midwest	672.8	710.5	755.1	806.8	820.3	819.3	821.2	888.9	937.5	969.3
	South	632.4	664.4	718.7	706.5	736.3	735.3	768.8	829.0	872.6	887.3
	West	678.7	732.0	869.1	891.1	924.8	942.8	1012.5	1021.3	1095.4	1124.5

Data for Exhibit 1.5
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	708.3	774.4	780.4	791.5	817.0	828.2	858.4	928.6	979.2	1011.0
	Northeast	698.6	689.5	724.0	739.1	758.1	780.9	846.3	909.2	972.0	991.8
Private	Midwest	701.0	763.5	758.6	760.4	774.9	792.8	812.5	885.7	906.7	971.9
	South	733.8	727.0	750.6	766.2	787.7	788.4	821.7	887.2	937.0	951.4
	West	690.4	906.4	884.5	897.7	944.5	959.3	968.0	1048.0	1122.2	1155.7
	Total	672.6	631.7	623.1	642.9	657.1	682.7	659.0	762.9	767.8	837.0
	Northeast	903.3	567.8	686.0	854.5	789.7	811.2	810.2	763.1	849.0	936.8
Self- pay/no	Midwest	609.2	666.8	727.0	692.6	658.6	659.3	688.3	685.7	711.4	753.0
charge	South	642.8	627.7	641.9	631.2	665.8	632.0	576.0	730.9	731.5	820.0
	West	397.1	650.8	509.8	550.7	590.5	729.7	717.8	853.9	831.1	869.4
	Total	1154.8	1067.1	1140.2	1164.1	1148.8	1419.5	1203.3	1361.1	1315.7	1288.7
Medicare	Northeast	920.4	1111.5	1115.5	1263.3	1199.6	1455.0	982.2	1290.6	1432.4	1191.1
(not shown)	Midwest	1205.9	1129.1	1231.0	1060.4	1110.4	1360.4	1237.1	1448.3	1375.8	1367.3
Snown)	South	1278.6	984.2	1037.8	1135.3	1072.9	1395.7	1161.3	1354.1	1131.6	1189.6
	West	1134.9	1067.4	1276.6	1312.7	1339.7	1550.4	1608.5	1370.1	1835.7	1740.7
	Total	648.4	664.0	731.6	722.6	754.7	754.6	778.7	785.9	806.7	853.2
	Northeast	657.9	617.2	721.0	824.3	753.3	728.0	814.0	800.9	886.5	933.3
Other (not shown)	Midwest	662.0	712.6	739.7	681.9	705.8	747.0	829.6	790.5	789.5	884.5
	South	662.1	691.4	726.9	695.7	771.2	722.5	722.3	736.1	779.9	774.1
	West	618.2	584.1	737.1	757.3	759.3	835.5	826.3	861.4	824.9	917.2

Exhibit 1.6
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

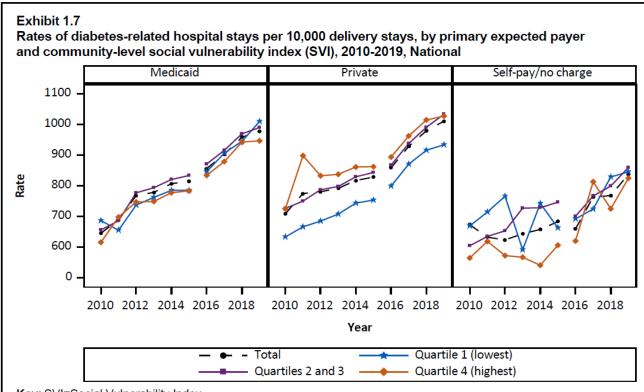


Data for Exhibit 1.6
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	679.5	732.6	771.8	782.2	809.2	820.3	852.6	912.4	962.7	989.8
Total	Quartile 1 (lowest)	631.0	603.9	679.3	702.7	724.4	731.5	793.0	836.4	899.7	884.8
Total	Quartiles 2 and 3	669.4	706.8	746.5	747.8	762.7	772.9	804.5	857.1	903.5	939.9
	Quartile 4 (highest)	686.1	762.9	795.9	812.7	849.8	863.9	895.2	961.4	1012.7	1031.8
	Total	644.6	688.8	767.8	778.2	806.6	814.1	855.9	902.5	958.4	978.3
Medicaid	Quartile 1 (lowest)	589.8	552.5	641.1	648.4	693.9	683.6	770.3	819.0	879.2	837.2
	Quartiles 2 and 3	617.4	678.3	725.0	729.7	750.7	755.4	791.4	834.9	892.3	915.5
	Quartile 4 (highest)	671.0	724.3	815.9	836.5	871.0	888.4	931.5	980.5	1033.0	1051.0

Data for Exhibit 1.6
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	708.3	774.4	780.4	791.5	817.0	828.2	858.4	928.6	979.2	1011.0
Private	Quartile 1 (lowest)	729.5	700.7	742.9	787.4	787.1	794.4	838.3	876.0	958.2	967.0
Filvale	Quartiles 2 and 3	722.5	730.9	768.6	766.7	776.2	790.8	825.4	886.8	926.0	979.5
	Quartile 4 (highest)	700.8	798.3	789.6	805.2	841.9	852.0	878.4	956.1	1010.7	1029.1
	Total	672.6	631.7	623.1	642.9	657.1	682.7	659.0	762.9	767.8	837.0
Self- pay/no	Quartile 1 (lowest)	589.6	555.2	617.8	557.4	440.9	537.6	519.5	609.5	638.5	787.2
charge	Quartiles 2 and 3	627.6	667.4	634.3	676.6	591.8	634.1	587.8	733.0	706.3	767.5
	Quartile 4 (highest)	565.2	618.0	630.0	652.4	737.6	749.1	744.8	819.4	845.7	895.4
	Total	1154.8	1067.1	1140.2	1164.1	1148.8	1419.5	1203.3	1361.1	1315.7	1288.7
Medicare (not	Quartile 1 (lowest)	904.0	1312.5	937.5	1012.8	877.5	1528.5	1094.7	1252.2	1111.1	1360.5
shown)	Quartiles 2 and 3	1177.8	1158.5	1169.2	1222.7	1220.8	1375.3	1151.4	1355.9	1337.4	1306.4
	Quartile 4 (highest)	1190.9	942.9	1165.9	1155.3	1133.3	1436.3	1294.7	1383.9	1356.0	1264.0
	Total	648.4	664.0	731.6	722.6	754.7	754.6	778.7	785.9	806.7	853.2
Other (not	Quartile 1 (lowest)	586.6	605.3	627.5	768.2	679.6	744.4	756.8	640.2	649.0	678.6
shown)	Quartiles 2 and 3	672.5	770.6	776.8	721.2	744.6	748.6	766.0	736.1	764.8	763.6
	Quartile 4 (highest)	647.2	581.7	705.1	722.3	775.7	765.0	796.6	842.7	852.9	933.0



Key: SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

National Inpatient Sample (NIS), 2010-2019

Data for Exhibit 1.7
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	679.5	732.6	771.8	782.2	809.2	820.3	852.6	912.4	962.7	989.8
Tatal	Quartile 1 (lowest)	652.2	661.3	703.0	722.5	755.1	763.7	811.7	876.0	921.1	952.9
Total	Quartiles 2 and 3	694.1	721.3	781.1	794.9	824.8	838.8	865.5	924.9	975.1	1008.4
	Quartile 4 (highest)	653.3	778.5	776.4	779.1	802.9	811.2	850.8	908.6	963.8	972.7
	Total	644.6	688.8	767.8	778.2	806.6	814.1	855.9	902.5	958.4	978.3
Medicaid	Quartile 1 (lowest)	686.1	654.6	736.7	761.8	784.8	785.0	845.5	906.6	944.8	1009.8
	Quartiles 2 and 3	655.4	685.3	776.7	793.3	820.3	833.3	870.7	915.5	969.5	990.1
	Quartile 4 (highest)	615.0	697.5	746.8	748.5	777.1	783.2	833.8	878.8	942.2	946.7

Data for Exhibit 1.7
Rates of diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	708.3	774.4	780.4	791.5	817.0	828.2	858.4	928.6	979.2	1011.0
Private	Quartile 1 (lowest)	632.6	665.7	684.4	707.3	743.1	753.0	798.9	870.4	915.7	933.8
Private	Quartiles 2 and 3	725.9	749.6	786.8	797.4	829.2	843.2	867.2	937.9	990.8	1033.5
	Quartile 4 (highest)	724.4	898.1	832.4	837.1	861.1	861.9	893.7	962.2	1014.6	1027.4
	Total	672.6	631.7	623.1	642.9	657.1	682.7	659.0	762.9	767.8	837.0
Self- pay/no	Quartile 1 (lowest)	668.7	713.9	765.6	590.9	742.0	662.3	691.7	723.8	828.6	845.3
charge	Quartiles 2 and 3	603.8	634.4	652.5	726.7	727.9	746.4	700.0	766.5	798.8	859.3
	Quartile 4 (highest)	564.0	618.1	571.7	566.3	540.2	605.6	619.4	812.9	724.5	824.4
	Total	1154.8	1067.1	1140.2	1164.1	1148.8	1419.5	1203.3	1361.1	1315.7	1288.7
Medicare (not	Quartile 1 (lowest)	1253.4	796.7	1214.1	1114.4	1056.9	1507.8	1083.3	1227.6	1231.5	1349.4
shown)	Quartiles 2 and 3	1259.1	1083.4	1143.6	1177.1	1167.5	1368.2	1254.8	1434.8	1430.1	1313.8
	Quartile 4 (highest)	959.9	1148.0	1103.6	1149.8	1132.6	1474.1	1156.4	1284.7	1175.1	1212.8
	Total	648.4	664.0	731.6	722.6	754.7	754.6	778.7	785.9	806.7	853.2
Other (not	Quartile 1 (lowest)	653.7	592.5	661.4	689.8	712.5	714.5	797.8	746.5	792.8	874.2
shown)	Quartiles 2 and 3	679.9	691.5	758.5	740.4	786.8	798.6	788.9	840.0	815.6	890.3
	Quartile 4 (highest)	593.6	646.3	727.9	713.0	707.1	684.4	747.1	692.2	792.7	742.3

Key: SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

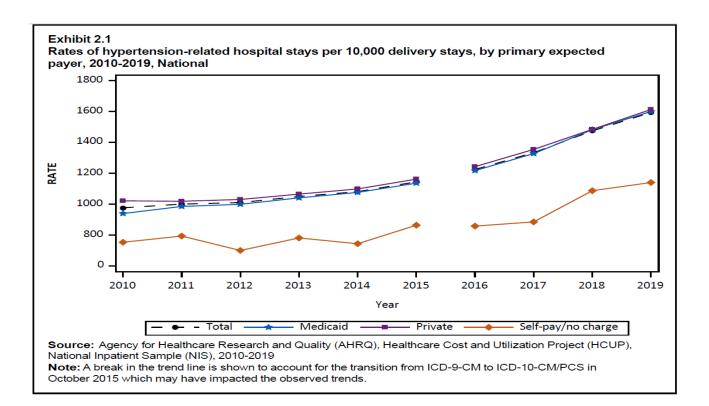
Section 2: Coexisting Condition—Hypertension

Background

Hypertension, or high blood pressure, is a major modifiable risk factor for cardiovascular disease, which is the leading cause of death for women. In 2017, the definition of hypertension was changed when the American Heart Association and the American College of Cardiology lowered the threshold for high blood pressure from 140/90 mmHg to 130/80 mmHg.¹² This change resulted in an increase in the overall prevalence of hypertension among adults from about 30 percent to nearly 50 percent. Hypertension has no symptoms, but if left untreated, can result in major health complications including heart attack, stroke, and heart failure. Women's risk for cardiovascular disease is further complicated by nontraditional risk factors, including adverse pregnancy outcomes like hypertensive disorders during pregnancy, such as preeclampsia.¹³ These disorders are a leading cause of adverse maternal and perinatal outcomes and have been associated with increased cardiovascular risk. Understanding the burden of hypertension among women of childbearing age who utilize hospital care may provide healthcare providers and other stakeholders with an opportunity to intervene on a new or existing diagnosis and increase awareness and treatment of the chronic condition, thereby improving immediate outcomes and potentially mitigating future lifetime cardiovascular risk.

Highlights Among Hypertension-Related Delivery Stays

- From 2010 to 2014 and from 2016 to 2019, the rate of hypertension among delivery stays increased 11 and 30 percent, respectively (exhibit 2.1). Annually, more than 500,000 delivery stays involved hypertension as a complicating or coexisting condition from 2016 to 2019.
- The rate of delivery stays involving hypertension was highest for women aged 35–55 years regardless of payer type. The difference in rate of delivery stays involving hypertension across age groups was greatest among stays billed to Medicaid, where the rate for women aged 35–55 years was 38 percent higher than the rate for women aged 12–19 years (the age group with the next highest rates) (exhibit 2.2).
- Regardless of expected payer, the rate of deliveries involving hypertension was highest for Black non-Hispanic women in 2019, 70 percent higher than the rate for Asian/Pacific Islander non-Hispanic women, who had the lowest rates (exhibit 2.3).
- From 2016 to 2019, the rate of deliveries involving hypertension increased the most (a 33 percent increase) for stays with self-pay/no charge as the expected payer, despite having a substantially lower annual rate than delivery stays billed to private insurance or Medicaid (exhibit 2.1). The rate increase was highest for delivery stays at Northeastern hospitals where the rate increased 57 percent from 2016 to 2019 (exhibit 2.5).
- The greatest rate increase for delivery stays with self-pay/no charge as the expected payer occurred among stays for women from the highest community-level income areas (Q4: a 53 percent increase) and the least socially vulnerable areas (Q1: a 55 percent increase) (exhibits 2.6 and 2.7).

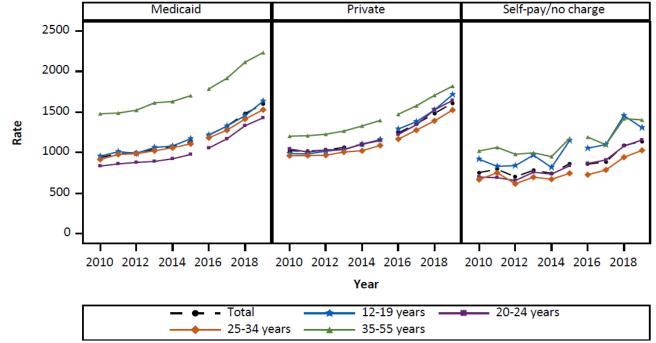


Data for Exhibit 2.1 Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019, National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	975.5	999.9	1009.6	1049.3	1080.1	1144.1	1223.5	1332.8	1473.5	1593.0
Medicaid	938.6	984.6	998.6	1040.2	1075.5	1135.1	1216.5	1326.6	1481.5	1599.0
Private	1020.8	1018.3	1029.7	1064.4	1098.1	1161.3	1242.1	1353.7	1483.2	1612.0
Self-pay/no charge	753.1	793.1	699.9	780.9	743.3	863.2	857.6	884.6	1086.4	1139.5

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Exhibit 2.2
Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

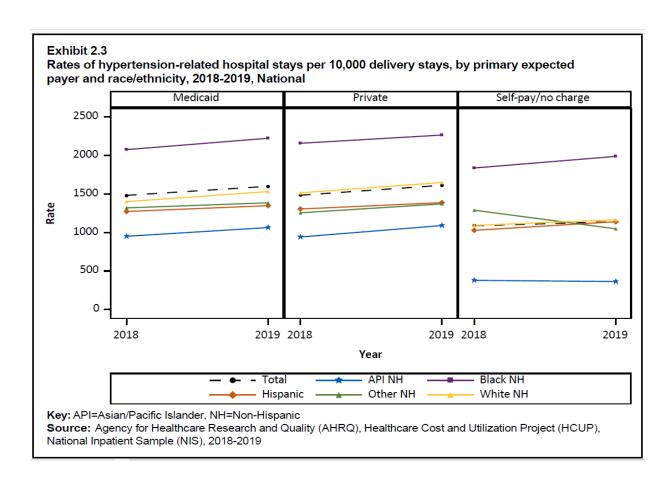


Data for Exhibit 2.2 Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	975.5	999.9	1009.6	1049.3	1080.1	1144.1	1223.5	1332.8	1473.5	1593.0
	12-19	962.0	1000.3	991.5	1056.6	1083.0	1164.2	1224.5	1337.6	1469.3	1640.6
Total	20-24	886.7	901.0	921.6	934.8	978.2	1031.2	1107.9	1222.7	1392.1	1494.7
	25-34	937.3	964.1	968.5	1007.5	1027.5	1087.9	1162.7	1264.7	1388.8	1511.7
	35-55	1275.0	1286.9	1308.5	1365.9	1411.0	1486.1	1567.7	1678.4	1827.3	1932.3
	Total	938.6	984.6	998.6	1040.2	1075.5	1135.1	1216.5	1326.6	1481.5	1599.0
	12-19	954.5	1010.8	990.7	1062.5	1081.1	1170.8	1216.2	1326.9	1455.3	1634.9
Medicaid	20-24	832.8	859.5	877.7	890.6	923.1	976.3	1056.2	1169.1	1331.8	1428.6
	25-34	915.4	976.6	986.1	1022.0	1059.1	1107.7	1182.5	1276.0	1414.3	1528.5
	35-55	1479.0	1488.5	1522.6	1614.3	1630.7	1703.2	1786.1	1918.3	2116.0	2234.8

Data for Exhibit 2.2 Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	1020.8	1018.3	1029.7	1064.4	1098.1	1161.3	1242.1	1353.7	1483.2	1612.0
	12-19	987.9	982.0	1016.9	1038.0	1103.8	1159.9	1290.0	1381.0	1525.9	1715.7
Private	20-24	1044.5	1006.2	1032.7	1036.6	1102.8	1148.6	1222.2	1344.1	1528.0	1644.4
	25-34	960.8	962.6	967.1	1006.7	1022.5	1087.3	1165.6	1276.2	1391.0	1525.3
	35-55	1202.0	1207.8	1226.4	1265.2	1328.7	1396.4	1473.1	1577.2	1707.0	1820.2
	Total	753.1	793.1	699.9	780.9	743.3	863.2	857.6	884.6	1086.4	1139.5
	12-19	917.9	829.2	838.4	967.0	816.3	1148.9	1053.3	1098.5	1456.1	1306.4
Self-pay/no charge	20-24	697.3	689.5	654.0	756.2	734.7	836.7	865.2	907.6	1079.3	1156.5
	25-34	666.3	750.0	613.8	695.6	670.2	743.1	725.8	784.1	941.7	1026.8
	35-55	1019.6	1063.7	979.5	996.6	949.8	1175.6	1190.7	1096.1	1418.6	1403.1
	Total	1565.4	1487.4	1500.6	1721.6	1698.4	1851.2	1946.3	2140.0	2211.0	2421.5
	12-19	1511.3	812.8	969.2	884.4	1219.5	1264.4	1234.6	1855.7	1705.4	1467.9
Medicare (not shown)	20-24	1185.7	1220.2	1157.3	1139.7	1094.5	1341.9	1119.3	1502.0	1547.0	1822.2
	25-34	1559.4	1412.0	1444.0	1629.9	1610.0	1722.0	1905.0	1926.6	2053.8	2340.9
	35-55	2062.4	2265.4	2273.2	2757.9	2596.4	2674.1	2818.8	3072.6	3103.2	3047.1
	Total	931.1	964.7	957.8	1012.0	963.9	1042.9	1120.2	1242.0	1346.0	1421.7
	12-19	1015.9	1044.9	904.8	1159.4	1185.3	1005.4	1061.2	1485.4	1458.0	1565.7
Other (not shown)	20-24	860.4	881.1	911.3	898.3	922.1	966.9	1108.4	1195.0	1332.6	1407.2
	25-34	898.5	909.7	932.7	980.8	893.9	1000.6	1036.3	1141.4	1257.6	1324.9
	35-55	1229.2	1399.0	1208.6	1341.7	1285.2	1372.8	1506.1	1665.5	1675.0	1774.5



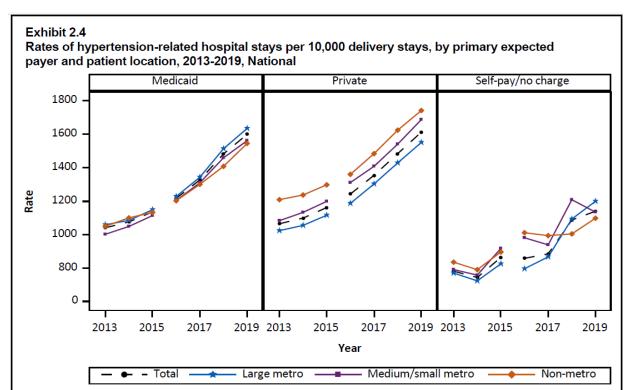
Data for Exhibit 2.3 Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National										
Expected payer	Race/Ethnicity	2018	2019							
	Total	1473.5	1593.0							
	API NH	914.0	1033.6							
Total	Black NH	2100.4	2236.9							
Total	Hispanic	1273.0	1350.4							
	White NH	1472.1	1601.6							
	Other NH	1286.8	1360.2							
	Total	1481.5	1599.0							
	API NH	950.2	1063.5							
Medicaid	Black NH	2074.9	2222.5							
Wedicald	Hispanic	1271.9	1347.7							
	White NH	1400.0	1530.5							
	Other NH	1318.8	1384.8							

Data for Exhibit 2.3
Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
Private	Total	1483.2	1612.0
	API NH	941.0	1089.9
	Black NH	2157.3	2263.9
	Hispanic	1304.4	1387.0
	White NH	1514.7	1648.8
	Other NH	1255.0	1370.5
Self-pay/no charge	Total	1086.4	1139.5
	API NH	378.5	363.1
	Black NH	1836.5	1987.2
	Hispanic	1027.6	1139.1
	White NH	1091.1	1165.0
	Other NH	1288.7	1047.3
Medicare (not shown)	Total	2211.0	2421.5
	API NH	1295.0	1219.5
	Black NH	2839.1	3181.5
	Hispanic	2026.6	1944.9
	White NH	2062.1	2184.7
	Other NH	1403.5	1690.1
Other (not shown)	Total	1346.0	1421.7
	API NH	1048.5	804.6
	Black NH	1799.7	1931.5
	Hispanic	1081.4	1195.5
	White NH	1395.2	1455.4
	Other NH	1126.1	1124.6

Key: API=Asian/Pacific Islander, NH=Non-Hispanic

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019

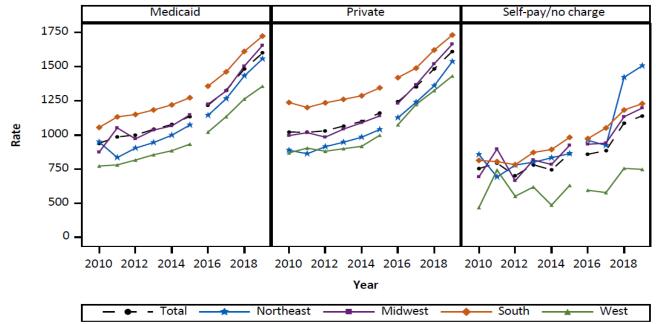


Data for Exhibit 2.4 Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National											
Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019			
Total	Total	1049.3	1080.1	1144.1	1223.5	1332.8	1473.5	1593.0			
	Large metro	1034.3	1058.5	1124.7	1195.6	1311.1	1455.3	1574.7			
	Medium/small metro	1043.5	1089.7	1153.8	1256.8	1355.4	1497.0	1618.2			
	Non-metro	1119.6	1156.6	1207.5	1277.2	1383.7	1507.4	1626.6			
Medicaid	Total	1040.2	1075.5	1135.1	1216.5	1326.6	1481.5	1599.0			
	Large metro	1058.5	1084.3	1148.3	1227.5	1342.5	1512.9	1634.4			
	Medium/small metro	1001.4	1048.3	1113.2	1203.7	1309.7	1458.4	1561.2			
	Non-metro	1049.4	1099.5	1132.6	1201.8	1300.0	1407.5	1544.6			
Private	Total	1064.4	1098.1	1161.3	1242.1	1353.7	1483.2	1612.0			
	Large metro	1023.1	1054.6	1115.2	1186.1	1302.3	1427.8	1550.5			
	Medium/small metro	1082.7	1132.3	1198.2	1310.6	1407.8	1540.0	1686.7			
	Non-metro	1208.5	1236.3	1297.3	1359.5	1483.4	1623.6	1741.1			

Data for Exhibit 2.4
Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	780.9	743.3	863.2	857.6	884.6	1086.4	1139.5
Self-pay/no charge	Large metro	769.6	723.0	824.9	795.4	866.5	1092.6	1198.7
	Medium/small metro	790.7	757.1	917.0	980.5	938.1	1208.0	1133.8
	Non-metro	834.8	789.8	895.5	1010.6	993.3	1003.6	1097.4
	Total	1721.6	1698.4	1851.2	1946.3	2140.0	2211.0	2421.5
Medicare (not	Large metro	1805.0	1758.3	2003.2	2084.7	2098.1	2213.0	2478.1
shown)	Medium/small metro	1700.6	1649.2	1810.7	1773.8	2218.7	2164.9	2467.5
	Non-metro	1561.3	1595.5	1526.4	1978.2	2131.4	2251.4	2187.1
	Total	1012.0	963.9	1042.9	1120.2	1242.0	1346.0	1421.7
Other (not	Large metro	955.5	886.1	1022.7	1080.4	1238.4	1295.0	1392.2
shown)	Medium/small metro	1061.8	1051.4	1051.3	1175.6	1257.0	1390.9	1486.8
	Non-metro	1044.1	978.8	1089.4	1116.1	1216.1	1408.9	1342.3

Exhibit 2.5
Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

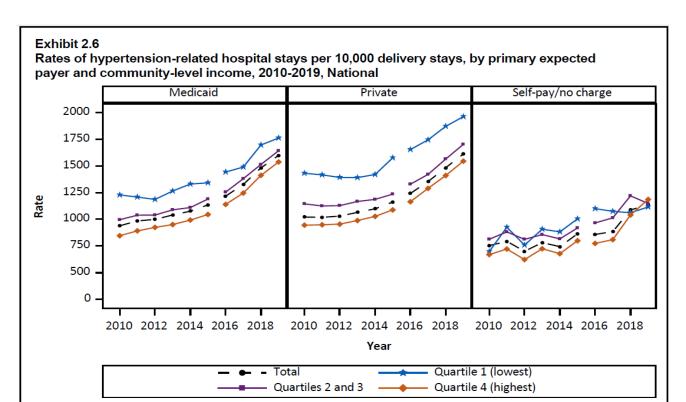


Data for Exhibit 2.5
Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	975.5	999.9	1009.6	1049.3	1080.1	1144.1	1223.5	1332.8	1473.5	1593.0
	Northeast	914.0	849.7	912.5	948.9	990.2	1056.0	1133.5	1249.8	1391.9	1545.2
Total	Midwest	939.6	1027.9	973.3	1039.2	1077.0	1138.6	1227.2	1346.5	1505.5	1649.9
	South	1124.0	1152.5	1176.2	1208.1	1240.8	1297.0	1374.2	1463.4	1604.5	1708.4
	West	820.8	847.9	844.4	873.7	886.7	959.4	1037.6	1163.9	1280.7	1379.9
	Total	938.6	984.6	998.6	1040.2	1075.5	1135.1	1216.5	1326.6	1481.5	1599.0
	Northeast	947.6	833.5	902.7	943.6	996.8	1071.9	1142.5	1264.7	1431.4	1556.2
Medicaid	Midwest	872.9	1050.7	970.6	1034.7	1065.5	1146.1	1224.1	1321.4	1502.9	1654.5
	South	1054.3	1131.5	1149.2	1182.3	1219.4	1272.0	1356.6	1461.3	1611.2	1722.9
	West	771.7	779.9	815.4	854.1	883.6	931.8	1020.2	1133.4	1262.5	1355.6

Data for Exhibit 2.5
Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	1020.8	1018.3	1029.7	1064.4	1098.1	1161.3	1242.1	1353.7	1483.2	1612.0
	Northeast	887.4	861.3	913.4	945.7	982.5	1038.9	1125.1	1238.7	1358.9	1537.1
Private	Midwest	994.3	1016.0	983.2	1042.0	1088.5	1138.5	1230.7	1366.2	1519.8	1664.4
	South	1236.9	1200.1	1234.9	1259.7	1286.4	1344.1	1419.1	1488.6	1621.4	1731.2
	West	868.2	902.8	879.7	898.5	915.9	996.8	1073.3	1222.2	1324.1	1431.2
	Total	753.1	793.1	699.9	780.9	743.3	863.2	857.6	884.6	1086.4	1139.5
	Northeast	856.0	691.0	778.6	799.5	831.4	863.1	960.4	922.1	1421.2	1505.6
Self- pay/no	Midwest	692.0	895.6	663.9	815.5	782.9	923.1	930.8	939.3	1132.3	1196.2
charge	South	812.9	804.0	781.1	871.1	892.6	981.5	972.2	1050.3	1181.9	1228.0
	West	467.6	741.8	550.2	618.1	485.1	629.6	594.4	577.3	754.3	747.1
	Total	1565.4	1487.4	1500.6	1721.6	1698.4	1851.2	1946.3	2140.0	2211.0	2421.5
Medicare	Northeast	1266.7	1372.7	1559.7	1677.3	1535.5	1798.9	1755.5	1866.3	2042.4	2473.8
(not	Midwest	1335.4	1418.5	1287.2	1476.5	1554.6	1553.3	1746.1	2374.4	2125.3	2584.8
shown)	South	2181.9	1687.9	1688.7	2053.0	1971.1	2172.5	2166.8	2187.1	2308.6	2367.3
	West	1591.1	1264.0	1347.5	1441.4	1519.1	1550.4	1836.1	2028.5	2237.8	2296.3
	Total	931.1	964.7	957.8	1012.0	963.9	1042.9	1120.2	1242.0	1346.0	1421.7
	Northeast	909.7	731.8	950.4	980.4	1022.0	1042.5	1079.7	1199.1	1179.3	1334.3
Other (not shown)	Midwest	866.4	876.3	891.6	1020.5	990.8	1042.6	1195.3	1294.5	1355.7	1429.6
	South	1010.6	1066.4	1027.3	1048.1	1021.7	1083.1	1134.0	1290.9	1460.5	1468.9
	West	881.8	923.0	893.2	954.3	815.3	964.8	1035.4	1130.3	1227.5	1383.1



Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Data for Exhibit 2.6

Private

Quartiles 2 and 3

Quartile 4 (highest)

1144.1

944.5

1124.8

948.3

1127.9

954.5

1166.8

988.1

1186.5

1027.1

1235.8

1088.1

1328.8

1164.5

1420.7

1289.9

1564.6

1410.1

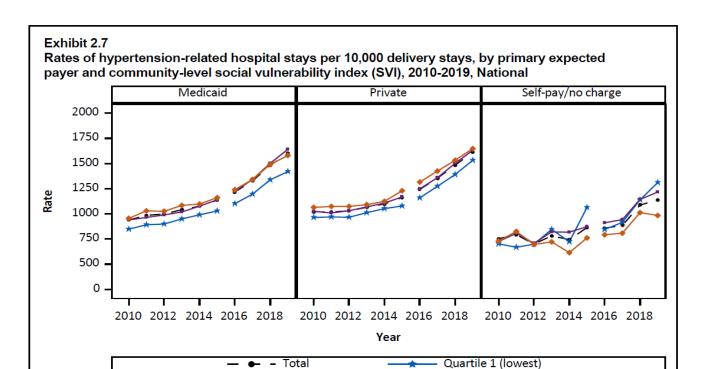
income, 20	10-2019, National										
Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	975.5	999.9	1009.6	1049.3	1080.1	1144.1	1223.5	1332.8	1473.5	1593.0
Total	Quartile 1 (lowest)	1269.9	1265.4	1252.9	1300.1	1354.1	1431.9	1518.6	1575.4	1747.9	1822.0
TOLAI	Quartiles 2 and 3	1057.3	1075.7	1074.1	1120.3	1139.1	1204.6	1284.9	1393.2	1533.5	1658.4
	Quartile 4 (highest)	899.0	923.1	937.3	970.7	1006.0	1066.9	1146.6	1264.0	1401.9	1532.4
	Total	938.6	984.6	998.6	1040.2	1075.5	1135.1	1216.5	1326.6	1481.5	1599.0
Medicaid	Quartile 1 (lowest)	1228.2	1208.1	1186.0	1264.9	1330.2	1341.5	1443.0	1489.8	1696.4	1762.2
	Quartiles 2 and 3	995.9	1038.0	1039.3	1088.5	1109.9	1189.8	1254.5	1380.7	1513.8	1642.4
	Quartile 4 (highest)	845.7	891.1	923.6	950.2	992.4	1045.1	1139.5	1245.5	1411.8	1537.1
_	Total	1020.8	1018.3	1029.7	1064.4	1098.1	1161.3	1242.1	1353.7	1483.2	1612.0
	Quartile 1 (lowest)	1431.5	1416.3	1392.1	1390.6	1419.7	1576.2	1653.8	1744.7	1871.4	1962.4

1703.0

1545.1

Data for Exhibit 2.6
Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	753.1	793.1	699.9	780.9	743.3	863.2	857.6	884.6	1086.4	1139.5
Self- pay/no	Quartile 1 (lowest)	696.7	925.3	757.8	906.8	881.9	1003.6	1099.6	1074.4	1061.0	1115.3
charge	Quartiles 2 and 3	812.5	881.7	811.5	856.2	816.1	918.4	965.8	1013.2	1219.4	1148.8
	Quartile 4 (highest)	668.7	721.0	621.9	723.3	677.9	798.7	773.5	808.7	1040.0	1186.0
	Total	1565.4	1487.4	1500.6	1721.6	1698.4	1851.2	1946.3	2140.0	2211.0	2421.5
Medicare (not	Quartile 1 (lowest)	1938.0	2170.5	1785.7	1583.4	1854.3	1994.8	2352.1	2365.2	1876.9	2426.3
shown)	Quartiles 2 and 3	1552.8	1588.0	1565.1	1843.8	1762.9	1882.3	1988.1	2178.0	2321.0	2410.7
	Quartile 4 (highest)	1514.1	1276.1	1384.5	1653.0	1598.3	1786.4	1780.2	2049.1	2178.2	2442.8
	Total	931.1	964.7	957.8	1012.0	963.9	1042.9	1120.2	1242.0	1346.0	1421.7
Other (not	Quartile 1 (lowest)	1218.4	1073.1	1080.2	1159.0	1127.7	1508.3	1340.0	1319.1	1718.5	1526.9
shown)	Quartiles 2 and 3	956.6	1059.9	973.1	1025.4	988.1	1036.5	1144.4	1243.0	1406.3	1426.9
	Quartile 4 (highest)	909.5	881.7	933.4	982.6	926.1	991.4	1069.7	1233.9	1267.1	1406.8



Key: SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

Quartiles 2 and 3

Quartile 4 (highest)

National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in

October 2015 which may have impacted the observed trends.

Data for Exhibit 2.7
Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	975.5	999.9	1009.6	1049.3	1080.1	1144.1	1223.5	1332.8	1473.5	1593.0
Total	Quartile 1 (lowest)	921.2	940.2	938.9	992.8	1028.9	1064.0	1135.1	1248.0	1371.9	1493.1
Total	Quartiles 2 and 3	982.8	987.1	1006.6	1046.0	1087.6	1149.5	1231.3	1343.6	1493.5	1623.0
	Quartile 4 (highest)	987.7	1046.4	1041.6	1077.1	1094.2	1180.9	1262.5	1363.0	1496.3	1593.8
	Total	938.6	984.6	998.6	1040.2	1075.5	1135.1	1216.5	1326.6	1481.5	1599.0
Medicaid	Quartile 1 (lowest)	847.6	891.2	898.4	949.2	989.6	1028.5	1100.5	1195.2	1337.2	1419.6
	Quartiles 2 and 3	939.1	963.7	988.9	1018.3	1075.9	1138.5	1222.9	1340.8	1501.2	1640.3
	Quartile 4 (highest)	955.0	1029.6	1024.7	1083.7	1096.6	1160.3	1239.7	1340.1	1490.2	1579.0
	Total	1020.8	1018.3	1029.7	1064.4	1098.1	1161.3	1242.1	1353.7	1483.2	1612.0
Private	Quartile 1 (lowest)	963.8	968.8	965.8	1011.1	1051.2	1077.8	1158.3	1273.0	1390.0	1531.3
i iivale	Quartiles 2 and 3	1024.1	1008.3	1030.3	1068.5	1106.4	1167.6	1247.7	1358.6	1501.0	1630.6
	Quartile 4 (highest)	1063.3	1073.2	1073.3	1091.0	1123.9	1228.6	1314.8	1424.0	1531.6	1646.8

Data for Exhibit 2.7

Rates of hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	753.1	793.1	699.9	780.9	743.3	863.2	857.6	884.6	1086.4	1139.5
Self- pay/no	Quartile 1 (lowest)	701.5	667.3	698.5	845.0	722.6	1062.6	844.2	915.4	1138.1	1310.2
charge	Quartiles 2 and 3	725.4	806.8	707.2	820.3	817.3	872.8	910.3	942.7	1143.2	1215.4
	Quartile 4 (highest)	729.0	825.0	695.4	720.8	614.3	761.1	791.9	807.4	1011.9	983.8
	Total	1565.4	1487.4	1500.6	1721.6	1698.4	1851.2	1946.3	2140.0	2211.0	2421.5
Medicare (not	Quartile 1 (lowest)	1216.6	1175.1	1240.2	1055.7	1463.4	1525.1	1440.5	1982.1	2075.3	2349.4
shown)	Quartiles 2 and 3	1575.3	1395.7	1398.4	1774.7	1613.5	1804.4	1941.7	2152.1	2320.8	2421.9
	Quartile 4 (highest)	1699.3	1744.2	1799.7	1895.6	2041.7	2141.4	2233.9	2205.1	2074.3	2485.1
	Total	931.1	964.7	957.8	1012.0	963.9	1042.9	1120.2	1242.0	1346.0	1421.7
Other (not	Quartile 1 (lowest)	749.0	884.9	813.5	1026.4	948.3	988.0	1052.1	1176.3	1254.4	1268.1
shown)	Quartiles 2 and 3	1007.6	969.3	956.1	1039.8	985.4	1049.7	1111.2	1265.5	1369.4	1466.4
	Quartile 4 (highest)	921.2	1016.9	1056.7	951.7	932.2	1074.4	1200.8	1243.5	1378.0	1436.7

Key: SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Section 3: Coexisting Condition—Mental Health Disorders

Background

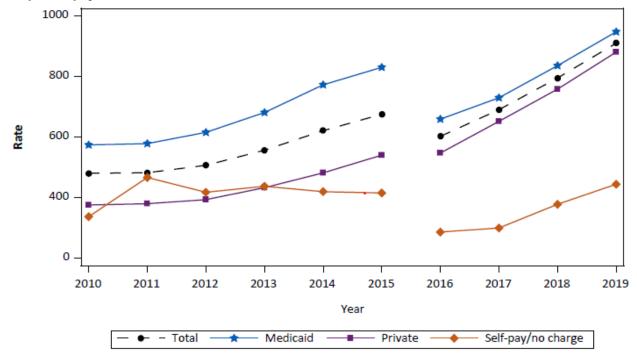
Mental health disorders encompass a wide variety of conditions that affect an individual's thinking, emotions, or behavior. These conditions are officially classified in the *Diagnostic and Statistical Manual of Mental Disorders*, *Fifth Edition* (DSM-5) and include diagnoses such as major depressive disorders, anxiety disorders, and schizophrenia. There is a high prevalence of mental health disorders among women of childbearing age, and this prevalence has been increasing over time differentially by race. Researchers have found that many mental health disorders (e.g., anxiety, depression, bipolar disorder, schizophrenia) are associated with adverse maternal outcomes. For example, patients diagnosed with schizophrenia have a higher rate of comorbidities, such as hypertension and diabetes, and pregnancy complications, such as gestational diabetes and preeclampsia. There are several potential mechanisms driving these observed relationships. First, mental health disorders have been associated with a high likelihood of comorbid substance use. For example, patients diagnosed with poor health behaviors (e.g., lack of exercise, poor diet, risky behavior) and not seeking appropriate prenatal care, 9,18,19 which may adversely affect maternal outcomes.

Highlights Among Mental Health Disorder-Related Delivery Stays

- From 2010 to 2014, the rate of mental health disorders among delivery stays increased 29 percent from 479.7 per 10,000 delivery stays in 2010 to 620.6 in 2014. From 2016 to 2019, the rate increased 51 percent from 601.7 per 10,000 delivery stays in 2016 to 909.5 in 2019 (exhibit 3.1). Each year during 2016–2019, mental health disorders were evident among approximately 270,000 delivery stays.
- The rate of delivery stays involving mental health disorders was lowest for stays billed as self-pay/no charge and about twice as high for stays with Medicaid as the expected payer (exhibit 3.1).
- Among delivery stays billed as self-pay/no charge, from 2016 to 2019, the rate of mental health disorders for women aged 12–19 years nearly doubled (an 82 percent increase) and more than doubled (a 138 percent increase) for delivery stays at Northeastern hospitals (exhibits 3.2 and 3.5)
- Regardless of expected payer type, the rate of delivery stays involving mental health disorders was highest for White non-Hispanic women in 2018, which was more than double the rate for Asian/Pacific Islander non-Hispanic women (exhibit 3.3).
- Although the rate of delivery stays involving mental health disorders varied by community-level income and payer type, the rate was consistently higher among patients from the least socially vulnerable areas across payer types. During 2016–2019, the rate of mental health disorders among delivery stays billed to Medicaid were 72 percent higher for women from the least socially vulnerable areas compared to those from the most vulnerable areas (exhibit 3.7).

Exhibit 3.1

Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019, National



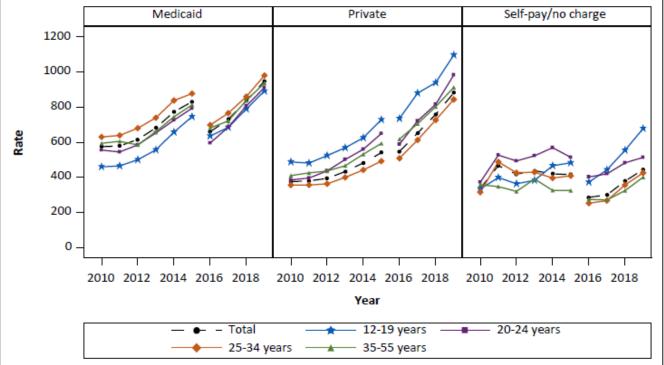
Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Data for Exhibit 3.1 Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019, National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	479.7	481.7	506.2	556.1	620.6	674.8	601.7	689.9	794.6	909.5
Medicaid	573.5	577.9	615.1	680.5	772.0	829.8	658.6	729.2	835.4	947.1
Private	375.2	379.4	392.9	432.4	481.3	539.7	546.7	651.4	757.9	880.1
Self-pay/no charge	336.6	466.0	417.2	436.9	419.1	414.9	285.9	299.3	377.5	443.8

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Exhibit 3.2
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National



Data for Exhibit 3.2
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

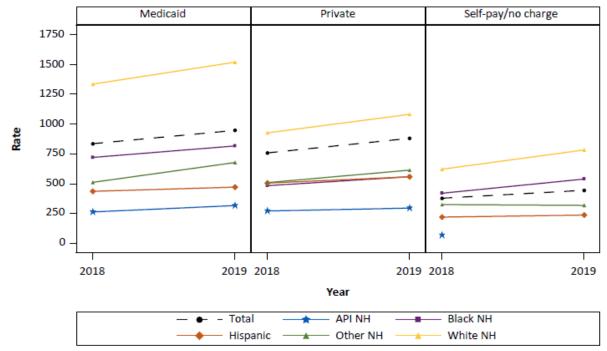
Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	479.7	481.7	506.2	556.1	620.6	674.8	601.7	689.9	794.6	909.5
	12-19	463.2	465.4	501.3	556.2	646.5	732.9	645.4	720.5	815.9	930.5
Total	20-24	509.4	505.4	541.7	604.8	670.9	741.9	592.6	699.5	808.9	932.8
	25-34	470.1	472.4	494.9	541.4	602.2	645.7	588.4	676.0	780.7	895.7
	35-55	476.0	487.9	494.0	535.7	604.1	665.8	643.5	715.8	817.9	923.2
	Total	573.5	577.9	615.1	680.5	772.0	829.8	658.6	729.2	835.4	947.1
	12-19	459.3	464.2	499.7	555.6	656.7	744.7	634.4	683.6	788.4	890.4
Medicaid	20-24	554.3	543.6	584.2	652.1	724.7	792.3	594.5	684.8	805.8	910.2
	25-34	629.1	638.1	678.9	738.2	836.9	876.1	696.8	764.6	859.1	979.2
	35-55	593.2	604.5	583.9	659.8	744.0	811.5	680.0	720.5	837.2	935.9

Data for Exhibit 3.2 Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	375.2	379.4	392.9	432.4	481.3	539.7	546.7	651.4	757.9	880.1
	12-19	487.0	480.4	523.2	567.5	624.5	727.3	734.1	878.7	938.4	1095.8
Private	20-24	384.8	395.3	436.0	500.8	559.0	648.7	587.4	720.4	814.5	982.0
	25-34	355.2	355.5	362.4	399.0	441.5	491.4	507.9	611.7	725.6	842.8
	35-55	409.5	424.7	434.9	465.4	530.9	592.7	616.8	704.3	801.4	911.5
	Total	336.6	466.0	417.2	436.9	419.1	414.9	285.9	299.3	377.5	443.8
	12-19	333.2	398.1	362.5	382.3	465.3	482.3	371.7	441.9	553.5	677.0
Self-pay/no charge	20-24	371.1	526.0	492.4	522.2	568.0	513.3	401.6	418.9	481.9	512.7
	25-34	314.8	487.1	425.4	428.5	395.4	408.1	251.9	266.9	355.8	424.6
	35-55	357.2	346.7	319.1	389.6	325.1	324.4	273.6	270.3	323.8	399.9
	Total	2327.2	2086.2	1989.3	2181.0	2341.5	2470.9	2124.2	2290.3	2323.6	2594.1
	12-19	844.3	449.8								
Medicare (not shown)	20-24	1782.8	1708.9	1482.6	1615.5	1920.4	2204.5	1583.9	2055.3	1658.4	2594.7
	25-34	2431.5	2186.7	2104.3	2322.6	2439.5	2479.0	2193.4	2274.2	2319.6	2475.2
	35-55	2922.1	2689.7	2660.6	2589.5	2634.1	2860.7	2550.3	2577.8	2948.8	3064.0
	Total	533.8	465.1	465.5	543.3	542.2	583.3	593.0	727.3	851.0	977.6
	12-19	507.1	410.4	476.2	660.2	715.0	625.0	438.8	781.0	1012.0	1226.0
Other (not shown)	20-24	520.8	453.5	475.7	532.3	535.0	609.1	523.7	728.8	875.0	912.7
·	25-34	549.7	468.6	447.6	531.3	518.9	566.4	614.6	707.2	835.5	971.0
	35-55	517.2	511.7	521.6	570.1	597.0	601.5	649.5	795.8	849.1	1027.0

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.

Exhibit 3.3
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National



Key: API=Asian/Pacific Islander, NH=Non-Hispanic

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019

Data for Exhibit 3.3
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	794.6	909.5
	API NH	258.4	288.3
Total	Black NH	660.5	749.7
Total	Hispanic	456.6	495.1
	White NH	1060.6	1220.5
	Other NH	514.8	642.8
	Total	835.4	947.1
	API NH	262.1	315.8
Medicaid	Black NH	720.1	816.4
Wedicald	Hispanic	435.2	470.5
	White NH	1335.2	1519.8
	Other NH	510.8	677.1

Data for Exhibit 3.3 Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	757.9	880.1
	API NH	270.1	294.5
Deiverte	Black NH	482.7	558.2
Private	Hispanic	504.5	557.4
	White NH	926.3	1081.9
	Other NH	508.3	613.2
	Total	377.5	443.8
	API NH	67.0	
Self-pay/no charge	Black NH	419.3	538.5
	Hispanic	218.9	236.1
	White NH	621.1	782.5
	Other NH	324.0	317.6
	Total	2323.6	2594.1
	API NH		
Madigara (not abour)	Black NH	2147.6	2325.7
Medicare (not shown)	Hispanic	1952.7	1831.4
	White NH	2757.3	3125.3
	Other NH	1052.6	1737.1
	Total	851.0	977.6
	API NH	315.7	344.8
Other (not shown)	Black NH	743.0	884.0
Origi (Hor allowil)	Hispanic	516.6	601.9
	White NH	998.1	1159.6
	Other NH	794.6	909.5

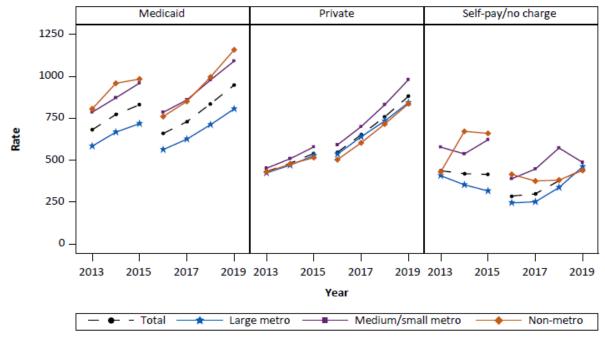
Key: API=Asian/Pacific Islander, NH=Non-Hispanic

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

National Inpatient Sample (NIS), 2018-2019.

Notes: Suppressed rates are indicated with a dash (-) in applicable table cells.

Exhibit 3.4
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National



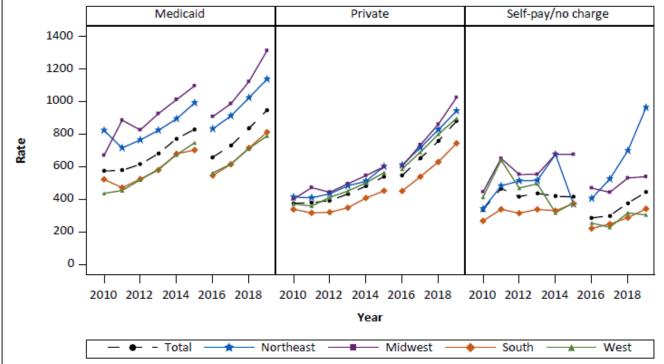
Data for Exhibit 3.4 Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	556.1	620.6	674.8	601.7	689.9	794.6	909.5
Total	Large metro	503.1	560.8	611.9	551.0	635.2	724.9	829.4
Total	Medium/small metro	622.0	691.0	763.7	688.8	781.7	905.1	1031.5
	Non-metro	629.6	727.8	752.9	633.8	729.2	855.5	986.2
	Total	680.5	772.0	829.8	658.6	729.2	835.4	947.1
Medicaid	Large metro	583.3	666.9	717.4	562.7	625.0	711.1	805.3
ivieuicaiu	Medium/small metro	785.6	871.3	958.9	784.9	858.6	977.4	1090.5
	Non-metro	805.4	957.8	983.2	760.2	849.9	995.4	1157.4
	Total	432.4	481.3	539.7	546.7	651.4	757.9	880.1
Private	Large metro	423.7	470.2	526.5	535.3	639.2	733.2	842.8
i iivale	Medium/small metro	451.4	508.5	578.8	591.0	699.5	830.0	979.3
	Non-metro	429.4	476.1	515.1	503.1	603.2	715.3	835.7

Data for Exhibit 3.4
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	436.9	419.1	414.9	285.9	299.3	377.5	443.8
Self-pay/no charge	Large metro	407.4	353.2	316.5	245.6	251.8	336.9	460.9
	Medium/small metro	577.6	537.1	621.7	389.3	447.0	572.7	486.2
	Non-metro	430.0	671.5	659.2	415.3	375.8	381.4	439.0
	Total	2181.0	2341.5	2470.9	2124.2	2290.3	2323.6	2594.1
Medicare (not	Large metro	2203.9	2234.0	2446.0	2236.4	2199.0	2273.2	2327.9
shown)	Medium/small metro	2429.4	2575.8	2732.5	2153.8	2431.3	2406.1	2963.4
	Non-metro	1765.8	2213.5	2054.2	1780.4	2280.1	2251.4	2591.6
	Total	543.3	542.2	583.3	593.0	727.3	851.0	977.6
Other (not	Large metro	504.0	500.2	557.0	623.1	748.4	820.0	1027.2
shown)	Medium/small metro	548.1	576.2	614.8	586.1	754.7	880.1	964.8
	Non-metro	627.4	587.3	598.4	526.5	595.0	884.4	841.3

Exhibit 3.5
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National



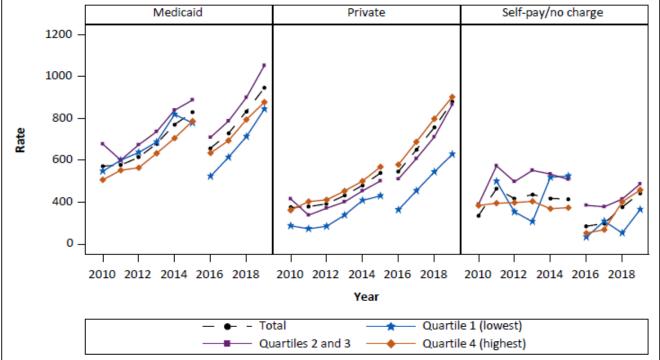
Data for Exhibit 3.5
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	479.7	481.7	506.2	556.1	620.6	674.8	601.7	689.9	794.6	909.5
	Northeast	599.9	541.7	590.7	641.8	696.2	784.7	718.3	813.6	921.3	1032.6
Total	Midwest	532.3	663.0	610.1	676.5	741.2	798.8	731.0	839.9	971.3	1142.4
	South	445.1	402.8	434.0	473.4	547.3	577.7	501.2	580.0	673.2	775.7
	West	411.7	414.6	471.8	524.3	581.1	648.7	573.7	652.8	754.4	841.5
	Total	573.5	577.9	615.1	680.5	772.0	829.8	658.6	729.2	835.4	947.1
	Northeast	822.3	715.2	764.4	823.3	893.9	991.5	832.0	911.7	1022.9	1137.7
Medicaid	Midwest	670.2	885.8	825.6	925.8	1011.7	1096.2	907.3	986.8	1122.4	1312.8
	South	522.6	471.3	524.5	579.1	679.3	702.3	545.9	615.2	714.8	812.3
	West	436.6	454.3	520.0	585.8	673.3	746.9	562.4	615.8	711.9	788.9

Data for Exhibit 3.5
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	375.2	379.4	392.9	432.4	481.3	539.7	546.7	651.4	757.9	880.1
	Northeast	414.1	409.3	434.1	482.9	511.7	601.5	610.5	717.3	827.2	942.0
Private	Midwest	401.8	471.9	443.4	495.2	545.9	600.5	603.5	733.3	861.2	1025.3
	South	338.5	316.5	320.7	348.5	408.1	452.8	451.2	539.0	629.5	744.1
	West	371.6	358.8	412.3	450.7	501.0	563.8	586.6	689.3	799.7	897.0
	Total	336.6	466.0	417.2	436.9	419.1	414.9	285.9	299.3	377.5	443.8
	Northeast	341.1	482.5	513.5	516.1	675.8	369.9	405.1	524.6	698.9	962.8
Self- pay/no	Midwest	444.9	651.3	552.7	553.4	675.4	675.8	469.3	442.9	531.1	539.2
charge	South	267.7	338.8	315.0	338.3	330.0	373.7	221.2	248.2	287.6	341.7
	West	413.3	640.5	469.4	495.1	317.7	379.3	254.2	228.7	316.7	304.7
	Total	2327.2	2086.2	1989.3	2181.0	2341.5	2470.9	2124.2	2290.3	2323.6	2594.1
Medicare	Northeast	2742.8	2958.3	2704.8	3046.7	3090.2	3333.3	2936.3	2674.1	2767.5	3455.5
(not shown)	Midwest	1737.8	1923.6	1838.1	2000.0	2290.6	2264.0	2126.3	2847.3	3049.3	3463.1
Snown)	South	2630.9	1706.0	1534.7	1846.2	1941.1	1948.7	1734.2	1681.8	1727.6	1908.2
	West	3061.5	2616.7	2808.5	2290.9	2464.1	3139.5	2458.3	3291.8	2972.0	2944.4
	Total	533.8	465.1	465.5	543.3	542.2	583.3	593.0	727.3	851.0	977.6
	Northeast	523.2	496.7	544.9	660.3	651.5	774.6	679.0	758.0	748.3	862.1
Other (not shown)	Midwest	659.1	703.9	527.3	566.7	537.5	662.9	727.4	845.5	1100.5	1285.9
	South	485.1	375.1	415.0	458.8	479.0	505.1	496.9	664.8	805.0	871.8
	West	506.1	414.3	464.5	625.3	608.2	584.6	613.0	712.7	780.9	963.0

Exhibit 3.6
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National



Data for Exhibit 3.6 Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

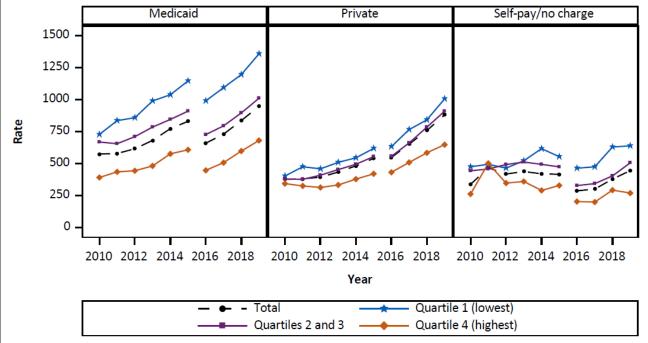
Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	479.7	481.7	506.2	556.1	620.6	674.8	601.7	689.9	794.6	909.5
Total	Quartile 1 (lowest)	465.3	515.4	508.2	562.2	668.4	653.4	469.7	561.7	655.2	758.6
Total	Quartiles 2 and 3	565.2	494.4	543.6	593.3	667.5	707.1	622.4	709.8	816.0	965.0
	Quartile 4 (highest)	437.1	470.3	483.8	532.7	585.5	657.1	604.2	691.9	797.6	894.1
	Total	573.5	577.9	615.1	680.5	772.0	829.8	658.6	729.2	835.4	947.1
Medicaid	Quartile 1 (lowest)	548.5	601.5	638.3	688.1	820.3	779.1	524.0	615.3	714.3	845.4
	Quartiles 2 and 3	678.6	601.7	674.8	737.8	840.3	889.1	710.5	788.0	901.3	1054.0
	Quartile 4 (highest)	507.6	553.3	565.1	634.3	706.8	788.4	635.6	694.9	795.2	878.8

Data for Exhibit 3.6 Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	375.2	379.4	392.9	432.4	481.3	539.7	546.7	651.4	757.9	880.1
Private	Quartile 1 (lowest)	287.6	273.7	285.4	338.9	409.0	431.0	363.8	455.3	545.2	629.7
Filvale	Quartiles 2 and 3	416.3	338.6	371.9	402.0	454.7	502.2	511.5	609.0	712.5	867.7
	Quartile 4 (highest)	362.5	403.7	411.6	454.4	501.4	569.4	579.9	688.9	799.3	904.0
	Total	336.6	466.0	417.2	436.9	419.1	414.9	285.9	299.3	377.5	443.8
Self- pay/no	Quartile 1 (lowest)		500.5	354.2	307.8	519.7	525.7	233.8	309.9	253.5	365.5
charge	Quartiles 2 and 3	390.7	574.2	498.8	552.7	535.1	509.3	385.7	378.6	415.8	488.0
	Quartile 4 (highest)	384.9	396.0	398.5	404.9	369.7	374.6	252.9	269.2	402.0	459.5
	Total	2327.2	2086.2	1989.3	2181.0	2341.5	2470.9	2124.2	2290.3	2323.6	2594.1
Medicare (not	Quartile 1 (lowest)	1748.1	2345.8	1041.7	1369.5	1705.3	1683.9	1405.3	1530.4	1516.5	2131.5
shown)	Quartiles 2 and 3	2068.8	1974.2	2133.8	2406.6	2556.2	2470.9	2088.1	2339.0	2480.6	2673.9
	Quartile 4 (highest)	2776.4	2114.3	2099.2	2206.8	2293.9	2637.3	2372.2	2415.2	2371.9	2590.8
	Total	533.8	465.1	465.5	543.3	542.2	583.3	593.0	727.3	851.0	977.6
Other (not	Quartile 1 (lowest)	296.8	295.6	389.2	498.7	500.4	666.0	397.0	485.0	758.7	537.2
shown)	Quartiles 2 and 3	507.0	437.8	447.2	553.4	559.8	579.7	595.2	725.9	886.6	960.5
	Quartile 4 (highest)	578.1	503.5	494.3	544.1	535.4	583.3	622.8	756.8	838.2	1033.8

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.

Exhibit 3.7
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National



Key: SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in

October 2015 which may have impacted the observed trends.

Data for Exhibit 3.7
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	479.7	481.7	506.2	556.1	620.6	674.8	601.7	689.9	794.6	909.5
Total	Quartile 1 (lowest)	512.7	591.0	586.7	651.6	690.6	771.2	739.8	863.5	945.5	1112.5
Total	Quartiles 2 and 3	523.3	504.5	551.3	607.1	657.9	715.1	636.4	724.7	835.9	951.8
	Quartile 4 (highest)	379.3	402.0	396.6	427.3	499.3	532.9	444.8	509.6	597.3	668.8
	Total	573.5	577.9	615.1	680.5	772.0	829.8	658.6	729.2	835.4	947.1
Medicaid	Quartile 1 (lowest)	727.1	835.1	858.1	989.5	1037.9	1146.1	990.2	1093.5	1195.7	1358.3
	Quartiles 2 and 3	667.8	654.7	709.9	784.7	844.6	909.4	725.8	794.2	895.6	1010.7
	Quartile 4 (highest)	390.1	434.3	442.8	480.7	575.4	607.0	446.3	506.4	597.0	680.1

Data for Exhibit 3.7
Rates of mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	375.2	379.4	392.9	432.4	481.3	539.7	546.7	651.4	757.9	880.1
Private	Quartile 1 (lowest)	401.4	474.4	458.0	508.4	544.2	617.8	632.0	765.1	841.6	1005.8
Filvale	Quartiles 2 and 3	378.5	376.0	408.1	451.7	493.9	553.8	555.9	660.5	784.2	909.0
	Quartile 4 (highest)	342.1	324.1	312.1	331.3	377.6	418.8	431.2	508.0	583.6	647.5
	Total	336.6	466.0	417.2	436.9	419.1	414.9	285.9	299.3	377.5	443.8
Self- pay/no	Quartile 1 (lowest)	473.8	493.5	463.4	521.0	615.9	553.1	463.0	473.7	628.6	638.2
charge	Quartiles 2 and 3	442.3	456.7	491.5	511.2	493.0	473.4	326.8	342.0	402.5	504.8
	Quartile 4 (highest)	260.9	500.9	346.2	359.0	289.0	327.9	201.9	197.7	291.4	268.5
	Total	2327.2	2086.2	1989.3	2181.0	2341.5	2470.9	2124.2	2290.3	2323.6	2594.1
Medicare (not	Quartile 1 (lowest)	2390.3	2325.9	2402.1	1832.8	2206.7	2374.3	2392.9	2212.3	2269.1	3000.0
shown)	Quartiles 2 and 3	2680.6	2051.8	2134.9	2440.6	2421.8	2598.7	2203.4	2638.8	2606.8	2711.3
	Quartile 4 (highest)	1742.1	2013.3	1545.0	1839.7	2220.6	2221.1	1800.3	1704.8	1846.5	2083.3
	Total	533.8	465.1	465.5	543.3	542.2	583.3	593.0	727.3	851.0	977.6
Other (not	Quartile 1 (lowest)	686.0	575.8	570.2	600.1	558.1	625.6	673.2	800.5	863.4	1233.9
shown)	Quartiles 2 and 3	526.6	457.4	473.5	569.0	551.5	619.6	614.9	768.2	908.3	970.6
	Quartile 4 (highest)	460.6	398.1	389.8	462.5	513.5	477.8	488.3	565.5	695.1	778.9

Key: SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Section 4: Coexisting Condition—Substance Use Disorders

Background

A substance use disorder (SUD)^c is a mental disorder that affects an individual's ability to control their use of legal and illegal substances (e.g., drugs, alcohol, and medications). SUDs are associated with increased odds of impairment, disability, health problems, and a reduced ability to satisfy daily responsibilities. Approximately 1 in 12 adults in the United States has an SUD, and the prevalence of maternal hospital stays due to substance use has increased over time.^{20,21} Substance use during pregnancy is associated with an increased risk of preterm delivery, eclampsia, obstetric hemorrhage, placental abruption, venous thromboembolism, sepsis, and maternal death.^{21,22} In addition to the direct effects of substance use on maternal and neonatal health, substance use is associated with an increased likelihood of not receiving adequate prenatal and postpartum care.²³

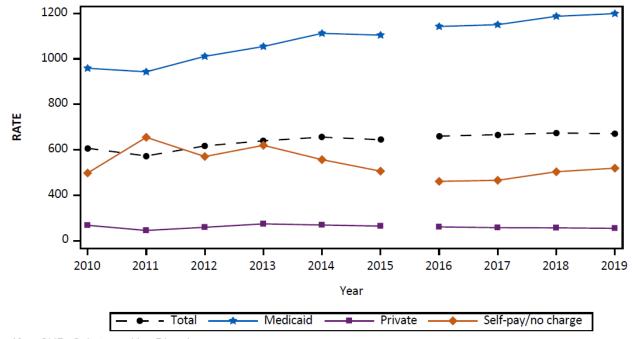
Highlights Among Substance Use Disorder-Related Delivery Stays

- Overall, the rate delivery stays involving SUD during 2010–2019 was unchanged at about 670.5 per 10,000 delivery stays or about 240,000 delivery stays annually (exhibit 4.1).
- Across expected payer types, since 2016, the rate of delivery stays involving SUDs was highest among stays billed to Medicaid, but stays billed as self-pay/no charge experienced the largest rate increase (a 13 percent increase) (exhibit 4.1).
- From 2016 to 2019, SUD rates were highest among delivery stays for women with the following characteristics: White non-Hispanic race and ethnicity and residence location in non-metro Midwest, or lowest community-level income quartile areas (exhibits 4.3, 4.5, and 4.6).
- Among delivery stays billed to Medicaid, approximately 1 in 10 women were diagnosed with an SUD (1,199.0 per 10,000 delivery stays in 2019), which was more than four times and double the rate among delivery stays billed to private insurance (254.4 per 10,000 in 2019) or self-pay/no charge (519.1 per 10,000 in 2019), respectively (exhibit 4.1).

^c Data note: The definition of SUD used in this chartbook includes all substance use disorders that were diagnosed during the delivery stay including alcohol, tobacco use, cannabis, opioids, cocaine, and other substances. This definition differs from the one used in <a href="https://docs.py.ncbe/http

Exhibit 4.1

Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019, National



Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Data for Exhibit 4.1

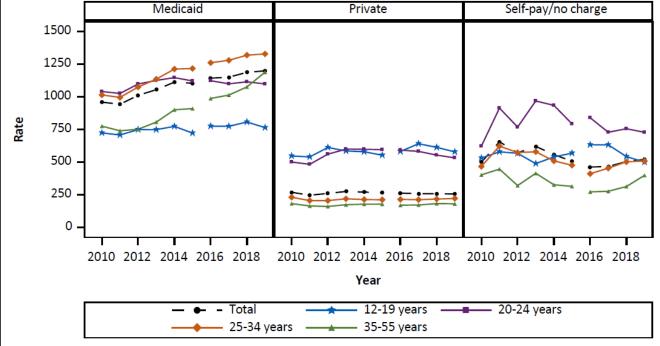
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019, National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	606.5	572.9	616.8	639.6	655.6	644.1	660.0	666.3	673.8	670.5
Medicaid	958.5	942.9	1011.0	1054.3	1112.2	1104.2	1142.4	1150.3	1187.2	1199.0
Private	267.8	245.0	258.9	274.0	269.0	264.2	260.7	257.3	256.4	254.4
Self-pay/no charge	497.7	654.7	570.3	619.4	556.5	505.9	461.0	465.7	503.3	519.1

Key: SUD=Substance Use Disorder

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Exhibit 4.2 Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National



Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Data for Exhibit 4.2 Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	606.5	572.9	616.8	639.6	655.6	644.1	660.0	666.3	673.8	670.5
	12-19	681.5	664.9	712.1	703.8	719.0	680.8	721.4	744.1	758.6	717.4
Total	20-24	877.2	855.0	920.5	947.8	953.5	929.8	930.1	913.5	907.9	886.1
	25-34	535.8	502.8	546.7	578.0	601.3	600.2	626.7	641.8	655.7	653.9
	35-55	360.8	330.5	343.3	369.0	401.4	402.7	426.5	445.2	461.8	492.3
	Total	958.5	942.9	1011.0	1054.3	1112.2	1104.2	1142.4	1150.3	1187.2	1199.0
	12-19	722.8	707.1	748.2	747.9	773.2	721.7	774.5	773.2	806.6	763.2
Medicaid	20-24	1040.2	1025.5	1097.8	1125.4	1146.8	1121.4	1123.1	1099.4	1114.6	1098.3
	25-34	1014.1	995.1	1074.8	1135.2	1212.3	1216.7	1260.9	1279.6	1318.8	1328.7
	35-55	774.6	739.2	751.0	805.5	900.3	909.4	987.1	1013.0	1075.6	1188.4

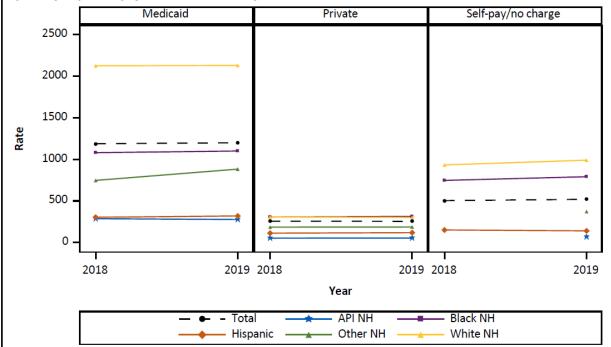
Data for Exhibit 4.2 Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	267.8	245.0	258.9	274.0	269.0	264.2	260.7	257.3	256.4	254.4
	12-19	546.0	538.8	611.3	584.5	578.2	551.8	580.5	640.0	612.1	577.4
Private	20-24	499.7	482.2	560.0	598.5	597.6	594.3	591.2	581.3	552.6	531.6
	25-34	229.5	204.1	204.0	217.5	212.0	210.4	213.2	210.9	215.8	219.9
	35-55	180.8	162.7	158.9	172.3	176.3	176.6	168.5	170.3	180.9	179.4
	Total	497.7	654.7	570.3	619.4	556.5	505.9	461.0	465.7	503.3	519.1
	12-19	530.1	577.7	566.5	487.3	538.8	567.4	632.0	631.3	541.5	498.8
Self-pay/no charge	20-24	620.8	913.4	767.7	968.0	934.1	792.2	839.0	728.1	754.9	727.3
	25-34	465.8	621.4	572.1	578.5	508.2	474.8	409.9	452.4	501.4	507.2
	35-55	401.1	445.2	319.1	413.5	325.1	313.0	271.0	275.3	311.7	397.6
	Total	2035.0	1771.2	1750.1	1774.6	1938.4	1898.8	1782.4	1819.9	1781.2	1787.6
	12-19	1343.5	1355.5	748.9							
Medicare (not shown)	20-24	2004.6	1840.0	1717.1	1714.6	1751.2	1901.0	1562.8	1422.9	1571.8	1574.3
	25-34	2105.8	1791.0	1774.1	1827.3	2047.7	1947.8	1855.5	1829.1	1797.5	1753.9
	35-55	1964.3	1718.2	1947.0	1778.9	1909.7	1840.8	1912.8	2106.9	1998.4	2112.8
	Total	557.5	422.5	454.9	460.8	377.6	396.6	406.3	469.7	410.6	444.6
	12-19	671.1	549.6	659.9	660.2	526.8	611.4	387.8	735.1	669.0	679.5
Other (not shown)	20-24	676.3	542.3	603.8	630.4	526.6	494.4	510.6	615.5	476.3	512.9
	25-34	506.5	369.2	395.0	397.3	319.4	349.2	385.0	424.0	397.5	422.8
	35-55	355.1	298.6	295.0	307.9	323.2	371.9	351.4	397.9	328.4	395.7

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.

Exhibit 4.3
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National



Key: SUD=Substance Use Disorder, API=Asian/Pacific Islander, NH=Non-Hispanic **Source:** Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019

Data for Exhibit 4.3	
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays	s, by primary
expected payer and race/ethnicity, 2018-2019, National	

Expected payer	Race/Ethnicity	2018	2019
	Total	673.8	670.5
	API NH	116.7	112.0
Total	Black NH	827.2	835.6
Total	Hispanic	235.8	247.4
	White NH	890.1	871.4
	Other NH	483.0	544.1
	Total	1187.2	1199.0
	API NH	285.7	276.4
Medicaid	Black NH	1079.7	1099.6
Wedicald	Hispanic	303.2	318.8
	White NH	2124.5	2128.9
	Other NH	746.4	881.9

Data for Exhibit 4.3
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

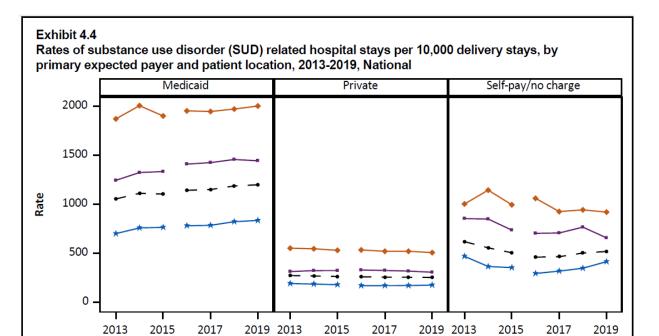
Expected payer	Race/Ethnicity	2018	2019
	Total	256.4	254.4
	API NH	52.6	54.0
Private	Black NH	306.3	313.4
Privale	Hispanic	112.3	118.0
	White NH	305.9	301.2
	Other NH	184.5	186.3
	Total	503.3	519.1
	API NH		67.1
Self-pay/no charge	Black NH	746.3	790.6
	Hispanic	150.3	140.2
	White NH	932.3	989.7
	Other NH		371.6
	Total	1781.2	1787.6
	API NH		
Medicare (not shown)	Black NH	1642.3	1732.2
Medicare (not snown)	Hispanic	784.0	842.8
	White NH	2293.8	2215.0
	Other NH	848.0	1079.8
	Total	410.6	444.6
	API NH		
Other (not shown)	Black NH	470.7	525.7
	Hispanic	183.9	220.0
	White NH	477.6	518.9
	Other NH	225.2	396.9

Key: SUD=Substance Use Disorder, API=Asian/Pacific Islander, NH=Non-Hispanic

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

National Inpatient Sample (NIS), 2018-2019.

Note: Suppressed rates are indicated with a dash (-) in applicable table cells.



Total

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2013-2019

Year

Medium/small metro

Non-metro

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Large metro

Rates of substan	Data for Exhibit 4.4 Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National													
Expected payer	Patient Location													
	Total	639.6	655.6	644.1	660.0	666.3	673.8	670.5						
Total	Large metro	425.4	441.3	435.8	439.0	443.1	453.3	456.7						
Total	Medium/small metro	761.7	798.5	794.2	832.7	847.5	847.7	830.6						
	Non-metro	1213.2	1270.1	1201.4	1226.8	1226.5	1228.1	1220.6						
	Total	1054.3	1112.2	1104.2	1142.4	1150.3	1187.2	1199.0						
Medicaid	Large metro	700.9	759.5	764.9	781.5	785.4	822.7	835.4						
Medicald	Medium/small metro	1244.5	1323.9	1334.0	1409.7	1425.1	1457.1	1443.5						
	Non-metro	1870.8	2005.4	1900.6	1952.6	1946.3	1971.2	2002.3						
	Total	274.0	269.0	264.2	260.7	257.3	256.4	254.4						
Private	Large metro	192.1	187.0	179.9	170.4	171.1	171.5	176.5						
riivale	Medium/small metro	313.8	324.1	324.7	330.5	325.4	319.2	307.2						
	Non-metro	552.7	546.6	530.9	534.9	521.1	521.2	508.0						

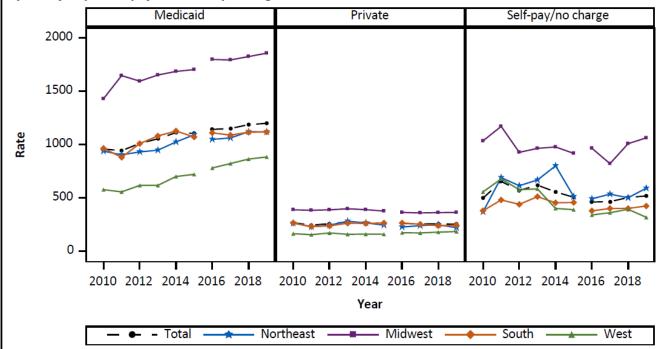
Data for Exhibit 4.4

Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	619.4	556.5	505.9	461.0	465.7	503.3	519.1
Self-pay/no charge	Large metro	469.6	365.9	354.4	294.6	319.0	348.1	415.3
	Medium/small metro	854.4	849.9	736.7	704.2	707.3	767.4	658.2
	Non-metro	1003.2	1144.6	995.0	1061.4	926.2	943.4	920.3
	Total	1774.6	1938.4	1898.8	1782.4	1819.9	1781.2	1787.6
Medicare (not	Large metro	1434.3	1659.6	1430.9	1569.5	1377.1	1309.7	1347.5
shown)	Medium/small metro	2127.4	2016.3	2205.8	1773.8	2256.3	2075.2	2207.1
	Non-metro	2063.2	2674.2	2582.0	2334.3	2465.9	2525.7	2237.7
	Total	460.8	377.6	396.6	406.3	469.7	410.6	444.6
Other (not	Large metro	360.6	269.3	282.0	329.5	405.5	350.8	393.2
shown)	Medium/small metro	449.6	405.1	425.8	383.4	441.1	374.8	421.4
	Non-metro	693.9	634.7	640.6	707.0	762.4	704.4	703.6

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2013-2019

Exhibit 4.5
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National



Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

National Inpatient Sample (NIS), 2010-2019

Data for Exhibit 4.5
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

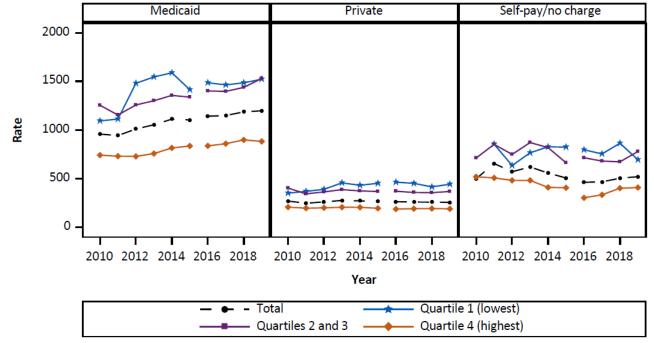
Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	606.5	572.9	616.8	639.6	655.6	644.1	660.0	666.3	673.8	670.5
	Northeast	567.1	504.1	548.9	574.4	604.6	619.1	590.1	603.5	621.1	589.6
Total	Midwest	854.5	925.7	889.1	907.0	910.0	891.9	927.5	933.9	938.8	950.5
	South	644.5	562.2	638.4	677.6	687.8	655.4	671.2	664.9	665.7	661.5
	West	360.3	349.4	390.0	388.2	414.6	421.7	455.1	473.5	485.2	488.9
	Total	958.5	942.9	1011.0	1054.3	1112.2	1104.2	1142.4	1150.3	1187.2	1199.0
	Northeast	938.5	903.9	931.3	947.4	1024.9	1091.9	1048.7	1062.1	1120.2	1119.6
Medicaid	Midwest	1429.6	1646.5	1594.5	1652.1	1685.7	1702.9	1797.8	1793.5	1824.9	1856.8
	South	964.5	880.6	1009.6	1080.8	1127.6	1070.4	1109.8	1088.7	1116.0	1117.9
	West	577.6	556.5	617.5	617.9	700.8	720.9	780.8	822.2	864.2	884.0

Data for Exhibit 4.5
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	267.8	245.0	258.9	274.0	269.0	264.2	260.7	257.3	256.4	254.4
	Northeast	263.8	229.6	244.7	281.5	266.0	244.9	227.4	240.4	249.2	220.6
Private	Midwest	388.9	384.0	388.6	398.3	390.3	376.7	364.1	359.5	362.5	364.3
	South	265.2	231.4	237.9	263.5	261.0	265.8	265.1	253.5	239.7	243.6
	West	164.9	155.4	171.9	159.1	160.7	159.8	173.9	172.0	179.3	184.9
	Total	497.7	654.7	570.3	619.4	556.5	505.9	461.0	465.7	503.3	519.1
	Northeast	370.4	690.3	614.5	668.4	801.1	512.7	491.6	535.2	501.9	591.1
Self- pay/no	Midwest	1034.9	1170.5	927.3	964.4	977.8	917.6	966.0	821.4	1008.7	1062.9
charge	South	379.9	481.0	440.1	511.8	454.8	457.3	379.0	401.1	401.6	424.5
	West	556.4	678.1	577.1	584.4	401.4	389.9	340.2	361.5	393.5	318.3
	Total	2035.0	1771.2	1750.1	1774.6	1938.4	1898.8	1782.4	1819.9	1781.2	1787.6
Medicare	Northeast	1810.4	2195.7	2053.3	2388.5	2034.5	2235.5	2309.3	1922.0	1856.8	1950.3
(not shown)	Midwest	2201.4	1973.8	1944.9	1852.4	2220.8	2091.4	2165.0	2482.8	2423.0	2564.9
SHOWII)	South	2027.5	1465.4	1460.0	1527.9	1786.4	1639.2	1371.8	1413.3	1508.9	1413.2
	West	1858.5	1556.4	1758.9	1480.0	1650.7	1802.3	1714.7	2259.8	1800.7	1851.9
	Total	557.5	422.5	454.9	460.8	377.6	396.6	406.3	469.7	410.6	444.6
	Northeast	566.7	536.8	458.8	548.2	468.2	390.2	383.8	381.2	219.6	281.1
Other (not shown)	Midwest	997.4	738.7	715.9	628.9	494.0	569.6	735.6	843.1	805.4	904.4
	South	441.1	305.4	378.4	364.3	329.8	365.9	301.5	398.6	385.5	374.8
	West	378.5	328.7	334.7	464.5	341.4	315.6	300.3	297.3	231.0	268.3

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Exhibit 4.6
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National



Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

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Data for Exhibit 4.6
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	606.5	572.9	616.8	639.6	655.6	644.1	660.0	666.3	673.8	670.5
Total	Quartile 1 (lowest)	848.4	888.5	1063.8	1128.0	1128.7	1033.0	1083.3	1088.0	1069.1	1091.3
Total	Quartiles 2 and 3	865.2	783.6	839.4	871.4	885.0	861.7	897.7	896.8	903.9	950.1
	Quartile 4 (highest)	444.3	407.1	421.8	430.0	445.6	445.4	442.0	455.3	467.4	459.4
	Total	958.5	942.9	1011.0	1054.3	1112.2	1104.2	1142.4	1150.3	1187.2	1199.0
Medicaid	Quartile 1 (lowest)	1094.4	1113.1	1482.1	1547.7	1590.6	1415.9	1487.8	1465.4	1487.2	1524.4
	Quartiles 2 and 3	1255.6	1155.4	1258.6	1302.3	1357.3	1339.5	1403.0	1398.7	1439.8	1531.9
	Quartile 4 (highest)	741.2	730.3	728.6	757.1	815.3	835.5	836.7	859.3	898.3	883.1

Data for Exhibit 4.6
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	267.8	245.0	258.9	274.0	269.0	264.2	260.7	257.3	256.4	254.4
Private	Quartile 1 (lowest)	349.0	367.2	388.7	455.3	430.2	450.9	462.2	450.3	413.6	441.4
Filvale	Quartiles 2 and 3	401.9	341.8	362.1	385.5	372.0	366.3	368.9	356.3	354.1	366.6
	Quartile 4 (highest)	205.2	194.1	197.7	203.8	202.4	193.2	185.5	189.2	190.6	187.9
	Total	497.7	654.7	570.3	619.4	556.5	505.9	461.0	465.7	503.3	519.1
Self- pay/no	Quartile 1 (lowest)		854.0	634.3	765.4	826.8	824.4	796.5	754.1	863.9	693.5
charge	Quartiles 2 and 3	711.9	852.6	749.0	871.2	818.9	662.7	714.3	680.0	672.4	778.8
	Quartile 4 (highest)	518.2	506.2	481.0	480.4	408.6	404.8	301.3	332.2	400.1	406.7
	Total	2035.0	1771.2	1750.1	1774.6	1938.4	1898.8	1782.4	1819.9	1781.2	1787.6
Medicare (not	Quartile 1 (lowest)	1463.5	1972.2	1473.2	1554.9	1639.1	1968.9	1568.0	1582.6	1771.8	2108.8
shown)	Quartiles 2 and 3	2303.2	1900.1	2029.1	2047.6	2265.3	2144.5	2028.9	2067.8	2062.1	2086.5
	Quartile 4 (highest)	1871.9	1634.1	1589.2	1601.0	1719.4	1629.5	1563.0	1616.1	1463.6	1429.9
	Total	557.5	422.5	454.9	460.8	377.6	396.6	406.3	469.7	410.6	444.6
Other (not	Quartile 1 (lowest)	508.9	582.8	810.2	707.6	597.5	577.9	490.1	708.0	676.4	867.1
shown)	Quartiles 2 and 3	666.0	442.4	500.0	526.9	428.4	501.4	514.4	578.2	515.7	513.9
	Quartile 4 (highest)	499.8	394.4	376.2	364.0	305.8	275.0	296.7	362.6	304.3	357.6

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.

Exhibit 4.7 Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National Medicaid Private Self-pay/no charge 2000 1500 Rate 1000 500 0 2010 2012 2014 2016 2018 2010 2012 2014 2016 2018 2010 2012 2014 2016 2018 Year Quartile 1 (lowest) Quartiles 2 and 3 Quartile 4 (highest)

Key: SUD=Substance Use Disorder, SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in

October 2015 which may have impacted the observed trends.

Rates of su	Data for Exhibit 4.7 Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National													
Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019			
	Total	606.5	572.9	616.8	639.6	655.6	644.1	660.0	666.3	673.8	670.5			
Total	Quartile 1 (lowest)	588.4	634.8	660.8	679.8	615.2	613.5	625.6	638.6	628.6	611.1			
TOTAL	Quartiles 2 and 3	694.0	645.4	700.3	723.4	724.3	697.1	703.0	705.2	711.8	709.7			
	Quartile 4 (highest)	447.6	437.0	455.0	476.5	534.9	550.4	586.8	595.3	608.1	612.1			
	Total	958.5	942.9	1011.0	1054.3	1112.2	1104.2	1142.4	1150.3	1187.2	1199.0			
Medicaid	Quartile 1 (lowest)	1315.8	1455.5	1514.0	1590.0	1452.9	1494.6	1529.8	1548.0	1563.1	1545.4			
	Quartiles 2 and 3	1169.9	1154.0	1228.2	1274.4	1269.8	1237.3	1257.6	1252.1	1274.1	1286.2			
	Quartile 4 (highest)	553.9	596.5	630.8	660.2	762.9	774.5	830.4	851.4	888.6	904.4			

Data for Exhibit 4.7
Rates of substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	267.8	245.0	258.9	274.0	269.0	264.2	260.7	257.3	256.4	254.4
Private	Quartile 1 (lowest)	257.7	292.9	297.8	310.0	275.9	260.4	258.6	258.4	248.6	237.5
Filvale	Quartiles 2 and 3	277.2	254.5	273.3	288.4	284.3	275.2	267.4	264.0	266.9	267.0
	Quartile 4 (highest)	249.5	193.2	197.0	212.6	216.0	236.4	242.9	236.7	230.4	232.4
	Total	497.7	654.7	570.3	619.4	556.5	505.9	461.0	465.7	503.3	519.1
Self- pay/no	Quartile 1 (lowest)	751.1	790.0	765.6	794.2	805.0	735.1	751.6	745.1	819.0	714.3
charge	Quartiles 2 and 3	697.6	691.2	677.8	748.4	665.4	571.5	485.8	509.7	520.5	562.7
	Quartile 4 (highest)		627.3	436.4	463.4	367.7	385.4	396.8	342.4	418.9	394.4
	Total	2035.0	1771.2	1750.1	1774.6	1938.4	1898.8	1782.4	1819.9	1781.2	1787.6
Medicare (not	Quartile 1 (lowest)	2279.8	1917.7	2323.8	1627.6	1823.5	1663.8	2035.7	1700.8	1470.9	1566.3
shown)	Quartiles 2 and 3	2095.8	1843.4	1920.4	2113.0	2074.9	2056.9	1837.7	2058.4	2045.6	1965.0
	Quartile 4 (highest)	1883.5	1618.5	1165.8	1255.4	1684.1	1693.2	1524.3	1463.9	1450.8	1562.5
	Total	557.5	422.5	454.9	460.8	377.6	396.6	406.3	469.7	410.6	444.6
Other (not	Quartile 1 (lowest)	805.8	428.9	494.2	499.2	390.1	355.6	371.5	406.7	372.0	483.1
shown)	Quartiles 2 and 3	544.3	428.1	481.9	467.7	378.6	377.1	378.4	483.6	402.3	405.0
	Quartile 4 (highest)	427.0	411.4	380.4	425.8	372.5	477.8	501.1	495.1	463.4	518.5

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.

Section 5: Coexisting Condition—Severe Maternal Morbidity

Background

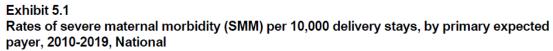
Severe maternal morbidity (SMM)^d at delivery represents potentially life-threatening complications such as pulmonary embolism, sepsis, and hemorrhage. SMM occurs at a higher rate in the United States than it does in any other industrialized countries despite greater investments in and costs of healthcare in the United States. Each year, approximately 700 women die during or shortly after pregnancy, but cases of SMM occur more frequently at approximately 27,000 per year during 2010–2019.⁴ Surveillance and examination of SMM cases may provide insight into issues with healthcare access and quality that contribute to the United States' higher and racially disparate rate of maternal mortality. Factors associated with SMM include many patient-level factors like older age (35 and older), hypertension and other maternal comorbidities, and the quality of prenatal and in-hospital obstetric care.^{24, 25}

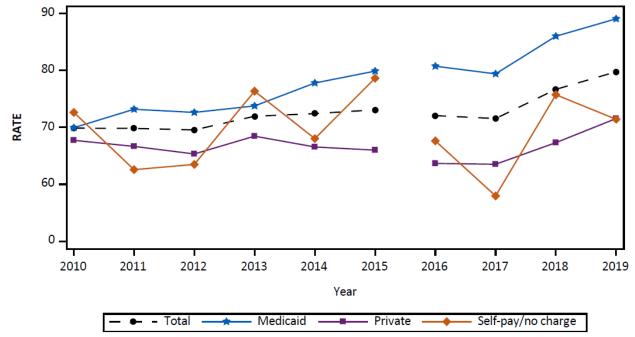
Recent studies show that SMM rates were minimally affected by the ICD transition²⁶ and that state-level SMM rates were associated with state rates of hypertension and low-risk cesarean delivery.²⁷ However, less is known about how the prevalence of some patient, hospital, and community factors among delivery stays with SMM has changed over time, particularly across different payer types. A better understanding of these trends may help hospitals to plan for patients who are more likely to be seen for SMM in the future, to minimize the occurrence of SMM, and to improve outcomes for women who experience these rare events.

Highlights Among SMM-Related Delivery Stays

- The 2019 SMM rate (79.7 per 10,000 delivery stays) was 11 percent higher than the 2016 rate (72.0 per 10,000). On average, more than 27,000 delivery stays experienced an SMM complication each year from 2016 to 2019.
- Regardless of expected payer, SMM rates for women aged 35–55 years were nearly 50 percent higher than the rates for women of younger ages and the difference was greatest among delivery stays billed to Medicaid (exhibit 5.2). Notably, SMM rates among delivery stays billed to private insurance for women aged 12–19 years increased 68 percent from 2016 to 2019.
- The urban-rural gap in SMM rates increased 65 percent from 2016 to 2018. In 2016, the SMM rate for women who reside in large metro areas (62.9 per 10,000 delivery stays) was 13 percent higher than the rate seen among women from non-metro areas (48.1 per 10,000). By 2018, the SMM rate for delivery stays among women from large metro areas (78.6 per 10,000) was 22 percent higher than the rate for non-metro residents (45.9 per 10,000).

^d Note: the rate of SMM presented in this chartbook exclude cases where blood transfusion is the only indication of morbidity.





Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Data for Exhibit 5.1

Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer, 2010-2019, National

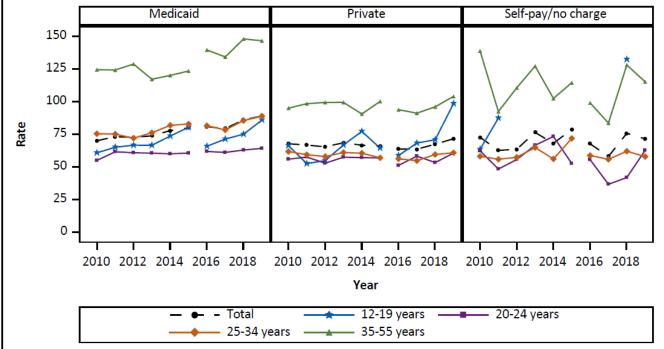
Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	69.8	69.8	69.5	71.9	72.4	73.1	72.0	71.5	76.7	79.7
Medicaid	69.9	73.2	72.6	73.7	77.8	79.9	80.7	79.4	86.0	89.0
Private	67.7	66.6	65.3	68.4	66.5	66.0	63.7	63.5	67.3	71.5
Self-pay/no charge	72.6	62.6	63.5	76.3	68.0	78.6	67.6	57.9	75.7	71.4

Key: SMM=Severe Maternal Morbidity

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Exhibit 5.2 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National



Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Data for Exhibit 5.2 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

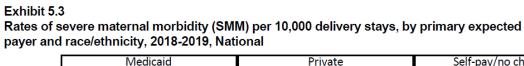
Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	69.8	69.8	69.5	71.9	72.4	73.1	72.0	71.5	76.7	79.7
	12-19	62.3	63.0	62.1	66.4	73.5	76.0	64.5	71.0	75.0	87.1
Total	20-24	56.7	60.3	59.0	59.0	59.9	59.6	58.9	59.6	59.4	63.3
	25-34	67.8	65.3	64.3	68.4	69.2	67.4	66.8	65.1	70.5	72.4
	35-55	104.6	105.3	109.2	106.5	101.0	110.0	107.9	106.2	114.7	117.3
	Total	69.9	73.2	72.6	73.7	77.8	79.9	80.7	79.4	86.0	89.0
	12-19	60.7	65.0	66.6	66.5	73.6	80.3	65.7	71.3	75.0	85.8
Medicaid	20-24	54.9	61.5	60.8	60.5	60.0	60.5	61.8	61.0	62.9	64.1
	25-34	75.4	75.1	71.9	76.1	81.8	82.9	81.5	78.3	85.5	88.8
	35-55	124.5	124.2	128.8	117.1	120.1	123.5	139.6	134.3	148.1	146.7

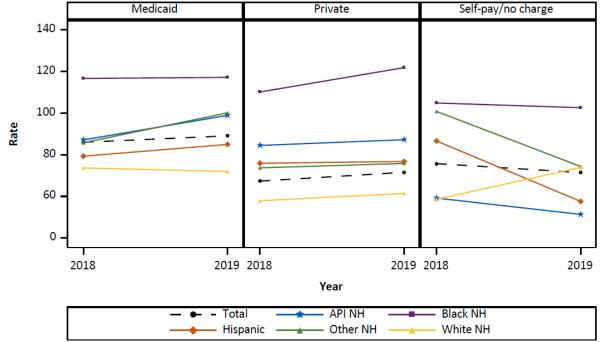
Data for Exhibit 5.2 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	67.7	66.6	65.3	68.4	66.5	66.0	63.7	63.5	67.3	71.5
	12-19	66.2	52.5	54.8	66.8	77.2	64.3	58.6	68.2	70.7	98.5
Private	20-24	55.9	57.4	52.8	57.3	57.1	56.7	51.0	58.2	53.3	60.5
	25-34	61.6	59.3	57.8	61.0	60.4	56.9	56.1	54.7	59.4	60.8
	35-55	95.0	98.4	99.4	99.4	90.5	100.2	93.8	91.1	96.0	104.0
	Total	72.6	62.6	63.5	76.3	68.0	78.6	67.6	57.9	75.7	71.4
	12-19	63.4	87.4							132.4	
Self-pay/no charge	20-24	62.3	48.3	55.6	66.5	73.2	52.5	55.5	36.6	41.8	62.6
	25-34	58.1	55.8	57.3	64.8	56.0	71.8	58.7	55.7	61.9	57.8
	35-55	138.9	92.3	110.6	127.2	102.4	114.5	99.0	83.6	128.1	115.2
	Total	204.1	135.2	175.0	190.4	236.4	190.7	205.8	229.4	210.2	203.7
	12-19			0.0			0.0				0.0
Medicare (not shown)	20-24	215.8		151.3		159.2		126.7			
	25-34	207.3	132.0	175.9	224.2	241.8	150.5	224.3	217.7	205.7	212.2
	35-55	203.6	211.8	244.6	221.1	310.4	348.3	234.9	319.2	316.8	244.1
	Total	73.9	65.8	73.7	72.7	58.8	65.5	60.7	68.6	71.0	73.1
	12-19	73.3									
Other (not shown)	20-24	68.3	59.2	62.5	42.0	56.2	62.8	69.8	46.4	64.2	68.4
	25-34	77.8	64.4	73.2	79.5	54.0	57.4	52.5	62.3	60.6	69.8
	35-55	71.9	82.0	115.1	106.4	87.5	119.4	81.6	116.2	126.0	94.2

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.





Key: SMM=Severe Maternal Morbidity, API=Asian/Pacific Islander, NH=Non-Hispanic **Source:** Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019

Data for Exhibit 5.3
Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and
race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	76.7	79.7
	API NH	85.3	88.5
Total	Black NH	118.8	122.3
Total	Hispanic	78.5	81.3
	White NH	63.2	65.0
	Other NH	81.7	88.1
	Total	86.0	89.0
	API NH	87.1	98.9
Medicaid	Black NH	116.6	117.1
Wedicald	Hispanic	79.3	84.9
	White NH	73.6	71.9
	Other NH	85.7	100.1

Data for Exhibit 5.3 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

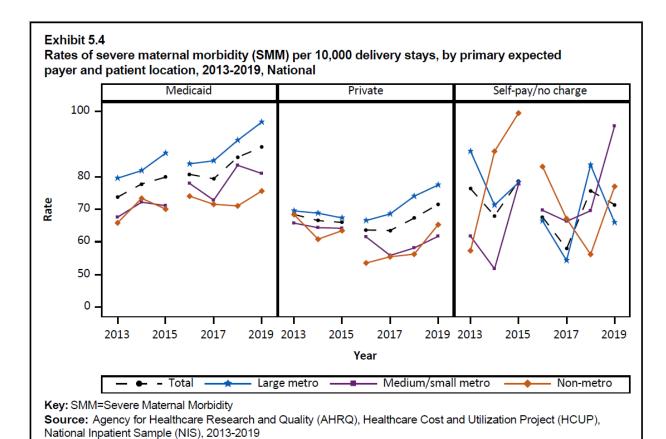
Expected payer	Race/Ethnicity	2018	2019
	Total	67.3	71.5
	API NH	84.4	87.2
Private	Black NH	110.1	121.8
Private	Hispanic	75.9	76.7
	White NH	57.9	61.4
	Other NH	73.7	75.8
	Total	75.7	71.4
	API NH	59.1	51.3
Self-pay/no charge	Black NH	104.8	102.6
	Hispanic	86.6	57.5
	White NH	58.6	73.9
	Other NH	100.8	74.3
	Total	210.2	203.7
	API NH		
Medicare (not shown)	Black NH	412.2	358.9
Medicare (not snown)	Hispanic		
	White NH	117.8	143.0
	Other NH		
	Total	71.0	73.1
	API NH	135.3	114.9
	Black NH	129.2	136.3
Other (not shown)	Hispanic	52.5	95.5
	White NH	60.4	54.9
	Other NH		

Key: SMM=Severe Maternal Morbidity, API=Asian/Pacific Islander, NH=Non-Hispanic

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

National Inpatient Sample (NIS), 2018-2019

Note: Suppressed rates are indicated with a dash (-) in applicable table cells.



October 2015 which may have impacted the observed trends.

Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in

Data for Exhibit 5.4

patient location, 2013-2019, National													
Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019					
	Total	71.9	72.4	73.1	72.0	71.5	76.7	79.7					
Total	Large metro	74.9	75.3	76.7	74.9	75.9	82.6	85.9					
Total	Medium/small metro	68.1	68.8	68.2	69.7	65.6	70.7	72.2					
	Non-metro	67.9	68.1	68.8	64.8	65.4	64.2	70.1					
	Total	73.7	77.8	79.9	80.7	79.4	86.0	89.0					
Medicaid	Large metro	79.5	81.9	87.2	83.9	84.9	91.2	96.7					
iviculcalu	Medium/small metro	67.6	72.2	71.1	77.9	72.8	83.5	81.0					
	Non-metro	65.9	73.4	70.1	74.0	71.5	71.0	75.6					
	Total	68.4	66.5	66.0	63.7	63.5	67.3	71.5					
Private	Large metro	69.5	68.8	67.3	66.6	68.6	74.0	77.5					
Private	Medium/small metro	65.8	64.4	64.2	61.5	55.9	58.1	61.7					
	Non-metro	68.4	60.9	63.5	53.5	55.5	56.2	65.3					

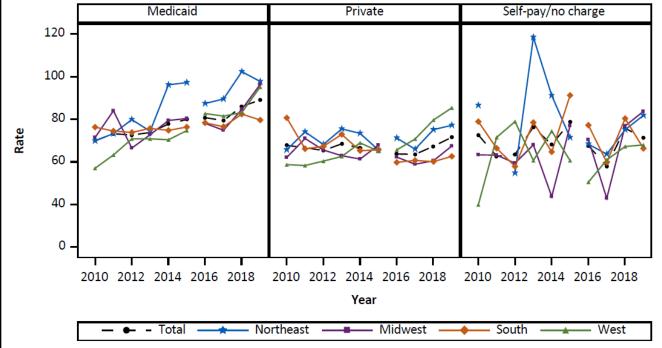
Data for Exhibit 5.4 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	76.3	68.0	78.6	67.6	57.9	75.7	71.4
Self-pay/no charge	Large metro	87.8	71.3	78.2	66.4	54.3	83.6	66.0
	Medium/small metro	61.7	51.8	77.7	69.7	66.3	69.6	95.5
	Non-metro	57.3	87.8	99.5	83.1	67.1	56.2	77.0
	Total	190.4	236.4	190.7	205.8	229.4	210.2	203.7
Medicare (not	Large metro	197.4	243.1	205.2	279.6	205.5	263.5	250.3
shown)	Medium/small metro	210.1	238.9	197.5	126.7	262.5	134.6	167.4
	Non-metro		202.2		187.9	247.8	194.3	
	Total	72.7	58.8	65.5	60.7	68.6	71.0	73.1
Other (not	Other (not Large metro		62.0	67.3	62.9	71.8	78.6	83.4
shown)	Medium/small metro	79.5	59.4	59.9	63.7	62.5	70.0	73.8
	Non-metro	73.2	47.4	76.7	48.1	74.4	45.9	

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2013-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.

Exhibit 5.5 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National



Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Data for Exhibit 5.5 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	69.8	69.8	69.5	71.9	72.4	73.1	72.0	71.5	76.7	79.7
	Northeast	69.5	73.3	73.5	77.0	83.4	79.4	77.9	76.7	87.6	85.5
Total	Midwest	66.8	76.7	66.1	67.7	68.6	74.1	69.7	66.2	71.3	79.5
	South	78.9	70.7	71.8	75.8	71.8	71.6	70.2	69.6	72.5	71.7
	West	58.9	60.8	66.3	66.2	69.5	70.3	73.2	75.9	81.0	89.5
	Total	69.9	73.2	72.6	73.7	77.8	79.9	80.7	79.4	86.0	89.0
	Northeast	69.8	73.2	79.8	74.4	96.1	97.2	87.4	89.5	102.3	97.7
Medicaid	Midwest	71.4	84.0	66.4	72.7	79.4	80.3	78.1	74.8	84.6	96.3
	South	76.3	74.5	73.8	75.7	74.8	76.3	78.3	76.5	82.4	79.6
	West	57.0	63.2	70.7	70.8	70.3	74.7	82.6	81.5	83.1	95.1

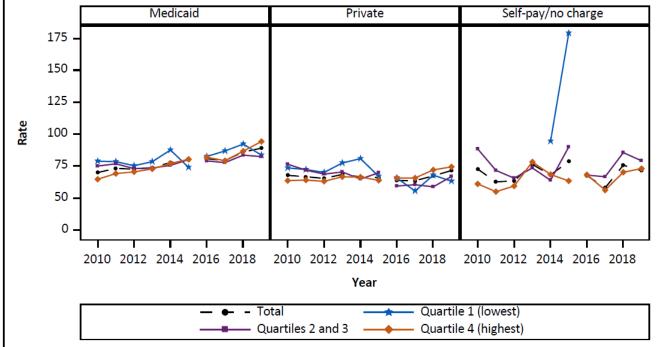
Data for Exhibit 5.5 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	67.7	66.6	65.3	68.4	66.5	66.0	63.7	63.5	67.3	71.5
	Northeast	65.6	74.1	68.1	75.4	73.3	65.6	71.1	65.9	75.1	77.1
Private	Midwest	62.0	70.9	65.5	62.9	61.3	67.8	62.2	58.8	60.5	67.4
	South	80.6	66.1	67.3	72.9	65.2	65.6	59.7	60.7	60.1	62.6
	West	58.7	58.3	60.3	62.5	68.9	65.0	65.6	70.7	79.6	85.3
	Total	72.6	62.6	63.5	76.3	68.0	78.6	67.6	57.9	75.7	71.4
	Northeast	86.5		54.7	118.4	91.1	71.4	68.3	63.6	75.0	81.8
Self- pay/no	Midwest	63.3	63.2	59.3	68.0	43.7	76.9	70.4	42.9	76.8	83.7
charge	South	78.9	66.3	57.8	78.5	64.6	91.2	77.2	59.8	80.3	66.3
	West	39.9	71.5	78.9	60.6	74.4	60.6	50.5	60.9	67.2	67.9
	Total	204.1	135.2	175.0	190.4	236.4	190.7	205.8	229.4	210.2	203.7
Medicare	Northeast	158.1	155.0	197.4	180.5	182.3	211.6	188.1	176.4	203.4	
(not	Midwest	154.2		118.0	167.8	196.7	253.8	206.2	275.9	266.9	279.4
shown)	South	320.0		193.5	233.4	344.3	125.1	175.4	229.0	181.1	183.6
	West	214.4		226.9				349.0	249.1	262.2	
	Total	73.9	65.8	73.7	72.7	58.8	65.5	60.7	68.6	71.0	73.1
	Northeast	76.4			92.0					81.3	82.5
Other (not shown)	Midwest	60.0	72.5	62.2	62.2	43.4	68.5	67.4	66.9	71.8	61.9
,	South	70.3	65.0	84.7	81.6	67.8	59.7	68.1	65.0	67.8	65.9
	West	88.2	60.7	69.6	56.0	54.1	85.4	49.7	78.7	70.4	89.4

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.

Exhibit 5.6
Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National



Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Data for Exhibit 5.6 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	69.8	69.8	69.5	71.9	72.4	73.1	72.0	71.5	76.7	79.7
Total	Quartile 1 (lowest)	77.0	76.5	74.7	79.0	86.6	76.2	77.5	77.0	83.4	75.7
Total	Quartiles 2 and 3	77.2	74.3	71.9	73.2	71.4	75.4	70.5	70.8	73.0	75.5
	Quartile 4 (highest)	64.8	66.4	66.8	70.0	71.0	71.0	72.4	71.2	78.3	82.6
	Total	69.9	73.2	72.6	73.7	77.8	79.9	80.7	79.4	86.0	89.0
Medicaid	Quartile 1 (lowest)	78.8	78.5	75.3	78.4	87.6	73.9	82.6	86.8	92.2	83.6
	Quartiles 2 and 3	75.0	76.7	73.0	73.5	75.5	80.1	79.0	77.7	83.6	82.4
	Quartile 4 (highest)	64.7	69.1	70.4	72.8	77.0	80.4	81.9	79.2	86.7	94.3

Data for Exhibit 5.6 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	67.7	66.6	65.3	68.4	66.5	66.0	63.7	63.5	67.3	71.5
Private	Quartile 1 (lowest)	73.5	72.3	70.0	77.4	80.8	66.9	65.6	55.4	67.9	63.1
Filvale	Quartiles 2 and 3	76.4	71.8	68.7	70.4	64.8	69.7	59.4	60.4	58.7	66.8
	Quartile 4 (highest)	63.6	64.0	63.0	66.6	66.4	63.8	65.7	65.7	72.0	74.4
	Total	72.6	62.6	63.5	76.3	68.0	78.6	67.6	57.9	75.7	71.4
Self- pay/no	Quartile 1 (lowest)					94.5	179.2				
charge	Quartiles 2 and 3	88.4	71.6	65.5	73.5	63.9	90.0	67.9	66.6	85.5	79.2
	Quartile 4 (highest)	61.0	54.9	59.4	78.2	68.4	63.3	68.2	56.2	70.2	73.1
	Total	204.1	135.2	175.0	190.4	236.4	190.7	205.8	229.4	210.2	203.7
Medicare (not	Quartile 1 (lowest)			178.6		281.5					
shown)	Quartiles 2 and 3	212.2	154.3	182.0	213.5	242.4	145.7	170.3	245.8	198.4	216.2
	Quartile 4 (highest)	211.4	119.2	170.0	181.7	218.8	235.4	251.3	209.8	232.5	201.7
	Total	73.9	65.8	73.7	72.7	58.8	65.5	60.7	68.6	71.0	73.1
Other (not	Quartile 1 (lowest)										
shown)	Quartiles 2 and 3	73.8	53.6	75.0	74.6	63.0	58.1	71.6	68.8	73.1	58.1
	Quartile 4 (highest)	73.1	76.3	74.4	70.7	55.7	69.1	52.0	64.2	69.7	86.2

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.

Exhibit 5.7 Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National Medicaid Private Self-pay/no charge 100 80 Rate 60 40 0 2010 2012 2014 2016 2018 2010 2012 2014 2016 2018 2010 2012 2014 2016 2018 Year Quartile 1 (lowest) - Quartiles 2 and 3 Quartile 4 (highest) Key: SMM=Severe Maternal Morbidity, SVI=Social Vulnerability Index

Data for Exhibit 5.7
Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP),

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in

National Inpatient Sample (NIS), 2010-2019

October 2015 which may have impacted the observed trends.

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	69.8	69.8	69.5	71.9	72.4	73.1	72.0	71.5	76.7	79.7
Total	Quartile 1 (lowest)	66.9	61.1	62.8	69.0	65.9	69.1	61.0	61.9	65.0	69.8
Total	Quartiles 2 and 3	70.3	72.0	69.2	71.6	72.8	70.5	72.7	70.3	79.3	81.4
	Quartile 4 (highest)	69.8	70.0	71.8	73.3	74.6	80.9	77.0	79.8	77.6	82.2
	Total	69.9	73.2	72.6	73.7	77.8	79.9	80.7	79.4	86.0	89.0
Medicaid	Quartile 1 (lowest)	69.0	70.9	60.7	64.1	71.9	79.2	75.4	71.8	70.7	86.0
	Quartiles 2 and 3	70.2	72.9	72.0	73.9	78.8	77.4	80.5	78.2	90.0	90.0
	Quartile 4 (highest)	69.3	74.2	74.1	75.1	76.4	83.8	82.5	83.3	82.8	86.9

Data for Exhibit 5.7
Rates of severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	67.7	66.6	65.3	68.4	66.5	66.0	63.7	63.5	67.3	71.5
Private	Quartile 1 (lowest)	66.7	57.3	63.0	69.4	63.8	63.4	53.9	58.7	62.1	63.7
Private	Quartiles 2 and 3	67.5	70.8	64.6	68.2	66.0	63.9	65.6	61.5	69.0	73.0
	Quartile 4 (highest)	69.2	64.0	68.1	67.7	71.3	74.8	67.0	74.1	67.9	75.9
	Total	72.6	62.6	63.5	76.3	68.0	78.6	67.6	57.9	75.7	71.4
Self- pay/no	Quartile 1 (lowest)	82.3			76.2	72.7	80.1	65.4			71.9
charge	Quartiles 2 and 3	80.7	64.4	63.1	78.4	75.9	72.6	70.1	72.0	77.5	83.6
	Quartile 4 (highest)	57.3	68.2	62.6	74.5	54.5	95.7	69.0	38.4	83.0	52.4
	Total	204.1	135.2	175.0	190.4	236.4	190.7	205.8	229.4	210.2	203.7
Medicare (not	Quartile 1 (lowest)			156.7			225.3	154.8		193.8	
shown)	Quartiles 2 and 3	237.9	132.8	189.6	165.6	257.0	179.1	220.0	237.9	220.9	213.3
	Quartile 4 (highest)	207.3		158.5	254.8	260.8	199.2	197.1	265.6	197.8	238.1
	Total	73.9	65.8	73.7	72.7	58.8	65.5	60.7	68.6	71.0	73.1
Other (not	Quartile 1 (lowest)	54.3	50.1	48.1	78.5	46.1	65.0	67.3	43.8	59.7	52.5
shown)	Quartiles 2 and 3	81.3	73.3	83.6	71.5	62.4	67.8	50.5	72.8	75.3	82.9
	Quartile 4 (highest)	71.0	63.2	68.9	71.8	58.9	62.0	80.2	79.8	68.3	66.2

Key: SMM=Severe Maternal Morbidity, SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends. Suppressed rates are indicated with a dash (-) in applicable table cells.

Appendix A: Methods

Source of Data for this Chartbook

The Healthcare Cost and Utilization Project (HCUP)^e is a family of healthcare databases and related software tools and products developed through a Federal-State-Industry partnership and sponsored by the Agency for Healthcare Research and Quality (AHRQ). HCUP databases bring together the data collection efforts of State data organizations, hospital associations, and private data organizations (HCUP Partners) and the Federal government to create a national information resource of encounter-level healthcare data. HCUP includes the largest collection of longitudinal hospital care data in the United States, with all-payer, encounter-level information beginning in 1988. These databases enable research on a broad range of health policy issues, including cost and quality of health services, medical practice patterns, access to healthcare programs, and outcomes of treatments at the national, State, and local market levels.

This chartbook is based on data from HCUP's National (Nationwide) Inpatient Sample (NIS)^f database (2010–2019), which provides a national perspective of care provided in community acute care hospitals (i.e., short-term, non-Federal, non-rehabilitation hospitals).

The HCUP NIS is a nationwide database of hospital inpatient stays. The NIS is drawn from a sampling frame that contains hospitals comprising more than 95 percent of all discharges in the United States. The vast size of the NIS allows for the study of various topics at the national and regional levels for specific subgroups of patients. In addition, NIS data are standardized across years to facilitate ease of use. Over time, the sampling frame for the NIS has changed; thus, the number of states contributing to the NIS varies from year to year. The NIS is intended for national estimates only; no State-level estimates can be produced. The unweighted sample size for the 2019 NIS is 7,083,805 (weighted, this represents 35,419,023 inpatient stays). The unweighted sample size for the 2010 NIS is 7,800,441 (weighted, this represents 37,352,013 inpatient stays).

Approach

This chartbook is divided into five condition-specific sections. Coexisting maternal conditions selected for inclusion in this chartbook are based on their importance to maternal health and morbidity and on their suitability to be monitored using administrative hospital discharge data. These include any diagnosis of:

- Diabetes
- Hypertension
- Mental health disorders
- Substance use disorder (SUD)
- Severe maternal morbidity (SMM)

Clinical coding criteria for each coexisting condition can be found in Appendix B.

Within each section, inpatient utilization rates and standard errors (SE) are shown for delivery-related inpatient stays for female patients aged 12–55 years. Delivery stays are defined as follows (a detailed list of codes can be found in Appendix B):

Delivery stays

e More information about HCUP can be found at: https://hcup-us.ahrq.gov/.

^f For more information about the HCUP NIS, visit: https://hcup-us.ahrq.gov/db/nation/nis/nisdbdocumentation.jsp

Inpatient stays with an indication of delivery based on diagnoses or procedures codes, excluding abortions. Encounter rates for are presented per 10,000 in-hospital delivery stays. Expected primary payer groups presented in the exhibits include Medicaid, private insurance, and self-pay/no charge. On average, Medicare represents fewer than 1 percent of in-hospital deliveries. "Other" expected payer types include other government programs, Workers' Compensation, and missing or invalid payers. Rates for Medicare and other expected payer types are provided in Appendix C.

Data for each condition and encounter type are presented overall and by select patient-level characteristics. Patient characteristics include expected primary payer, age group, race and ethnicity, and patient residence location type (metro vs non-metro). Other patient characteristics include region of the delivery hospital, patient residence location, community-level median household income, and community-level social vulnerability index (SVI),²⁸ which was obtained from AHRQ's Social Determinants of Health Database.²⁹ All rates shown are unadjusted.

Definitions

Diagnoses

The *principal diagnosis* is that condition established after study to be chiefly responsible for the patient's admission to the hospital. *Secondary diagnoses* are conditions that coexist at the time of admission that require or affect patient care treatment received or management, or that develop during the inpatient stay. *Anylisted diagnoses* include the principal diagnosis plus all secondary diagnoses.

ICD-10-CM Coding System

ICD-10-CM is the International Classification of Diseases, Tenth Revision, Clinical Modification. There are more than 70,000 ICD-10-CM diagnosis codes.

Expected payer

To make coding uniform across all HCUP data sources, the primary expected payer for the hospital stay combines detailed categories into general groups:

- Medicaid: includes fee-for-service and managed care Medicaid
- Private insurance: includes commercial nongovernmental payers, regardless of the type of plan (e.g., private health maintenance organizations [HMOs], preferred provider organizations [PPOs])
- Self-pay/No charge: includes self-pay, no charge, charity, and no expected payment
- Other payers: includes Medicare (fee-for-service and managed care Medicare) and other Federal and local government programs (e.g., TRICARE, CHAMPVA, Indian Health Service, Black Lung, Title V) and Workers' Compensation

Hospital stays that were expected to be billed to the State Children's Health Insurance Program (SCHIP) are included under Medicaid.

For this Chartbook, when more than one payer is listed for a hospital discharge, the first-listed payer is used.

Reporting of race and ethnicity

Data on Hispanic ethnicity are collected differently among the states and can differ from the census methodology of collecting information on race (White, Black, Asian/Pacific Islander, American Indian/Alaska Native, Other [including mixed race]) separately from ethnicity (Hispanic, non-Hispanic). State data organizations often collect Hispanic ethnicity as one of several categories that include race. Therefore, for multistate analyses, HCUP creates the combined categorization of race and ethnicity for data from states that report ethnicity separately. When a state data organization collects Hispanic ethnicity separately from race, HCUP uses Hispanic ethnicity to override any other race category to create a Hispanic category for the

uniformly coded race and ethnicity data element, while also retaining the original race and ethnicity data. This Chartbook reports race and ethnicity for the following categories: Asian/Pacific Islander non-Hispanic, Black non-Hispanic, White non-Hispanic, and other non-Hispanic race and ethnicity (including American Indian/Alaska Native and Other).

Location of patients' residence

Place of residence is based on a simplified adaptation of the Urban Influence Codes (UIC) developed by the United States Department of Agriculture (USDA) Economic Research Service (ERS). Starting with 2014 data, the county-level designation is based on the 2013 version of the UIC. Prior to 2014, the categorization was based on the 2003 version of the UIC. The 12 categories of the UIC are combined into 3 broader categories that differentiate between large metropolitan counties (i.e., those that include one or more urbanized areas with at least 1 million residents), small metropolitan counties (i.e., those that include one or more urbanized areas with 50,000–999,999 residents), and nonmetropolitan counties (i.e., micropolitan counties [those that include at least one urbanized area with 10,000–49,999 residents]) or nonurban residual counties (i.e., rural counties).

Hospital region

Hospital region is one of the four regions defined by the U.S. Census Bureau:

- Northeast: Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, and Pennsylvania
- Midwest: Ohio, Indiana, Illinois, Michigan, Wisconsin, Minnesota, Iowa, Missouri, North Dakota, South Dakota, Nebraska, and Kansas
- South: Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida, Kentucky, Tennessee, Alabama, Mississippi, Arkansas, Louisiana, Oklahoma, and Texas
- West: Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada, Washington, Oregon, California, Alaska, and Hawaii

Community-level income

Community-level income is based on the median household income of the patient's ZIP Code of residence. Quartiles are defined so that the total U.S. population is evenly distributed. Rates for quartiles 2 and 3 are combined into one middle community-level income group for this chartbook.

Social vulnerability

The Centers for Disease Control and Prevention (CDC)/Agency for Toxic Substances and Disease Registry (ATSDR) Social Vulnerability Index (SVI) is a measure of a community's ability to prevent human suffering and financial loss during a disaster. The SVI uses U.S. Census data to determine the social vulnerability of every census tract. Census tracts are subdivisions of counties for which the census collects statistical data. The SVI ranks each tract on 15 social factors, including poverty, lack of vehicle access, and crowded housing, and groups them into four related themes (socioeconomic status, household composition and disability, minority status and language, and housing type and transportation). Each tract receives a separate ranking for each of the four themes, as well as an overall ranking. Detailed descriptions of the CDC/ATSDR SVI and data downloads are available at www.atsdr.cdc.gov/placeandhealth/svi/index.html.

The social vulnerability designation in this chartbook is based on the overall SVI measure in the patient county of residence. Patient residence counties with SVI values are divided into quartiles with the middle, second, and third quartiles combined to create a moderate community-level social vulnerability category for this chartbook. The lowest quartile reflects the least vulnerable areas while the highest quartile depicts the most vulnerable areas.

Calculations

Trend-related findings highlighted in this chartbook are identified from percentage change comparisons over time using the following formula:

Percentage change =
$$\left(\frac{\text{Recent year rate} - \text{Older year rate}}{\text{Older year rate}}\right) \times 100$$

Within characteristic rate differences highlighted in this chartbook are identified from percent difference comparisons using the following formula:

Percent difference =
$$\left(\frac{\text{Group 1 rate - Group 2 rate}}{(\text{Group 1 rate + Group 2 rate})/2}\right) \times 100$$

where the absolute difference between two rates is expressed as a proportion of the average rate between the two groups.

Limitations / Exclusions

The unique perspective of maternal healthcare data presented here does have some limitations. First, all encounter rates presented are unadjusted and differences noted in the highlights may be explained by unexplored factors. Data for patient race and ethnicity were only available for 2 years. Further, patient race and ethnicity coded as multiracial or American Indian/Alaska Native (AIAN) are grouped together in the "Other race and ethnicity" category for this chartbook due to the varied collection of multiracial categories across states and the lack of information from Indian Health Service hospitals or tribally operated facilities. For these reasons, findings related to the Other race and ethnicity category should be interpreted with caution. Finally, HCUP data do not contain information about patient's prenatal care utilization or other office-based postpartum care, which may affect the data presented.

Appendix B: Clinical Coding Criteria

Detailed descriptions of each code can be found at the following resources:

- Medicare Severity-Diagnosis-Related Groups (MS-DRGs) Classifications and Software:
 https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/ms-drg-classifications-and-software
- International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), Clinical Classifications Software (CCS): https://hcup-us.ahrq.gov/toolssoftware/ccs/ccs.jsp
- International Classification of Diseases, Tenth Revision, Clinical Modification/Procedure Coding System (ICD-10-CM/PCS), Clinical Classifications Software Refined (CCSR): https://hcup-us.ahrq.gov/toolssoftware/ccsr/ccs refined.jsp#overview
- Clinical Classifications Software for Services and Procedures (CCS-Services and Procedures):
 https://hcup-us.ahrq.gov/toolssoftware/ccs_svcsproc/ccssvcproc.jsp

Delivery stays

- DRG
 - Version 25-35: 765–775
 - Version 36 (October 2018): 768–807
- ICD-9-CM, 2010–2015, any-listed diagnosis codes beginning with:
 - o V27, 650, 66970, 66971
- ICD-9-CM, 2010–2015, any listed procedure codes beginning with:
 - o 720, 721, 7221, 7229, 7231, 7239, 724, 7251, 7252, 7253, 7254, 726, 7271, 7279, 728, 729, 7322, 7359, 736, 740, 741, 742, 744, 7499
- ICD-10-CM/PCS, 2016–2019, any-listed diagnosis codes beginning with:
 - o Z37, O80, O82, O7582
- ICD-10-CM/PCS, 2016–2019, any-listed procedure codes beginning with:
 - o 10D00Z0-10D00Z2, 10D07Z3-0D07Z8, 10E0XZZ
- Abortions excluded
 - ICD-9-CM diagnosis codes beginning with: 630–639
 - o ICD-9-CM procedure codes beginning with: 6901, 6951,7491, 750
 - o ICD-10-CM/PCS diagnosis codes beginning with: O00, O01, O02, O03, O04, O07, O08
 - ICD-10-CM/PCS procedure codes beginning with: 10A0

Co-existing Conditions

Diabetes

- Any-listed diagnosis of the following:
 - ICD-9-CM diagnosis codes beginning with: 24900, 24901, 24910, 24911, 24920, 24921, 24930, 24931, 24940, 24941, 24950, 24951, 24960, 24961, 24970, 24971, 24980, 24981, 24990, 24991, 25000, 25001, 25002, 25003, 25010, 25011, 25012, 25013, 25020, 25021, 25022, 25023, 25030, 25031, 25032, 25033, 25040, 25041, 25042, 25043, 25050, 25051, 25052, 25053, 25060, 25061, 25062, 25063, 25070, 25071, 25072, 25073, 25080, 25081, 25082, 25083, 25090, 25091, 25092, 25093, 79021, 79022, 79029, 7915, 7916, V4585, V5391, V6546, 64800, 64801, 64802, 64803, 64804, 64880, 64881, 64882, 64883, 64884
 - ICD-10-CM/PCS diagnosis codes beginning with: E0800, E0801, E0810, E0811, E0821, E0822, E0829, E08311, E08319, E08321, E083212, E083213, E083219, E08329, E083291, E083292, E083293, E083299, E083311, E083312, E083313, E083319, E083391, E083392, E083393, E083399, E08341, E083411, E083412, E083413, E083419, E083491, E083492, E083493, E083499, E083511, E083511, E083512, E083513, E083519, E083521, E083522, E083523, E083529, E083531, E083532, E083533, E083539, E083541, E083542, E083543, E083549, E083551, E083552, E083553, E083559, E083591, E083592, E083593, E083599, E0836, E0837X1, E0837X2, E0837X3, E0837X9, E0839, E0840, E0841, E0842, E0843, E0844, E0849, E0851, E0852, E0859, E08610, E08618, E08620, E08621, E08622, E08628, E08630, E08638, E08641, E08649, E0865, E0869, E088, E089, E1010, E1011, E1021, E1022, E1029, E10311, E10319, E10321, E103211, E103212, E103213, E103219, E103299, E103291, E103292, E103293, E103299,

E10331, E103311, E103312, E103313, E103319, E10339, E103391, E103392, E103393, E103399, E10341, E103411, E103412, E103413, E103419, E10349, E103491, E103492, E103493, E103499, E10351, E103511, E103512, E103513, E103519, E103521, E103522, E103523, E103529, E103531, E103532, E103533, E103539, E103541, E103542, E103543, E103549, E103551, E103552, E103553, E103559, E10359, E103591, E103592, E103593, E103599, E1036, E1037X1, E1037X2, E1037X3, E1037X9, E1039, E1040, E1041, E1042, E1043, E1044, E1049, E1051, E1052, E1059, E10610, E10618, E10620, E10621, E10622, E10628, E10630, E10638, E10641, E10649, E1065, E1069, E108, E109, E1100, E1101, E1110, E1111, E1121, E1122, E1129, E11311, E11319, E11321, E113211, E113212, E113213, E113219, E11329, E113291, E113292, E113293, E113299, E11331, E113311, E113312, E113313, E113319, E11339, E113391, E113392, E113393, E113399, E11341, E113411, E113412, E113413, E113419, E11349, E113491, E113492, E113493, E113499, E11351, E113511, E113512, E113513, E113519, E113521, E113522, E113523, E113529, E113531, E113532, E113533, E113539, E113541, E113542, E113543, E113549, E113551, E113552, E113553, E113559, E11359, E113591, E113592, E113593, E113599, E1136, E1137X1, E1137X2, E1137X3, E1137X9, E1139, E1140, E1141, E1142, E1143, E1144, E1149, E1151, E1152, E1159, E11610, E11618, E11620, E11621, E11622, E11628, E11630, E11638, E11641, E11649, E1165, E1169, E118, E119, E1300, E1301, E1310, E1311, E1321, E1322, E1329, E13311, E13319, E13321, E133211, E133212, E133213, E133219, E13329, E133291, E133292, E133293, E133299, E133311, E133311, E133312, E133313, E133319, E13339, E133391, E133392, E133393, E133399, E13341, E133411, E133412, E133413, E133419, E13349, E133491, E133492, E133493, E133499, E13351, E133511, E133512, E133513, E133519, E133521, E133522, E133523, E133529, E133531, E133532, E133533, E133539, E133541, E133542, E133543, E133549, E133551, E133552, E133553, E133559, E13359, E133591, E133592, E133593, E133599, E1336, E1337X1, E1337X2, E1337X3, E1337X9, E1339, E1340, E1341, E1342, E1343, E1344, E1349, E1351, E1352, E1359, E13610, E13618, E13620, E13621, E13622, E13628, E13630, E13638, E13641, E13649, E1365, E1369, E138, E139, O24011, O24012, O24013, O24019, O2402, O2403, O24111, O24112, 024113, 024119, 02412, 02413, 024311, 024312, 024313, 024319, 02432, 02433, 024811, 024812, 024813, 024819, O2482, O2483, O24911, O24912, O24913, O24919, O2492, O2493, O99810, O99814, O99815, O24410, O24414, O24415, O24419, O24420, O24424, O24425, O24429, O24430, O24434, O24435, O24439

Hypertension

- Any-listed diagnosis of the following:
 - O ICD-9-CM diagnosis codes beginning with: 4011, 4019, 40211, 40210, 40511, 40310, 40311, 40300, 40301, 40390, 40391, 4372, 40413, 40411, 40410, 40412, 40401, 40403, 40400, 40402, 40493, 40491, 40490, 40492, 4010, 40201, 40200, 40501, 40519, 40509, 40599, 40291, 40290, 40591, 4030, 4031, 4039, 4040, 4041, 4049, 64273, 64272, 64271, 64274, 64270, 64220, 64223, 64222, 64221, 64224, 64213, 64212, 64211, 64214, 64210, 64203, 64201, 64204, 64200, 64202, 64263, 64262, 64261, 64264, 64260, 64243, 64242, 64241, 64244, 64240, 64253, 64252, 64251, 64254, 64250, 64233, 64231, 64232, 64234, 64230, 64293, 64292, 64291, 64294, 64290
 - O ICD-10-CM/PCS diagnosis codes beginning with: H35031, H35032, H35033, I10, I110, I119, I120, I129, I130, I1310, I1311, I132, I150, I151, I152, I158, I159, I160, I161, I169, I674, I973, O10011, O10012, O10013, O10019, O1002, O1003, O10111, O10112, O10113, O10119, O1012, O1013, O10211, O10212, O10213, O10219, O1022, O1023, O10311, O10312, O10313, O10319, O1032, O1033, O10411, O10412, O10413, O10419, O1042, O1043, O10911, O10912, O10913, O10919, O1092, O1093, O111, O112, O113, O114, O115, O119, O131, O132, O133, O134, O135, O139, O1400, O1402, O1403, O1404, O1405, O1410, O1412, O1413, O1414, O1415, O1420, O1422, O1423, O1424, O1425, O1490, O1492, O1493, O1494, O1495, O1500, O1502, O1503, O151, O152, O159, O161, O162, O163, O164, O165, O169

Mental health disorders

- Any-listed diagnosis of the following:
 - o ICD-9-CM diagnosis codes beginning with: 64840, 64841, 64842, 64843, 64844, 30924, 3090, 3093, 30928, 3094, 30982, 30983, 30922, 30929, 30989, 3091, 30923, 3099, 31383, 30021, 30022, 29384, 30000, 30002, 30010, 31382, 31322, 3131, 3084, 3005, 3003, 3083, 30009, 30029, 3130, 30001, 30020, 30981, 3081, 3080, 3082, 3133, 31321, 30023, 3089, 3009, 30921, 31323, 31401, 31400, 31282, 31281, 3141, 3142, 3124, 31381, 31289, 3148, 31221, 31222, 31223, 31220, 31201, 31202, 31203, 31200, 31211, 31212, 31213, 31210, 3129, 3149, 3128, 31230, 31234, 31235, 31232, 31239, 31231, 31233, 29682, 29681, 29680, 29655, 29651, 29652, 29654, 29653, 29650, 29645, 29641, 29642, 29644, 29643, 29640, 29665, 29661, 29662, 29664, 29663, 29660, 2967, 29605, 29601, 29602, 29604, 29603, 29600, 311, 3004, 29635, 29631, 29632, 29634, 29633, 29630, 29625, 29621, 29622, 29624, 29623, 29620, 29615, 29611, 29612, 29614, 29613, 29610, 29383, 29689, 29699, 29690, 30113, 30110, 3017, 30182, 30183, 30112, 30111, 3016, 3013, 30150, 30121, 30181, 3014, 30159, 30189, 3010, 30184, 30120, 30122, 3019, 2983, 29522, 29524, 29521, 29523, 29520, 2971, 2980, 29512, 29514, 29511, 29513, 29510, 2981, 29552, 29554, 29551, 29553, 29550, 2988, 2978, 29582, 29584, 29581, 29583, 29580, 2970, 29532, 29534, 29531, 29533, 29530, 2972 , 2984, 29381, 29382, 2982, 29572, 29574, 29571, 29573, 29570, 29562, 29564, 29561, 29563, 29560, 29542, 29544, 29541, 29543, 29540, 2973, 29502, 29504, 29501, 29503, 29500, 2979, 2989, 29592, 29594, 29591, 29593, 29590, E959, V6284, E9572, E9571, E9570, E9579, E9556, E9581, E9587, E9586, E9585, E956, E9584, E9555, E9583, E9559, E9550, E9530, E9552, E9580, E9553, E9554, E9538, E9588, E9557, E9582, E9551, E954, E9531, E9539, E9589, E9506, E9500, E9508, E9501, E9507, E9510, E9511, E9520, E9509, E9521, E9502, E9504, E9528, E9518, E9503, E9505, E9529, 3071, 30751, 30750, 30752, 30759, 30753, 30754, 3068, 7830, 3007, 30016, 30081, 30151, 30082, 30019, 30089, 30789, 30780, 30012, 30015, 30013, 30014, 30011, 3006, V409, 3069, 2939, V403, V402, 29389, V4039, V673, 3064, 3062, 3060, 3067, 3066, 3101, 316, 3061, 3063
 - ICD-10-CM/PCS diagnosis codes beginning with: 099340, 099341, 099342, 099343, 099344, 099345, F53, F530, F531, 0906, F4320, F4321, F4322, F4323, F4324, F4325, F4329, F064, F4000, F4001, F4002, F4010, F4011, F40210, F40218, F40220, F40228, F40230, F40231, F40232, F40233, F40240, F40241, F40242, F40243, F40248, F40290, F40291, F40298, F408, F409, F410, F411, F413, F418, F419, F930, F940, F42, F422, F423, F424, F428, F429, F4522, F633, F430, F4310,

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Substance use disorders

- Any-listed diagnosis of the following:
 - O ICD-9-CM diagnosis codes beginning with: 65553, 65551, 65550, 64833, 64832, 64831, 64834, 64830, 64900, 64901, 64902, 64903, 64904, 5711, 30301, 30302, 30300, 30501, 30502, 30500, 76071, 29182, 29181, 2910, 4255, 5712, 5710, 53531, 53530, 5713, 3575, 30391, 30392, 30390, 2918, 5353, 2911, 2912, 2915, 2913, 2914, 29189, 2919, 30400, 30401, 30402, 30470, 30471, 30472, 30550, 30551, 30552, 30521, 30522, 30520, 30431, 30432, 30430, 30541, 30542, 30540, 30411, 30412, 30410, 30561, 30562, 30560, 30421, 30422, 30420, 30441, 30442, 30440, 30571, 30572, 30570, 30531, 30532, 30530, 30451, 30452, 30450, 30581, 30582, 30580, 30481, 30482, 30480, 30461, 30462, 30460, 30591, 30592, 30590, 30491, 30492, 30490, 2920, 29281, 29284, 29283, 29282, 29211, 29212, 29285, 2922, 29289, 2929
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Severe maternal morbidity

- Any-listed diagnosis of the following:
 - O ICD-9-CM diagnosis codes beginning with: 2866, 2869, 4150, 4275, 4281, 4289, 4320, 4321, 4329, 4350, 4351, 4352, 4353, 4358, 4359, 4370, 4371, 4372, 4373, 4374, 4375, 4376, 4377, 4378, 4379, 4411, 4412, 4413, 4414, 4415, 4416, 4417, 4419, 5184, 5845, 5846, 5847, 5848, 5849, 7991, 9950, 9954, 9960, 9961, 9962, 9963, 9964, 9969, 9971, 28242, 28262, 28264, 28269, 28952, 34839, 36234, 41000, 41001, 41002, 41010, 41011, 41012, 41020, 41021, 41022, 41030, 41031, 41032, 41040, 41041, 41042, 41050, 41051, 41052, 41060, 41061, 41062, 41070, 41071, 41072, 41080, 41081, 41082, 41090, 41091, 41092, 41511, 41512, 41513, 41519, 42741, 42742, 42821, 42823, 42831, 42833, 42841, 42843, 43300, 43301, 43310, 43311, 43320, 43321, 43330, 43331, 43380, 43381, 43390, 43391, 43400, 43401, 43410, 43411, 43490, 43491, 44100, 44101, 44102, 44103, 51851, 51852, 51853, 51881, 51882, 51884, 64130, 64131, 64133, 64260, 64261, 64262, 64263, 64264, 66630, 66632, 66634, 66800, 66801, 66802, 66803, 66804, 66810, 66811, 66812, 66813, 66814, 66820, 66821, 66822, 66823, 66824, 66910, 66911, 66912, 66913, 66914, 66930, 66932, 66934, 67022, 67024, 67150, 67151, 67152, 67153, 67154, 67300, 67301, 67302, 67303, 67304, 67310, 67311, 67312, 67313, 67314, 67320, 67321, 67322, 67323, 67324, 67330, 67331, 67332, 67334, 67380, 67381, 67382, 67383, 67384, 67400, 67401, 67402, 67403, 67404, 78550, 78551, 78552, 78559, 99586, 99591, 99592, 99702, 99800, 99801, 99802, 99809, 0380, 03810, 03811, 03812, 03819, 0382, 0383, 03840, 03841, 03842, 03843, 03844, 03849, 0388, 0389, 0463, 4280, 42820, 42830, 42840, 430, 431, 436, 449, 67020
 - ICD-9-CM procedure codes beginning with: 6839, 6849, 6859, 6869, 6879, 689, 311, 9670, 9671, 9672
 - ICD-10-CM/PCS diagnosis codes beginning with: 12101, 5A12012, 5A2204Z, A327, A400, A401, A403, A408, A409, A4101, A4102, A411, A412, A413, A414, A4150, A4151, A4152, A4153, A4159, A4181, A4189, A419, A812, D5700, D5701, D5702, D57211, D57212, D57219, D57411, D57412, D57419, D57811, D57812, D57819, D65, D688, D689, G450, G451, G452, G453, G454, G458, G459, G460, G461, G462, G463, G464, G465, G466, G467, G468, G9349, H3400, H3401, H3402, H3403, 12102, 12109, 12111, 12119, 12121, 12129, 1213, 1214, 1219, 121A1, 121A9, 1220, 1221, 1222, 1228, 1229, 12601, 12602, 12609, 12690, 12692, 12693, 12694, 12699, 1462, 1468, 1469, 14901, 14902, 1501, 15020, 15021, 15023, 15030, 15031, 15033, 15040, 15041, 15043, 150810, 150811, 150813, 150814, 15082, 15083, 15084, 15089, 1509, 16000, 16001, 16002, 16010, 16011, 16012, 1602, 16020, 16021, 16022, 16030, 16031, 16032, 1604, 16050, 16051, 16052, 1606, 1607, 1608, 1609, 1610, 1611, 1612, 1613, 1614, 1615, 1616, 1618, 1619, 16200, 16201, 16202, 16203, 1621, 1629, 16300, 163011, 163012, 163013, 163019, 16310, 163111, 163112, 163113, 163119, 16312, 163131, 163132, 163133, 163139, 16319, 16320, 163211, 163212, 163213, 163219, 16322, 163231, 163232, 163233, 163239, 16329, 16329, 163200, 163200, 1 163311, 163312, 163313, 163319, 163321, 163322, 163323, 163329, 163331, 163332, 163333, 163339, 163341, 163342, 163343, 163349, 16339, 16340, 163411, 163412, 163413, 163419, 163421, 163422, 163423, 163429, 163431, 163432, 163433, 163439, 163441, 163442, 163432, 163430, 1 163443, 163449, 16349, 16350, 163511, 163512, 163513, 163519, 163521, 163522, 163523, 163529, 163531, 163532, 163533, 163539, 163541, 163542, 163543, 163549, 16359, 1636, 1638, 16381, 16389, 1639, 16501, 16502, 16503, 16509, 1651, 16521, 16522, 16523, 16529, 1658, 1659, 16601, 16602, 16603, 16609, 16611, 16612, 16613, 16619, 16621, 16622, 16623, 16629, 1663, 1668, 1669, 1670, 1671, 1672, 1673, 1674, 1675, 1676, 1677, 16781, 16782, 16783, 167841, 167848, 167850, 167858, 16789, 1679, 1680, 1682, 1688, 17100, 17101, 17102, 17103, 1711, 1712, 1713, 1714, 1715, 1716, 1718, 1719, 176, 1790, 197120, 197121, 197130, 197131, 197710, 197711, 197810, 197811, 197820, 197821, J80, J810, J951, J952, J953, J95821, J95822, J9600, J9601, J9602, J9620, J9621, J9622, J9690, J9691, J9692, N170, N171, N172, N178, N179, O1500, O1502, O1503, O151, O152, O159, O2250, O2252, O2253, O29112, O29113, O29119, O29122, O29123, O29129, O29192, O29193, O29199, O29212, O29213, O29219, O29292, O29293, O29299, O45002, O45003, O45009, O45012, O45013, O45019, O45022, O45023, O45029, O45092, O45093, O45099, O46002, O46003, O46009, O46012, O46013, O46019, O46022, O46023, O46029, O46092, O46093, O46099, O670, O723, O740, O741, O742, O743, O751, O85, O8604, O873, O88012, O88013, O88019, O8802, O8803, O88112, O88113, O88119, O8812, O8813, O88212, O88213, O88219, O8822, O8823, O88312, O88313, O88319, O8832, O8833, O88812, O88813, O88819, O8882, O8883, O8901, O8909, O891, O892, O904, R0603, R092, R570, R571, R578, R579, R6520, R6521, T782XXA, T800XXA, T8110XA, T8111XA, T8112XA, T8119XA, T8144XA, T882XXA, T883XXA, T886XXA
 - ICD-10-CM/PCS procedure codes beginning with: 0UT90ZZ, 0UT97ZL, 0UT97ZZ, 0UT90ZL, 0B110F4, 0B113F4, 0B114F4, 5A1935Z, 5A1945Z, 5A1955Z

Appendix C: Standard Errors

Executive Summary

Standard Errors for Exhibit E.1
Standard errors for selected co-existing conditions per 10,000 delivery stays, overall, 2010-2019, National

Condition	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Diabetes	13.41	16.04	7.73	7.63	8.00	7.99	7.17	7.61	8.41	8.72
Hypertension	18.36	21.09	9.83	9.54	10.05	10.90	11.47	13.03	14.08	15.42
Mental health disorders	19.60	18.50	9.26	10.22	11.06	11.82	10.82	12.40	13.88	15.19
Severe maternal morbidity	2.63	3.39	1.44	1.48	1.46	1.53	1.44	1.44	1.56	1.69
Substance use disorders	28.22	27.16	13.19	13.50	13.46	13.16	13.43	13.56	13.64	13.37

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit E.2

Standard errors for selected co-existing conditions per 10,000 delivery stays, by primary expected payer, 2010-2019, National

Condition	Expected Payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Diabetes	15.90	19.32	10.51	10.21	10.51	10.23	9.68	9.78	10.30	10.61
	Hypertension	24.85	33.97	13.94	13.60	14.09	15.24	16.29	18.01	19.81	21.45
Medicaid	Mental health disorders	27.31	28.27	13.44	14.61	16.55	17.26	14.52	15.57	17.56	18.93
	Severe maternal morbidity	2.74	4.24	1.93	2.16	2.11	2.36	2.11	1.98	2.12	2.32
	Substance use disorders	47.10	52.00	23.18	23.64	23.80	23.34	23.88	23.5	24.34	24.36
	Diabetes	16.04	21.34	9.35	9.85	9.88	10.15	8.81	9.33	10.70	11.16
	Hypertension	19.63	18.64	10.33	10.109	10.24	10.95	11.46	12.90	13.96	15.23
Private	Mental health disorders	17.19	15.37	8.45	9.35	9.65	10.71	10.66	12.86	14.29	15.69
	Severe maternal morbidity	3.57	3.87	1.86	1.78	1.71	1.83	1.54	1.71	1.79	1.89
	Substance use disorders	15.27	12.78	6.82	7.17	6.74	6.67	6.58	6.48	6.25	5.93

	Diabetes	48.77	33.35	27.06	23.50	30.30	30.15	26.06	27.43	27.61	26.46
	Hypertension	49.53	48.69	30.45	30.04	35.30	45.41	39.12	40.65	42.70	49.94
Self-pay/no charge	Mental health disorders	31.52	43.90	24.23	25.01	29.43	28.25	20.04	20.00	25.11	46.22
	Severe maternal morbidity	9.54	7.59	5.99	6.02	5.70	7.70	5.97	5.82	6.54	6.27
	Substance use disorders	69.44	71.41	33.19	34.32	39.26	31.80	29.31	29.01	28.56	27.95
	Diabetes	61.63	71.72	55.71	54.08	48.72	68.09	52.47	55.52	56.84	57.74
	Hypertension	78.90	83.32	64.06	72.03	62.93	72.31	69.88	81.48	84.84	88.88
Medicare (not shown)	Mental health disorders	268.12	203.29	112.27	107.53	114.55	138.83	100.88	125.19	121.35	125.50
	Severe maternal morbidity	21.48	26.49	17.66	21.08	22.09	25.10	22.34	22.97	23.39	22.14
	Substance use disorders	150.01	124.04	85.03	83.17	91.12	105.63	94.93	113.92	100.37	97.12
	Diabetes	32.32	43.00	22.77	24.58	25.47	25.50	22.52	25.90	23.77	22.94
	Hypertension	36.64	35.07	24.38	24.93	24.96	30.10	29.83	30.85	32.41	30.89
Other (not shown)	Mental health disorders	43.89	32.77	20.41	23.20	22.80	27.18	27.46	29.07	34.11	39.12
	Severe maternal morbidity	6.20	7.79	6.39	6.21	5.60	6.55	6.05	6.77	6.79	6.45
	Substance use disorders	59.00	36.24	27.75	29.09	22.96	25.14	28.17	32.44	27.60	30.63

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Section 1

Standard errors for Exhibit 1.1

Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019, National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	13.41	16.04	7.73	7.63	8.00	7.99	7.17	7.61	8.41	8.72
Medicaid	15.90	19.32	10.51	10.21	10.51	10.23	9.69	9.78	10.30	10.61
Private	16.04	21.34	9.35	9.85	9.88	10.15	8.81	9.33	10.70	11.16
Self-pay/no charge	48.77	33.35	27.06	23.50	30.30	30.15	26.06	27.43	27.61	26.46

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 1.2

Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	13.41	16.04	7.73	7.63	8.00	7.99	7.17	7.61	8.41	8.72
	12-19	7.71	8.32	7.31	7.74	8.26	9.83	8.34	9.46	10.06	10.33
Total	20-24	9.40	9.42	7.14	7.00	7.23	7.46	7.03	7.14	7.91	7.99
	25-34	14.84	17.53	8.71	8.58	8.60	8.75	7.76	7.89	8.88	9.43
	35-55	28.02	38.01	19.36	19.76	19.56	20.00	17.45	18.90	19.54	20.00
	Total	15.90	19.32	10.51	10.21	10.51	10.23	9.69	9.78	10.30	10.61
	12-19	8.44	9.48	8.40	9.22	9.88	11.08	9.37	10.55	11.36	11.52
Medicaid	20-24	10.85	11.33	8.71	8.55	8.84	9.03	8.79	8.88	9.61	9.41
	25-34	19.65	22.10	13.62	12.25	12.24	12.46	11.37	11.21	12.14	12.66
	35-55	45.44	47.27	30.52	30.50	30.43	32.18	27.35	26.17	26.04	27.14
	Total	16.04	21.34	9.35	9.85	9.88	10.15	8.81	9.33	10.70	11.16
	12-19	12.57	12.56	14.38	14.55	14.74	19.89	19.31	19.63	21.65	23.89
Private	20-24	12.09	13.05	10.00	10.93	10.00	11.50	10.05	10.46	11.93	12.64
	25-34	15.46	21.30	9.74	10.08	10.00	10.53	9.11	9.31	10.58	11.04
	35-55	29.60	43.76	20.63	21.95	21.41	21.97	19.32	20.99	22.19	23.36

Standard Errors for Exhibit 1.2
Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	48.77	33.35	27.06	23.50	30.30	30.15	26.06	27.43	27.61	26.46
	12-19	30.76	47.54	33.39	37.29	37.44	59.29	43.95	56.26	53.49	52.59
Self-pay/no charge	20-24	33.87	45.43	29.42	29.22	28.01	38.35	32.82	37.18	32.66	31.84
	25-34	59.75	43.71	31.85	29.59	35.68	32.61	30.54	28.93	30.39	32.31
	35-55	102.85	75.22	85.56	60.64	64.60	71.61	59.16	67.35	64.27	62.29
	Total	61.63	71.72	55.71	54.08	48.72	68.09	52.47	55.52	56.84	57.74
Medicare (not	12-19	85.80	124.68	131.48	100.50	134.29	218.16	155.89	239.87	128.01	156.35
shown)	20-24	74.63	72.04	75.55	70.19	84.76	111.07	85.07	104.81	92.92	111.49
	25-34	77.13	78.26	65.80	60.03	54.62	74.60	58.61	61.39	66.29	66.71
	35-55	155.10	194.23	138.95	140.60	124.57	164.59	124.56	121.84	123.74	119.83
	Total	32.32	43.00	22.77	24.58	25.47	25.50	22.52	25.90	23.77	22.94
	12-19	35.07	46.53	54.87	49.09	52.02	45.25	54.73	61.40	74.30	56.13
Other (not shown)	20-24	26.03	30.95	27.61	28.12	35.89	33.15	30.96	34.20	34.68	37.65
	25-34	48.35	48.29	28.31	29.07	25.94	29.10	26.13	31.12	27.85	26.77
	35-55	82.22	113.90	78.71	79.39	86.91	86.70	74.06	72.47	65.51	68.66

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 1.3 Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	8.41	8.72
	API NH	27.67	31.19
Total	Black NH	12.24	12.07
Total	Hispanic	15.59	16.30
	White NH	8.91	8.98
	Other NH	27.04	28.11

Standard Errors for Exhibit 1.3
Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	10.30	10.61
	API NH	45.45	50.71
Medicaid	Black NH	13.94	13.88
Medicald	Hispanic	17.83	19.76
	White NH	12.57	12.66
	Other NH	36.10	35.11
	Total	10.70	11.16
	API NH	32.18	35.12
Private	Black NH	20.14	19.19
Filvale	Hispanic	23.07	22.65
	White NH	10.16	10.21
	Other NH	33.67	35.88
	Total	27.61	26.46
	API NH	101.60	99.98
Self-pay/no charge	Black NH	52.09	71.01
	Hispanic	49.85	50.52
	White NH	30.95	33.28
	Other NH	109.07	96.59
	Total	56.84	57.74
	API NH	370.62	402.81
	Black NH	96.63	94.21
Medicare (not shown)	Hispanic	156.08	151.89
	White NH	78.33	81.06
	Other NH	177.22	268.48
	Total	23.77	22.94
	API NH	135.31	114.45
00 () 1	Black NH	59.73	60.49
Other (not shown)	Hispanic	72.99	68.75
	White NH	24.85	25.19
	Other NH	98.35	101.67

Key: API=Asian/Pacific Islander, NH=Non-Hispanic **Source:** Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019

Standard Errors for Exhibit 1.4
Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	7.63	8.00	7.99	7.17	7.61	8.41	8.72
Total	Large metro	10.95	11.47	11.32	9.85	10.91	11.77	12.37
Total	Medium/small metro	13.07	13.49	14.26	13.12	12.75	14.39	14.36
	Non-metro	11.52	10.91	12.59	11.88	12.27	13.24	14.69
	Total	10.21	10.51	10.23	9.69	9.78	10.30	10.61
Medicaid	Large metro	15.10	15.31	14.53	13.32	14.19	14.56	15.60
Medicald	Medium/small metro	17.37	17.99	19.45	19.04	17.05	18.54	17.48
	Non-metro	15.01	14.73	16.69	15.87	16.17	16.76	18.49
	Total	9.85	9.88	10.15	8.81	9.33	10.70	11.16
Private	Large metro	14.09	14.18	14.48	12.28	13.36	14.97	15.87
Tilvale	Medium/small metro	16.62	15.63	16.96	14.80	14.55	17.76	17.47
	Non-metro	14.65	14.00	16.43	15.25	15.16	16.58	18.11
	Total	23.50	30.30	30.15	26.06	27.43	27.61	26.46
Self-pay/no charge	Large metro	28.74	40.25	33.36	34.97	35.98	33.71	33.91
	Medium/small metro	45.52	44.52	74.91	51.00	48.06	48.94	52.83
	Non-metro	48.84	49.01	55.57	45.72	53.59	52.92	54.79
	Total	54.08	48.72	68.09	52.47	55.52	56.84	57.74
Medicare (not shown)	Large metro	66.41	62.51	88.18	73.35	79.59	76.22	74.76
Medicare (not snown)	Medium/small metro	115.04	84.76	124.44	83.27	92.51	95.67	105.81
	Non-metro	113.21	112.09	162.32	119.67	136.32	151.53	131.16
	Total	24.58	25.47	25.50	22.52	25.90	23.77	22.94
Other (not shown)	Large metro	39.61	38.32	40.97	33.11	43.36	35.42	33.63
Outer (not snown)	Medium/small metro	41.11	39.08	38.58	34.84	32.16	37.85	35.16
	Non-metro	49.23	42.65	56.72	57.92	47.16	51.01	55.12

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2013-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 1.5 Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	13.41	16.04	7.73	7.63	8.00	7.99	7.17	7.61	8.41	8.72
	Northeast	28.16	23.89	15.80	15.46	16.26	16.30	17.43	18.76	22.32	22.58
Total	Midwest	19.44	23.24	12.82	13.10	12.85	12.44	12.66	12.58	13.92	15.70
	South	22.50	25.19	12.79	12.19	13.60	12.10	10.77	11.75	12.72	12.34
	West	33.51	44.16	19.39	19.47	19.32	21.53	17.49	18.82	20.10	21.74
	Total	15.90	19.32	10.51	10.21	10.51	10.23	9.69	9.78	10.30	10.61
	Northeast	29.46	28.79	22.29	22.92	22.34	21.09	23.36	24.95	27.88	28.52
Medicaid	Midwest	22.89	27.43	16.37	17.80	16.93	16.14	15.97	17.47	17.59	19.39
	South	27.36	33.62	17.83	16.92	18.09	15.68	14.33	15.26	15.74	15.27
	West	36.59	46.01	23.57	22.48	23.11	25.97	23.48	22.31	23.44	25.12
	Total	16.04	21.34	9.35	9.85	9.88	10.15	8.81	9.33	10.70	11.16
	Northeast	29.86	29.62	18.53	17.39	19.22	20.65	20.56	21.67	26.26	25.92
Private	Midwest	25.17	27.34	15.51	16.33	15.83	15.47	15.85	15.84	16.99	18.95
	South	23.67	25.54	12.35	13.41	13.91	14.35	12.15	12.59	14.86	14.03
	West	43.53	62.62	26.45	28.37	27.23	28.66	22.43	24.88	27.60	30.28
	Total	48.77	33.35	27.06	23.50	30.30	30.15	26.06	27.43	27.61	26.46
	Northeast	86.29	52.29	56.99	70.97	65.75	118.62	81.90	62.25	74.34	69.32
Self-pay/no charge	Midwest	65.32	62.45	102.07	56.91	54.89	61.84	63.78	62.13	69.16	56.25
	South	67.14	43.90	32.53	39.01	60.01	39.01	35.06	38.49	34.63	36.47
	West	43.61	101.65	49.54	33.06	37.39	58.35	49.40	59.42	65.54	62.70
	Total	61.63	71.72	55.71	54.08	48.72	68.09	52.47	55.52	56.84	57.74
	Northeast	131.75	118.98	117.27	121.75	107.28	145.48	116.66	96.47	117.96	156.99
Medicare (not shown)	Midwest	96.40	97.25	98.41	90.60	86.37	127.28	111.06	116.07	118.53	108.64
,	South	120.66	141.29	89.98	96.23	81.70	114.17	73.17	89.36	78.06	76.51
	West	156.56	157.74	141.52	120.10	121.42	162.78	145.18	140.43	168.47	200.33

Standard Errors for Exhibit 1.5
Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	32.32	43.00	22.77	24.58	25.47	25.50	22.52	25.90	23.77	22.94
	Northeast	65.29	53.05	60.01	72.04	81.30	61.57	60.71	59.79	54.62	72.96
Other (not shown)	Midwest	76.30	92.10	40.73	43.93	45.45	52.92	47.92	42.66	52.04	52.75
	South	57.88	77.44	37.57	40.89	39.40	35.67	33.15	41.87	35.17	30.18
	West	45.01	35.10	48.59	48.14	51.37	63.64	51.81	63.86	54.24	48.77

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 1.6 Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	13.41	16.04	7.73	7.63	8.00	7.99	7.17	7.61	8.41	8.72
Total	Quartile 1 (lowest)	40.35	26.38	20.08	20.27	18.43	20.10	25.85	28.63	33.98	31.30
Total	Quartiles 2 and 3	18.68	19.64	11.67	10.66	10.74	10.08	9.48	9.88	11.17	11.17
	Quartile 4 (highest)	18.00	23.72	10.58	10.69	11.52	11.83	10.10	10.78	11.73	12.08
	Total	15.90	19.32	10.51	10.21	10.51	10.23	9.69	9.78	10.30	10.61
Medicaid	Quartile 1 (lowest)	44.26	26.92	22.49	23.69	22.05	21.78	31.58	33.03	42.43	33.45
	Quartiles 2 and 3	21.76	26.79	15.03	14.53	15.04	13.52	13.19	13.08	15.14	14.26
	Quartile 4 (highest)	22.00	30.14	16.00	15.63	16.09	16.36	14.41	14.51	14.65	15.53
	Total	16.04	21.34	9.35	9.85	9.88	10.15	8.81	9.33	10.70	11.16
Private	Quartile 1 (lowest)	44.70	35.92	27.12	29.04	26.62	31.12	30.00	32.48	33.52	35.82
Filvale	Quartiles 2 and 3	19.92	19.97	12.96	12.10	10.99	12.02	10.78	11.24	12.69	13.23
	Quartile 4 (highest)	21.26	29.81	12.48	13.37	13.89	14.28	12.21	13.08	14.91	15.27
	Total	48.77	33.35	27.06	23.50	30.30	30.15	26.06	27.43	27.61	26.46
Self- pay/no	Quartile 1 (lowest)	38.98	97.48	70.10	70.10	67.90	74.59	71.56	74.21	75.77	85.53
charge	Quartiles 2 and 3	87.33	59.27	34.34	38.48	34.77	41.78	35.23	42.76	34.48	41.88
	Quartile 4 (highest)	35.53	33.20	39.76	27.93	42.85	42.82	36.63	37.62	35.79	34.00

Standard Errors for Exhibit 1.6 Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	61.63	71.72	55.71	54.08	48.72	68.09	52.47	55.52	56.84	57.74
Medicare (not	Quartile 1 (lowest)	226.56	275.09	142.57	145.13	142.09	231.85	140.90	135.38	161.65	191.24
shown)	Quartiles 2 and 3	88.57	78.37	87.15	83.28	74.09	95.53	72.31	83.13	84.04	83.70
	Quartile 4 (highest)	77.74	85.99	71.50	67.63	62.60	98.94	74.43	81.22	79.20	82.05
	Total	32.32	43.00	22.77	24.58	25.47	25.50	22.52	25.90	23.77	22.94
Other (not	Quartile 1 (lowest)	69.09	69.15	67.59	78.05	61.52	90.25	89.97	81.67	83.45	93.32
shown)	Quartiles 2 and 3	55.17	81.70	34.71	40.63	40.09	37.46	34.92	32.73	33.05	32.13
	Quartile 4 (highest)	37.03	23.13	27.51	28.18	34.35	37.10	32.48	39.03	33.30	32.01

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 1.7

Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	13.41	16.04	7.73	7.63	8.00	7.99	7.17	7.61	8.41	8.72
Total	Quartile 1 (lowest)	31.55	18.43	12.54	14.10	12.94	12.56	12.63	13.28	14.60	14.88
Total	Quartiles 2 and 3	17.51	18.46	10.74	9.97	10.96	10.63	9.46	9.97	10.57	11.38
	Quartile 4 (highest)	20.28	33.41	13.49	14.43	15.10	15.92	14.00	14.81	16.98	16.35
	Total	15.90	19.32	10.51	10.21	10.51	10.23	9.69	9.78	10.30	10.61
Medicaid	Quartile 1 (lowest)	52.31	26.27	20.75	29.00	19.29	24.40	19.70	22.12	22.07	23.07
	Quartiles 2 and 3	20.14	22.01	15.20	14.07	14.92	14.32	12.67	13.16	13.20	14.34
	Quartile 4 (highest)	24.94	35.04	16.69	16.53	17.60	17.25	18.06	16.90	20.25	18.82
	Total	16.04	21.34	9.35	9.85	9.88	10.15	8.81	9.33	10.70	11.16
Private	Quartile 1 (lowest)	27.64	22.55	13.95	13.84	14.78	13.92	13.92	14.44	16.33	16.04
Fiivale	Quartiles 2 and 3	19.82	22.13	12.13	11.74	12.77	12.86	11.51	12.07	13.49	14.63
	Quartile 4 (highest)	29.42	52.43	19.86	24.66	23.59	26.31	18.62	20.71	23.37	22.56

Standard Errors for Exhibit 1.7

Standard errors for diabetes-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	48.77	33.35	27.06	23.50	30.30	30.15	26.06	27.43	27.61	26.46
Self- pay/no	Quartile 1 (lowest)	97.49	67.22	120.70	64.72	53.84	70.12	70.38	67.78	72.10	62.91
charge	Quartiles 2 and 3	66.40	43.94	32.46	29.99	42.98	40.03	34.16	32.14	31.08	31.19
	Quartile 4 (highest)	38.49	53.07	39.82	33.27	40.32	48.84	42.11	55.82	48.15	54.97
	Total	61.63	71.72	55.71	54.08	48.72	68.09	52.47	55.52	56.84	57.74
Medicare (not	Quartile 1 (lowest)	132.49	132.93	126.39	127.41	108.05	166.02	121.22	108.88	115.65	150.32
shown)	Quartiles 2 and 3	72.93	93.13	72.98	66.53	65.46	88.32	71.25	76.60	76.36	70.12
	Quartile 4 (highest)	79.83	99.51	86.55	96.15	99.67	129.65	95.56	100.24	97.74	110.06
	Total	32.32	43.00	22.77	24.58	25.47	25.50	22.52	25.90	23.77	22.94
Other (not	Quartile 1 (lowest)	86.52	45.18	38.93	49.31	47.35	48.27	48.32	48.15	47.13	49.80
shown)	Quartiles 2 and 3	37.43	66.04	32.72	31.91	35.49	35.00	29.16	36.33	32.11	29.84
	Quartile 4 (highest)	50.29	36.58	38.66	44.11	40.36	49.41	47.86	41.31	46.15	47.06

Key: SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Section 2

Standard Errors for Exhibit 2.1

Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019, National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	18.36	21.09	9.83	9.54	10.05	10.90	11.47	13.03	14.08	15.42
Medicaid	24.85	33.97	13.94	13.60	14.09	15.24	16.29	18.01	19.81	21.45
Private	19.63	18.64	10.33	10.10	10.24	10.95	11.46	12.90	13.96	15.23
Self-pay/no charge	49.53	48.69	30.45	30.04	35.30	45.41	39.12	40.65	42.70	49.94

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 2.2

Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	18.36	21.09	9.83	9.54	10.05	10.90	11.47	13.03	14.08	15.42
	12-19	26.70	34.81	17.33	17.54	18.70	22.28	22.62	24.97	25.79	31.24
Total	20-24	19.23	21.43	11.71	11.64	11.91	13.60	14.10	15.26	17.22	18.19
	25-34	17.78	19.79	10.01	9.82	10.25	11.13	11.47	12.71	13.61	15.19
	35-55	34.34	31.95	17.25	16.91	17.17	18.55	18.39	20.84	21.47	22.01
	Total	24.85	33.97	13.94	13.60	14.09	15.24	16.29	18.01	19.81	21.45
	12-19	30.06	43.15	20.41	20.48	21.86	25.27	25.66	28.82	28.72	35.18
Medicaid	20-24	22.12	26.80	14.15	14.14	14.02	16.19	16.77	18.34	21.05	22.22
	25-34	25.53	33.33	15.37	14.97	15.46	16.78	17.05	18.21	19.56	21.39
	35-55	49.67	67.18	29.30	29.48	29.23	31.58	30.65	32.74	35.84	35.00
	Total	19.63	18.64	10.33	10.10	10.24	10.95	11.46	12.90	13.96	15.23
	12-19	36.97	30.92	27.68	30.07	31.52	36.48	38.31	42.50	48.49	50.68
Private	20-24	24.85	22.49	16.08	16.27	16.36	18.77	18.52	19.13	21.83	22.38
	25-34	19.19	19.05	10.75	10.78	10.79	11.48	11.72	13.17	13.99	15.61
	35-55	35.47	28.03	18.46	17.30	17.60	20.14	19.17	21.09	21.68	22.70

Standard Errors for Exhibit 2.2 Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	49.53	48.69	30.45	30.04	35.30	45.41	39.12	40.65	42.70	49.94
Solf nov/no	12-19	98.25	83.05	79.63	82.65	79.93	150.68	115.53	114.74	138.62	119.87
Self-pay/no charge	20-24	50.77	66.43	40.54	48.49	47.16	66.88	63.19	66.10	74.30	76.28
	25-34	45.43	49.47	34.98	31.23	37.78	46.76	38.91	40.29	43.78	51.12
	35-55	100.48	80.52	66.79	66.70	71.19	74.64	68.95	69.56	74.43	77.02
	Total	78.90	83.32	64.06	72.03	62.93	73.21	69.88	81.48	84.84	88.88
	12-19	247.53	205.38	199.20	206.60	265.51	339.65	274.96	318.03	289.48	397.69
Medicare (not shown)	20-24	92.90	132.75	92.24	106.41	103.84	136.88	123.29	143.29	150.80	158.51
	25-34	89.15	91.82	71.17	80.60	70.91	80.90	79.46	86.33	92.84	103.66
	35-55	148.85	176.96	148.52	147.60	142.63	173.12	142.45	170.49	149.30	156.39
	Total	36.64	35.07	24.38	24.93	24.96	30.10	29.83	30.85	32.41	30.89
	12-19	88.93	85.33	79.89	92.17	101.88	116.34	111.01	139.05	154.01	152.28
Other (not shown)	20-24	52.95	38.62	38.60	40.41	42.30	50.98	48.85	54.37	57.88	61.46
	25-34	37.67	38.69	29.12	28.89	28.24	36.16	35.98	34.25	37.71	34.49
	35-55	78.33	97.06	69.09	71.97	72.35	78.36	69.56	73.55	74.05	71.58

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 2.3 Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	14.08	15.42
	API NH	35.36	39.19
Total	Black NH	30.58	34.64
Total	Hispanic	25.43	27.09
	White NH	13.90	15.46
	Other NH	30.98	33.00

Standard Errors for Exhibit 2.3
Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	19.81	21.45
	API NH	55.24	56.79
Medicaid	Black NH	36.48	40.58
Wedicald	Hispanic	32.10	34.39
	White NH	19.52	22.69
	Other NH	39.77	44.89
	Total	13.96	15.23
	API NH	34.59	41.22
Private	Black NH	32.91	36.24
Private	Hispanic	26.11	24.76
	White NH	15.00	16.19
	Other NH	37.33	40.12
	Total	42.70	49.94
	API NH	47.26	54.25
Self-pay/no charge	Black NH	102.62	109.19
	Hispanic	63.18	67.31
	White NH	50.61	60.91
	Other NH	130.08	84.26
	Total	84.84	88.88
	API NH	342.69	259.64
	Black NH	141.19	137.14
Medicare (not shown)	Hispanic	213.51	169.50
	White NH	94.27	105.66
	Other NH	197.42	282.34
	Total	32.41	30.89
	API NH	103.35	87.86
	Black NH	88.24	97.98
Other (not shown)	Hispanic	69.27	74.52
	White NH	38.60	35.46
	Other NH	115.05	106.62

Key: API=Asian/Pacific Islander, NH=Non-Hispanic **Source:** Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019

Standard Errors for Exhibit 2.4
Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	9.54	10.05	10.90	11.47	13.03	14.08	15.42
Total	Large metro	14.30	14.89	15.81	16.43	18.84	20.61	22.62
Total	Medium/small metro	14.91	15.49	17.68	19.05	21.19	22.25	24.01
	Non-metro	16.40	16.78	18.63	18.85	19.04	20.99	22.94
	Total	13.60	14.09	15.24	16.29	18.01	19.81	21.45
Medicaid	Large metro	22.10	22.29	23.31	24.69	28.25	31.17	34.04
Wedicald	Medium/small metro	18.49	20.45	23.36	25.28	26.15	28.00	30.70
	Non-metro	19.52	21.09	24.38	24.66	23.41	26.54	28.58
	Total	10.10	10.24	10.95	11.46	12.90	13.96	15.23
Private	Large metro	13.83	14.19	14.89	14.91	16.83	18.77	20.58
Tivate	Medium/small metro	16.37	15.52	18.34	20.06	22.69	22.78	24.44
	Non-metro	21.16	20.26	23.59	22.53	23.55	24.78	26.55
	Total	30.04	35.30	45.41	39.12	40.65	42.70	49.94
Self-pay/no charge	Large metro	46.43	49.39	59.35	47.10	57.83	60.19	74.25
	Medium/small metro	41.55	42.82	56.80	53.85	64.39	67.04	53.48
	Non-metro	57.57	50.17	88.68	76.54	76.02	76.59	77.31
	Total	72.03	62.93	73.21	69.88	81.48	84.84	88.88
Medicare (not shown)	Large metro	106.14	95.19	103.04	116.32	120.03	126.21	142.00
Medicare (not snown)	Medium/small metro	128.35	105.27	135.91	95.08	121.73	139.05	146.32
	Non-metro	131.13	127.12	150.69	147.54	175.03	177.98	157.57
	Total	24.93	24.96	30.10	29.83	30.85	32.41	30.89
Other (not shown)	Large metro	37.11	34.54	43.26	42.68	45.61	49.93	45.85
Caron (not snown)	Medium/small metro	40.78	41.01	47.79	41.33	50.43	46.27	47.37
	Non-metro	50.37	58.43	73.16	76.00	67.27	75.80	72.04

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2013-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 2.5
Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	18.36	21.09	9.83	9.54	10.05	10.90	11.47	13.03	14.08	15.42
	Northeast	53.47	47.03	25.85	24.97	28.82	33.47	31.75	35.46	40.98	44.22
Total	Midwest	28.67	49.61	17.93	18.11	18.73	20.23	21.96	23.88	24.95	30.43
	South	34.72	35.06	17.37	16.42	16.89	17.80	19.31	21.75	23.64	25.14
	West	30.43	31.14	14.88	15.34	16.68	19.08	20.39	24.73	25.73	28.04
	Total	24.85	33.97	13.94	13.60	14.09	15.24	16.29	18.01	19.81	21.45
	Northeast	78.00	79.61	35.87	36.74	43.19	48.67	46.08	48.35	57.47	62.26
Medicaid	Midwest	40.97	83.97	28.17	29.82	27.58	31.78	33.98	34.12	37.74	44.93
	South	41.02	52.12	23.49	21.81	22.53	23.70	25.80	29.51	31.74	34.08
	West	38.00	39.77	19.20	19.73	21.83	23.65	26.44	31.37	32.82	33.36
	Total	19.63	18.64	10.33	10.10	10.24	10.95	11.46	12.90	13.96	15.23
	Northeast	52.03	40.50	25.97	24.00	26.73	30.35	29.23	34.43	39.91	44.40
Private	Midwest	28.59	34.76	16.44	17.00	17.72	18.72	20.40	22.74	24.08	27.81
	South	42.96	32.69	19.56	19.14	18.66	18.63	20.65	21.13	23.44	24.36
	West	34.66	37.01	17.77	17.79	18.20	21.47	22.47	27.84	28.85	32.20
	Total	49.53	48.69	30.45	30.04	35.30	45.41	39.12	40.65	42.70	49.94
	Northeast	113.48	122.18	66.50	68.13	55.96	84.69	70.46	82.37	137.01	155.64
Self-pay/no charge	Midwest	87.85	86.01	55.76	55.67	58.09	72.26	61.93	62.81	81.48	71.10
	South	64.46	74.77	43.65	43.23	49.88	72.98	55.92	63.07	60.84	63.23
	West	64.19	95.10	57.06	54.61	59.18	62.90	68.20	60.87	66.08	72.37
	Total	78.90	83.32	64.06	72.03	62.93	73.21	69.88	81.48	84.84	88.88
	Northeast	106.97	124.68	136.34	133.60	139.14	123.19	156.97	117.45	168.02	256.55
Medicare (not shown)	Midwest	105.11	141.03	116.89	136.89	129.75	148.18	127.72	167.89	155.07	160.39
•	South	155.14	192.28	109.72	138.94	107.08	132.66	122.38	140.97	139.51	122.59
	West	164.45	161.53	144.10	133.53	129.01	167.07	175.93	179.87	208.77	268.53

Standard Errors for Exhibit 2.5

Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	36.64	35.07	24.38	24.93	24.96	30.10	29.83	30.85	32.41	30.89
	Northeast	73.10	73.97	90.92	66.69	80.56	60.20	74.49	75.94	64.98	67.59
Other (not shown)	Midwest	58.41	75.48	51.22	53.29	58.29	65.65	76.06	65.81	64.10	69.08
	South	69.62	55.38	37.27	38.51	36.70	47.61	44.58	49.69	53.65	49.79
	West	70.87	52.47	47.10	54.53	47.08	62.78	50.90	61.33	69.67	61.21

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 2.6

Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	18.36	21.09	9.83	9.54	10.05	10.90	11.47	13.03	14.08	15.42
Total	Quartile 1 (lowest)	81.67	86.88	38.31	34.49	41.80	47.26	45.67	40.53	45.35	43.71
Total	Quartiles 2 and 3	29.96	35.17	16.28	15.69	15.54	16.85	18.11	21.00	21.98	22.69
	Quartile 4 (highest)	20.19	20.33	10.98	10.90	11.73	12.83	13.27	15.55	16.90	19.72
	Total	24.85	33.97	13.94	13.60	14.09	15.24	16.29	18.01	19.81	21.45
Medicaid	Quartile 1 (lowest)	95.76	103.13	43.97	41.77	48.37	60.12	58.74	45.63	52.84	55.73
	Quartiles 2 and 3	41.83	53.93	22.73	21.99	21.34	23.18	24.99	28.39	31.42	29.74
	Quartile 4 (highest)	26.25	32.55	16.86	16.35	18.02	18.25	19.70	23.34	24.69	31.08
	Total	19.63	18.64	10.33	10.10	10.24	10.95	11.46	12.90	13.96	15.23
Private	Quartile 1 (lowest)	73.87	78.01	50.79	44.01	50.11	50.34	46.83	48.99	56.05	47.74
riivale	Quartiles 2 and 3	27.93	28.39	15.76	15.58	15.42	16.53	17.50	19.36	19.81	22.34
	Quartile 4 (highest)	22.62	20.93	11.83	11.84	12.07	13.50	13.57	15.75	17.12	18.67

Standard Errors for Exhibit 2.6 Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	49.53	48.69	30.45	30.04	35.30	45.41	39.12	40.65	42.70	49.94
Self- pay/no	Quartile 1 (lowest)	54.11	112.27	77.44	98.07	88.31	147.59	95.80	101.61	115.17	111.49
charge	Quartiles 2 and 3	73.69	81.47	54.16	47.77	42.24	50.04	51.53	69.73	70.60	52.05
	Quartile 4 (highest)	57.81	54.73	37.63	40.12	48.16	58.23	46.83	48.74	53.96	72.57
	Total	78.90	83.32	64.06	72.03	62.93	73.21	69.88	81.48	84.84	88.88
Medicare (not	Quartile 1 (lowest)	257.01	432.82	191.11	195.82	206.92	260.84	291.13	313.31	224.11	216.64
shown)	Quartiles 2 and 3	120.01	108.83	95.74	112.02	86.82	105.25	93.20	109.95	118.28	115.97
	Quartile 4 (highest)	107.09	89.26	87.61	99.92	92.50	104.56	102.75	111.49	124.84	145.25
	Total	36.64	35.07	24.38	24.93	24.96	30.10	29.83	30.85	32.41	30.89
Other (not	Quartile 1 (lowest)	192.77	129.07	110.23	96.20	86.98	143.96	105.22	108.69	161.93	124.97
shown)	Quartiles 2 and 3	54.40	56.74	35.61	36.82	37.17	42.59	42.25	47.23	47.76	48.80
	Quartile 4 (highest)	43.95	33.51	31.28	34.56	34.22	40.54	35.50	41.11	40.65	39.50

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 2.7

Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	18.36	21.09	9.83	9.54	10.05	10.90	11.47	13.03	14.08	15.42
Total	Quartile 1 (lowest)	24.95	25.47	14.91	15.44	16.56	19.02	18.17	21.40	21.84	24.49
Total	Quartiles 2 and 3	21.54	24.40	11.10	11.28	11.87	13.01	13.55	15.35	17.00	18.68
	Quartile 4 (highest)	40.91	40.92	20.26	19.64	23.07	24.28	25.70	28.03	28.96	31.33
	Total	24.85	33.97	13.94	13.60	14.09	15.24	16.29	18.01	19.81	21.45
Medicaid	Quartile 1 (lowest)	26.47	34.67	23.68	23.01	23.34	29.40	27.42	31.72	31.28	32.91
	Quartiles 2 and 3	27.88	35.12	15.17	15.26	16.87	17.61	18.31	21.16	24.42	26.58
	Quartile 4 (highest)	51.45	61.00	26.43	26.16	29.16	31.55	34.17	35.86	37.25	40.10

Standard Errors for Exhibit 2.7

Standard errors for hypertension-related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	19.63	18.64	10.33	10.10	10.24	10.95	11.46	12.90	13.96	15.23
Private	Quartile 1 (lowest)	29.32	27.77	17.17	17.25	18.28	19.95	19.05	22.47	23.13	25.56
Filvale	Quartiles 2 and 3	24.57	24.98	12.57	12.69	12.70	13.96	14.45	15.70	17.01	18.48
	Quartile 4 (highest)	41.82	32.01	21.03	19.40	22.34	22.56	23.66	26.21	28.12	30.63
	Total	49.53	48.69	30.45	30.04	35.30	45.41	39.12	40.65	42.70	49.94
Self- pay/no	Quartile 1 (lowest)	66.71	64.00	64.10	75.19	58.49	82.68	63.69	73.95	68.66	94.02
charge	Quartiles 2 and 3	52.11	46.71	29.10	33.04	37.60	56.01	43.20	47.39	53.69	61.10
	Quartile 4 (highest)	80.28	96.08	69.70	62.43	65.76	64.67	73.95	86.03	79.83	81.30
	Total	78.90	83.32	64.06	72.03	62.93	73.21	69.88	81.48	84.84	88.88
Medicare (not	Quartile 1 (lowest)	168.23	129.05	140.69	142.51	138.64	180.32	140.51	157.73	189.40	213.60
shown)	Quartiles 2 and 3	114.13	109.84	77.75	91.35	75.29	90.99	84.00	96.38	109.29	113.33
	Quartile 4 (highest)	176.26	173.14	118.79	137.43	125.57	153.03	151.25	166.49	149.39	158.42
	Total	36.64	35.07	24.38	24.93	24.96	30.10	29.83	30.85	32.41	30.89
Other (not	Quartile 1 (lowest)	53.25	58.48	44.14	61.31	54.26	58.36	57.95	58.79	56.20	59.61
shown)	Quartiles 2 and 3	42.15	43.60	31.11	33.96	32.22	39.98	34.70	40.21	42.65	38.71
	Quartile 4 (highest)	71.06	66.60	46.62	45.59	48.76	61.06	59.51	63.64	66.68	64.96

Key: SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Section 3

Standard Errors for Exhibit 3.1

Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019, National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	19.60	18.50	9.26	10.22	11.06	11.82	10.82	12.40	13.88	15.19
Medicaid	27.31	28.27	13.44	14.61	16.55	17.26	14.52	15.57	17.56	18.93
Private	17.19	15.37	8.45	9.35	9.65	10.71	10.66	12.86	14.29	15.69
Self-pay/no charge	31.52	43.90	24.23	25.01	29.43	28.25	20.04	20.00	25.11	46.22

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 3.2 Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	19.60	18.50	9.26	10.22	11.06	11.82	10.82	12.40	13.88	15.19
	12-19	22.61	23.11	13.33	14.83	17.73	19.56	17.06	18.57	21.38	22.64
Total	20-24	21.57	21.58	11.71	12.77	13.95	14.73	12.35	14.31	15.90	18.08
	25-34	19.69	18.02	9.23	10.32	10.93	11.96	11.05	12.50	14.15	15.47
	35-55	23.45	21.19	11.60	12.20	12.95	14.46	13.85	15.73	16.93	18.11
	Total	27.31	28.27	13.44	14.61	16.55	17.26	14.52	15.57	17.56	18.93
	12-19	24.65	26.84	15.09	16.95	20.05	22.18	19.32	19.75	23.48	24.20
Medicaid	20-24	26.58	27.70	14.42	15.48	17.30	18.08	14.33	16.37	18.09	20.64
	25-34	31.69	30.67	15.56	16.77	18.42	19.90	16.44	17.37	19.24	20.52
	35-55	35.14	40.74	19.04	21.24	22.79	24.32	20.46	20.58	24.46	25.16
	Total	17.19	15.37	8.45	9.35	9.65	10.71	10.66	12.86	14.29	15.69
	12-19	28.56	24.70	22.57	25.83	28.11	35.49	31.15	37.82	42.29	43.72
Private	20-24	20.59	17.40	12.96	14.91	15.02	17.28	14.74	17.46	20.02	23.14
	25-34	16.49	14.92	8.28	9.25	9.49	10.66	10.59	12.63	14.26	15.75
	35-55	23.30	20.97	12.39	12.33	13.15	14.71	15.01	17.56	18.62	19.74

Standard Errors for Exhibit 3.2 Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	31.52	43.90	24.23	25.01	29.43	28.25	20.04	20.00	25.11	46.22
Self-pay/no	12-19	48.98	68.59	51.68	55.06	65.52	82.66	67.73	78.53	80.60	92.29
charge	20-24	40.81	67.33	37.46	41.66	45.16	49.18	40.14	39.78	43.52	63.61
	25-34	33.51	47.50	29.37	29.30	33.84	31.61	21.00	20.80	28.27	50.93
	35-55	42.08	52.34	37.55	39.64	35.05	39.72	31.22	29.84	31.63	42.71
	Total	268.12	203.29	112.27	107.53	114.55	138.83	100.88	125.19	121.35	125.50
	12-19	169.85	93.13	122.29	182.05	199.83	271.36	209.23	342.57	200.32	239.47
Medicare (not shown)	20-24	258.37	239.60	144.51	149.43	167.18	210.19	130.19	211.65	179.36	224.57
	25-34	259.24	194.51	122.63	117.02	123.52	149.82	116.58	128.60	128.66	128.67
	35-55	258.93	308.99	181.02	160.37	163.84	195.93	161.35	168.41	169.39	173.89
	Total	43.89	32.77	20.41	23.20	22.80	27.18	27.46	29.07	34.11	39.12
	12-19	64.37	60.96	56.47	76.40	91.72	96.39	69.70	111.71	136.34	132.54
Other (not shown)	20-24	44.62	40.38	34.45	37.01	37.31	46.35	37.97	45.21	57.82	61.11
	25-34	49.58	33.46	24.07	25.50	25.21	29.82	30.09	31.63	37.34	43.26
	35-55	71.14	57.89	41.54	48.26	46.95	55.62	50.83	59.10	61.41	65.11

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 3.3

Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	13.88	15.19
	API NH	13.52	13.19
Total	Black NH	20.94	21.19
Total	Hispanic	15.62	16.74
	White NH	17.30	18.58
	Other NH	20.76	24.13

Standard Errors for Exhibit 3.3
Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	17.56	18.93
	API NH	18.92	22.86
Medicaid	Black NH	24.42	24.38
Wedicald	Hispanic	15.99	17.47
	White NH	27.05	28.73
	Other NH	24.73	32.76
	Total	14.29	15.69
	API NH	16.75	14.86
Private	Black NH	18.52	19.75
Filvate	Hispanic	23.46	25.26
	White NH	16.45	17.85
	Other NH	24.73	26.78
	Total	25.11	46.22
	API NH	19.14	21.83
Self-pay/no charge	Black NH	71.13	122.32
	Hispanic	23.96	29.64
	White NH	38.84	67.62
	Other NH	56.52	59.07
	Total	121.35	125.50
	API NH	237.54	222.49
	Black NH	153.01	146.67
Medicare (not shown)	Hispanic	271.04	244.34
	White NH	159.89	164.79
	Other NH	251.05	277.01
	Total	34.11	39.12
	API NH	62.40	55.42
	Black NH	89.25	97.84
Other (not shown)	Hispanic	51.74	59.75
	White NH	40.43	48.25
	Other NH	112.99	96.63

Key: API=Asian/Pacific Islander, NH=Non-Hispanic **Source:** Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019

Standard Errors for Exhibit 3.4
Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	10.22	11.06	11.82	10.82	12.40	13.88	15.19
Total	Large metro	13.52	14.67	15.76	14.64	16.63	18.59	19.91
างเลเ	Medium/small metro	18.56	19.54	21.46	18.43	21.35	23.71	26.45
	Non-metro	19.27	20.34	18.39	16.50	19.63	20.99	23.65
	Total	14.61	16.55	17.26	14.52	15.57	17.56	18.93
Medicaid	Large metro	19.91	22.44	23.40	19.19	20.56	23.45	24.54
Medicald	Medium/small metro	26.26	28.58	30.90	25.75	27.81	29.64	33.09
	Non-metro	27.64	31.24	27.57	23.55	25.71	27.89	31.19
	Total	9.35	9.65	10.71	10.66	12.86	14.29	15.69
Private	Large metro	12.28	13.20	14.44	14.81	17.63	19.33	20.76
Tivate	Medium/small metro	16.66	16.67	19.00	16.64	20.81	24.17	26.99
	Non-metro	16.94	16.04	16.64	15.69	18.41	20.82	22.74
	Total	25.01	29.43	28.25	20.04	20.00	25.11	46.22
Self-pay/no charge	Large metro	32.47	29.88	32.02	23.84	21.49	33.40	72.67
	Medium/small metro	48.67	46.17	59.39	40.10	49.23	48.05	40.14
	Non-metro	43.81	115.77	74.04	42.08	42.96	42.12	45.20
	Total	107.53	114.55	138.83	100.88	125.19	121.35	125.50
Medicare (not shown)	Large metro	136.98	156.95	201.75	153.68	169.05	177.90	174.94
Medicare (not snown)	Medium/small metro	219.88	191.78	239.71	168.42	206.58	193.45	214.26
	Non-metro	170.02	213.10	218.14	162.83	255.65	220.94	197.68
	Total	23.20	22.80	27.18	27.46	29.07	34.11	39.12
Other (not shown)	Large metro	31.41	32.35	37.84	41.54	44.85	48.93	58.62
Outer (HOLSHOWII)	Medium/small metro	37.79	36.24	46.75	42.27	40.93	50.92	54.28
	Non-metro	53.15	60.36	55.14	45.82	59.89	82.52	72.26

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2013-2019

Standard Errors for Exhibit 3.5
Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	19.60	18.50	9.26	10.22	11.06	11.82	10.82	12.40	13.88	15.19
	Northeast	58.16	37.11	25.64	29.54	31.99	35.68	31.48	35.84	41.45	45.15
Total	Midwest	37.38	44.01	19.03	20.40	21.61	22.57	19.99	23.15	26.39	28.57
	South	33.32	28.69	14.57	16.05	17.74	18.30	15.97	18.05	20.44	22.82
	West	34.32	32.61	17.73	19.21	20.80	22.90	23.72	27.86	29.42	31.41
	Total	27.31	28.27	13.44	14.61	16.55	17.26	14.52	15.57	17.56	18.93
	Northeast	88.96	60.96	42.51	49.94	54.08	56.27	47.56	48.56	60.54	63.79
Medicaid	Midwest	52.74	63.60	28.51	29.89	33.76	34.15	28.92	30.73	33.85	38.31
	South	42.85	39.57	20.23	21.65	25.00	25.52	20.16	21.92	24.99	26.54
	West	41.55	47.92	22.31	23.87	28.10	31.04	27.86	31.64	32.43	35.49
	Total	17.19	15.37	8.45	9.35	9.65	10.71	10.66	12.86	14.29	15.69
	Northeast	40.80	32.57	20.03	21.59	22.53	27.39	25.88	33.64	38.70	43.44
Private	Midwest	30.10	34.23	15.61	17.42	17.88	19.19	17.71	22.66	26.76	27.48
	South	26.53	23.20	11.36	13.06	14.08	15.96	15.73	17.89	19.83	23.52
	West	40.57	31.91	21.82	23.77	23.92	25.69	27.44	32.34	33.71	35.84
	Total	31.52	43.90	24.23	25.01	29.43	28.25	20.04	20.00	25.11	46.22
	Northeast	61.47	101.92	58.20	66.66	129.48	56.92	48.06	65.65	115.43	216.15
Self-pay/no charge	Midwest	87.28	105.86	56.59	49.17	54.55	69.77	43.94	40.54	54.56	50.89
	South	42.13	47.43	29.06	29.45	32.41	39.54	23.51	26.39	24.38	27.82
	West	76.62	119.63	62.08	65.07	42.80	60.52	46.15	39.54	48.16	42.85
	Total	268.12	203.29	112.27	107.53	114.55	138.83	100.88	125.19	121.35	125.50
	Northeast	449.31	259.84	272.41	266.29	279.94	391.09	323.09	258.73	311.59	350.15
Medicare (not shown)	Midwest	368.28	274.55	172.19	204.94	227.68	254.83	191.58	178.30	203.54	200.25
	South	167.71	360.80	168.79	163.10	173.27	197.32	131.65	161.26	159.07	151.42
	West	287.72	309.29	234.06	202.14	188.89	235.29	181.94	239.28	237.00	308.83

Standard Errors for Exhibit 3.5

Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	43.89	32.77	20.41	23.20	22.80	27.18	27.46	29.07	34.11	39.12
	Northeast	65.17	69.91	61.08	73.66	67.49	112.15	69.65	80.60	72.24	81.25
Other (not shown)	Midwest	131.78	89.93	44.54	43.79	51.90	76.71	71.32	74.26	96.09	96.51
	South	52.58	37.86	31.28	30.72	31.59	32.83	35.06	40.68	43.25	53.75
	West	64.44	55.54	38.38	56.82	48.70	52.22	54.35	57.07	70.41	80.74

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 3.6

Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	19.60	18.50	9.26	10.22	11.06	11.82	10.82	12.40	13.88	15.19
Total	Quartile 1 (lowest)	67.58	57.53	33.62	38.14	46.21	37.38	25.91	28.32	35.71	40.51
Total	Quartiles 2 and 3	32.55	24.65	14.62	15.65	17.40	18.12	15.98	19.19	21.19	22.95
	Quartile 4 (highest)	23.24	24.21	11.29	12.69	13.22	14.96	14.26	15.95	17.64	18.97
	Total	27.31	28.27	13.44	14.61	16.55	17.26	14.52	15.57	17.56	18.93
Medicaid	Quartile 1 (lowest)	83.78	72.70	41.82	43.71	53.84	41.69	30.69	33.31	36.16	41.81
	Quartiles 2 and 3	47.20	37.89	21.03	22.68	26.20	26.73	22.15	24.04	27.78	28.64
	Quartile 4 (highest)	31.90	40.72	16.85	19.23	20.37	22.72	20.02	21.16	22.82	24.96
	Total	17.19	15.37	8.45	9.35	9.65	10.71	10.66	12.86	14.29	15.69
Private	Quartile 1 (lowest)	31.87	24.46	24.11	34.61	39.07	38.47	24.79	26.41	44.11	48.19
i iival e	Quartiles 2 and 3	24.93	16.88	11.19	12.07	12.60	14.29	13.60	17.66	19.42	22.41
	Quartile 4 (highest)	21.81	19.92	11.21	12.18	12.73	14.16	14.30	16.71	18.36	19.36

Standard Errors for Exhibit 3.6

Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	31.52	43.90	24.23	25.01	29.43	28.25	20.04	20.00	25.11	46.22
Self- pay/no	Quartile 1 (lowest)	44.56	89.18	71.89	60.00	93.09	98.14	55.18	60.24	55.47	67.53
charge	Quartiles 2 and 3	64.10	69.30	35.08	39.31	56.28	40.73	32.25	34.94	37.30	40.27
	Quartile 4 (highest)	41.97	47.47	32.07	33.08	32.06	37.62	25.67	23.98	37.10	66.33
	Total	268.12	203.29	112.27	107.53	114.55	138.83	100.88	125.19	121.35	125.50
Medicare (not	Quartile 1 (lowest)	277.12	337.81	179.44	238.30	306.56	285.21	232.46	313.23	267.52	247.09
shown)	Quartiles 2 and 3	386.09	245.34	146.93	144.97	144.86	182.38	134.08	170.42	153.36	172.16
	Quartile 4 (highest)	230.50	271.15	152.11	139.04	156.59	198.18	142.27	175.01	189.47	192.93
	Total	43.89	32.77	20.41	23.20	22.80	27.18	27.46	29.07	34.11	39.12
Other (not	Quartile 1 (lowest)	53.75	74.39	69.40	77.26	85.86	88.22	72.62	77.62	98.18	78.09
shown)	Quartiles 2 and 3	45.28	39.27	27.73	37.57	35.92	41.93	39.05	43.93	51.15	55.06
	Quartile 4 (highest)	64.87	46.05	28.49	28.09	28.66	35.09	34.28	38.09	43.73	51.05

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 3.7

Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	19.60	18.50	9.26	10.22	11.06	11.82	10.82	12.40	13.88	15.19
Total	Quartile 1 (lowest)	42.86	26.88	18.71	19.57	18.56	21.74	21.08	24.44	26.68	30.65
Total	Quartiles 2 and 3	25.51	22.84	12.14	13.74	14.34	15.17	13.35	14.87	16.72	17.85
	Quartile 4 (highest)	30.18	28.02	13.61	14.20	19.18	19.97	18.01	21.01	23.53	24.88

Standard Errors for Exhibit 3.7
Standard errors for mental health disorder related bosnital stays per 10 000 delivery stays, by primary expected

Standard errors for mental health disorder related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	27.31	28.27	13.44	14.61	16.55	17.26	14.52	15.57	17.56	18.93
Medicaid	Quartile 1 (lowest)	80.96	49.81	35.21	39.94	36.83	41.43	37.18	39.83	46.66	50.10
	Quartiles 2 and 3	35.68	32.37	18.51	20.22	21.99	22.59	18.39	19.62	21.92	22.98
	Quartile 4 (highest)	36.59	37.59	17.25	18.49	24.48	25.05	20.55	21.98	25.91	29.49
	Total	17.19	15.37	8.45	9.35	9.65	10.71	10.66	12.86	14.29	15.69
Private	Quartile 1 (lowest)	31.33	23.64	16.24	16.42	16.01	18.67	18.79	22.75	23.61	28.04
Filvale	Quartiles 2 and 3	20.62	19.99	10.63	12.04	11.95	13.05	12.66	14.74	16.93	17.99
	Quartile 4 (highest)	31.78	22.73	13.98	14.65	18.93	21.90	22.21	27.15	28.17	26.91
	Total	31.52	43.90	24.23	25.01	29.43	28.25	20.04	20.00	25.11	46.22
Self- pay/no	Quartile 1 (lowest)	71.46	58.43	62.58	55.73	53.10	64.43	58.18	55.54	78.46	72.24
charge	Quartiles 2 and 3	41.47	42.98	30.76	31.26	40.97	37.04	25.84	26.76	30.54	65.47
	Quartile 4 (highest)	49.18	86.03	37.72	41.16	37.03	41.72	31.28	27.83	35.49	35.16
	Total	268.12	203.29	112.27	107.53	114.55	138.83	100.88	125.19	121.35	125.50
Medicare (not	Quartile 1 (lowest)	352.32	293.16	272.20	191.59	198.31	280.71	226.30	215.51	252.38	281.30
shown)	Quartiles 2 and 3	212.50	259.64	136.80	132.53	146.29	182.29	126.64	161.91	150.97	163.31
	Quartile 4 (highest)	345.53	280.00	160.66	171.97	204.97	216.81	167.59	210.04	198.49	199.89
	Total	43.89	32.77	20.41	23.20	22.80	27.18	27.46	29.07	34.11	39.12
Other (not	Quartile 1 (lowest)	131.87	55.10	46.13	44.92	45.52	56.21	55.55	62.87	61.53	73.43
shown)	Quartiles 2 and 3	44.53	37.75	25.51	31.41	28.47	34.56	31.62	35.56	43.97	46.38
	Quartile 4 (highest)	55.09	61.09	35.92	42.23	47.54	48.33	48.98	51.89	56.56	68.64

Key: SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Section 4

Standard Errors for Exhibit 4.1

Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer, 2010-2019, National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	606.5	572.9	616.8	639.6	655.6	644.1	660.0	666.3	673.8	670.5
Medicaid	958.5	942.9	1011.0	1054.3	1112.2	1104.2	1142.4	1150.3	1187.2	1199.0
Private	267.8	245.0	258.9	274.0	269.0	264.2	260.7	257.3	256.4	254.4
Self-pay/no charge	497.7	654.7	570.3	619.4	556.5	505.9	461.0	465.7	503.3	519.1

Key: SUD=Substance Use Disorder

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 4.2

Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected paver and age group, 2010-2019, National

	je group, 2010-20	Tio, Nation	ıaı								
Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	28.22	27.16	13.19	13.50	13.46	13.16	13.43	13.56	13.64	13.37
	12-19	33.96	35.89	18.72	18.91	18.94	18.98	19.21	18.99	20.25	19.81
Total	20-24	38.17	39.43	19.34	19.55	18.94	18.24	17.71	18.22	17.93	17.65
	25-34	25.73	23.71	12.11	12.66	12.84	13.00	13.43	13.51	13.65	13.36
	35-55	22.56	20.02	10.44	11.04	11.62	12.06	12.09	12.66	13.06	13.53
	Total	47.10	52.00	23.18	23.64	23.80	23.34	23.88	23.50	24.34	24.36
	12-19	39.36	44.19	21.90	22.60	22.19	22.30	22.85	22.22	23.44	23.29
Medicaid	20-24	49.11	54.16	25.71	25.83	25.62	24.54	24.24	24.78	24.56	24.88
	25-34	52.40	56.33	25.79	26.32	26.77	27.25	27.48	26.58	27.71	27.33
	35-55	50.80	54.61	25.85	26.61	28.23	29.10	29.73	28.60	31.38	32.54
	Total	15.27	12.78	6.82	7.17	6.74	6.67	6.58	6.48	6.25	5.93
	12-19	36.13	29.65	25.04	25.12	26.26	29.76	27.34	30.39	33.17	30.59
Private	20-24	30.96	23.96	15.44	16.67	15.69	16.77	14.82	15.25	14.58	14.28
	25-34	12.57	10.99	5.82	6.12	5.72	5.80	5.81	5.74	5.68	5.48
	35-55	12.54	10.79	6.23	6.82	6.77	6.94	6.33	6.35	6.24	6.15

Standard Errors for Exhibit 4.2 Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	69.44	71.41	33.19	34.32	39.26	31.80	29.31	29.01	28.56	27.95
Self-pay/no	12-19	89.13	89.71	70.90	64.11	77.43	89.67	89.38	94.37	86.04	81.44
charge	20-24	101.22	110.29	53.41	63.04	63.75	64.89	64.24	57.50	55.72	55.85
	25-34	64.74	67.12	37.58	36.22	43.97	35.93	30.76	31.58	32.45	30.84
	35-55	59.70	60.35	37.78	42.44	34.63	38.56	32.11	30.51	31.44	34.44
	Total	150.01	124.04	85.03	83.17	91.12	105.63	94.93	113.92	100.37	97.12
	12-19	319.74	260.47	162.12	378.92	250.82	453.45	146.75	291.92	217.01	193.57
Medicare (not shown)	20-24	186.56	175.92	126.60	153.34	140.59	174.32	130.93	149.69	162.91	163.66
	25-34	165.39	137.70	99.42	94.71	108.63	125.90	110.07	123.61	114.39	105.67
	35-55	226.33	206.62	153.59	141.46	137.15	157.27	151.01	173.51	143.40	159.57
	Total	59.00	36.24	27.75	29.09	22.96	25.14	28.17	32.44	27.60	30.63
	12-19	81.30	72.30	72.90	81.77	74.59	90.99	63.82	107.88	101.10	106.55
Other (not shown)	20-24	68.41	44.90	44.57	50.84	41.35	43.52	42.70	50.44	46.46	47.46
	25-34	66.00	36.73	27.47	27.04	22.77	26.00	31.33	33.52	30.80	32.76
	35-55	52.40	45.50	35.12	37.47	34.06	46.43	40.77	43.51	37.79	37.38

Key: SUD=Substance Use Disorder

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 4.3

Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	13.64	13.37
	API NH	14.28	12.63
Total	Black NH	24.30	24.22
Total	Hispanic	9.47	9.38
	White NH	17.62	16.90
	Other NH	38.88	41.40

Standard Errors for Exhibit 4.3
Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	24.34	24.36
	API NH	40.18	37.95
Medicaid	Black NH	29.55	29.57
Wedicald	Hispanic	13.38	13.14
	White NH	35.45	35.45
	Other NH	60.33	69.61
	Total	6.25	5.93
	API NH	6.56	5.70
Private	Black NH	15.86	14.79
Filvate	Hispanic	6.36	6.16
	White NH	7.29	7.09
	Other NH	17.29	16.44
	Total	28.56	27.95
	API NH	17.90	18.50
Self-pay/no charge	Black NH	86.38	99.35
	Hispanic	18.57	18.22
	White NH	54.27	53.28
	Other NH	113.18	69.44
	Total	100.37	97.12
	API NH	199.88	217.99
NA dia ana (na da ala anna)	Black NH	110.60	108.22
Medicare (not shown)	Hispanic	140.83	132.85
	White NH	149.28	143.30
	Other NH	244.47	231.55
	Total	27.60	30.63
	API NH	36.30	39.53
Other (net -b)	Black NH	67.79	66.32
Other (not shown)	Hispanic	31.13	31.89
	White NH	35.59	38.08
	Other NH	55.54	62.78

Key: SUD=Substance Use Disorder, API=Asian/Pacific Islander, NH=Non-Hispanic **Source:** Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019

Standard Errors for Exhibit 4.4
Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	13.50	13.46	13.16	13.43	13.56	13.64	13.37
Total	Large metro	16.03	15.54	15.12	15.03	15.17	15.22	14.89
Total	Medium/small metro	22.45	22.60	22.04	22.18	21.52	22.55	22.32
	Non-metro	28.21	27.09	26.49	25.25	25.72	24.85	24.03
	Total	23.64	23.80	23.34	23.88	23.50	24.34	24.36
Medicaid	Large metro	28.90	28.90	28.24	28.16	27.88	29.11	28.97
Wedicald	Medium/small metro	40.45	40.63	40.44	40.68	39.13	40.32	40.85
	Non-metro	44.44	44.94	44.04	42.07	41.25	40.23	39.80
	Total	7.17	6.74	6.67	6.58	6.48	6.25	5.93
Private	Large metro	8.13	7.22	6.70	6.46	6.47	6.10	6.02
riivale	Medium/small metro	11.91	11.45	11.93	11.40	10.74	10.70	9.66
	Non-metro	16.94	16.76	17.44	16.42	17.07	16.28	16.19
	Total	34.32	39.26	31.80	29.31	29.01	28.56	27.95
Self-pay/no charge	Large metro	38.65	32.10	32.69	25.52	28.13	27.81	35.09
	Medium/small metro	62.93	67.47	62.74	59.55	55.43	60.92	52.77
	Non-metro	72.40	152.28	99.52	91.05	79.35	76.07	71.10
	Total	83.17	91.12	105.63	94.93	113.92	100.37	97.12
Medicare (not shown)	Large metro	99.66	109.40	135.90	136.62	139.05	123.57	128.60
Medicare (not snown)	Medium/small metro	169.57	157.18	177.09	153.59	186.68	166.51	138.47
	Non-metro	173.03	198.57	192.32	151.98	208.57	180.52	174.91
	Total	29.09	22.96	25.14	28.17	32.44	27.60	30.63
Other (not shown)	Large metro	30.95	27.02	26.41	40.54	49.63	39.06	44.13
Oulei (Hot SHOWH)	Medium/small metro	46.29	37.51	44.18	38.08	36.15	34.62	36.31
	Non-metro	76.79	66.77	67.88	73.38	72.28	76.16	77.86

Key: SUD=Substance Use Disorder

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2013-2019

Standard Errors for Exhibit 4.5
Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	28.22	27.16	13.19	13.50	13.46	13.16	13.43	13.56	13.64	13.37
	Northeast	64.84	66.12	31.00	34.51	34.00	35.81	34.61	36.40	37.73	35.89
Total	Midwest	68.26	60.94	29.34	29.42	28.96	29.83	30.39	31.67	32.29	31.96
	South	54.16	47.44	25.12	25.33	25.08	23.02	23.98	23.14	22.72	22.22
	West	35.28	33.72	16.74	16.35	17.69	18.17	18.49	19.39	19.68	19.30
	Total	47.10	52.00	23.18	23.64	23.80	23.34	23.88	23.50	24.34	24.36
	Northeast	120.32	121.72	58.58	63.96	64.42	68.98	67.46	67.85	74.39	75.61
Medicaid	Midwest	106.12	94.94	47.21	47.70	47.71	46.49	47.38	49.59	53.29	53.48
	South	79.23	88.17	39.70	39.95	40.08	37.55	38.93	36.71	37.02	36.30
	West	65.35	61.88	29.43	29.31	31.92	32.69	33.26	34.60	35.16	35.38
	Total	15.27	12.78	6.82	7.17	6.74	6.67	6.58	6.48	6.25	5.93
	Northeast	32.90	33.49	15.67	20.24	16.95	16.33	14.81	16.84	17.41	14.87
Private	Midwest	37.56	28.82	17.92	17.00	15.66	15.96	14.77	15.57	15.11	14.17
	South	30.95	21.08	11.30	12.13	12.06	12.07	12.25	11.23	10.02	9.90
	West	17.40	18.58	10.03	9.27	9.51	8.61	10.10	9.10	9.42	9.22
	Total	69.44	71.41	33.19	34.32	39.26	31.80	29.31	29.01	28.56	27.95
	Northeast	107.71	172.82	81.39	81.17	180.17	73.07	56.14	73.02	63.30	71.11
Self-pay/no charge	Midwest	234.30	244.13	75.36	65.89	73.30	93.40	83.67	70.87	80.06	77.55
	South	72.64	74.15	41.07	46.65	40.87	39.76	32.60	36.06	34.04	35.33
	West	112.66	103.50	76.52	74.50	60.24	65.30	65.05	59.17	59.77	46.20
	Total	150.01	124.04	85.03	83.17	91.12	105.63	94.93	113.92	100.37	97.12
	Northeast	412.34	221.32	237.13	267.10	219.25	307.46	315.15	277.71	292.43	294.82
Medicare (not shown)	Midwest	225.29	177.68	153.02	161.52	182.59	219.56	209.47	181.14	161.75	184.07
	South	166.46	229.30	132.41	128.49	154.99	148.90	121.50	151.66	130.69	122.73
	West	223.45	245.23	159.63	146.51	146.99	193.09	158.42	190.82	174.78	199.28

Standard Errors for Exhibit 4.5

Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	59.00	36.24	27.75	29.09	22.96	25.14	28.17	32.44	27.60	30.63
	Northeast	83.43	109.12	53.90	87.68	90.83	82.06	65.91	44.93	36.82	42.52
Other (not shown)	Midwest	177.97	115.12	85.18	65.96	59.92	70.51	93.01	115.47	89.17	99.73
	South	48.92	30.63	40.34	37.62	30.23	36.92	30.30	33.76	33.55	34.57
	West	65.67	53.77	33.49	68.61	41.94	35.90	31.98	37.46	27.48	26.47

Key: SUD=Substance Use Disorder

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 4.6

Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	28.22	27.16	13.19	13.50	13.46	13.16	13.43	13.56	13.64	13.37
Total	Quartile 1 (lowest)	106.68	95.28	69.08	66.30	66.74	59.83	53.52	51.99	58.95	60.67
Total	Quartiles 2 and 3	50.38	51.71	21.98	22.79	22.77	21.83	22.30	22.22	22.82	21.74
	Quartile 4 (highest)	29.06	24.07	12.89	13.09	13.16	13.27	12.72	13.44	13.37	13.03
	Total	47.10	52.00	23.18	23.64	23.80	23.34	23.88	23.50	24.34	24.36
Medicaid	Quartile 1 (lowest)	146.64	131.25	93.27	83.27	86.03	76.52	80.63	77.51	77.65	74.27
	Quartiles 2 and 3	83.01	95.85	38.34	40.00	40.10	38.47	39.98	38.48	40.52	36.34
	Quartile 4 (highest)	53.53	54.10	25.78	26.37	26.86	27.60	26.52	27.05	27.56	28.39
	Total	15.27	12.78	6.82	7.17	6.74	6.67	6.58	6.48	6.25	5.93
Private	Quartile 1 (lowest)	44.44	38.41	32.17	38.54	38.73	41.75	30.31	27.58	33.95	39.12
Filvale	Quartiles 2 and 3	31.43	24.44	11.68	12.72	11.41	11.61	11.45	11.54	11.37	10.64
	Quartile 4 (highest)	14.25	12.72	7.27	7.25	7.04	6.58	6.27	6.47	6.14	5.91

Standard Errors for Exhibit 4.6

Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	69.44	71.41	33.19	34.32	39.26	31.80	29.31	29.01	28.56	27.95
Self- pay/no	Quartile 1 (lowest)	126.82	146.79	118.59	114.94	120.75	132.41	115.42	103.84	128.89	109.83
charge	Quartiles 2 and 3	146.72	126.67	52.53	51.56	79.95	51.08	53.11	51.54	48.35	46.64
	Quartile 4 (highest)	75.14	57.92	40.18	39.05	34.57	36.51	28.01	30.09	33.60	33.70
	Total	150.01	124.04	85.03	83.17	91.12	105.63	94.93	113.92	100.37	97.12
Medicare (not	Quartile 1 (lowest)	358.20	217.01	226.97	251.81	322.19	292.79	284.20	289.35	268.19	237.71
shown)	Quartiles 2 and 3	184.16	137.22	115.91	120.63	137.93	158.23	135.04	155.09	135.71	123.58
	Quartile 4 (highest)	173.34	155.18	100.62	101.80	97.61	131.02	117.66	166.31	143.62	140.53
	Total	59.00	36.24	27.75	29.09	22.96	25.14	28.17	32.44	27.60	30.63
Other (not	Quartile 1 (lowest)	92.48	146.21	153.21	115.53	104.36	105.75	99.46	103.42	107.43	153.65
shown)	Quartiles 2 and 3	73.39	60.11	38.77	48.17	35.37	43.07	49.82	61.29	48.94	45.78
	Quartile 4 (highest)	89.92	42.60	29.82	27.35	27.53	24.27	21.22	25.73	24.59	31.50

Key: SUD=Substance Use Disorder

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 4.7

Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	28.22	27.16	13.19	13.50	13.46	13.16	13.43	13.56	13.64	13.37
Total	Quartile 1 (lowest)	65.47	42.63	26.63	26.98	22.35	23.74	23.17	24.37	24.08	23.25
Total	Quartiles 2 and 3	37.24	36.58	17.79	18.29	18.51	17.80	18.11	17.77	17.54	17.03
	Quartile 4 (highest)	41.09	40.98	17.48	18.56	21.19	21.13	21.53	22.12	23.03	23.20

Standard Errors for Exhibit 4.7
Standard errors for substance use disorder (SUD) related hospital stays per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	47.10	52.00	23.18	23.64	23.80	23.34	23.88	23.50	24.34	24.36
Medicaid	Quartile 1 (lowest)	161.30	93.76	58.80	62.60	52.87	57.78	57.13	58.41	60.19	63.19
	Quartiles 2 and 3	61.03	64.69	32.37	32.39	32.29	31.35	31.75	30.52	31.93	31.26
	Quartile 4 (highest)	49.28	60.85	25.63	27.53	31.85	31.74	33.49	33.26	34.28	34.59
	Total	15.27	12.78	6.82	7.17	6.74	6.67	6.58	6.48	6.25	5.93
Private	Quartile 1 (lowest)	28.59	23.54	14.31	14.25	11.33	11.07	10.37	10.44	10.01	9.06
Filvale	Quartiles 2 and 3	18.61	15.94	8.30	8.94	8.91	8.61	8.46	8.29	8.04	7.75
	Quartile 4 (highest)	31.00	21.65	10.91	11.52	12.16	13.25	12.20	12.54	12.06	11.62
	Total	69.44	71.41	33.19	34.32	39.26	31.80	29.31	29.01	28.56	27.95
Self- pay/no	Quartile 1 (lowest)	107.20	93.72	91.49	81.90	113.35	79.83	96.47	73.70	76.38	60.86
charge	Quartiles 2 and 3	78.58	66.12	40.61	40.96	50.85	40.56	35.22	38.33	36.13	38.30
	Quartile 4 (highest)	125.00	140.06	46.61	49.87	45.30	46.95	44.21	38.39	43.55	43.41
	Total	150.01	124.04	85.03	83.17	91.12	105.63	94.93	113.92	100.37	97.12
Medicare (not	Quartile 1 (lowest)	280.99	250.37	237.00	167.31	170.80	192.96	190.56	231.68	222.00	223.11
shown)	Quartiles 2 and 3	168.99	161.74	111.23	107.63	117.80	136.83	115.91	145.65	122.98	134.48
	Quartile 4 (highest)	309.13	178.81	101.49	116.72	162.66	181.55	157.08	172.36	153.70	135.03
	Total	59.00	36.24	27.75	29.09	22.96	25.14	28.17	32.44	27.60	30.63
Other (not	Quartile 1 (lowest)	214.88	49.41	59.68	47.28	45.37	44.34	36.97	41.97	40.94	51.65
shown)	Quartiles 2 and 3	45.90	42.80	32.12	38.99	28.90	27.72	30.92	33.39	31.49	33.42
	Quartile 4 (highest)	65.98	79.07	56.12	55.24	46.22	57.03	65.80	81.35	66.01	64.10

Key: SUD=Substance Use Disorder, SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Section 5

Standard Errors for Exhibit 5.1

Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer, 2010-2019, National

Expected payer	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	2.63	3.39	1.44	1.48	1.46	1.53	1.44	1.44	1.56	1.69
Medicaid	2.74	4.24	1.93	2.16	2.11	2.36	2.11	1.98	2.12	2.32
Private	3.57	3.87	1.86	1.78	1.71	1.83	1.54	1.71	1.79	1.89
Self-pay/no charge	9.54	7.59	5.99	6.02	5.70	7.70	5.97	5.82	6.54	6.27

Key: SMM=Severe Maternal Morbidity

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 5.2 Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	2.63	3.39	1.44	1.48	1.46	1.53	1.44	1.44	1.56	1.69
	12-19	3.59	4.15	3.27	3.60	3.98	4.86	4.04	4.37	4.56	5.37
Total	20-24	3.09	3.14	2.10	2.21	2.09	2.44	2.19	2.24	2.27	2.42
	25-34	2.69	3.51	1.65	1.67	1.68	1.75	1.61	1.66	1.72	1.89
	35-55	4.84	6.29	3.58	3.55	3.33	3.70	3.26	3.25	3.39	3.54
	Total	2.74	4.24	1.93	2.16	2.11	2.36	2.11	1.98	2.12	2.32
	12-19	3.71	4.84	3.98	4.33	4.56	5.77	4.60	5.09	5.31	6.20
Medicaid	20-24	3.13	3.67	2.67	2.81	2.61	3.16	2.80	2.83	2.85	2.96
	25-34	3.28	5.29	2.60	2.67	2.78	3.13	2.62	2.60	2.64	3.04
	35-55	7.67	8.20	6.65	6.45	6.60	7.36	6.21	6.29	6.63	6.52
	Total	3.57	3.87	1.86	1.78	1.71	1.83	1.54	1.71	1.79	1.89
	12-19	7.56	6.35	6.63	7.18	8.41	9.22	8.23	9.29	10.21	11.79
Private	20-24	4.93	3.94	3.48	3.51	3.42	3.89	3.36	3.64	3.58	3.92
	25-34	3.42	3.69	1.97	1.96	1.86	1.99	1.68	1.91	1.93	2.05
	35-55	5.78	7.32	4.26	4.31	3.82	4.33	3.63	3.67	3.74	3.93

Standard Errors for Exhibit 5.2 Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and age group, 2010-2019, National

Expected payer	Age group, years	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	9.54	7.59	5.99	6.02	5.70	7.70	5.97	5.82	6.54	6.27
Self-pay/no	12-19	16.90	21.99	13.35	20.87	20.76	39.72	31.80	21.83	38.89	28.00
charge	20-24	14.44	11.71	12.21	12.54	14.07	15.08	13.28	10.69	11.25	13.17
	25-34	8.36	9.43	7.60	7.38	6.72	9.27	7.47	7.45	7.59	7.34
	35-55	25.67	20.18	19.73	18.21	15.80	21.37	15.81	14.37	17.02	16.06
	Total	21.48	26.49	17.66	21.08	22.09	25.10	22.34	22.97	23.39	22.14
	12-19	28.58	39.30	0.00	57.42	81.35	0.00	55.20	169.00	78.10	0.00
Medicare (not shown)	20-24	42.27	36.78	34.50	28.44	39.09	50.53	37.18	46.78	33.05	44.18
	25-34	30.47	29.02	23.43	27.92	27.99	26.64	27.11	28.29	28.34	28.69
	35-55	47.17	47.94	48.27	48.15	54.11	65.51	45.33	49.11	50.11	48.50
	Total	6.20	7.79	6.39	6.21	5.60	6.55	6.05	6.77	6.79	6.45
	12-19	20.72	24.83	18.02	23.66	23.11	19.12	24.90	40.40	23.85	35.92
Other (not shown)	20-24	10.29	11.14	9.88	8.10	11.80	13.53	14.43	11.24	13.05	13.22
	25-34	8.62	8.63	8.62	8.79	6.77	7.66	6.59	7.97	8.29	7.32
	35-55	18.84	16.60	19.43	19.54	17.56	22.74	15.89	20.82	20.84	18.66

Key: SMM=Severe Maternal Morbidity

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 5.3 Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	1.56	1.69
	API NH	5.27	5.44
Total	Black NH	4.09	4.22
Total	Hispanic	2.80	3.06
	White NH	1.66	1.65
	Other NH	5.19	5.78

Standard Errors for Exhibit 5.3
Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and race/ethnicity, 2018-2019, National

Expected payer	Race/Ethnicity	2018	2019
	Total	2.12	2.32
	API NH	10.78	10.17
Medicaid	Black NH	4.76	4.99
Wedicald	Hispanic	3.39	3.63
	White NH	2.91	2.81
	Other NH	6.89	8.66
	Total	1.79	1.89
	API NH	5.85	6.53
Private	Black NH	6.03	6.47
Filvate	Hispanic	4.33	4.96
	White NH	1.89	1.85
	Other NH	7.09	7.48
	Total	6.54	6.27
	API NH	17.67	15.17
Self-pay/no charge	Black NH	22.99	21.21
	Hispanic	12.32	9.99
	White NH	10.40	11.00
	Other NH	26.56	22.27
	Total	23.39	22.14
	API NH	148.48	75.87
	Black NH	58.84	48.16
Medicare (not shown)	Hispanic	51.36	44.55
	White NH	21.82	25.32
	Other NH	55.57	104.53
	Total	6.79	6.45
	API NH	37.73	32.43
Other (not shown)	Black NH	26.54	23.87
	Hispanic	14.94	19.93
	White NH	7.42	6.82
	Other NH	28.32	24.24

Key: SMM=Severe Maternal Morbidity, API=Asian/Pacific Islander, NH=Non-Hispanic **Source:** Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2018-2019

Standard Errors for Exhibit 5.4
Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and patient location, 2013-2019, National

Expected payer	Patient Location	2013	2014	2015	2016	2017	2018	2019
	Total	1.48	1.46	1.53	1.44	1.44	1.56	1.69
Total	Large metro	2.06	2.05	2.15	1.96	2.00	2.17	2.40
Total	Medium/small metro	2.54	2.32	2.45	2.29	2.26	2.27	2.42
	Non-metro	3.32	3.19	3.38	2.92	2.98	3.01	3.21
	Total	2.16	2.11	2.36	2.11	1.98	2.12	2.32
Medicaid	Large metro	3.19	3.18	3.52	3.00	2.80	2.85	3.41
Wedicald	Medium/small metro	3.20	3.09	3.45	3.33	3.17	3.46	3.36
	Non-metro	4.45	4.41	4.58	4.49	4.37	4.30	4.50
	Total	1.78	1.71	1.83	1.54	1.71	1.79	1.89
Private	Large metro	2.36	2.27	2.41	2.08	2.39	2.51	2.65
1 Hvale	Medium/small metro	3.24	3.03	3.33	2.63	2.62	2.49	2.76
	Non-metro	4.33	3.80	4.43	3.43	3.63	3.81	3.99
	Total	6.02	5.70	7.70	5.97	5.82	6.54	6.27
Self-pay/no charge	Large metro	8.03	7.11	9.92	7.67	7.17	8.97	7.44
	Medium/small metro	10.81	11.46	16.13	12.19	13.57	13.43	15.20
	Non-metro	16.51	17.98	24.40	19.52	17.47	15.21	18.22
	Total	21.08	22.09	25.10	22.34	22.97	23.39	22.14
Medicare (not shown)	Large metro	29.38	32.37	34.55	38.52	27.40	37.07	36.42
Medicare (not snown)	Medium/small metro	40.50	39.36	48.07	26.66	47.84	27.02	31.02
	Non-metro	45.67	51.00	44.71	44.60	52.96	51.11	45.19
	Total	6.21	5.60	6.55	6.05	6.77	6.79	6.45
Other (not shown)	Large metro	9.54	8.10	10.37	8.87	10.63	10.50	10.08
Outer (Hot SHOWII)	Medium/small metro	9.62	8.84	8.95	10.14	10.02	10.64	9.82
	Non-metro	14.47	13.49	19.14	11.19	15.57	12.70	11.29

Key: SMM=Severe Maternal Morbidity

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2013-2019

Standard Errors for Exhibit 5.5
Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	2.63	3.39	1.44	1.48	1.46	1.53	1.44	1.44	1.56	1.69
	Northeast	3.66	10.47	3.75	3.80	3.99	4.07	3.36	3.44	4.31	4.11
Total	Midwest	4.93	9.52	3.05	3.13	3.08	3.33	3.07	2.82	2.95	3.57
	South	5.63	4.74	2.36	2.51	2.21	2.39	2.32	2.35	2.37	2.48
	West	3.64	4.72	2.83	2.81	3.11	3.14	3.12	3.17	3.52	4.07
	Total	2.74	4.24	1.93	2.16	2.11	2.36	2.11	1.98	2.12	2.32
	Northeast	5.93	8.40	5.18	5.09	6.18	6.96	4.76	4.91	6.02	5.52
Medicaid	Midwest	5.80	10.44	4.45	4.59	4.64	4.87	4.54	3.99	5.00	5.01
	South	4.76	7.50	2.83	3.30	2.85	3.46	3.42	3.24	3.09	3.36
	West	4.52	6.13	4.13	4.88	4.88	5.11	4.45	4.07	4.31	5.74
	Total	3.57	3.87	1.86	1.78	1.71	1.83	1.54	1.71	1.79	1.89
	Northeast	4.42	13.08	4.84	4.74	4.55	4.42	3.91	4.21	4.88	4.62
Private	Midwest	5.34	10.85	3.68	3.47	3.30	4.01	3.34	3.14	3.11	3.72
	South	9.23	3.82	3.18	3.13	2.67	2.98	2.32	2.52	2.59	2.68
	West	4.25	4.39	3.61	3.21	3.71	3.64	3.29	4.27	4.41	4.63
	Total	9.54	7.59	5.99	6.02	5.70	7.70	5.97	5.82	6.54	6.27
	Northeast	16.54	13.14	14.56	20.99	18.25	19.90	15.86	18.30	17.60	16.74
Self-pay/no charge	Midwest	14.41	14.06	14.11	14.24	12.83	20.26	16.70	11.65	19.52	15.57
	South	17.97	11.90	7.95	9.55	8.33	12.18	9.01	8.75	9.04	9.29
	West	10.17	15.35	14.75	9.32	11.25	12.35	10.24	11.60	12.90	12.56
	Total	21.48	26.49	17.66	21.08	22.09	25.10	22.34	22.97	23.39	22.14
	Northeast	30.07	38.20	39.04	39.70	36.56	52.44	46.55	35.26	44.82	40.79
Medicare (not shown)	Midwest	29.20	49.97	26.96	37.38	40.17	51.45	47.97	63.80	60.30	55.59
	South	55.88	49.27	30.57	40.39	46.30	36.92	29.02	33.23	33.36	27.32
	West	62.38	37.50	54.73	46.51	39.24	75.57	80.55	64.05	64.11	87.36

Standard Errors for Exhibit 5.5

Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and hospital region, 2010-2019, National

Expected payer	Hospital Region	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	6.20	7.79	6.39	6.21	5.60	6.55	6.05	6.77	6.79	6.45
	Northeast	21.73	21.01	19.52	18.45	17.53	13.45	12.43	21.25	19.08	16.41
Other (not shown)	Midwest	10.88	12.55	12.14	11.74	12.85	14.29	14.27	14.16	14.63	14.06
	South	9.11	13.45	10.20	10.57	8.82	8.61	9.58	10.23	10.13	9.00
	West	13.07	14.18	12.96	10.74	9.50	17.41	11.03	13.96	14.58	15.23

Key: SMM=Severe Maternal Morbidity

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 5.6

Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	2.63	3.39	1.44	1.48	1.46	1.53	1.44	1.44	1.56	1.69
Total	Quartile 1 (lowest)	7.86	10.49	5.56	5.10	7.36	7.01	4.92	5.47	5.57	5.65
Total	Quartiles 2 and 3	6.15	5.47	2.45	2.41	2.18	2.32	2.13	2.03	2.04	2.32
	Quartile 4 (highest)	2.20	3.98	1.67	1.82	1.82	1.94	1.87	1.94	2.11	2.31
	Total	2.74	4.24	1.93	2.16	2.11	2.36	2.11	1.98	2.12	2.32
Medicaid	Quartile 1 (lowest)	9.53	11.56	6.76	6.14	8.90	9.37	6.13	6.70	6.83	7.04
	Quartiles 2 and 3	4.98	7.00	2.83	3.06	2.79	3.24	3.05	2.80	2.84	3.09
	Quartile 4 (highest)	2.81	4.41	2.63	3.11	3.09	3.33	2.91	2.78	2.99	3.50
	Total	3.57	3.87	1.86	1.78	1.71	1.83	1.54	1.71	1.79	1.89
Private	Quartile 1 (lowest)	9.55	9.80	7.38	7.69	8.06	6.91	6.87	6.11	7.20	7.35
	Quartiles 2 and 3	10.00	6.42	3.54	3.07	2.83	3.04	2.24	2.41	2.36	2.85
	Quartile 4 (highest)	2.74	4.58	2.03	2.12	2.11	2.33	2.04	2.34	2.43	2.45

Standard Errors for Exhibit 5.6

Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level income, 2010-2019, National

Expected payer	Community-level income	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Total	9.54	7.59	5.99	6.02	5.70	7.70	5.97	5.82	6.54	6.27
Self- pay/no	Quartile 1 (lowest)	24.53	33.23	32.68	32.10	26.59	42.61	26.65	20.62	26.06	24.58
charge	Quartiles 2 and 3	21.75	11.33	9.47	9.93	9.67	13.10	9.66	9.31	11.62	11.92
	Quartile 4 (highest)	10.26	9.13	8.21	7.80	7.52	9.23	8.51	8.38	8.69	7.94
	Total	21.48	26.49	17.66	21.08	22.09	25.10	22.34	22.97	23.39	22.14
Medicare (not	Quartile 1 (lowest)	62.20	75.11	53.39	56.35	66.43	99.83	58.77	95.08	54.94	59.90
shown)	Quartiles 2 and 3	29.07	45.25	28.24	32.80	34.98	28.65	28.50	31.57	33.61	32.27
	Quartile 4 (highest)	35.76	25.60	24.51	28.91	31.37	41.22	35.53	33.17	34.39	33.31
	Total	6.20	7.79	6.39	6.21	5.60	6.55	6.05	6.77	6.79	6.45
Other (not	Quartile 1 (lowest)	35.13	17.93	23.51	28.01	24.12	32.68	16.14	33.25	22.43	21.03
shown)	Quartiles 2 and 3	10.77	8.13	9.74	9.48	8.78	8.59	10.58	10.55	9.96	9.17
	Quartile 4 (highest)	7.66	12.35	8.66	8.34	7.38	9.95	6.99	8.86	9.32	9.33

Key: SMM=Severe Maternal Morbidity

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

Note: A break in the trend line is shown to account for the transition from ICD-9-CM to ICD-10-CM/PCS in October 2015 which may have impacted the observed trends.

Standard Errors for Exhibit 5.7

Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total	Total	2.63	3.39	1.44	1.48	1.46	1.53	1.44	1.44	1.56	1.69
	Quartile 1 (lowest)	3.78	4.66	3.13	3.18	2.76	3.06	2.65	2.73	2.98	2.99
	Quartiles 2 and 3	3.65	4.54	1.93	1.94	1.73	1.82	1.77	1.72	1.93	2.12
	Quartile 4 (highest)	4.20	5.11	2.41	2.58	3.44	3.38	2.87	3.04	2.85	3.31

Standard Errors for Exhibit 5.7
Standard errors for severe maternal morbidity (SMM) per 10,000 delivery stays, by primary expected payer and community-level social vulnerability index (SVI), 2010-2019, National

Expected payer	Community-level SVI	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Medicaid	Total	2.74	4.24	1.93	2.16	2.11	2.36	2.11	1.98	2.12	2.32
	Quartile 1 (lowest)	6.09	7.61	4.92	6.15	5.21	6.24	5.66	4.97	5.24	5.67
	Quartiles 2 and 3	3.18	4.16	2.54	2.70	2.35	2.69	2.51	2.52	2.76	2.97
	Quartile 4 (highest)	5.26	7.56	3.15	3.65	4.58	4.82	3.93	3.53	3.45	4.24
	Total	3.57	3.87	1.86	1.78	1.71	1.83	1.54	1.71	1.79	1.89
Private	Quartile 1 (lowest)	4.99	4.74	3.94	3.57	3.25	3.65	2.86	3.10	3.19	3.29
Filvale	Quartiles 2 and 3	4.94	5.89	2.37	2.36	2.13	2.39	2.04	2.00	2.24	2.34
	Quartile 4 (highest)	4.57	3.41	3.60	3.28	4.14	3.67	3.24	4.60	3.71	4.43
	Total	9.54	7.59	5.99	6.02	5.70	7.70	5.97	5.82	6.54	6.27
Self- pay/no	Quartile 1 (lowest)	19.68	14.97	24.44	21.24	17.42	20.66	17.90	14.48	16.87	17.46
charge	Quartiles 2 and 3	17.76	8.00	8.14	8.79	8.12	10.46	8.54	8.84	8.36	8.48
	Quartile 4 (highest)	9.40	14.35	10.32	9.35	9.30	14.74	10.33	8.39	13.73	10.47
	Total	21.48	26.49	17.66	21.08	22.09	25.10	22.34	22.97	23.39	22.14
Medicare	Quartile 1 (lowest)	28.13	46.75	43.71	46.02	35.18	58.53	42.47	38.72	50.37	40.50
(not shown)	Quartiles 2 and 3	39.51	29.15	24.81	25.15	30.14	32.88	29.40	29.75	30.79	29.37
	Quartile 4 (highest)	48.47	45.55	29.65	44.86	46.02	49.45	39.08	48.34	45.83	42.06
	Total	6.20	7.79	6.39	6.21	5.60	6.55	6.05	6.77	6.79	6.45
Other (not	Quartile 1 (lowest)	10.92	9.90	10.91	14.77	11.13	14.93	13.10	12.16	13.19	11.76
shown)	Quartiles 2 and 3	8.93	12.29	8.87	8.28	7.35	8.84	6.73	8.77	9.63	8.84
	Quartile 4 (highest)	12.64	12.25	11.35	11.97	11.99	13.00	13.60	14.46	12.93	12.81

Key: SMM=Severe Maternal Morbidity, SVI=Social Vulnerability Index

Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), National Inpatient Sample (NIS), 2010-2019

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