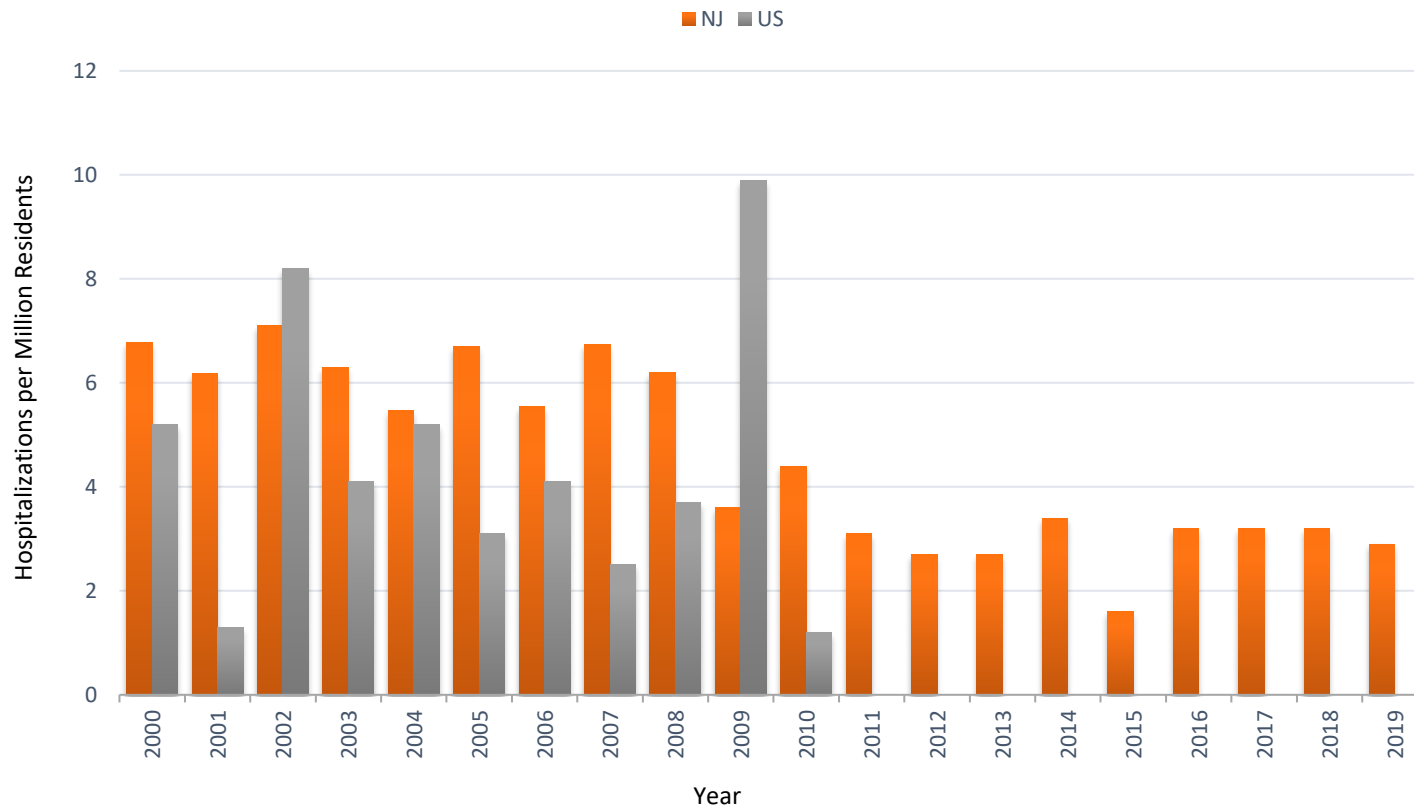


OHI #9: Hospitalizations from or with Pneumoconiosis

Annual Age-Standardized, Rate* of Inpatient Hospitalizations from Silicosis, New Jersey and United States, 2000-2019



*Age-Standardized rate per million residents

Estimated Annual Number and Age-Standardized Rate* of Inpatient Hospitalizations from Silicosis, New Jersey and United States, 2000-2019

Year	Number		Rate*	
	NJ	US	NJ	US
2000	47	1128	6.8	5.2
2001	43	289	6.2	1.3
2002	49	1792	7.1	8.2
2003	45	892	6.3	4.1
2004	40	1132	5.5	5.2
2005	46	754	6.7	3.1
2006	40	1033	5.5	4.1
2007	48	630	6.7	2.5
2008	43	875	6.2	3.7
2009	26	2,348	3.6	9.9
2010	34	249	4.4	1.2
2011	24	N/A	3.1	N/A
2012	23	N/A	2.7	N/A
2013	23	N/A	2.7	N/A
2014	28	N/A	3.4	N/A
2015	15	N/A	1.6	N/A
2016	26	N/A	3.2	N/A
2017	28	N/A	3.2	N/A
2018	26	N/A	3.2	N/A
2019	24	N/A	2.9	N/A

*Age-standardized rate per million residents

N/A: not available

Data Source: NJ Department of Health inpatient hospital discharge data; US Census Bureau, State Population Estimates [<https://data.census.gov/cedsci/advanced>]; US 2000 Standard Population [<https://www.cdc.gov/nchs/data/statnt/statnt20.pdf>]

Technical Notes:

- Includes non-federal, acute care hospitals only.
- Primary expected payer must be workers' compensation.
 - Self-employed individuals such as farmers and independent contractors, federal employees, railroad or longshore and maritime workers may not be covered by state workers' compensation systems.
- Estimates for all states, except Texas, include employed persons age 16 years and older.
- Hospitalizations from or with pneumoconiosis are identified by a principle or contributing diagnosis of the following: ICD-10-CM codes J60–J66 (All pneumoconiosis); ICD-10-CM code J60 (Coal workers' pneumoconiosis); ICD-10-CM code J61 (Asbestosis); ICD-10-CM code J62 (Silicosis); ICD-10-CM codes J63–J66 (Other or unspecified pneumoconiosis)
- Excludes patients with unknown age, out-of-state residents and unknown residence, and out-of-state inpatient hospitalizations.
- Cells with less than 5 hospitalizations may be too small to produce reliable estimates or may violate confidentiality requirements.
- Age-standardized rates reported in Table 9b and Figure 9 are based on the 2000 U.S. Standard Population and the Census Bureau's State Population Estimates. Rates are expressed as hospitalizations per one million residents.
 - Rates not calculated for cells with <5 hospitalizations and for Washington where hospitalizations were <10.

Limitations:

- State hospital discharge data are subject to a number of limitations:
 - Workers hospitalized for injuries in a given state, but who reside in a different state, will not be included in the case count for this indicator.
 - Practice patterns and payment mechanisms may impact decisions by health care providers to hospitalize patients, correctly diagnose work-related conditions, and/or list conditions as a discharge diagnosis.
 - Many individuals with work-related illnesses or injuries do not file for workers' compensation or fail to recognize work as the cause of their illness or injury.
 - Attribution of primary payer in hospital discharge data may not be accurate.
 - All hospital admissions are counted, including multiple admissions for a single individual.
- Data between states may not be comparable due to differences in states' workers' compensation programs. Pneumoconiosis are typically chronic diseases of long latency (pre-clinical period). Furthermore, current incidence is not necessarily indicative of current exposure. Therefore, it may be many years before reductions in occupational exposures affect hospitalizations.