

Health Services Advisory Group (HSAG) Hospital Quality Improvement Contract (HQIC) Hospital Readmissions and Care Transitions

1. Introduction

1. Definition of a Readmission

- A readmission is an unplanned inpatient admission to the hospital within 30 days of the initial hospital discharge date.
- The readmission rate is measured and tracked by Medicare.





1. Definition of a Readmission (cont.)

- **High utilizers** (4 admissions in 1 year, or 6 emergency department visits within 1 year)
 - Account for a larger proportion of readmission visits
 - Often require more social services interventions than a typical diagnosis-driven readmission





2. Context in the U.S./Incidence

- Readmissions are costly, disruptive for patients and family members, and very often are preventable.
- In addition to concerns regarding quality, readmissions are also very costly for the healthcare system and for patients.



2. Context in the U.S./Incidence (cont.)

- Hospitals are now financially penalized by Medicare through the Readmissions Reduction Program for higher-than-expected readmission rates
- According to the Centers for Medicare & Medicaid Services (CMS) data, the Hospital Readmissions Reduction Program (HRRP)
 - Reduced reimbursement for 2,599 hospitals for fiscal year (FY) 2019, totaling \$566 million
 - An approximately \$2 million increase over FY 2018 penalties



3. Factors

- Unplanned readmissions have been associated with ineffective discharge processes including:
 - Discharge planning
 - Medication reconciliation
 - Failed handoffs to post-acute care providers
 - Insufficient patient education







Thank you!