

Readmissions NEWS

Home Health Care as a Vehicle for Reducing Avoidable Hospital Readmissions

by Excel Health Group

All healthcare providers, in recent years, have dealt with seismic shifts in the way they are paid for the care provided to patients. Especially if the Medicare program is involved. Pay for performance, in one form or another, has become a fact of life. The performance and quality initiatives that impact hospitals including the Hospital Readmissions Reduction Program (HRRP) have the potential to increase payment rates by as much as 3.5% or lower them by as much as 6%. For hospitals, most of which are already grappling with negative Medicare margins that could fall as low as -10% in 2018, the reimbursement swings can have a significant negative impact. To say the least, the financial balancing act has its challenges.

Readmissions The problems with hospital discharges have been extensively reported. We know that about 19% of Medicare patients discharged from an inpatient stay are readmitted at least once within 30 days. The cost of avoidable Medicare readmissions has been estimated at upwards of \$17 Billion a year. Currently, performance under HRRP is measured by same cause readmissions for about 180 primary diagnosis codes that indicate COPD, Heart Failure, Pneumonia, Stroke, or Acute Myocardial Infarction, as well as surgical procedures for CABG and elective knee or hip replacement. In its 2018 report to Congress, MedPAC reiterated its suggestion that the policy be expanded to cover all conditions rather than only the handful that are now included, and that the penalty formula be “fixed” to equate the financial consequence for each excess readmission to an amount approximating its cost.

As more and more baby boomers join the ranks of Medicare beneficiaries, the readmission problem is destined to get bigger. When increasing numbers of elderly patients are hospitalized, the pressure on the efficiency of hospital discharge planning and follow up processes will most certainly mount.

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Understanding All-Payer Readmissions at North Carolina Acute Care Hospitals

by Trish Vandersea

Recently, the North Carolina Healthcare Association analyzed all-cause, all-payer readmissions data for 110 acute care hospitals in North Carolina. The purpose of the analysis was to better understand what challenges these hospitals face when addressing readmissions. The analysis included all adult, non-OB patients living in North Carolina discharged between January 1, 2016 and December 31, 2016.

Question 1: How do readmission rates compare by payer for NC hospitals?

The overall readmissions rate among the 110 hospitals in this analysis was 15.0%. Looking at rates by payer, the Medicaid readmission rate was highest (19.3%) followed by Medicare (16.5%).

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