

Federal, State and Regional Data Collection on Readmissions



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CMS Readmissions Program



- 2008 - CMS selected 30-day hospital readmission rates as a measure to be included under its existing Reporting Hospital Quality Data for Annual Payment Update (RHQDAPU) program.
- July 2009 - CMS posted 30-day hospital readmission rates for heart failure, acute myocardial infarction, and pneumonia for the first time on their Hospital Compare website.



CMS Readmissions Program



- Hospital Compare Readmission Data
 - Readmission percentages are calculated from Medicare data on patients discharged between 1/1/05 and 6/30/08
 - Readmissions could be for the same or a different condition
 - Readmissions could be to the same facility or to a different hospital
 - 3 categories for comparison: better than, worse than or no different from the national rate



CMS Readmissions Program



- **National 30-Day Readmission Rates**
 - For heart attack patients the rate of readmission is 19.9%
 - For heart failure patients the rate of readmission is 24.5%
 - For pneumonia patients the rate of readmission is 18.2%



CMS Readmissions Program



- April 2009 CMS Institutes a Readmission Pilot Program.
- Care Transitions Project will examine hospital readmission incidences on a local level to develop tailored solutions for preventing readmissions.
- Project will take place in 14 communities.
- Project will continue through the summer of 2011.



Federal Health Reform and Readmissions



- For FFY 2013, CMS will reduce Medicare inpatient payments for all Medicare discharges for hospitals with higher than expected readmission rates.
- Hospital performance will be based on 30-day readmission rates for heart attack, heart failure, and pneumonia.
- Highest percentage decrease in payments for FFY 2013 is 1 percent.



Federal Health Reform and Readmissions



- As of FY 2015, the Secretary of HHS is able to expand the list of conditions to include:
 - chronic obstructive pulmonary disorder
 - cardiac procedures
 - vascular surgical procedures
- Secretary is directed to seek endorsement from the National Quality Forum for all measures used to assess readmissions performance.



Federal Health Reform and Readmissions



- Decrease in Medicare inpatient payments for FFY 2014 will not exceed 2 percent.
- Decrease in Medicare inpatient payments for FFY 2015 and beyond will not exceed 3 percent.
- Nationally this reduction in payments for readmissions is projected to produce \$7.1 billion in savings over 10 years.
- For PA, the projected reductions in Medicare payments is \$383 million over 10 years.



Federal Health Reform and Readmissions



- Hospitals will be required to submit all payer claims level data regarding readmissions but there is no timeline established for this reporting.
- Acute inpatient, cancer, children's, rehabilitation, long-term care, and psychiatric inpatient facilities are required to report.
- The Secretary is directed to calculate and report all-payer readmission rates for the conditions selected for the readmissions financial penalties program, based on all-payer data submitted by hospitals.



Federal Health Reform and Readmissions



- January 2011 - Community Care Transitions Program will be funded at \$500 million over 5 years for hospitals to implement care transitions using evidence-based interventions for targeted high-risk beneficiaries.
- March 2012 - The Secretary is mandated to establish a quality improvement initiative for hospitals with high severity-adjusted readmission rates.
- Patient Safety Organizations will work with hospitals to organize improvement programs to reduce readmission rates.



PA Reporting of Hospital Readmissions



- The PA Health Care Cost Containment Council (PHC4) Report of Readmissions for 2008 includes 21 categories of readmissions for any reason.
- The report covers inpatient hospital discharges during Federal Fiscal Year 2008.
- There were 57,852 readmissions amounting to \$2.5 billion in charges.
- There were 22,094 readmissions for complication or infection in 2008 amounting to \$1.1 billion in charges.



PA Reporting of Hospital Readmissions



- PHC4 Definition of a Readmission: includes an acute care hospitalization in a PA hospital where the admit date is within 30 days of the discharge date of the original hospitalization.
- Risk-adjusted readmission ratings is a comparison of the # of patients one could expect to be readmitted for a given condition with the actual # of readmissions.



PA Reporting of Hospital Readmissions



- According to the 2009 PHC4 Hospital Performance Report, the overall PA hospital readmission rates have been very stable over the past five years, 19.0% in 2004 and 19.1% in 2008.
- Readmission rates for complications and infections are generally higher in the report for FFY 2008 due to PHC4's inclusion of additional diagnosis codes used to define readmission for complication or infection.



PA Reporting of Hospital Readmissions



- Eight of the conditions had readmission rates that exceeded the overall rate of 18.9%:
 - Respiratory Failure with Mechanical Ventilation
 - Congestive Heart Failure
 - Respiratory Failure without Mechanical Ventilation
 - Pneumonia-Aspiration
 - Kidney Failure-Acute
 - Chronic Obstructive Pulmonary Disease
 - Diabetes with Amputation
 - Diabetes-Medical Management



SEPA Hospital Readmissions for Selected Conditions



		Total Cases	Total Readmits	Actual Readmit Rate	Expected Readmit Rate
CHF	All Readmits	18,055	5,329	29.5	27.1
	Complications/Infections	18,055	1,323	7.3	7.6
Pneumonia	All Readmits	13,223	2,289	17.3	16.7
	Complications/Infections	13,223	1,022	7.7	8
COPD	All Readmits	11,208	2,763	24.7	23
	Complications/Infections	11,208	702	6.3	6.9

DVHC Data Collection



- DVHC has collected monthly utilization data for hospitals in the Delaware Valley since the early 1970's.
- The data collected and reported across clinical service areas includes:
 - # of admissions
 - emergency department visits
 - average length of stay
 - census by service type and staffed beds



DVHC Data Collection



- DVHC converted the manual reporting system to an electronic system in 2009.
- Hospitals can obtain reports and graphs of the data by hospital type: Community and Teaching; Academic Medical Centers; Acute Care, Psychiatric and Rehabilitation Facilities.
- Hospitals use the data for strategic planning purposes.
- DVHC has used the data for various advocacy initiatives over the years.



DVHC Data Collection



- In May of 2010, DVHC expanded its reporting capabilities to include the following data:
 - Readmission rates
 - Observations days
 - Short procedure unit visits
 - Psychiatric crisis evaluations
- The data collection will be retroactive to dates of service beginning January 1, 2010.



DVHC Readmission Data Collection



DVHC Readmissions Data Collection

- As part of monthly DVHC utilization reporting, hospitals will submit the number of readmissions that occurred that month.
- A readmission is defined as any time a patient is admitted to a hospital within 30 days of the previous admission to that same hospital.
- A hospital's monthly readmission rate will be calculated as:

$$\frac{\text{Number of readmissions reported for the month}}{\text{Number of admissions reported for the month}}$$

- Readmissions are included in both the numerator and denominator.



DVHC Readmission Data Collection



- There is at least a 60-day lag time for DVHC data collection.
- Hospital staff can review reports of monthly data as long as the data for their hospital has been entered for that particular month.
- Hospitals will be able to see readmission trends in aggregate over time.
- DVHC and HCIF will be able to compare hospitals performance regarding readmissions based on the data collected.





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