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NEW PHC4 REPORT SHOWS PROGRESS ON HOSPITAL READMISSIONS

HARRISBURG—June 17, 2015 The Pennsylvania Health Care Cost Containment Council (PHC4) has released a new report on hospital readmission rates. Focusing on four conditions, the report examines repeat hospitalizations for the same condition in an effort to identify readmissions that might be prevented.

“The report shows a significant decline in readmission rates for the same condition since 2008 for COPD and since 2010 for CHF,” said Joe Martin, PHC4’s executive director. That rates are dropping in these two chronic illness categories is a very positive sign as preventable readmissions are a significant cost driver.”

Examining hospital discharges from January 1, 2013 through August 31, 2014, the report presents hospital-specific data, including 30-day readmission ratings for the same condition and the average hospital charges of these readmissions. Conditions examined include abnormal heartbeat, chronic obstructive pulmonary disease (COPD), congestive heart failure (CHF), and diabetes – medical management. The report also includes county-level rates and statewide data on Medicare and Medicaid payments.

Shedding some light on the impact these readmissions have on health care resources, the report notes that, for these four conditions alone, there were 13,525 readmissions for the same condition within 30 days, amounting to nearly 61,000 hospital days.

From a financial perspective, PHC4 examined payment data from the two-year period 2011-2012 (the most recent payment data available for this study). Results showed readmissions for the same condition amounted to over \$62 million for Medicare fee-for-service and nearly \$22 million for Medicaid (fee-for-service and managed care) for that period. For patients not covered by one of these payer types, the report estimates another \$77 million in payments during 2011-2012.

Looking at other statewide trends over time, there were no significant changes in the rates of readmission for the same condition for abnormal heartbeat or diabetes – medical management. Regionally, there was a significant decline in these readmission rates for COPD in Western PA since 2008, and declines in each region (Western PA, Central & Northeastern PA and Southeastern PA) since 2010 for CHF. Central & Northeastern PA saw a significant increase in these readmission rates since 2008 for diabetes – medical management.

“This report points out the value of continued transparency of health care outcomes,” added Martin. “Ongoing examination of trends across time and the resources spent on these types of readmissions will be an important strategy going forward.”

Other findings from the report include:

- Of the four conditions studied, abnormal heartbeat had the lowest readmission rate; 3.6% of patients hospitalized for abnormal heartbeat were readmitted to a Pennsylvania hospital within 30 days for that same condition.
- Diabetes – medical management had the highest rate of readmission for the same condition at 8.4%.
- 7.7% of patients hospitalized for chronic obstructive pulmonary disease (COPD) were readmitted for this condition within 30 days. The rate for congestive heart failure (CHF) was also 7.7%.
- County-level rates of readmission for the same condition ranged from:
 - 0.0% to 6.9% for abnormal heartbeat (statewide rate was 3.6%).
 - 0.0% to 15.3% for COPD (statewide rate was 7.7%).
 - 0.0% to 11.8% for CHF (statewide rate was 7.7%).
 - 0.0% to 24.5% for diabetes – medical management (statewide rate was 8.4%).

PHC4 is an independent state agency charged with collecting, analyzing and reporting information that can be used to improve the quality and restrain the cost of health care in Pennsylvania.