



Maryland Health Services Cost Review Commission

Readmission Program for CY 2014 Performance Year

Performance Measurement Work Group 02/28/2014



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Guiding Principles

- ▶ Measurement used for performance linked with payment must include all patients regardless of payer
- ▶ Measurement must be fair to hospitals
- ▶ First year target must be established to reasonably support the overall goal of equal or less than the National Medicare readmission rate by CY 2018
- ▶ Measure used should be consistent with the CMS Measure of Readmissions (also used by Partnership for Patients Program)

State Readmission Target- 6.8% Reduction

	National Medicare					Maryland Medicare					MD- US Difference
	Admissions	Readmissions	% Readmissions	Percentage Point Change	Percent Change in Rate of Readmits	Admissions	Readmissions	% Readmissions	Percentage Point Change	Percent Change in Rate of Readmits	
FY2010	11,043,196	2,049,473	18.56%			253,320	54,019	21.32%			14.9%
FY2011	11,129,694	2,070,250	18.60%	0.04%	0.22%	248,731	52,032	20.92%	-0.40%	-1.88%	12.5%
FY2012	10,857,862	1,991,886	18.35%	-0.25%	-1.34%	241,681	49,100	20.32%	-0.60%	-2.87%	10.7%
FY2013	10,458,098	1,847,036	17.66%	-0.69%	-3.76%	235,532	45,244	19.21%	-1.11%	-5.46%	8.8%
FY 2014			16.78%	-0.88%	-5.00%			17.91%	-1.30%	-6.76%	6.8%
CY 2014			16.34%	-1.32%	-7.50%			17.26%	-1.95%	-10.13%	5.7%



Adjustments to Readmission Rate

▶ Adjustments

- ▶ Planned Admission CMS Algorithm V2.1 with an adjustment for deliveries.
- ▶ Risk Adjustment using Admission APR-DRG

▶ All Payer – Any Hospital Readmission

▶ Positive Incentive for Hospitals that reach or exceed the goal

▶ Uniform Achievement Benchmark for all hospitals

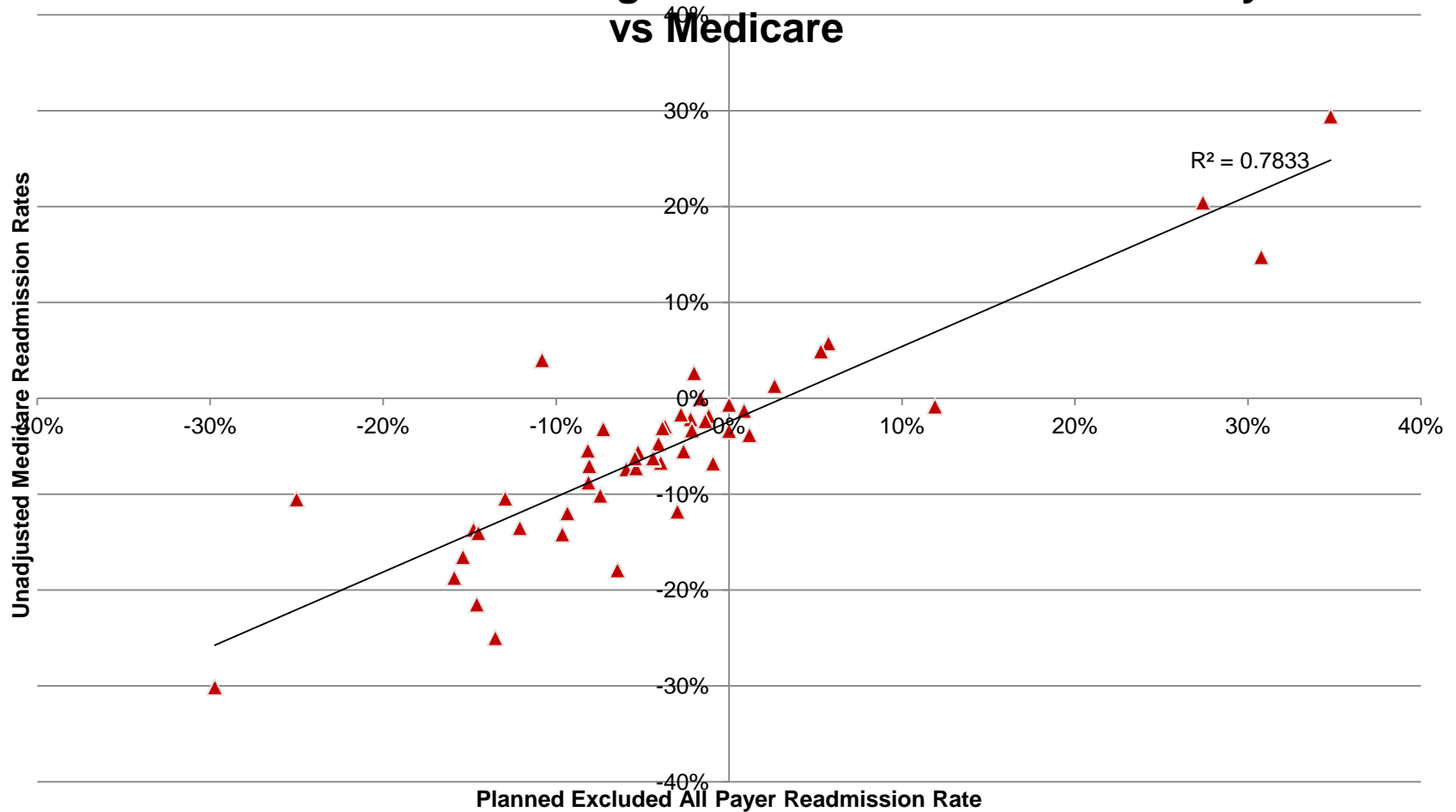
▶ Performance will be measured cumulatively for future years

▶ Observation and ED visits within 30 Days of an inpatient stay will be monitored

▶ Possible adjustments in Observation cases within 30 Days increases faster than the overall observation cases.

All Payer vs Medicare Readmission Trends

FY 2013 Annual % Change in Readmission Rates: All Payer vs Medicare



Ongoing Work

- ▶ Continue with CMMI to refine the readmission measure
 - ▶ Planned Admissions
 - ▶ Rehab-psych subunit
 - ▶ Risk adjustment
- ▶ Hospital specific measure
 - ▶ Risk adjustment
 - ▶ Subsequent target determination etc.