

Readmissions NEWS

Partnering with Primary Care Providers to Reduce Readmissions in Camden, NJ

by *Natasha Dravid, MBA, Dawn Wiest, PhD, and Teagan Kuruna, MPH*

An innovative, one-of-a-kind program to reduce readmissions in Camden, NJ, shows significant reductions in readmissions when patients see their primary care providers within seven days of hospital discharge. The citywide effort, known as the 7-Day Pledge, brings together the Camden Coalition of Healthcare Providers and primary care providers serving Camden and the surrounding areas to redesign clinical workflows so that patients can get necessary follow-up care upon leaving the hospital.

Because hospital readmissions add \$16 billion in annual healthcare costs and approximately 25% of all 30-day readmissions are avoidable, momentum is growing to understand and address the reasons why patients return to the hospital not long after being discharged. The Camden Coalition is a multidisciplinary nonprofit organization that has been providing care management for people with complex medical, behavioral health, and social needs since 2002.

Through this work, we have developed strong relationships with primary care practices in our region. We also learned that patients who were leaving the hospital had difficulty getting timely follow-up appointments—and yet, the patients who were able to see primary care providers within a week of being discharged had fewer readmissions. These findings encouraged us to create the 7-Day Pledge program, launched in 2014, to redesign the way that primary care practices prioritize recently-discharged patients.

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For Profit Hospitals Have a Higher Readmission Rate

by *Andrew D. Boyd, MD*

A recent study examined the readmission data from the Hospital Readmission Reduction Program (HRRP) that is published by the Center for Medicaid and Medicare Services (CMS).¹ Hospitals have been compared on their readmission rates in a number of different methods. Including in the Hospital compare website hosted by CMS. The website lists the star ranking of hospitals from one star to five stars for a wide range of variables.

However, the same data collection is also released with the individual hospital name and specific disease states from: acute myocardial infarction (AMI), heart failure (HF), coronary artery bypass graft (CABG), pneumonia (PN), chronic obstructive pulmonary disease (COPD), and total hip arthroplasty and/or total knee arthroplasty (THA/TKA). All six diseases are listed by hospital as a ratio. The importance of the ratio is that the severity of the illness of the hospitals patients helps to adjust the readmission rate of the hospitals.

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Catching Up With ...



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Readmissions News: How do the Social Determinants of Health impact hospital readmissions?

Mr. Ipekdjian: Social Determinants of Health (SDOH), or the conditions in which people are born, where they work, live and age, have a tremendous effect on one's health. While our healthcare system has focused much of its resources, money and attention on properly caring for the sick within the hospital, we've overlooked the importance of forces that impact patient health beyond care settings.

Having spent much of my career as a case manager and nurse, I've seen many instances of how poor tracking of SDOH results in hospital readmissions. For example, we had a diabetic patient who consistently had very high A1C levels, was failing to control his blood sugar and was not taking his medication appropriately. As a result, we conducted a home visit to better understand why this kept happening despite his physician's best efforts. We learned this patient had no family support system and did not understand that drinking soda could contribute to high blood sugar. By identifying this patient's real-life barriers to achieving better health, we were able to provide the kind of support and education the patient needed to take control of his disease, maintain his health and stay out of the hospital.

Readmissions News: What role do socioeconomic factors play?

Mr. Ipekdjian: The American Hospital Association (AHA) recently reported that socioeconomic factors are responsible for approximately 40 percent of a patient's health, while just 20 percent is tied to care access and quality of care.¹ For patients with life-threatening conditions or chronic illnesses, SDOH is particularly impactful on their health and potential readmissions. Unfortunately, not all hospitals have enough case managers or resources to follow every patient to their home. But, with the right balance of **care management and technology**, providers and care managers can better monitor patient transitions and understand patterns of care to help identify gaps that may be causing readmissions.

Readmissions News: What can healthcare providers do to deal with these issues?

Mr. Ipekdjian: Examining social determinants of health does not need to be overly complex. The hospital I previously worked for built a navigation program aimed at very simple activities, such as going through patients' cabinets to see their food choices. It was common to discover that patients with breathing problems didn't have air conditioners, or those with heart problems often didn't understand the need to monitor their daily sodium intake. These are simple things to figure out — if you know where to look. And the impact can be huge.

By taking various steps to understand and address the social determinants of health, providers can improve long-term patient health and reduce readmissions.

¹ <https://www.aha.org/addressing-social-determinants-health-presentation>



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