The challenge

One in five elderly patients in the U.S. is readmitted to the hospital within 30 days after leaving. An estimated 13 percent of readmissions are potentially preventable. Avoidable readmissions increase medical risks and disruption to patients and more than doubles medical costs according to an analysis of Medicare claims data.

To promote work to reduce preventable readmissions, the Centers for Medicare and Medicaid Services (CMS) began penalizing hospitals in 2012 for exceeding target readmission rates for patients with heart failure, heart attack or pneumonia.

Regions Hospital success in preventing hospital admissions

Since 2009, Regions has decreased the rate of readmissions* from 11.5 percent to 9.7 percent. This has prevented 428 patients from having to be readmitted to the hospital for any reason within 30-days of discharge. This has reduced medical costs by more than $4.1 million.**

When Sarah* came to the emergency room at Regions Hospital, she told ER crisis social workers that if not admitted she’d commit suicide. Sarah had been diagnosed with major depression and generalized anxiety disorder at 25. A crisis at home had triggered three trips to the ER in the past six months. In 2010, Regions developed a program to create personalized care plans for patients like Sarah.

Alerts in the electronic medical record provided detailed information about Sarah’s case to each care giver she saw, helping them quickly complete a mental health assessment and determine a treatment plan. In addition to clinical information, the plan included information about Sarah’s community support system. The crisis social worker called Sarah’s family, primary care physician and therapist to see if there were any unusual circumstances that might be contributing to her current condition.

Based on this information, the team was able to relieve Sarah’s symptoms using medication, weighted blankets and talk therapy until she felt safe. She did not have to be admitted to the hospital and was able to return home to her family and outpatient provider network.

*Not her real name

* 30-day all cause readmissions to Regions Hospital
**Based on Centers for Medicare and Medicaid Services estimate of $9,600 average cost of admission
HealthPartners strategies for success

As an integrated health care delivery and financing organization, HealthPartners is leveraging its unique opportunity to improve the coordination of care for patients and members to prevent hospital admissions and visits to the emergency room.

Inpatient services
HealthPartners care managers identify and proactively reach out to patients who are admitted to hospitals in the Minneapolis/St. Paul area who care for HealthPartners members. In 2011, care managers identified nearly 10,000 patients. Of these, nearly 7,000 patients were referred to free case and disease management service. Of the patients referred, 85–89 percent of patients participated in programs. As a result, the 30-day readmission rate for this program is about half the national readmission rate for Medicare patients.

Personalized care plans for patients who frequently visit the hospital
Patients gain increased access to primary care and community resources. A pilot program of 35 patients reduced hospital admissions by 67 percent.

Mental health
HealthPartners trademarked predictive model identifies patients at risk of having a behavioral health crisis in the next 12 months. Patients are offered case and disease management services. This program has decreased hospital stays for mental health conditions among participants by about one third.

Immediate follow-up to patients discharged from the hospital
Care coordinators call patients who are discharged from Regions Hospital to improve follow up care.

Case and disease management
In 2011, nearly 80,000 HealthPartners health plan members received personalized support for chronic and complex medical conditions.

Home care services for uninsured patients
In a pilot program, nurses conduct home visits to high-risk patients discharged from hospital to provide treatment and to remove barriers to follow up care.

Medication counseling
In 2011, about 3,500 HealthPartners members participated in RxCheckup, a program to help members who are taking at least five medications to ensure proper dose and combination. Pharmacists identified an average of two medications per patient that needed adjustment. This program prevented 114 emergency room and hospital visits for one large employer group over a 4 year period.

Regions Hospital’s Medication Boot Camp program identifies patients with congestive heart failure who need help managing multiple prescriptions when they get home.

Sources:

About HealthPartners
Founded in 1957, HealthPartners is the largest consumer-governed, nonprofit health care organization in the nation. It is dedicated to improving the health of its members, patients and the community. HealthPartners provides a full-range of health plan services including insurance, administration and health and well-being programs. It serves more than 1.4 million medical and dental health plan members nationwide, and is the top-ranked commercial plan in Minnesota. Its Medicare plan has the highest rating (five stars), which only 11 plans in the nation achieved in 2013. Since its combination with Park Nicollet in 2013, its care system includes more than 1,700 physicians; five hospitals; 50 primary care clinics; 21 urgent care locations; and numerous specialty practices in Minnesota and Western Wisconsin. In addition, Stillwater Medical Group, part of the HealthPartners family of care, includes 80 physicians serving the St. Croix Valley region. HealthPartners Dental Group has more than 60 dentists and 21 dental clinics. HealthPartners also provides medical education and conducts research through its Institute of Education and Research.