

Fairview Physician Associates/UCare Readmission Initiative

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Series Objectives

At the conclusion of this learning activity, participants will be able to:

1. Identify key changes and strategies that were used to reduce avoidable readmissions.
2. Describe how the program was developed and tools the team used.
3. Discuss the outcomes of the program.
4. Discuss how these best practices may be applied in their own organization.

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William Nersesian, MD (speaker) has no relevant financial relationships to disclose and does not intend to discuss off-label or investigational uses of commercial products or devices.

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2008 UCare readmission rates

Selected MN hospitals, all Medicare, top 3 diagnoses: diabetes, COPD, heart

- Rochester Methodist (Mayo)* 36.7%
- UMMC 29.3%
- HCMC* 24.7%
- Abbott Northwestern 23.2%
- **Fairview Southdale Hospital 21.0%**
- Fairview Lakes Medical Center* 19.8%
- Fairview Ridges Hospital* 18.4%
- Park Nicollet Methodist* 15.3%

*Smaller patient numbers, less statistical validity.

Mental health patients are excluded, hospitals with fewer than 20 admits are excluded.

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2008, 2009 UCare readmissions (all Medicare, diabetes, COPD, heart)

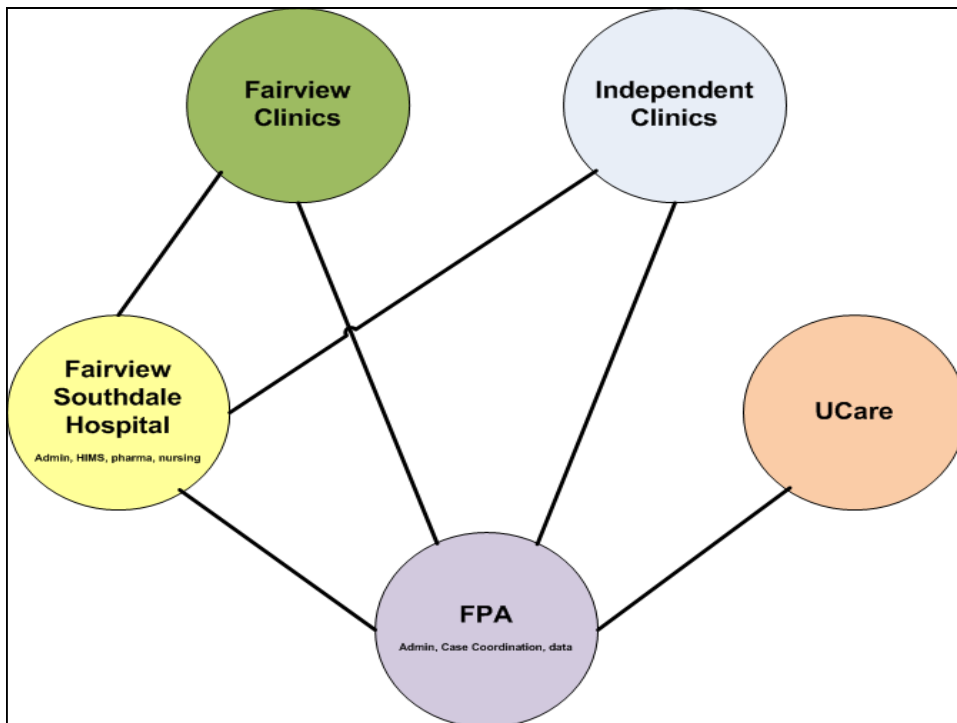
2008

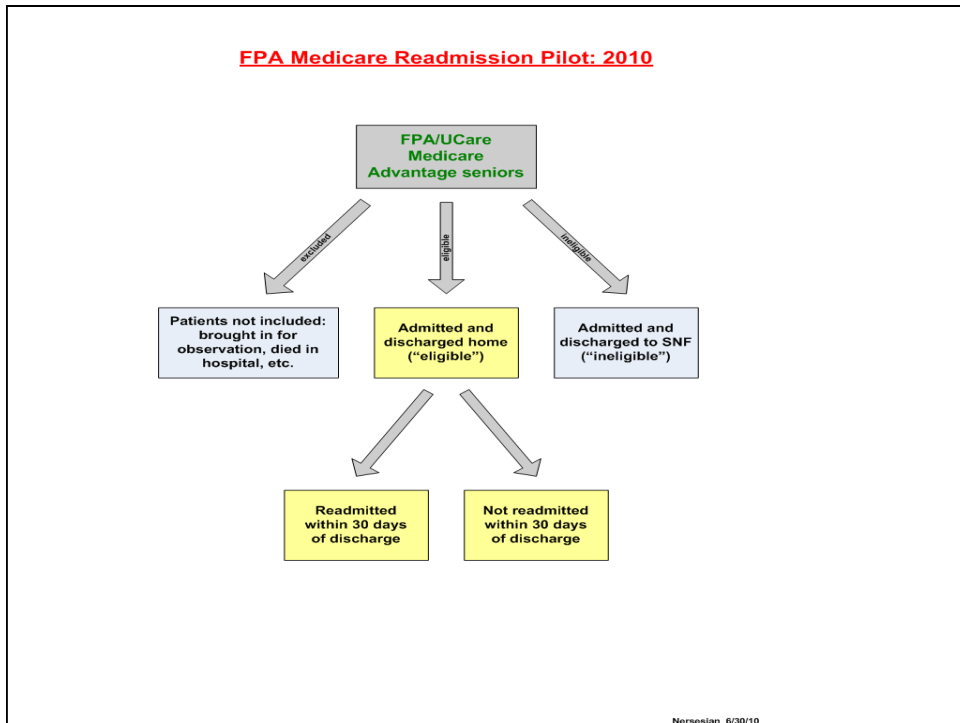
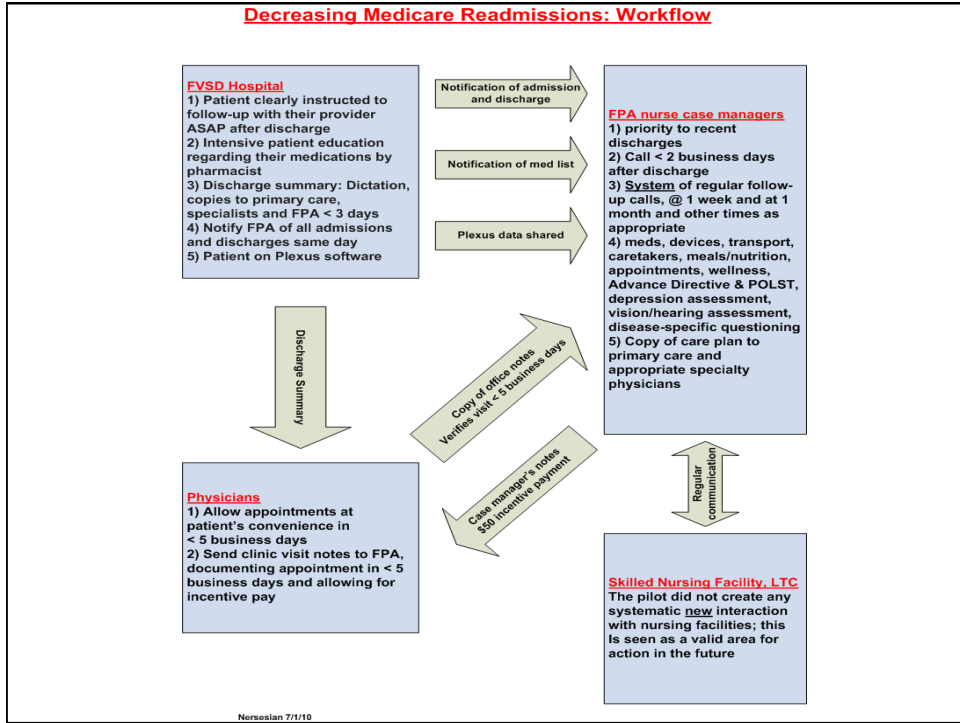
Statewide UCare readmissions	19.7%
FPA: all UCare readmissions	18.6%
FSH: all UCare readmissions	21.0%
FPA/FSH UCare readmit rate	16.7%

2009

Statewide UCare readmissions	17.7%
FPA/FSH UCare readmit rate	16.5%

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Prospective results at 9 months

2009 **21/127 patients readmitted = 16.5%**

3 top diagnoses, all discharges
home or SNF/LTC/hospice, UCare data

2010 **37/367 patients readmitted = 10.1%**

all diagnoses, discharged home (“eligible”)

14/146 patients readmitted = 9.4%

all diagnoses, discharge to SNF /LTC/hospice (“ineligible”)

10/179 patients readmitted = 5.6%

all diagnoses, observation patients (“excluded”)

statistical significance $p = .052$ Mantel-Haenszel chi-square
for “*eligible*” patients

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Prospective results at 9 months

FPA/FSH readmission rate (eligible patients) ~ 10.1%

(9.8% for all included patients,

home or SNF/LTC/hospice discharge)

95% confidence limits are +/- 3.1% for eligible patients,

Therefore, we can be reasonably sure the true readmit rate for eligible
patients lies between 6.9% and 13.1%

Since the 2009 rate was 16.5% (3 diagnoses, home or
SNF/LTC/hospice discharge),

readmits are ~ 39% lower this year

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UCare comparison

- UCare examined 2010 to 2009, in an “apples to apples” comparison
- Readmit rate was 16.5% for FSH in all of 2009 (for 3 diagnoses, COPD, heart, diabetes)
- Readmit rate for Jan-Sept in 2010 was 11.7%
- This represents an approximate **30% reduction** in readmissions using their methodology

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Savings

UCare estimates that each prevented admission saves at least:

\$10,000

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Potential savings

UCare patients with top 3 diagnoses, 2008 data

• UMMC readmits	89
• Fairview Southdale readmits	86
• Fairview Lakes readmits	18
• Fairview Ridges readmits	29
• <u>Fairview Northland readmits</u>	<u>4</u>
Total 2008 UCare readmits	226

If 39% of these readmissions can be prevented @ \$10,000 each,

the ACO saves **\$881,000 a year on UCare patients alone**

If 30% of these readmissions can be prevented, ACO saves **\$680,000 a year**

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Clinics participating in the pilot

- Bloomington Lake Clinic
- Burnsville Family Physicians
- Consultants in Internal Medicine
- Edina Family Practice
- Edina Sports and Wellness
- France Ave Family Physicians
- Richfield Medical Group
- Southdale Internal Medicine
- Fairview Crosstown Clinic
- Fairview Eden Center Clinic
- Fairview Hiawatha Clinic
- Fairview Highland Park Clinic
- Fairview Oxboro Clinic
- Fairview Ridges Clinic
- Fairview Uptown Clinic

Partners in clinical integration

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To suggest future topics
for this series of ICSI/MHA
Reducing Avoidable
Readmissions Effectively
“RARE” Networking Webinars:
Kathy.Cummings@icsi.org

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ICSI Members – Upcoming Events:

- 3/3 Welcome ICSI President, Sanne Magnan, following ‘Building ACOs’ (*open to non-ICSI members*)
- 3/15 ICSI Ideagora, host Dr. Oftedahl & Dr. Montori, evolving content of minimally disruptive medicine
- 3/18 ICSI Headache guideline webinar
- 4/6 or 27 One-day workshop by Dr. Claire Neely to develop Motivational Interviewing skills
- 5/16-18 ICSI/IHI Annual Colloquium: Advancing Accountability, Affordability and Patient Experience. Information and Registration at <http://www.icsi.org/templates/detail.aspx?catID=54255&itemID=54256>
- 5/25 ICSI/MHA RARE Networking Webinar by Tania Daniels, MN Hosp. Assn. (*open to non-ICSI mbrs*)

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