

Plan All-cause Readmissions (PCR)

Risk-Adjusted Utilization HEDIS® measure

Measurement definition

The number of acute inpatient and observation stays for patients ages 18 and older that were followed by an unplanned acute readmission for any diagnosis within 30 days of discharge date.

Exclusions

Patients are excluded if they:

- Received hospice care during the measurement year.
- Died during the hospital stay.
- Are members who are diagnosed with pregnancy or of a condition originating in the perinatal period.

Tips for success

- Keep open appointments so patients who are discharged from the hospital can be seen within seven days of their discharge.
- When scheduling the post-discharge visit, ask patients to bring in all their prescription medications and over-the-counter medications and supplements so that the medication reconciliation can be performed.
- Obtain and review patients' discharge summary.
- Obtain any test results that were not available when patients were discharged and track tests that are still pending.
- Connect with your area's automated electronic admission, discharge and transfer (ADT) systems to receive admission, discharge and transfer notifications for your patients.
- If patients have not scheduled their discharge follow-up appointment, reach out and schedule an appointment within seven days of discharge or sooner as needed.
- Consider implementing:
 - A post-discharge process to track, monitor and follow up with patients.
 - A transitional care management program for recently discharged patients.
- This measure is based on discharges. If a patient has more than one discharge, they may appear in the measure more than once.

Tips for talking with patients

- Discuss the discharge summary with patients and ask if they understand the instructions and filled the new prescriptions.
- Complete a thorough medication reconciliation and ask patients and/or caregivers to describe their new medication regimen back to you.
 - Document and date the medication reconciliation in the patients' outpatient medical record.

- Submit a claim with CPT® II code 1111F as soon as the reconciliation is complete. It is not necessary to wait for all components of TCM or care planning services to be met.
 - Provide the patient with a current list of medications.
- Develop an action plan for chronic conditions. The plan should include what symptoms would trigger the patient to:
 - Start as needed (PRN) medications.
 - Call their doctor during after-office hours.
 - Go to the emergency room.
- Have patients and caregivers repeat the care plan back to you to demonstrate understanding.
- Ask about barriers or issues that might have contributed to patients' hospitalization and discuss how to prevent them in the future.
- Ask patients if they completed or scheduled prescribed outpatient workups or other services. This could include physical therapy, home health care visits and obtaining durable medical equipment.