Hospital-Wide All-Cause Readmissions

Measure Basic Information

A significant proportion of hospital readmissions are among those who were only recently discharged. This can be costly, and is often avoidable. This metric therefore measures all inpatients (of all ages) who were readmitted within 30 days for any reason.

Name and date of specifications used: The Hospital Performance Metrics Advisory Committee chose to adopt the readmissions measure that is one of the standardized measures for Oregon’s Partnership for Patients initiative. Partnership for Patients is a national CMS initiative aimed to improve the quality, safety, and affordability of health care.

URL of Specifications: N/A

Measure Type:
HEDIS □ Joint Commission □ Survey □ Other ■ Specify: Partnership for Patients measure

Data Source¹: Oregon hospitals are currently required to report inpatient discharges on a quarterly basis. OAHHS collect both numerator and denominator information and will report to OHA.

Measurement Period: Year One: October 1, 2013 – September 30, 2014 (baseline)
Year Two: October 1, 2014 – September 30, 2015 (performance year)

Benchmark: State 90th percentile for all hospital types (not limited to DRG hospitals), 6.1%, for October 2013 – September 2014. Specific benchmark to be confirmed once baseline data for Year One are submitted.

The equation used is inpatients returning as an acute care inpatient within 30 days of date of discharge / total inpatient discharges * 100 and is reported as a percentage. Hospitals must submit numerators and denominators as detailed below.

Improvement from Baseline Target: MN method with a 1 percentage point floor²

Measure Details

¹ OHA reserves the right to contact hospitals directly or through OAHHS with additional questions about data submitted as part of the program. Hospitals must be able to provide documentation of data submitted should it be requested.
² Information on improvement target calculations can be found in the ‘Hospital Improvement Target Brief’, here: http://www.oregon.gov/oha/Pages/Hospital-Baseline-Data.aspx.
**Data elements required denominator:** Total inpatient discharges (for patients of all ages).

**Required exclusions for denominator:**

- Patients who have died.
- Patients who have been discharged or transferred to another short-term hospital.

**Deviations from cited specifications for denominator:** None.

**Data elements required numerator:** Number of readmissions by patients of all ages, defined as an inpatient admission to any acute care facility which occurs within 30 days of the discharge date.

**Required exclusions for numerator:**

- Those not readmitted as an acute care inpatient.
- Readmission of any patient more than 30 days since previous hospital admission.

**Deviations from cited specifications for numerator:** None.

**Explanation of Exclusions and Deviations**

List other required exclusions and or deviations from cited specifications not already indicated: None.

**Version Control**

This measure specification sheet was updated on 11 March 2015 to reflect the benchmark (based on the period October 2013 – September 2015). This will be updated in the subsequent year as data are available.