Minnesota's Unique Hospitalization & Community Discharge Quality Indicators

Nursing Facility Rates and Policy Division

Coming Soon to the Nursing Home Report Card:
MN Hospitalization & Community Discharge QIs

Annual rate of hospitalizations **within 30 days** of admission to the facility

Annual number of resident hospitalizations **31-365 days** after admission to the facility per 1000 annual resident days

Annual rate of community discharge **within 30 days** of admission to the facility

Annual rate of community discharge **31-90 days** after admission to the facility

30-Day Hospitalizations

This measure is the annual percentage of hospitalizations within 30 days of admission to the facility, divided by the facility's total annual admissions. This period is known as "high risk" as hospitalizations are much more likely during this initial part of the stay. To acknowledge that residents are admitted to the facility with different risks of being hospitalized, the measure is risk-adjusted with 22 health and demographic characteristics from residents' Minimum Data Set (MDS) admission assessments, as well as two facility characteristics.
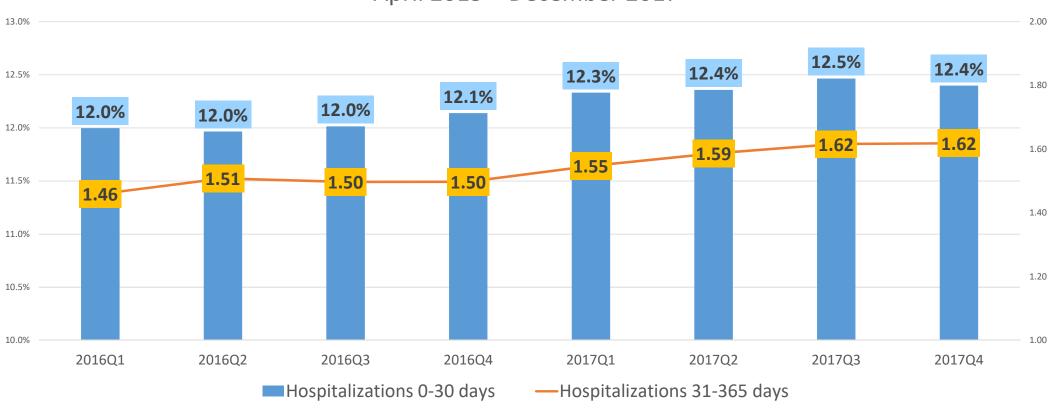
31-365 Day Hospitalizations

This measure is the annual number of resident hospitalizations 31-365 days after admission to the facility per 1000 annual resident days. This period is known as "low risk" as hospitalizations are less likely after this initial period. Residents in the facility for 365 days have more chance to be hospitalized than residents there for 31 days, simply because they have been there longer, so this measure is weighted by length of stay to correct for this difference.

	MN Hospitalization QIs: Focus on all residents	CMS Re-hospitalization QI: Focus on some Medicare residents
Data Source?	MDS	Medicare fee-for-service claims
Admitted from?	All sources	Hospital
Includes only "Unplanned" hospitalizations?	No. Using only unplanned discharges to the hospital (A0310G) has little effect	No. QI does exclude transplants; chemotherapy; psych admits; pregnancy
Inc obs. stays?	Yes	Yes
Risk adjusted?	MDS risk-adjusters. MN-specific method to stabilize and adjust for differences in provider size	Claims and MDS risk-adjusters. Compares scores to national rates to stabilize them
Timeframe?	1 year	1 year
# of measures?	2: 0-30 days, 31-365 days	1: 0-30 days

Short and Long Stay Hospitalizations steadily increased since the end of 2016

Annual Short and Long Stay Hospitalizations, April 2015 – December 2017

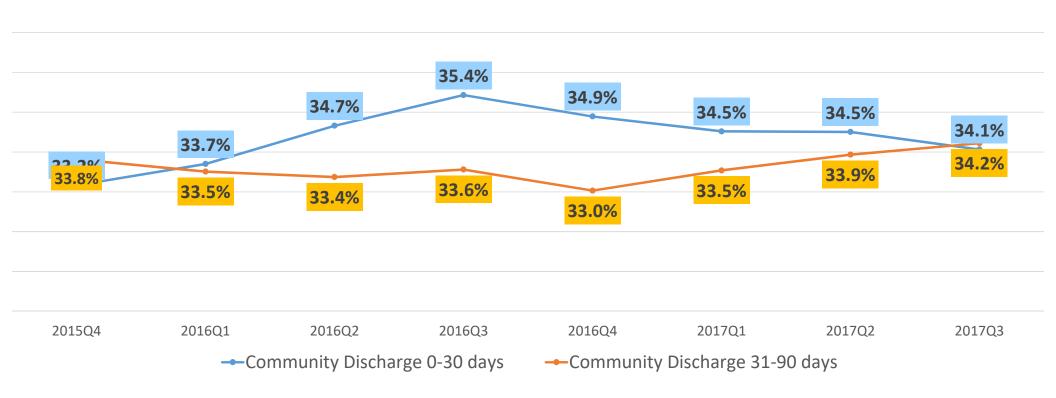|	2016Q1	2016Q2	2016Q3	2016Q4	2017Q1	2017Q2	2017Q3	2017Q4
Hospitalizations 0-30 days	12.0%	12.0%	12.0%	12.1%	12.3%	12.4%	12.5%	12.4%
Hospitalizations 31-365 days	1.46	1.51	1.50	1.50	1.55	1.59	1.62	1.62

30-Day Community Discharges

This measure is the annual rate of community discharge within 30 days after admission to the facility, divided by each facility's total annual admissions. "Community discharge" is defined by the MDS as discharge to a less-restrictive setting such as a private home/apartment, board and care, assisted living, or group home (A2100 = 01). Most people admitted to facilities are discharged in the first 30 days, and this measure is an indicator of how well facilities successfully complete typical post-hospitalization stays. To acknowledge that residents are admitted to the facility with different chances of community discharge and facilities have different home-and-community-based resources available, the measure is risk-adjusted with 22 health and demographic characteristics from residents' admission assessments, as well as six facility and area characteristics.
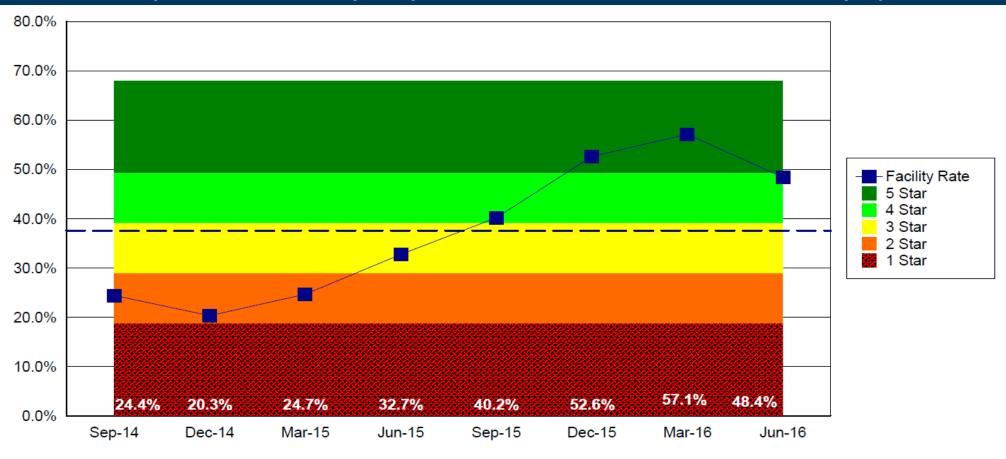
31-90 Day Community Discharges

This measure is the annual rate of community discharge 31-90 days after admission to the facility, divided by each facility's total annual admissions. After 30 days, community discharge sharply declines and if a resident has not discharged after 90 days, their chance of doing so without intervention is small. So, this measure is an indicator of how well facilities return residents to community settings in this later time period when their circumstances may be more complex. To acknowledge that residents are admitted to the facility with different chances of community discharge and facilities have different home-and-community-based resources available, the measure is risk-adjusted with 22 health and demographic characteristics from residents' admission assessments, as well as six facility and area characteristics.

30-Day Community Discharges declined since the end of 2016. 31-90 Day Community Discharges increased, possibly helped by more transitions through the Return to Community program during this period.

Annual 30-Day and 31-90 Day Community Discharges,
January 2015 – September 2017

	2015Q4	2016Q1	2016Q2	2016Q3	2016Q4	2017Q1	2017Q2	2017Q3
Community Discharge 0-30 days	33.8%	33.7%	34.7%	35.4%	34.9%	34.5%	34.5%	34.1%
Community Discharge 31-90 days	33.2%	33.5%	33.4%	33.6%	33.0%	33.5%	33.9%	34.2%

— Community Discharge 0-30 days   — Community Discharge 31-90 days

Example Community Discharge Portal Report:
This facility shows steady improvement over this almost 3-yr period

Legend:
- Facility Rate
- 5 Star
- 4 Star
- 3 Star
- 2 Star
- 1 Star

Data points: 24.4%, 20.3%, 24.7%, 32.7%, 40.2%, 52.6%, 57.1%, 48.4%

X-axis: Sep-14, Dec-14, Mar-15, Jun-15, Sep-15, Dec-15, Mar-16, Jun-16

- - - - - - Facility Average trend line

Coming Soon

- Incorporate new measures into pay for performance programs in MN (QIIP, PIPP and VBR)

- Add a new short-stay focus to the MN Report Card including short stay experience survey results, hospitalization and community discharge rates, and more

- Continue to improve the MN QIs in response to providers, experts, changing best practice

Resources

Quality results and information

MN Nursing Home Report Card - http://nhreportcard.dhs.mn.gov

DHS Nursing Facility Provider Portal - https://nfportal.dhs.state.mn.us/

Technical Questions

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