South Dakota Care Coordination Quarterly Report - March 2016



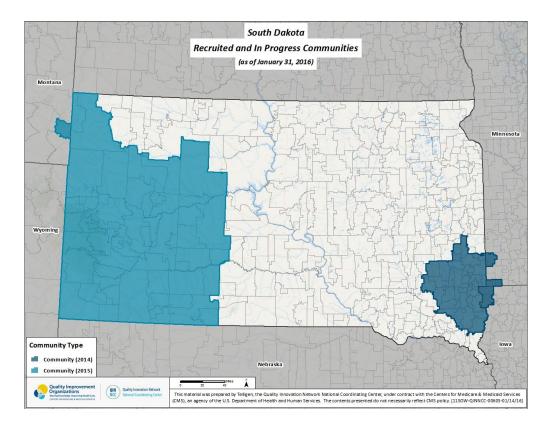


Background

Communities across the Great Plains Quality Innovation Network (QIN) region are collaborating to improve care coordination and medication safety. The goal of the communities is to reduce avoidable hospital admissions, readmissions and Adverse Drug Events (ADEs). Great Plains QIN is the Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for North Dakota, Kansas, Nebraska and South Dakota. South Dakota Foundation for Medical Care as a partner in the Great Plains QIN, is complementing these efforts by sharing data. The shared data assists with the identification of readmission root causes and supports the development of community partnerships between healthcare providers and community stakeholders.

Communities

Communities are identified based on two factors: 1) where each ZIP code's Medicare beneficiaries received most of their care and 2) where most of a hospitals' Medicare patients reside. The areas where these two factors experienced the most overlap resulted in these communities.



Data Overview and Definitions

Medicare claims data provided to the Great Plains QIN by the National Coordinating Center (NCC) was used to calculate the measures contained in this report. Readmissions are defined as "all-cause" readmissions to any hospital within 30 days of discharge. We refer to the initial hospital admission as the "index discharge" and the second return admission as the "readmission." None of the measures are risk adjusted.

This material was prepared by the Great Plains Quality Innovation Network, the Medicare Quality Improvement Organization for Kansas, Nebraska, North Dakota and South Dakota, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. 11SOW-GPQIN-SD-C3-131/0316

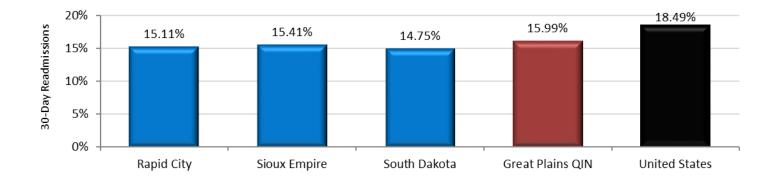
Community-level measures included are:

- **30-day Hospital Readmission Rate and Trends:** The percentage of hospital readmissions within 30 days of discharge
- Acute Care Utilization Rate: Hospital Admissions, 30-Day Hospital Readmissions, Emergency Department (ED)
 Visits (without admission), and Observation Stays per 1000 Medicare FFS Beneficiaries
- Composite Measure of Unplanned Care: All Admissions, ED Visits, and Observation Stays per 1000 Medicare FFS Beneficiaries
- Hospital Discharge Rate per Location: Home (Community), Home Health, Hospice, and Skilled Nursing Facility
- 30-Day Hospital Readmission Rate per Discharge Location: As Above
- Percent of 30-Day Hospital Readmissions by Day: Readmissions to same hospital, and other hospitals
- Average Length of Stay Comparison: Comparison between index discharges with 30-day hospital readmission and all other hospital admissions
- Mortality Rate: All Hospital Admissions, and within first 3 days of Hospital Admission
- Top Five DRG Bundles

The measures included in the Care Coordination Quarterly Report may vary from issue to issue depending on data availability and the needs of community partners.

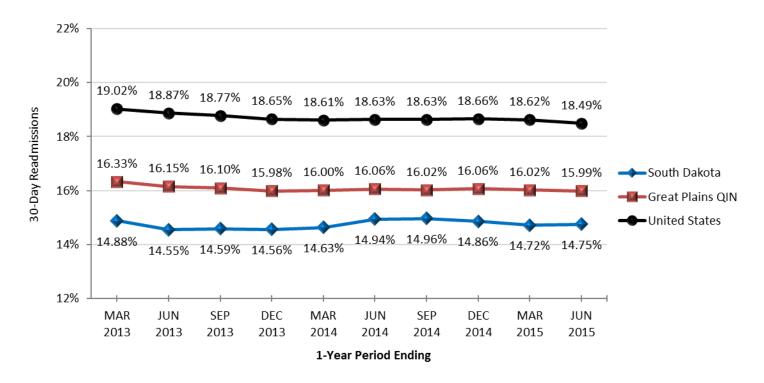
Community Data Highlights

Current Readmission Rates (# of readmissions within 30 days / # of discharges): 07/01/2014 - 06/30/2015



Community	Discharges	30-Day Readmissions	30-Day Readmission Rates	
		Readillissions	Nates	
Rapid City	7,180	1,085	15.11%	
Sioux Empire	7,865	1,212	15.41%	
South Dakota	30,655	4,521	14.75%	
Great Plains QIN	238,620	38,144	15.99%	
United States	9,971,290	1,843,367	18.49%	

Readmission Rate Trends:

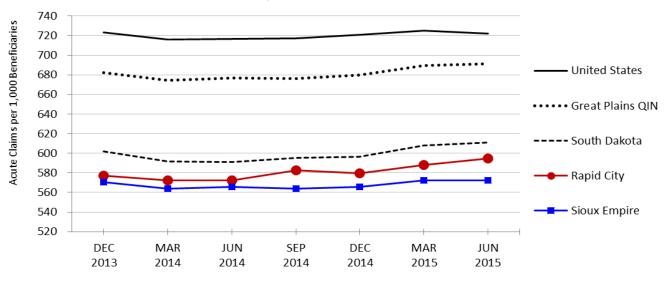


Acute Care Utilization (per 1,000 Beneficiaries): 07/01/2014 – 06/30/2015

Community	Benes	Adms	Adms per 1000 Benes	30-Day Readms	30-Day Readms per 1000 Benes	ED Visits	ED Visits per 1000 Benes	Obs Stays	Obs Stays per 1000 Benes
Rapid City	33,414	7,449	222.93	1,085	32.47	10,778	322.56	1,652	49.44
Sioux Empire	32,252	8,045	249.44	1,212	37.58	8,703	269.84	1,708	52.96
South Dakota	126,435	31,584	249.80	4,521	35.76	38,922	307.84	6,773	53.57
Great Plains QIN	911,633	246,826	270.75	38,144	41.84	333,980	366.35	49,342	54.12
United States	37,311,625	10,307,120	276.24	1,843,367	49.40	14,615,103	391.70	2,010,039	53.87

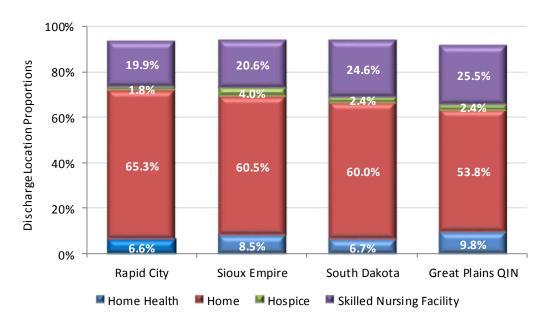
Composite Measure of Unplanned Care: Counts all the Admissions, ED visits and Observation stays per 1,000 beneficiaries.

All Acute-Care Utilization (Admissions, ED visits, Observation Stays) per 1,000 Beneficiaries



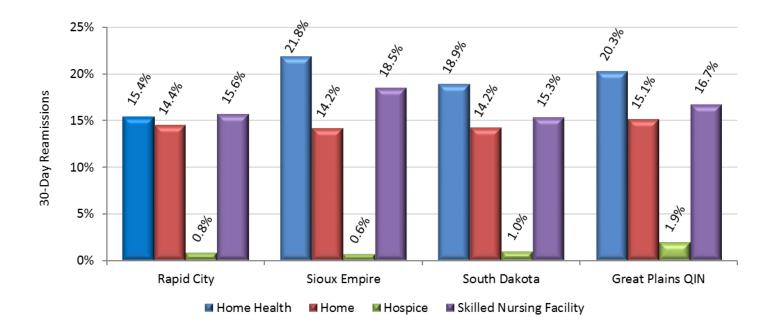
1-Year Period Ending

Discharge Locations: 07/01/2014 - 06/30/2015



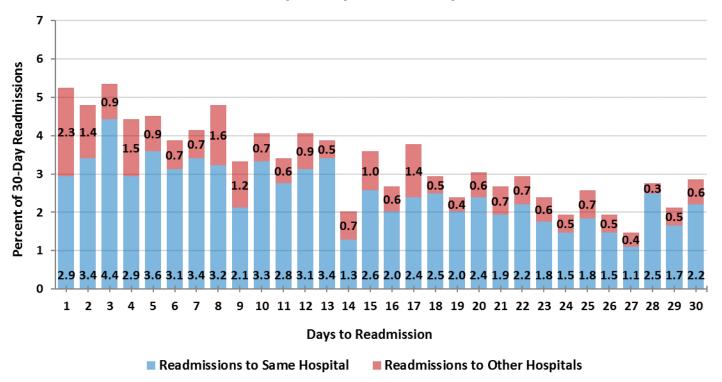
	Discharges								
		Home	Health	Home		Hospice		Skilled Nursing Facility	
Community	All	# to Home	% to Home	# to	% to	# to	% to	# to SNF	% to SNF
_		Health	Health	Home	Home	Hospice	Hospice		
Rapid City	7,180	473	6.6%	4,686	65.3%	129	1.8%	1,428	19.9%
Sioux Empire	7,865	669	8.5%	4,760	60.5%	315	4.0%	1,623	20.6%
South Dakota	30,655	2,062	6.7%	18,388	60.0%	721	2.4%	7,551	24.6%
Great Plains QIN	238,620	23,479	9.8%	128,435	53.8%	5,778	2.4%	60,856	25.5%

Readmission Rates among Discharge Locations: 07/01/2014 – 06/30/2015

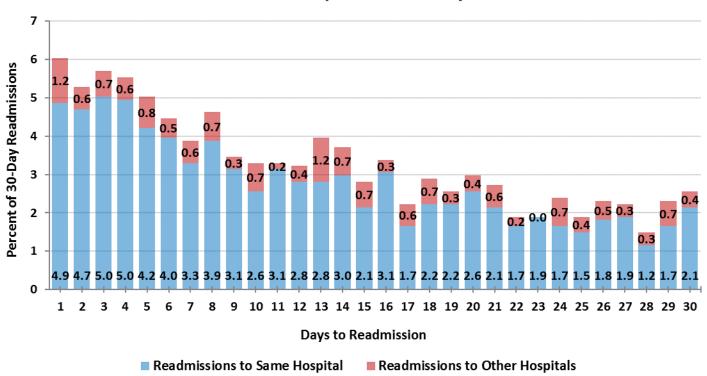


	Home Health			Home			Hospice			Skilled Nursing Facility		
Community	Disch	30-Day Readm	30-Day Readm Rates	Disch	30-Day Readm	30-Day Readm Rates	Disch	30-Day Readm	30-Day Readm Rates	Disch	30-Day Readm	30-Day Readm Rates
Rapid City	473	73	15.4%	4,686	677	14.4%	129	1	0.8%	1,428	223	15.6%
Sioux Empire	669	146	21.8%	4,760	674	14.2%	315	2	0.6%	1,623	300	18.5%
South Dakota	2,062	389	18.9%	18,388	2,610	14.2%	721	7	1.0%	7,551	1,155	15.3%
Great Plains QIN	23,479	4,755	20.3%	128,435	19,356	15.1%	5,778	108	1.9%	60,856	10,165	16.7%

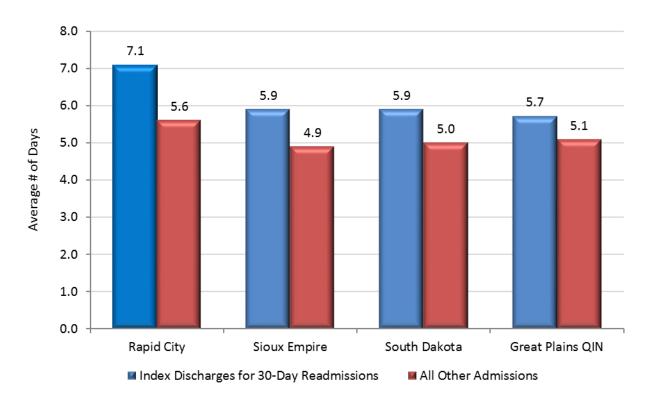
Rapid City Community



Sioux Empire Community



Average Length of Stay comparison between the Index discharges associated with 30-Day Readmissions versus All Other Admissions: 07/01/2014 - 06/30/2015



Mortality Rates: 07/01/2014 - 06/30/2015

Excludes Transfers

Community	Admissions	Mortalities	Mortality Rates	3-Day Mortalities	3-Day Mortality Rates
Rapid City	7,449	269	3.61%	109	1.46%
Sioux Empire	8,045	180	2.24%	77	0.96%
South Dakota	31,584	929	2.94%	444	1.41%
Great Plains QIN	246,826	8,206	3.32%	4,030	1.63%

Top 5 DRG Bundles: 07/01/2014 – 06/30/2015

DRGs that differ only in their level of complications are combined into "DRG Bundles". For example, DRGs 637, 638, and 639 (Diabetes with major complications, with complications, and without complications) are combined into one DRG bundle called Diabetes.

Community	DRG Bundle Description	DRG Bundle 30-Day Readmissions	Community 30-Day Readmissions	Percent of Community 30-Day Readmissions
	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS	77	1,085	7.10%
	HEART FAILURE & SHOCK	63	1,085	5.81%
Rapid City	PSYCHOSES	49	1,085	4.52%
карій Сіту	SIMPLE PNEUMONIA & PLEURISY	44	1,085	4.06%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	33	1,085	3.04%
	NUTRITIONAL & MISC METABOLIC DISORDERS	33	1,085	3.04%
	HEART FAILURE & SHOCK	72	1,212	5.94%
	PSYCHOSES	56	1,212	4.62%
Sioux Empire	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS	56	1,212	4.62%
	G.I. HEMORRHAGE	45	1,212	3.71%
	SIMPLE PNEUMONIA & PLEURISY	43	1,212	3.55%
	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS	295	4,521	6.53%
	HEART FAILURE & SHOCK	254	4,521	5.62%
South Dakota	SIMPLE PNEUMONIA & PLEURISY	250	4,521	5.53%
	PSYCHOSES	175	4,521	3.87%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	173	4,521	3.83%
	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS	2,291	38,144	6.01%
	HEART FAILURE & SHOCK	2,131	38,144	5.59%
Great Plains QIN	SIMPLE PNEUMONIA & PLEURISY	1,906	38,144	5.00%
QIIV	PSYCHOSES	1,798	38,144	4.71%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	1,323	38,144	3.47%

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