

## Hospital Readmission Reduction Program Excess Readmission Ratio Specifications 2023 Report Year

Topic	Description
<b>Summary of Changes</b>	<p>The Centers for Medicare &amp; Medicaid Services (CMS) made the following changes to the Hospital Readmission Reduction Program measure:</p> <ul style="list-style-type: none"> <li>• Adopted a measure suppression policy to suppress the Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate following Pneumonia Hospitalization measure (NQF #0506) beginning with the federal fiscal year (FY) 2023 program year.</li> <li>• Modified the remaining five condition-specific readmission measures to exclude COVID-19 diagnosed patients from the measure denominators, beginning with the FY 2023 program year.</li> </ul>
<b>Description</b>	<p>The Centers for Medicare &amp; Medicaid Services (CMS) Hospital Readmission Reduction Program (HRRP) was developed to reduce unplanned rehospitalizations and cost by tying payment to excess readmissions in prospective payment system (PPS) hospitals.</p> <p>Excess readmissions are calculated as the ratio of predicted readmissions to expected readmissions.</p> <p>The composite rate is calculated by the Minnesota Department of Health using results from HRRP.</p>
<b>Methodology</b>	<p>Specifications for individual measures are located on QualityNet. The details of HRRP are contained in the CMS inpatient prospective payment system (IPPS) final rule.</p>
<b>Measurement Period</b>	<p>Data will be submitted on an annual basis on the following schedule: Final results are released by CMS in the beginning of the fiscal year (FY) which for FY 2023 starts with October 1, 2022 discharges and ends with September 30, 2023 discharges. A final table of results is published on the 2022 IPPS rule page. It contains the excess readmission ratio for each condition for each hospital. This will be the source for data submission of the individual measures listed below. Final results are planned to be published annually on Hospital Compare. The composite measure will be calculated using these results.</p>
<b>Denominator</b>	<p>Sum of the number of cases for each of the readmission measures included in the HRRP if the hospital has 25 or more eligible discharges for that condition AMI Cases + Pneumonia Cases* + Heart Failure Cases + Hip/Knee Cases + COPD Cases + CABG Cases</p>
<b>Allowable Exclusions</b>	<p>If a hospital has fewer than 25 eligible discharges for a condition, that measure is not included in the composite measure.</p>
<b>Numerator</b>	<p>Number of readmission measures with excess readmissions (number of 1 or greater) for FY 2023 which includes data from July 1, 2018 to June 30, 2021 (AMI Cases x excess ratio) + (Pneumonia Cases* x excess ratio) + (Heart Failure Cases x excess ratio) + (Hip/Knee Cases x excess ratio) + (COPD Cases x excess ratio) + (CABG Cases x excess ratio)</p>

\* In 2021 CMS adopted a measure suppression policy to suppress the Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate following Pneumonia Hospitalization measure (NQF #0506) beginning with the federal fiscal year (FY) 2023 program year.

<b>Individual Measures Contained in the Composite Measure</b>	<ul style="list-style-type: none"><li>• 30-day Readmissions Acute Myocardial Infarction (AMI)</li><li>• 30-day Readmissions Heart Failure (HF)</li><li>• 30-day Readmissions Pneumonia (PN) <i>Suppressed beginning with the FY 2023 program year</i></li><li>• 30-day Readmissions Chronic Obstructive Pulmonary Disease (COPD)</li><li>• 30-day Readmissions Elective Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA)</li><li>• 30 day Readmissions Coronary Artery Bypass Graft (CABG) surgery</li></ul>
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