

Health Disparities in the Medi-Cal Population

Hospital Readmissions



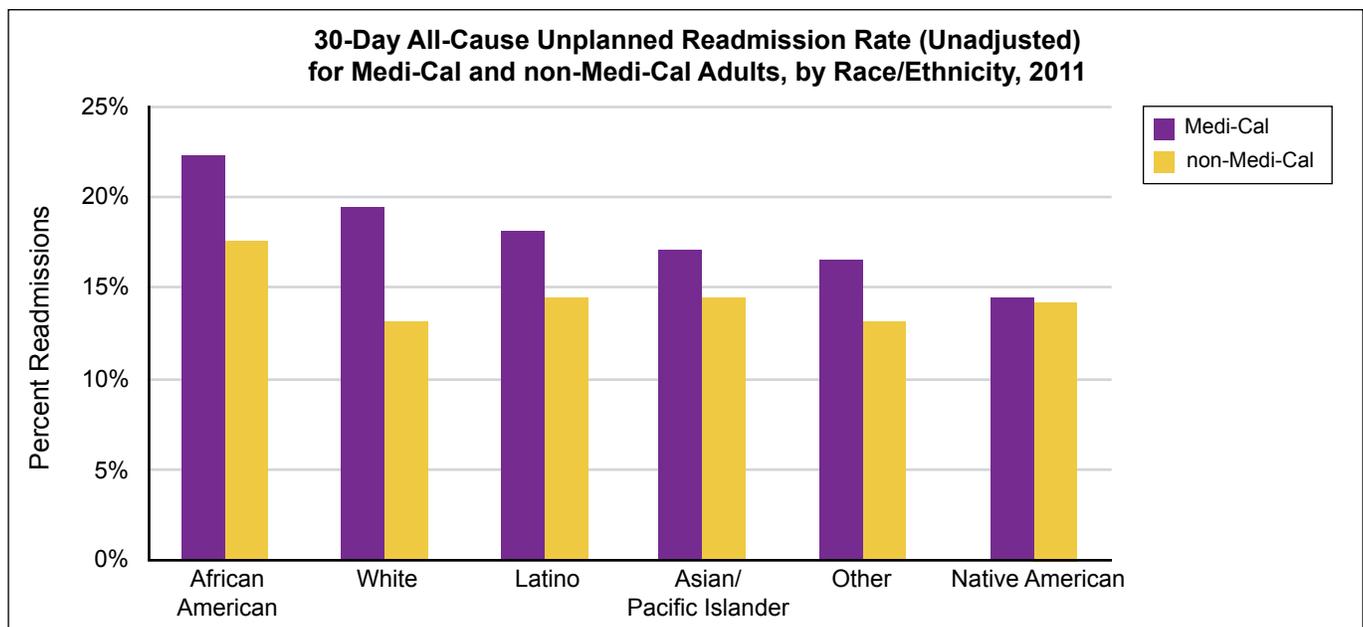
A large proportion of hospital readmissions are attributed to people with chronic diseases such as congestive heart failure and diabetes.¹ Research suggests that hospital readmissions are both costly and potentially dangerous to patients.² Fortunately, there is evidence that hospital readmissions can be reduced through better coordination of care.³ For example, clear discharge instructions and post-discharge communication may help patients better manage their own health and prevent acute episodes that require re-hospitalization.⁴ Evidence is leading to policy changes. Medicare is reducing payment for specific readmissions and Medi-Cal has started a Statewide collaborative to reduce All-Cause Readmissions using quality improvement projects.⁵

The *Let's Get Healthy California Task Force Final Report* provided an overall California readmission rate of 14.1%.⁶ The hospital readmission rate for the Medi-Cal population was higher at 18.7%.⁷



Readmission rates vary by race/ethnicity, yet the differences were the most striking for the Medi-Cal population. For example, although there was only a small difference between the Medi-Cal and non-Medi-Cal population among Native Americans, the readmission rates were substantially different for Whites. African Americans, Latinos, Asians/Pacific Islanders, and Others also had higher rates among the Medi-Cal population, yet the relative difference was not as extreme as among Whites.⁶

Figure



Source: Office of Statewide Health Planning and Development (OSHPD) Discharge Data, 2011.

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2. Kocher RP, Adashi EY. Hospital readmissions and the Affordable Care Act: Paying for coordinated quality care. *JAMA.* 2011;306(16):1794-1795.
3. Benbassat J, Taragin MI. The effect of clinical interventions on hospital readmissions: A meta-review of published meta-analyses. *Israel J. of Health Policy Res.* 2013;2(1):1-15.
4. Jack BW, Chetty VK, Anthony D, et al. A reengineered hospital discharge program to decrease rehospitalization: A randomized trial. *Annu Intern Med.* 2009;150(3):178.
5. Statewide Collaborative Quality Improvement Project All-Cause Readmissions Interim Report June 2011 – May 2013. http://www.dhcs.ca.gov/dataandstats/reports/Documents/MMCD_Qual_Rpts/EQRO_QIPs/CA2012-13_QIP_Coll_ACR_Interim_Report_F2.pdf. Accessed September 30, 2013.
6. Let's Get Healthy California Task Force Final Report. <http://www.chhs.ca.gov/Documents/Let%27s%20Get%20Healthy%20California%20Task%20Force%20Final%20Report.pdf>. Published December 19, 2013. Accessed February 25, 2013.
7. Office of Statewide Health Planning and Development (OSHPD), Patient Discharge Data, 2011.

Link to Data Sources and Methods