

# 2022 Star Measure Tips



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One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

## Plan All-cause Readmissions (PCR)

Risk-Adjusted Utilization HEDIS® Measure

### Measurement definition

The number of acute inpatient and observation stays for patients ages 18 and older that were followed by an unplanned acute readmission for any diagnosis within 30 days of discharge date.

### Exclusions

Patients are excluded if they:

- Received hospice care during the measurement year.
- Died during the hospital stay.
- Were diagnosed with pregnancy or a condition originating in the perinatal period.

### Tips for success

- Keep open appointments so patients who are discharged from the hospital can be seen within seven days of their discharge.
- When scheduling the post-discharge visit, ask patients to bring in all of their prescription medications and over-the-counter medications and supplements so that the medication reconciliation can be performed.
- Obtain and review patients' discharge summary.
- Obtain any test results that were not available when patients were discharged and track tests that are still pending.
- Connect with your state's automated electronic admission, discharge and transfer, or ADT system to receive admission, discharge and transfer notifications for your patients.

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- If patients have not scheduled their discharge follow-up appointment, reach out and schedule an appointment within seven days of discharge or sooner as needed.
- Consider implementing:
  - A post-discharge process to track, monitor and follow up with patients.
  - Perform transitional care management for recently discharged patients. TCM codes can be billed as early as the date of the face-to-face visit and do not need to be held until the end of the service period to be submitted on a claim.
- This measure is based on discharges. Members may appear in the denominator more than once.

## Tips for talking with patients

- Discuss the discharge summary with patients and ask if they understand the instructions and filled the new prescriptions.
- Complete a thorough medication reconciliation and ask patients and/or caregivers to describe their new medication regimen back to you.
- Document and date the medication reconciliation in the outpatient medical record.
  - Submit an 1111F claim as soon as the reconciliation is complete. It is not necessary to wait for all components of TCM or care planning services to be met.
  - Provide the patient with a current list of medications
- Develop an action plan for chronic conditions. The plan should include what symptoms would trigger the patient to:
  - Start as-needed, or PRN, medications.
  - Call his or her doctor (during or after office hours).
  - Go to the emergency room.
- Have patients and caregivers repeat the care plan back to you to demonstrate understanding.
- Ask about barriers or issues that might have contributed to patients' hospitalization and discuss how to prevent them in the future.
- Ask patients if they completed or scheduled prescribed outpatient work-ups or other services. This could include physical therapy, home health care visits and obtaining durable medical equipment.