



Hospital Quality-Based Program: Potentially Preventable Readmissions (PPR) Hospital-Level Report

Hospital:

NPI:

TPI:

Reporting Period: State Fiscal Year 2016

Population: All Medicaid and CHIP

Effective Date: September 1, 2017

** This is a low-volume hospital*

About this report

Senate Bill (S.B.) 7, 82nd Texas Legislature, First Called Session, 2011, and S.B. 7, 83rd Texas Legislature, Regular Session, 2013, requires HHS to implement a hospital reporting process and reimbursement reductions to hospitals based on their performance in potentially preventable readmissions (PPRs) and potentially preventable complications (PPCs). For the Medicaid Program, actual rates of these potentially preventable events (PPEs) are compared to their expected rates and a final reimbursement adjustment is determined and applied to all claims paid by HHS to each hospital. Calculation of the PPE rates are made using Medicaid/CHIP fee-for-service claims and managed care encounters.

A hospital with an actual-to-expected PPR ratio equal to or greater than 1.10 and equal to or less than 1.25 is subject to a reimbursement adjustment of -1% of the hospital’s inpatient claims. An actual-to-expected PPR ratio greater than 1.25 is subject to a reimbursement adjustment of -2% of the hospital’s inpatient claims. It is important to note that the actual-to-expected ratio is rounded to two decimal places.

This report is designed to help hospitals target their quality improvement efforts. HHS can provide underlying detailed data for this report to each hospital, following their request (please include full name, email, phone number, NPI, TPI, and hospital name) emailed to MCD_PPR_PPC@hpsc.state.tx.us

HHS Potentially Preventable Events webpage: <https://hhs.texas.gov/about-hhs/process-improvement/medicaid-chip-quality-efficiency-improvement/potentially-preventable-events>

Table 1 - Hospital PPR Rates

	Total Admissions at Risk for PPR	Actual Number of PPR Chains	Actual PPR Weights	Expected PPR Weights	Actual-to-Expected Ratio	Total Reimbursement Reduction
Hospital Results						

Table 2 - Hospital PPR Expenditures

	Unique Members with PPRs	Number of PPR Events	Actual PPR Expenditures
Hospital Results			

Table 3 - State-Wide Hospital PPR Rate

	25 th Percentile	50 th Percentile	90 th Percentile
PPR Weights	100.7660	40.5810	9.8528

Table 4 - State-Wide Hospital Distributions

	25 th Percentile	50 th Percentile	90 th Percentile
Total Admissions at Risk for PPR	610	1,269	4,716
Actual Number of PPR Chains	14	31	130
Members with PPRs	13	30	121
Number of PPR Events	16	36	167

Table 5 - Hospital PPR Results by PPR Reason

PPR Reason	PPR Weights	Fraction of Total PPR Weights	PPR Expenditures	Fraction of PPR Expenditures
1 — Medical readmission for a continuation or recurrence of the reason for the initial admission, or for a closely related condition				
2A — Ambulatory care sensitive conditions as designated by AHRQ				
2B — All other readmissions for a chronic problem that may be related to care either during or after the initial admission				
3 — Medical readmission for acute medical condition or complication that may be related to or may have resulted from care during initial admission or in post-discharge period after initial admission				
4 — Readmission for surgical procedure to address a continuation or a recurrence of the problem causing the initial admission				
5 — Readmission for surgical procedure to address a complication that may be related to or may have resulted from care during the initial admission				
6A — Readmission for mental health reasons following an initial admission for a non-mental health, non-substance abuse reason				
6B — Readmission for a substance abuse diagnosis reason following an initial admission for a non-mental health, non-substance abuse reason				
6C — Mental health or substance abuse readmission following an initial admission for a substance abuse or mental health diagnosis				



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