

Massachusetts Acute Care Hospital Readmissions Profile: July, 2012 to June, 2013

Milford Regional Medical Center

September 2015

In June, 2015 the Center for Health Information and Analysis (CHIA) released [Hospital-Wide Adult All-Payer Readmissions in Massachusetts: 2011-2013](#), its first annual report on hospital-wide all cause readmissions in the Commonwealth. That report applied the Hospital-Wide All-Cause Unplanned 30-day Readmission Measure developed by the Centers for Medicare and Medicaid Services (CMS) and the Yale Center for Outcomes Research to the adult all-payer population in the Commonwealth. It included detailed readmission statistics for the state as a whole and hospital-specific readmission rates for 62 acute-care hospitals. This readmission profile series provides more in-depth information on each hospital.

This profile contains readmission statistics for Milford Regional Medical Center presented in the context of the statewide figures and of the patient population that Milford serves. CHIA hopes that these reports will be useful to hospitals and to other stakeholders working to reduce readmissions in the Commonwealth. The profile is based on data submitted by Massachusetts acute-care hospitals to CHIA's Hospital Discharge Database (see www.chiamass.gov/case-mix-data/).

It is important to note a few features of the Yale/CMS readmissions methodology as modified by CHIA for Massachusetts reporting.

- The calculations reflect the all-payer population. CMS reports on Medicare Fee-for-Service patients only.
- Readmissions from Milford back to Milford as well as those back to other acute-care hospitals in the Commonwealth are included.
- The calculations exclude primary psychiatric and obstetric discharges.
- The calculations include adults (age 18+) only.
- This profile primarily covers the state fiscal year FY13, from July, 2012 to June, 2013. Some data displays include the three-year period from July, 2010 to June 2013.
- Breakouts with fewer than 11 data points (e.g. discharges, readmissions, or patients) are suppressed to protect patient privacy.

Please note, the bar graph on frequent users (page 6 top) and the bar graphs for payer and discharge setting (page 3 right) have been updated to ensure consistency in calculation methods across different CHIA readmissions data products. For definitions of the terms and methodology used in this report please see the statewide report.

It is important to note that with the exception of the table on this page and the first figure on the next, the readmission rates reported here are not risk-adjusted. The patterns and trends reported in this profile reflect this hospital's patient case-mix, practice patterns, and any licensure for providing specialized inpatient services.

This report contains the following information profiling readmissions at Milford. Except where indicated below, all displays cover the period from July 2012 to June 2013.

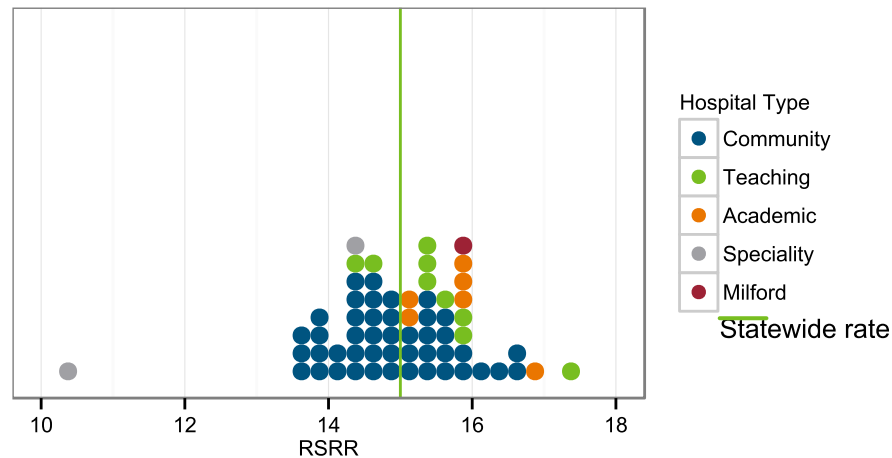
- [Overview readmissions statistics](#)
- [Risk-standardized readmission rates by hospital type](#)
- [Readmission rates by quarter \(July 2010 to June 2013\)](#)
- [Number of readmissions by time since discharge](#)
- [Readmission rates by age](#)
- [Readmission rates by payer type](#)
- [Readmission rates by discharge setting](#)
- [Diagnoses with the highest numbers and rates of readmissions](#)
- [Readmissions to other hospitals](#)
- [Readmissions among frequently hospitalized patients \(July 2010 to June 2013\)](#)
- [Detailed readmission figures for quarter, payer type, and discharge setting](#)

Overview Readmissions Statistics, July 2012 to June 2013

This table contains the overall readmission statistics for Milford. The statewide figures are provided for comparison.

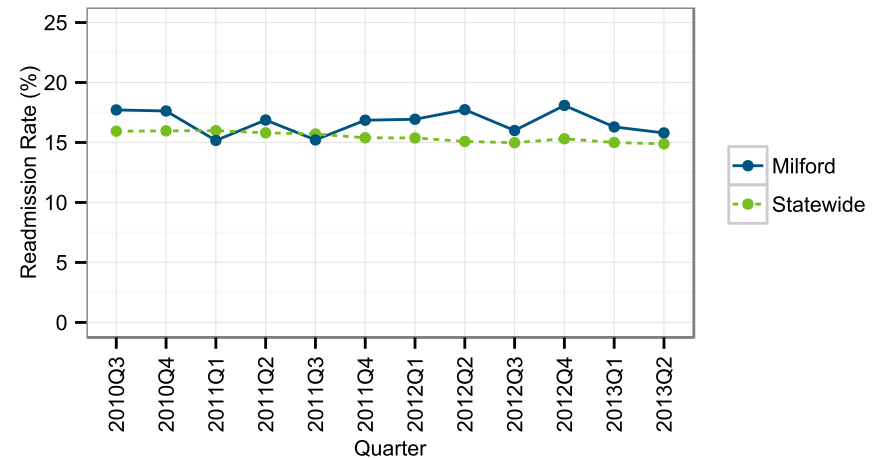
	Milford	Statewide
Eligible Discharges	5,841	508,354
Readmissions	969	76,481
Readmission Rate	16.6%	15.0%
Risk-Standardized Readmission Rate	15.8%	15.0%

All-Payer Risk-Standardized Readmission Rates by Hospital Type, July 2012 to June 2013



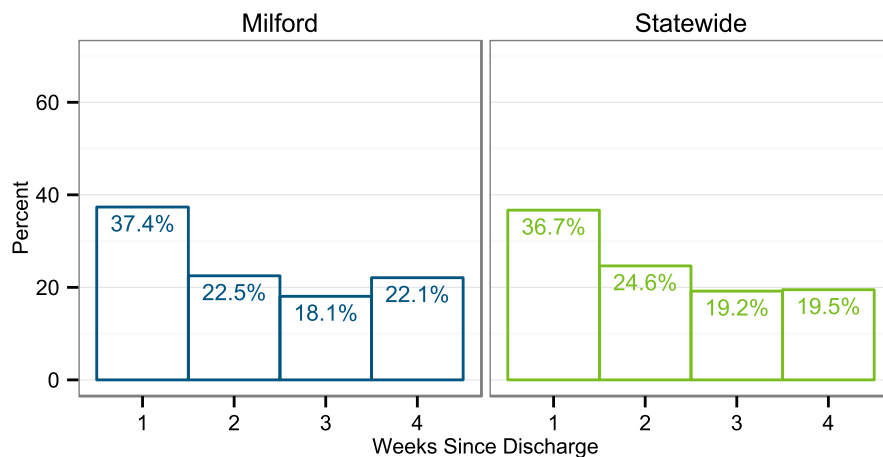
This graph shows the distribution of risk-standardized readmission rates for hospitals. Milford is indicated by the red dot. Please see the statewide report for information on how hospital types are defined.

All-Payer Readmission Rate by Quarter, July 2010 to June 2013



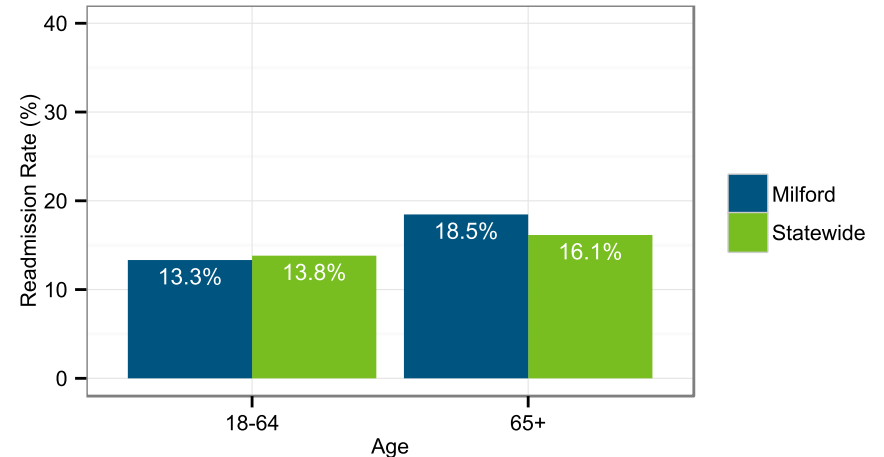
This graph shows the readmission rate for Milford over time in comparison to the statewide rate.

Length of Time Between Discharge and Readmission, July 2012 to June 2013



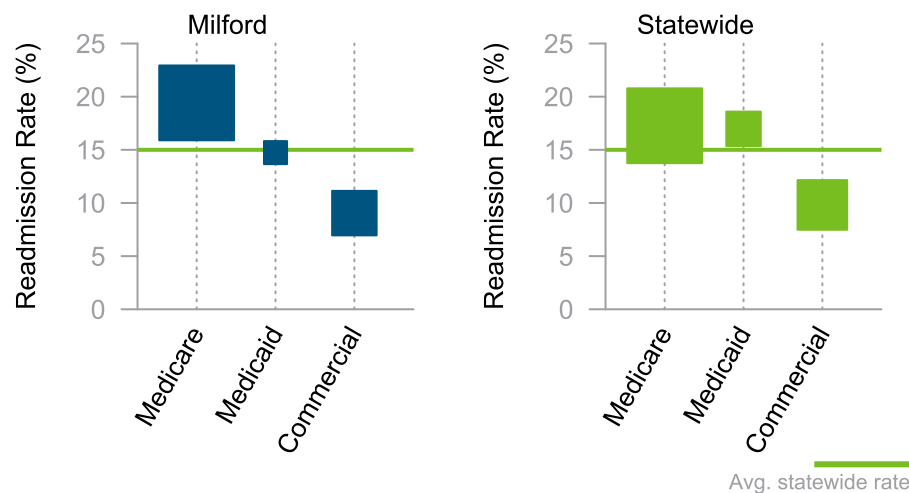
These plots show the percentage of readmissions by week from the time of the initial discharge.

All-Payer Readmission Rates by Age, July 2012 to June 2013



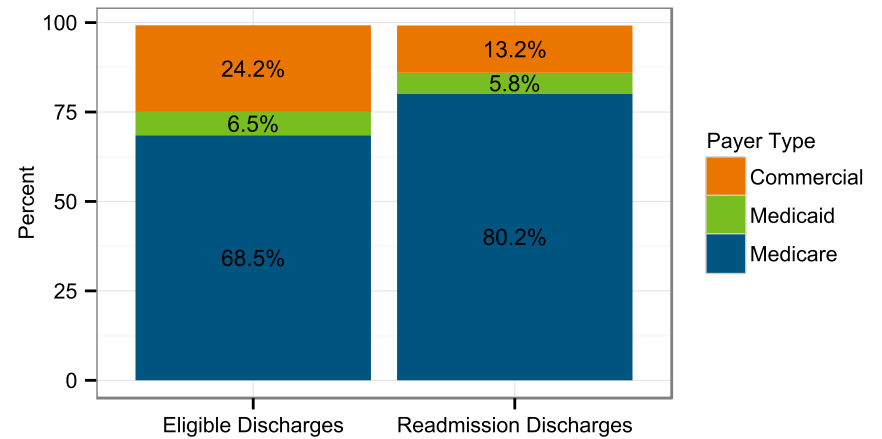
This graph shows readmission rates by age for Milford and for the state.

All-Payer Readmission Rate by Payer Type, July 2012 to June 2013



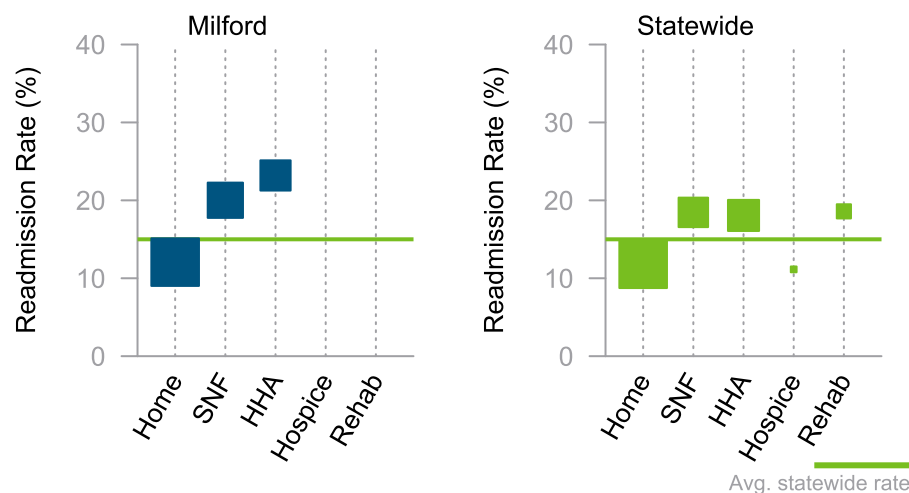
These plots show hospital and statewide readmissions broken out by the expected payer type. Vertical position of the box indicates the rate, and the size of the box is proportional to the number of readmissions.

Payer Type Profile, July 2012 to June 2013



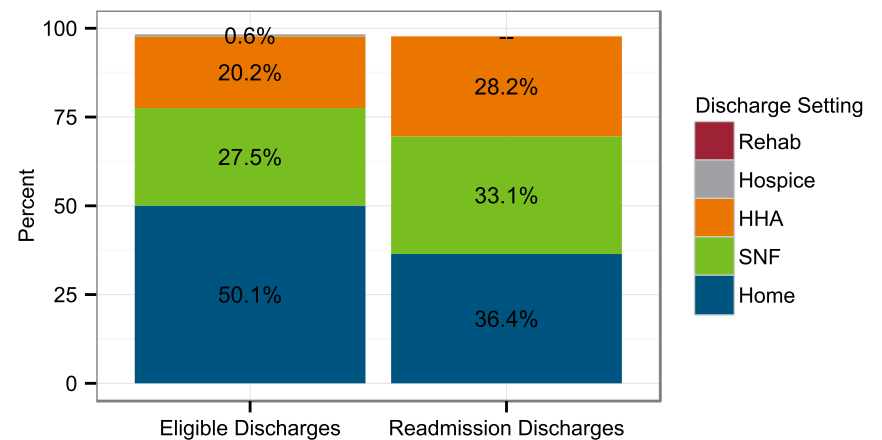
This chart compares the payer profile of discharges from Milford that resulted in a readmission to the payer profile of all eligible discharges at Milford. Note: "Self-Pay" and "Other" categories not shown.

All-Payer Readmission Rate by Discharge Setting, July 2012 to June 2013



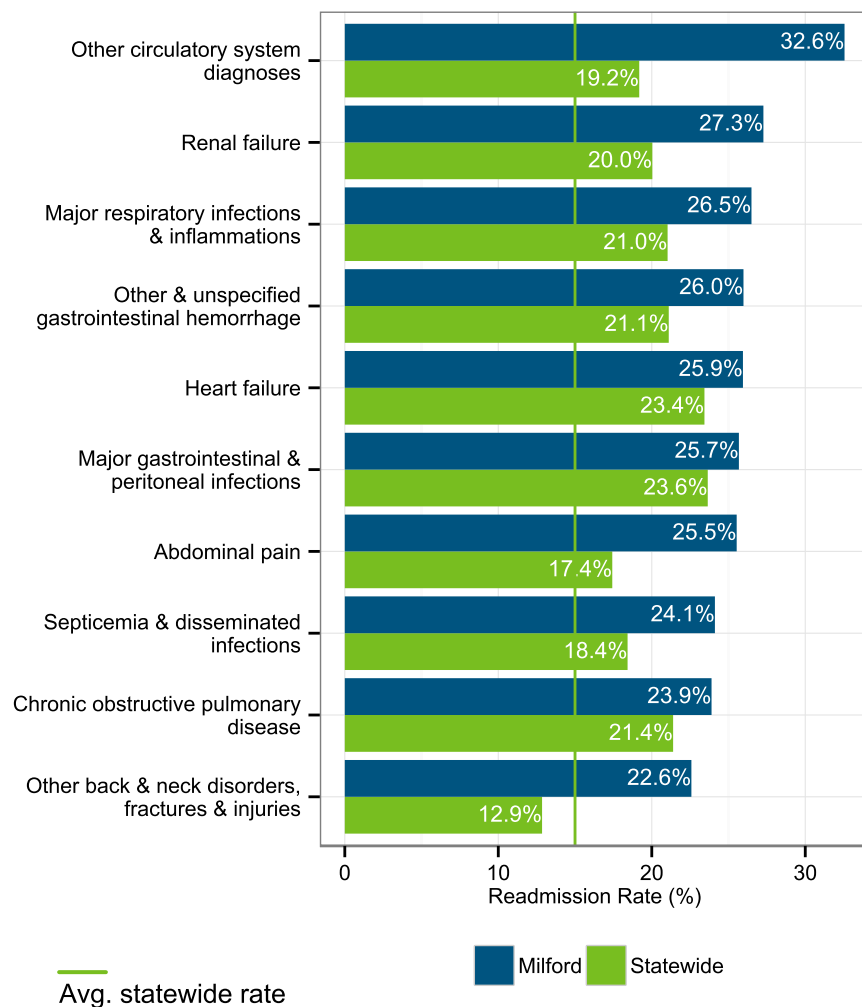
This graph shows readmission rate by the setting to which the patient was originally discharged. Note: SNF = skilled nursing facility, HHA = home with home health agency care.

Discharge Setting Profile, July 2012 to June 2013



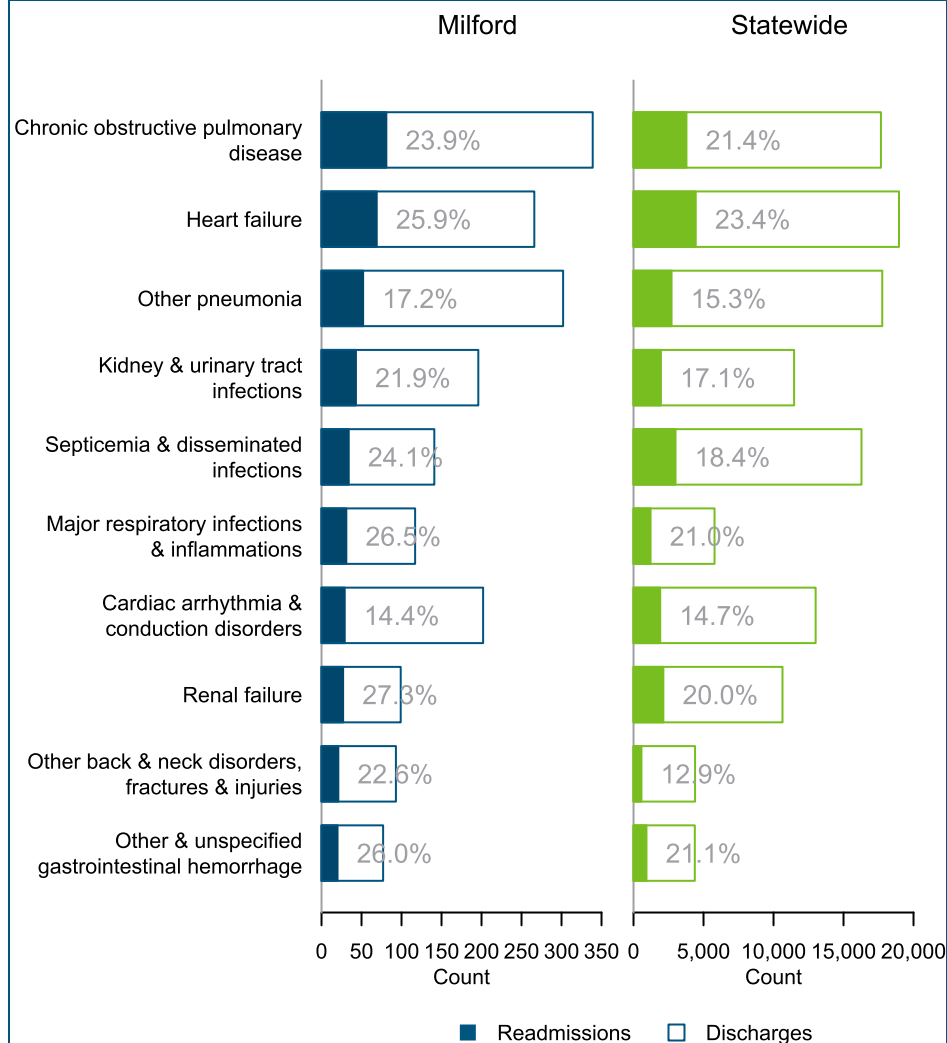
This graph shows the distribution of discharge settings for readmission discharges compared to all the eligible discharges at Milford. Cells with < 11 cases are suppressed to protect patient privacy (indicated by "--").

Top Diagnoses with Highest Rates of Readmission, July 2012 to June 2013



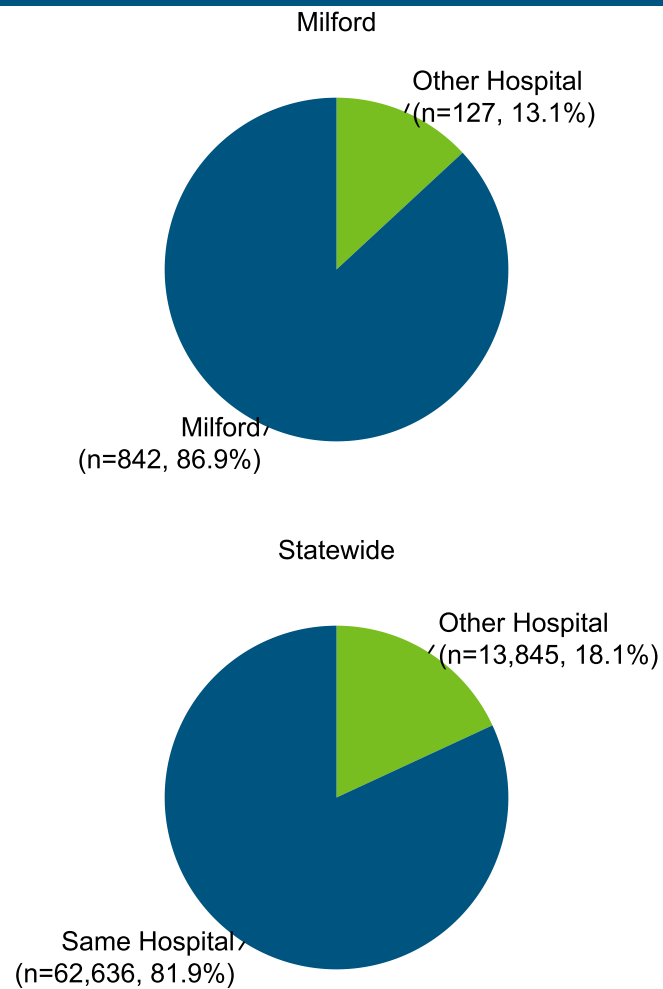
This plot shows the 10 discharge conditions with the highest rates of readmissions for Milford and corresponding figures for those conditions statewide. Note: Only conditions with 25 or more discharges and 11 or more readmissions are included.

Top Diagnoses with Highest Numbers of Readmissions, July 2012 to June 2013



These plots show the 10 discharge conditions with the highest numbers of readmissions at Milford and the corresponding figures for those conditions statewide. The outlined bars represent the total number of discharges for each diagnosis, and the filled-in bars show the number of readmissions. The figures next to each bar give the readmissions rate. Note: Only conditions with 25 or more discharges and 11 or more readmissions are included.

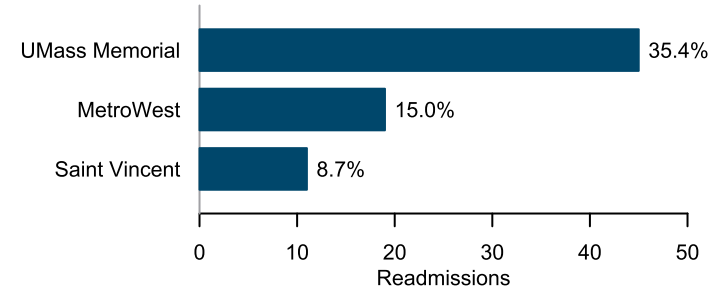
Readmissions to Other Hospitals, July 2012 to June 2013



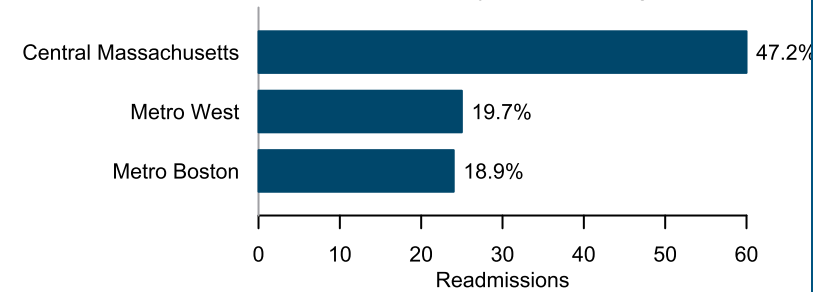
This figure shows the proportion of the readmissions from Milford that were to another hospital, along with the corresponding statewide figure.

Characteristics of Readmissions to Other Hospitals, July 2012 to June 2013

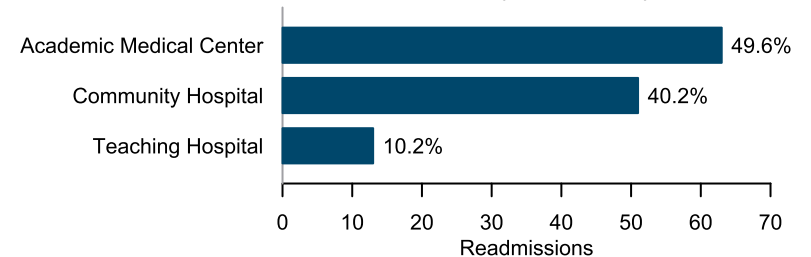
Readmissions to Top 3 Other Hospitals



Readmissions to Other Hospitals by Hospital Region

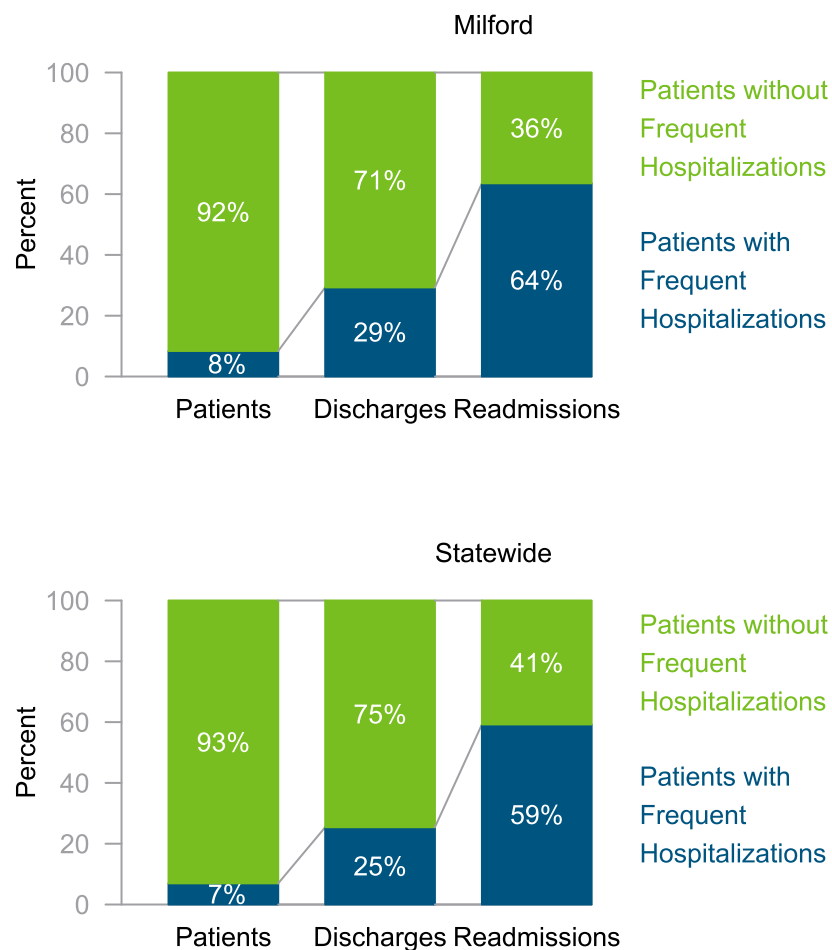


Readmissions to Other Hospitals by Hospital Type



This display provides more information on discharges from Milford in which the patient was subsequently readmitted to another hospital. The top portion of the figure shows the top three other hospitals to which patients from Milford were readmitted. The middle portion shows the regions in which these patients were readmitted. The bottom portion shows the types of hospitals to which they were readmitted. The percentage for each bar represents the percentage that group represents of the total number of readmissions from Milford that were readmitted to other hospitals. Due to data privacy concerns, only groups with 11 or more readmissions are listed. For definitions of the geographic regions, please see the statewide report.

All-Payer Readmissions among Frequently Hospitalized Patients, July 2010 to June 2013



In the statewide report, CHIA reported readmissions for frequently hospitalized patients, defined as those with four or more admissions in any one-year period from July 2010 to June 2013. This chart shows the percentage of patients, discharges, and readmissions accounted for by frequently hospitalized patients at Milford.

Hospital Readmissions among Frequently Hospitalized Patients by Payer Type, July 2010 to June 2013

	Number of Patients	Percentage within Group	Number of Discharges	Number of Readmissions	Readmission Rate (%)
Patients with Frequent Hospitalizations	748	100.0%	5,167	1,870	36.2%
Commercial	108	14.4%	571	210	36.8%
Medicare	595	79.5%	4,262	1,536	36.0%
Medicaid	42	5.6%	316	117	37.0%
Patients without Frequent Hospitalizations	8,146	100.0%	12,458	1,072	8.6%
Commercial	3,239	39.8%	4,131	252	6.1%
Medicare	4,232	52.0%	7,397	763	10.3%
Medicaid	526	6.5%	758	49	6.5%
Total Patients	8,894		17,625	2,942	16.7%

This table shows the breakdown of patients at Milford with frequent hospitalizations by payer type, and the associated readmission rates for these groups. Note: Percentages within groups do not sum to 100 because the table excludes "Self-Pay" and "Other" categories which together sum to less than 5% of discharges. Patients with frequent hospitalizations are defined as those with four or more admissions in any one-year period from July 2010 to June 2013. Cells with fewer than 11 cases are suppressed to protect patient privacy and are indicated by dashes.

Detailed Readmissions Figures

This table contains breakouts of readmission rates by payer type, quarter, and discharge setting. Statistics for groups with fewer than 11 cases are excluded to protect patient privacy, and are indicated by dashes.

Characteristic	Milford			Statewide		
	Number of Discharges	Number of Readmissions	Readmission Rate (%)	Number of Discharges	Number of Readmissions	Readmission Rate (%)
Overall, July 2012 to June 2013						
Overall	5,841	969	16.6%	508,354	76,481	15.0%
Age, July 2012 to June 2013						
18-64	2,131	284	13.3%	240,507	33,233	13.8%
65+	3,710	685	18.5%	267,847	43,248	16.1%
Year and Quarter, July 2010 to June 2013						
2010Q3	1,417	251	17.7%	134,869	21,499	15.9%
2010Q4	1,390	245	17.6%	136,216	21,753	16.0%
2011Q1	1,569	238	15.2%	136,669	21,851	16.0%
2011Q2	1,612	272	16.9%	137,362	21,712	15.8%
2011Q3	1,446	220	15.2%	133,936	21,038	15.7%
2011Q4	1,489	251	16.9%	133,129	20,490	15.4%
2012Q1	1,423	241	16.9%	133,659	20,553	15.4%
2012Q2	1,438	255	17.7%	131,942	19,904	15.1%
2012Q3	1,300	208	16.0%	127,337	19,077	15.0%
2012Q4	1,570	284	18.1%	127,928	19,583	15.3%
2013Q1	1,534	250	16.3%	127,151	19,071	15.0%
2013Q2	1,437	227	15.8%	125,938	18,750	14.9%
Payer Type, July 2012 to June 2013						
Medicare	4,002	777	19.4%	295,261	50,973	17.3%
Medicaid	380	56	14.7%	62,717	10,643	17.0%
Commercial	1,415	128	9.0%	129,873	12,749	9.8%
Discharge Setting, July 2012 to June 2013						
Home	2,924	353	12.1%	258,860	30,541	11.8%
SNF	1,604	321	20.0%	99,346	18,335	18.5%
HHA	1,177	273	23.2%	110,419	19,946	18.1%
Hospice	36	--	--	3,851	429	11.1%
Rehab	0	0	NA	22,988	4,273	18.6%