

## Background

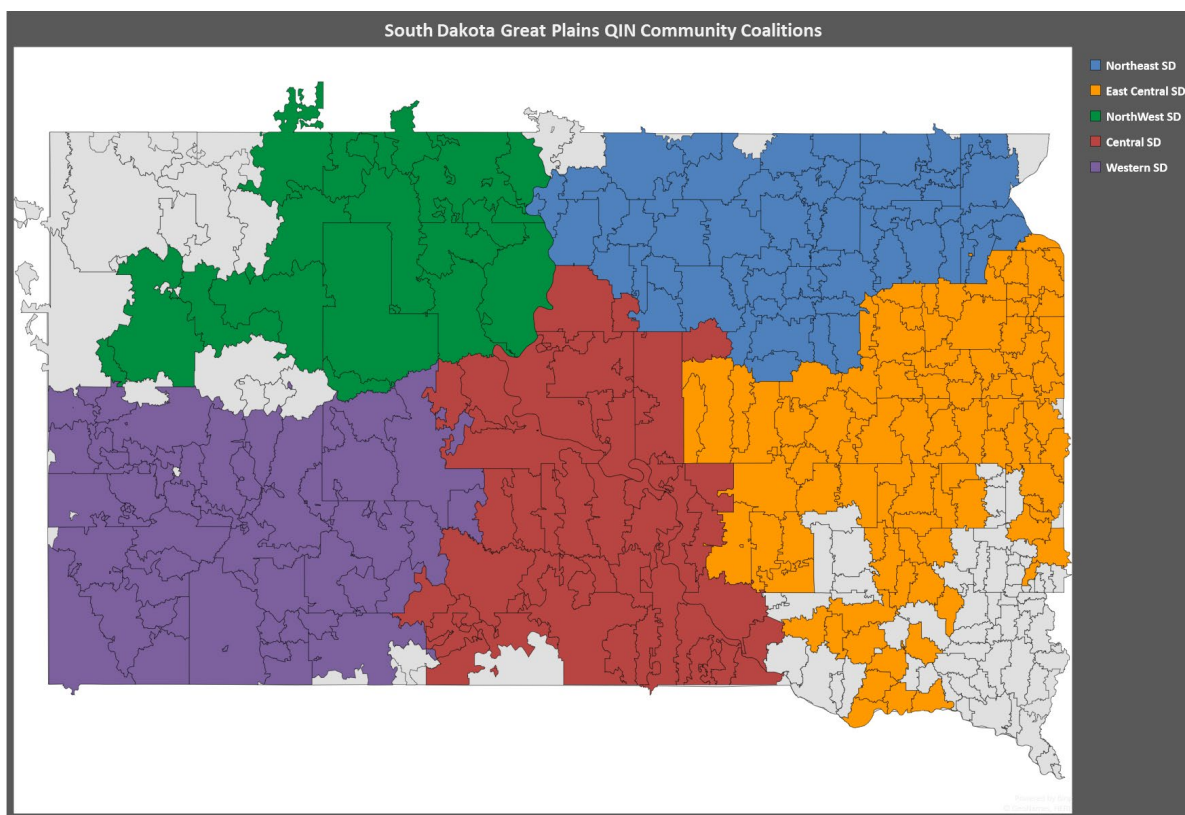
North Dakota and South Dakota communities have many attributes that are similar, yet qualities that make them unique. However, when it comes to healthcare, each state has a shared commitment to ensuring quality of care for its community members.

The Great Plains Quality Innovation Network is the Quality Innovation Network–Quality Improvement Organization (QIN-QIO) for North Dakota and South Dakota. Through our Quality Care Coalitions– Partnership for Community Health, we strive to improve healthcare quality and patient outcomes. We work with partners to identify areas for improvement, which include reducing avoidable hospital admissions and readmissions, including those caused by high-risk medications related to adverse drug events, improving medication safety and overall better care coordination.

As your quality partner, our team has developed these community data reports to offer a snapshot for growth, addressing gaps and quality improvement.

## Partnerships for Community Health

These Partnerships are defined by geographical service areas or zip codes (communities) and comprised of healthcare practitioners, providers and/or members from various settings, healthcare groups, non-clinical organizations, and local support/service organizations. Great Plains QIN engages these partnership communities to coordinate care for cost effectiveness, efficiencies and to reduce barriers in accessing care.



This material was prepared by Great Plains Quality Innovation Network, a Quality Innovation Network – Quality Improvement Organization, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 12SOW/GPQIN/QIN-QIO-330/0623

## Data Overview and Definitions

Fee-for-Service Medicare claims data were used to calculate the measures contained in this report (by GPQIN?). Readmissions are defined as "all-cause" readmissions to any hospital within 30 days of discharge. We refer to the initial hospital admission as the "index discharge" and the second return admission as the "readmission." None of the measures are risk adjusted.

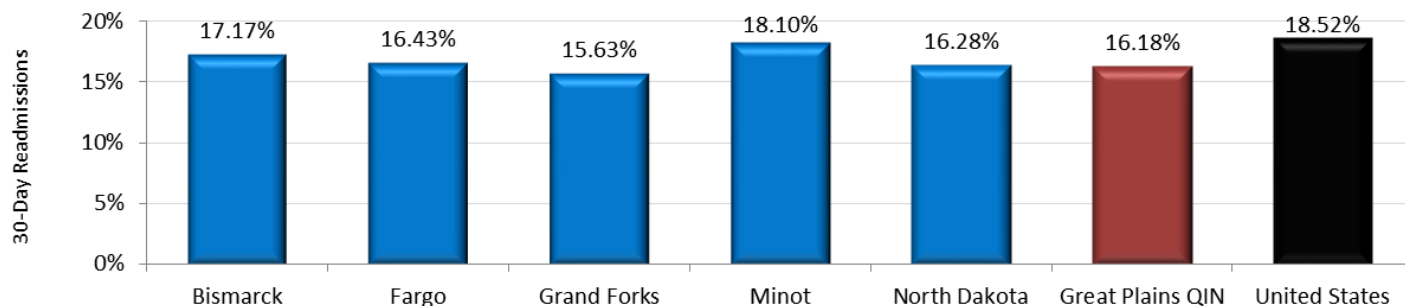
COVID-19 related Medicare claims were excluded from all the measures in this report. Specifically, inpatient admissions, inpatient discharges, emergency department (ED) visits and observation stays are excluded when they had a principal/first-listed diagnosis of COVID-19. In addition, inpatient admissions and inpatient discharges are excluded when they had a principal diagnosis of Sepsis or Transplant Complication with a diagnosis of COVID-19 in any secondary position.

Community-level measures included are:

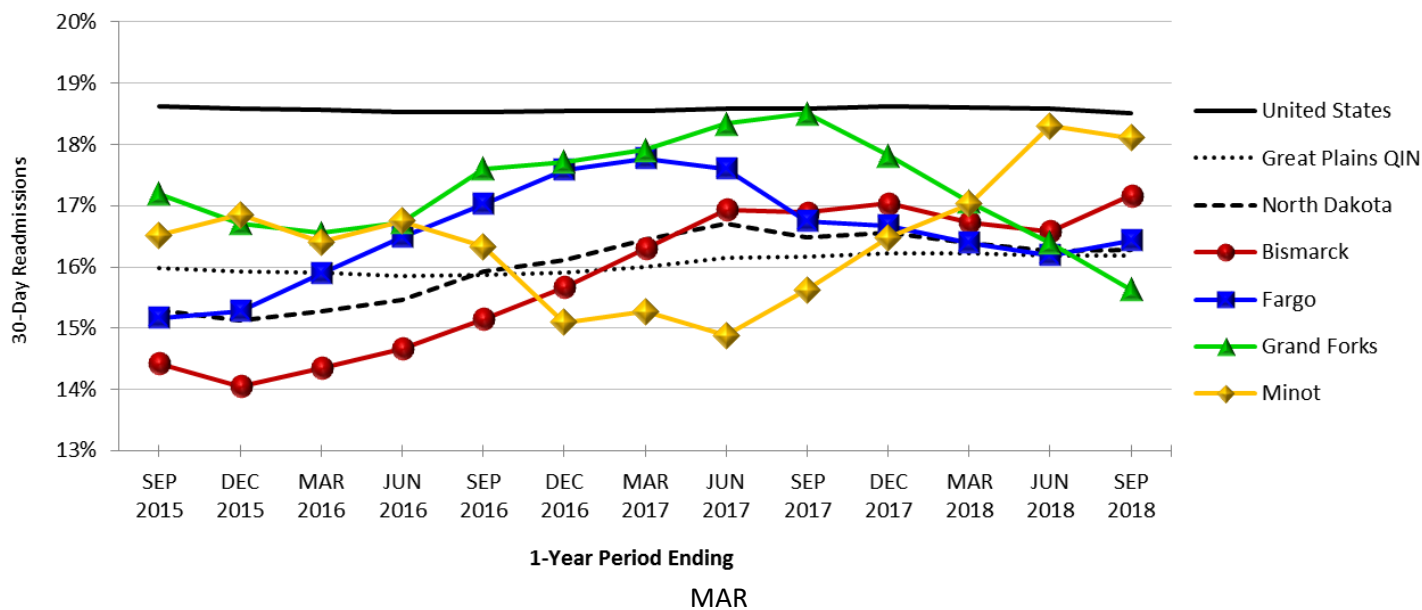
- **30-day Hospital Readmission Rate and Trends:** The percentage of hospital readmissions within 30 days of discharge
- **Acute Care Utilization Rate:** Admissions and Emergency Department (ED) Visits (without admission)
- **Hospital Discharge Rate per Location:** Home (Community), Home Health, Hospice, and Skilled Nursing Facility
- **30-Day Hospital Readmission Rate per Discharge Location:** As Above
- **Top Five DRG Bundles for Admissions:** DRG bundles designated by Great Plains QIN
- **Top Five DRG Bundles for 30-Day Readmissions:** DRG bundles designated by Great Plains QIN
- **ED Visits among Super-Utilizers Rate:** Rate of emergency department visits per 1,000 Medicare Fee-for-Service beneficiary-years among super-utilizers. A **super-utilizer** has at least 4 inpatient discharges or at least 5 ED visits, observation stays, and inpatient discharges combined, with discharge dates in a **12-month** period. One beneficiary -year is comprised of 12 months of original Medicare enrollment.
- **30-Day Readmissions Rate:** Rate of all-cause inpatient readmissions withing 30 days after inpatient discharge per 1,000 Medicare Fee-for-Service beneficiary-years. One beneficiary-year is comprised of 12 months of original Medicare enrollment.

## Community Data Highlights

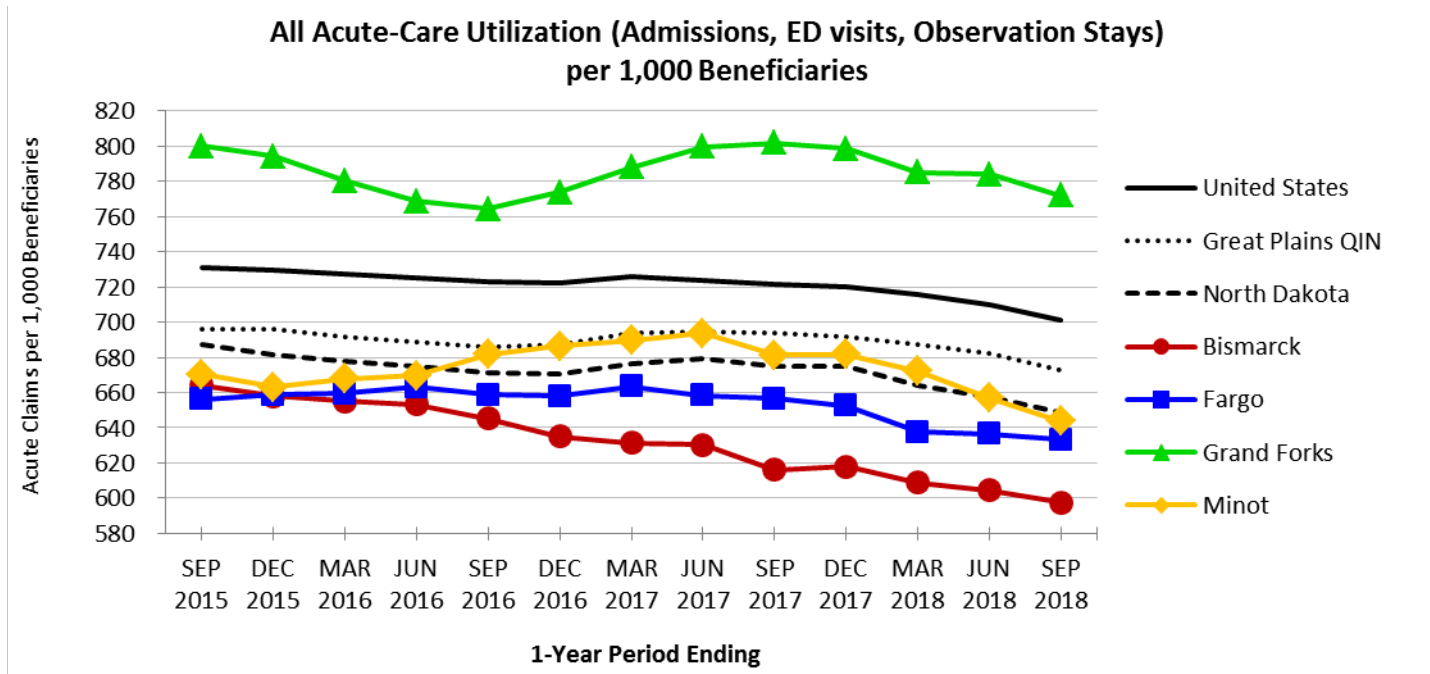
Current Readmission Rates (# of readmissions within 30 days / # of discharges): 10/01/2017 - 09/30/2018



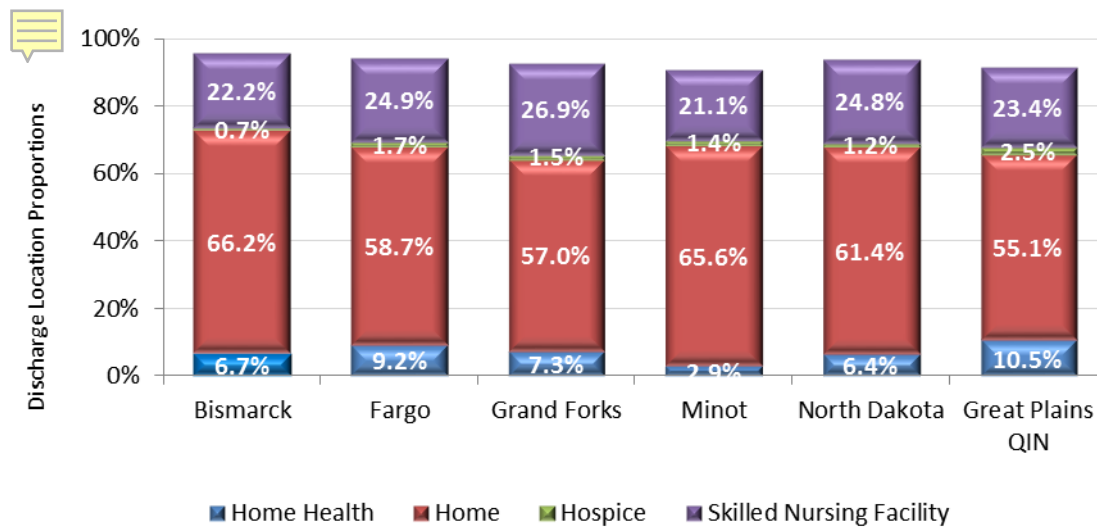
### Readmission Rate Trends:



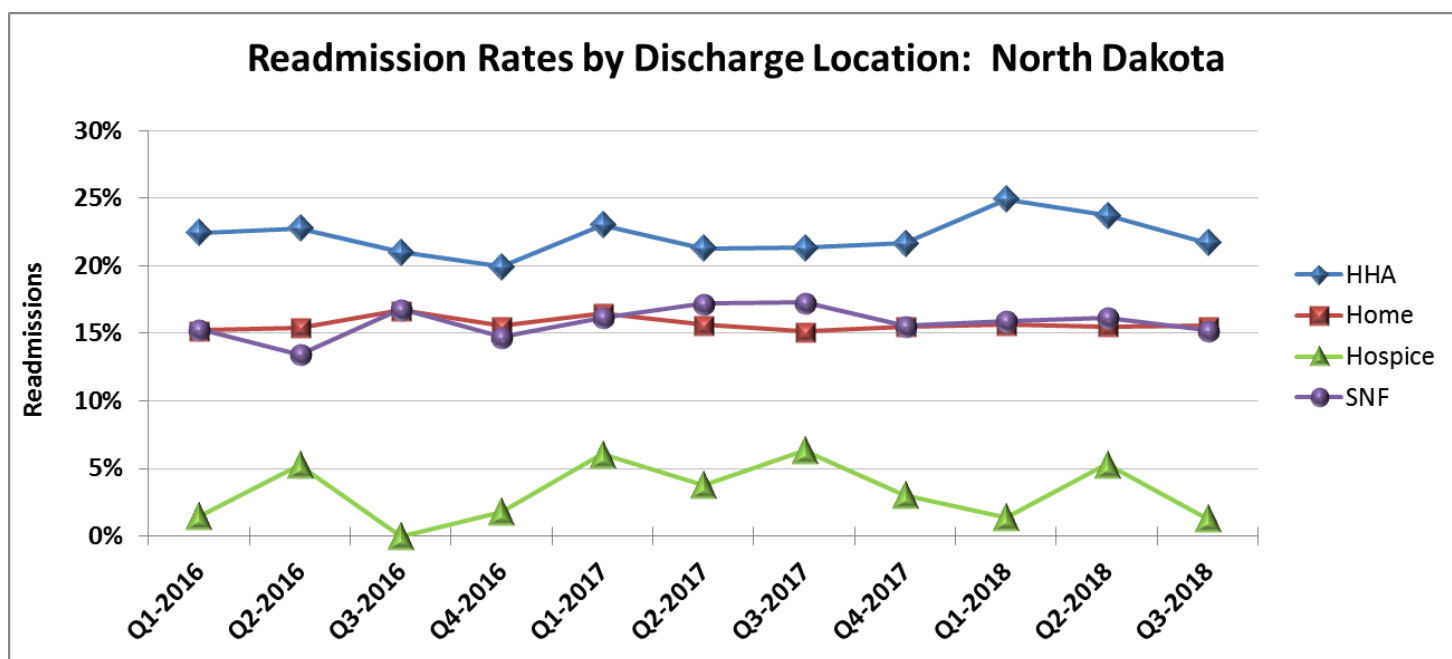
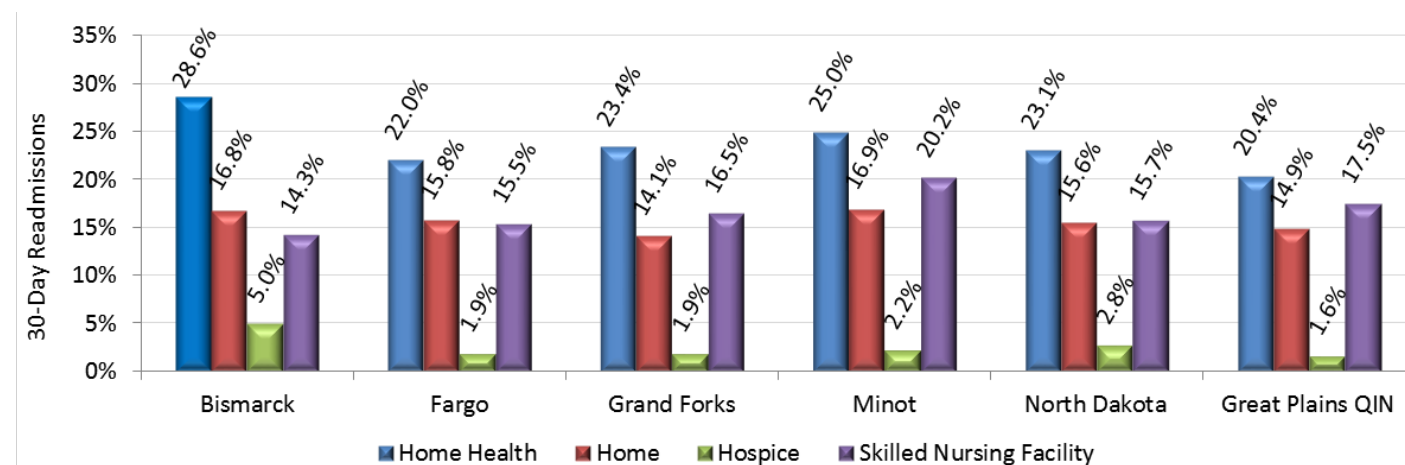
**Acute Care Utilization (per 1,000 Beneficiaries): 10/01/2017 - 09/30/2018**



**Discharge Locations: 10/01/2017 - 09/30/2018**



## Readmission Rates among Discharge Locations: 10/01/2017 - 09/30/2018



**Top 5 Admission DRG Bundles: 10/01/2017 - 09/30/2018**

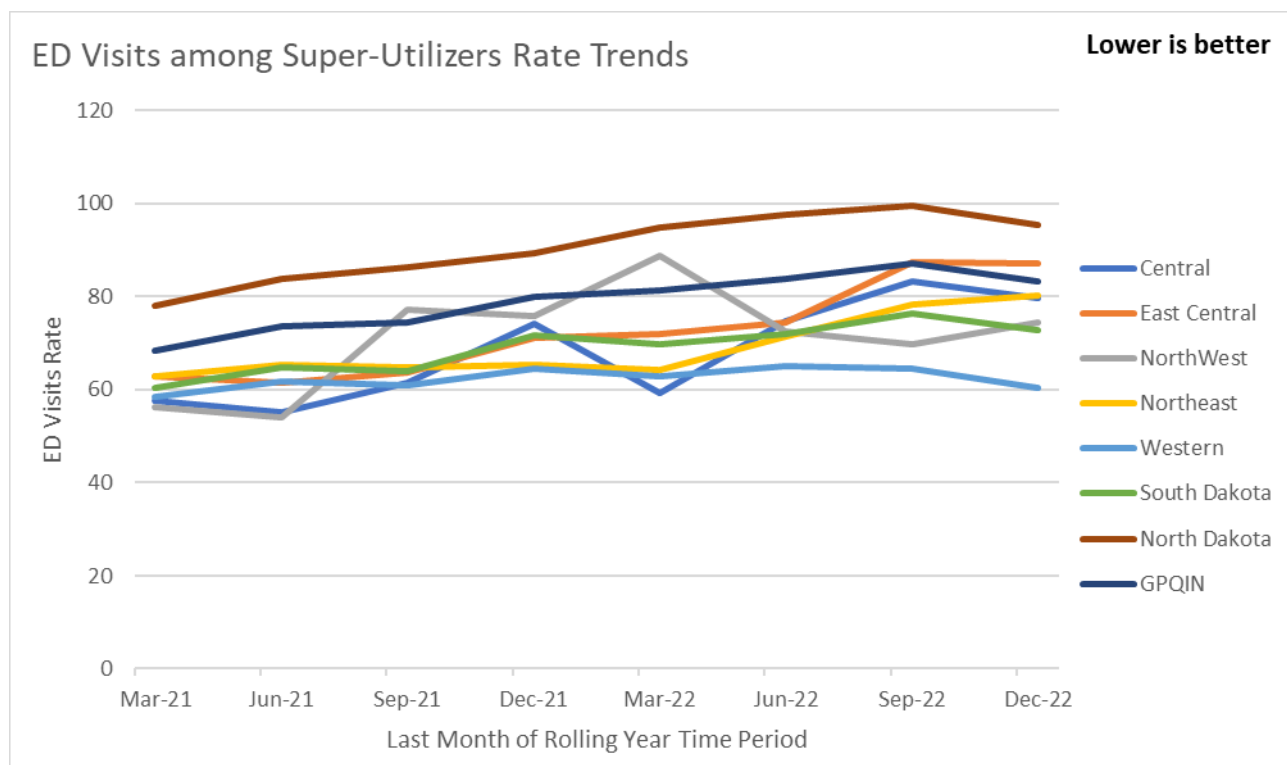
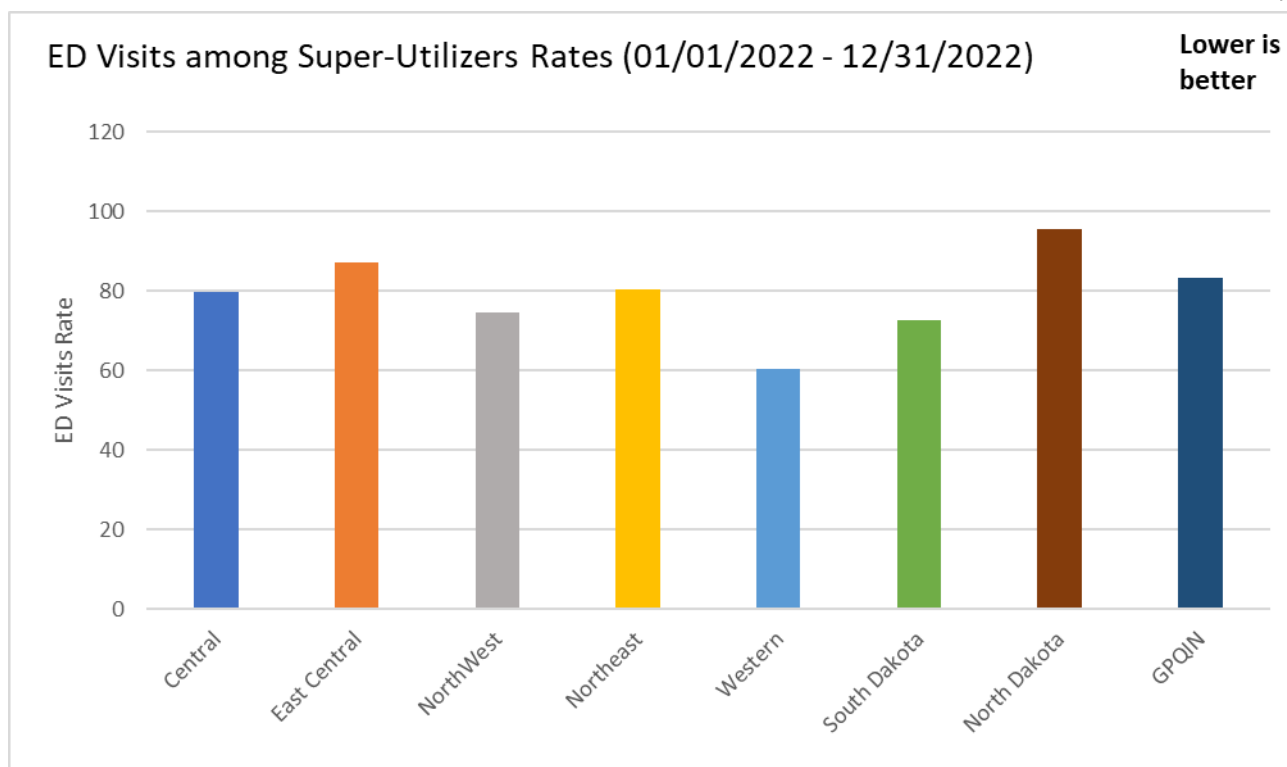
DRGs that differ only in their level of complications are combined into "DRG Bundles". For example, DRGs 637, 638, and 639 (Diabetes with major complications, with complications, and without complications) are combined into one DRG bundle called Diabetes.

Community	DRG Bundle Description	DRG Bundle Admissions	Community Admissions	Percent of Community Admissions
Bismarck	SEPTICEMIA OR SEVERE SEPSIS	469	5,629	8.33%
	HEART FAILURE & SHOCK	356	5,629	6.32%
	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	257	5,629	4.57%
	SIMPLE PNEUMONIA & PLEURISY	251	5,629	4.46%
	RENAL FAILURE	148	5,629	2.63%
Fargo	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	472	6,503	7.26%
	SEPTICEMIA OR SEVERE SEPSIS	379	6,503	5.83%
	HEART FAILURE & SHOCK	321	6,503	4.94%
	SIMPLE PNEUMONIA & PLEURISY	304	6,503	4.67%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	227	6,503	3.49%
Grand Forks	SEPTICEMIA OR SEVERE SEPSIS	361	3,630	9.94%
	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	204	3,630	5.62%
	SIMPLE PNEUMONIA & PLEURISY	199	3,630	5.48%
	HEART FAILURE & SHOCK	188	3,630	5.18%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	114	3,630	3.14%
Minot	SEPTICEMIA OR SEVERE SEPSIS	259	3,403	7.61%
	SIMPLE PNEUMONIA & PLEURISY	240	3,403	7.05%
	HEART FAILURE & SHOCK	188	3,403	5.52%
	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	159	3,403	4.67%
	PULMONARY EDEMA & RESPIRATORY FAILURE	106	3,403	3.11%
North Dakota	SEPTICEMIA OR SEVERE SEPSIS	1,719	24,557	7.00%
	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	1,423	24,557	5.79%
	SIMPLE PNEUMONIA & PLEURISY	1,384	24,557	5.64%
	HEART FAILURE & SHOCK	1,336	24,557	5.44%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	705	24,557	2.87%
Great Plains QIN	SEPTICEMIA OR SEVERE SEPSIS	20,312	248,351	8.18%
	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY	17,679	248,351	7.12%
	SIMPLE PNEUMONIA & PLEURISY	11,721	248,351	4.72%
	HEART FAILURE & SHOCK	11,071	248,351	4.46%
	PSYCHOSES	7,176	248,351	2.89%

**Top 5 Readmission DRG Bundles: 10/01/2017 - 09/30/2018**

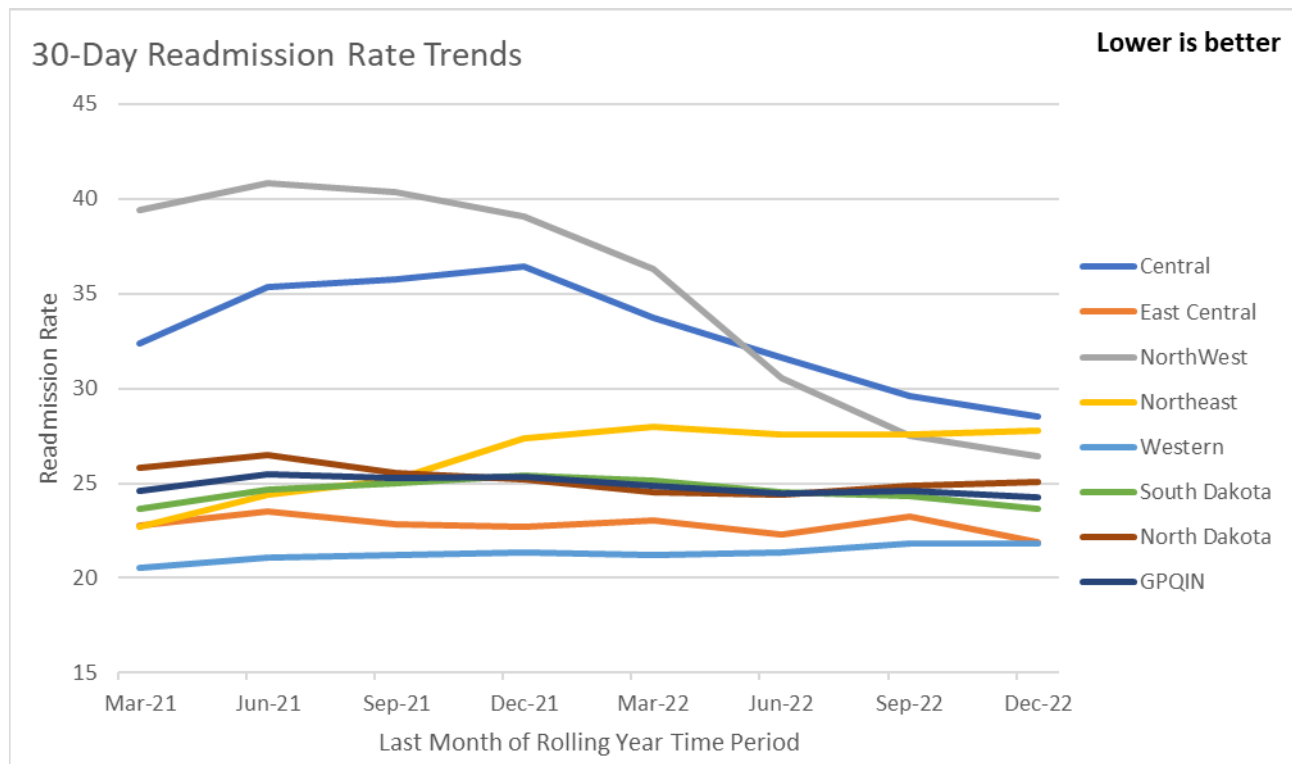
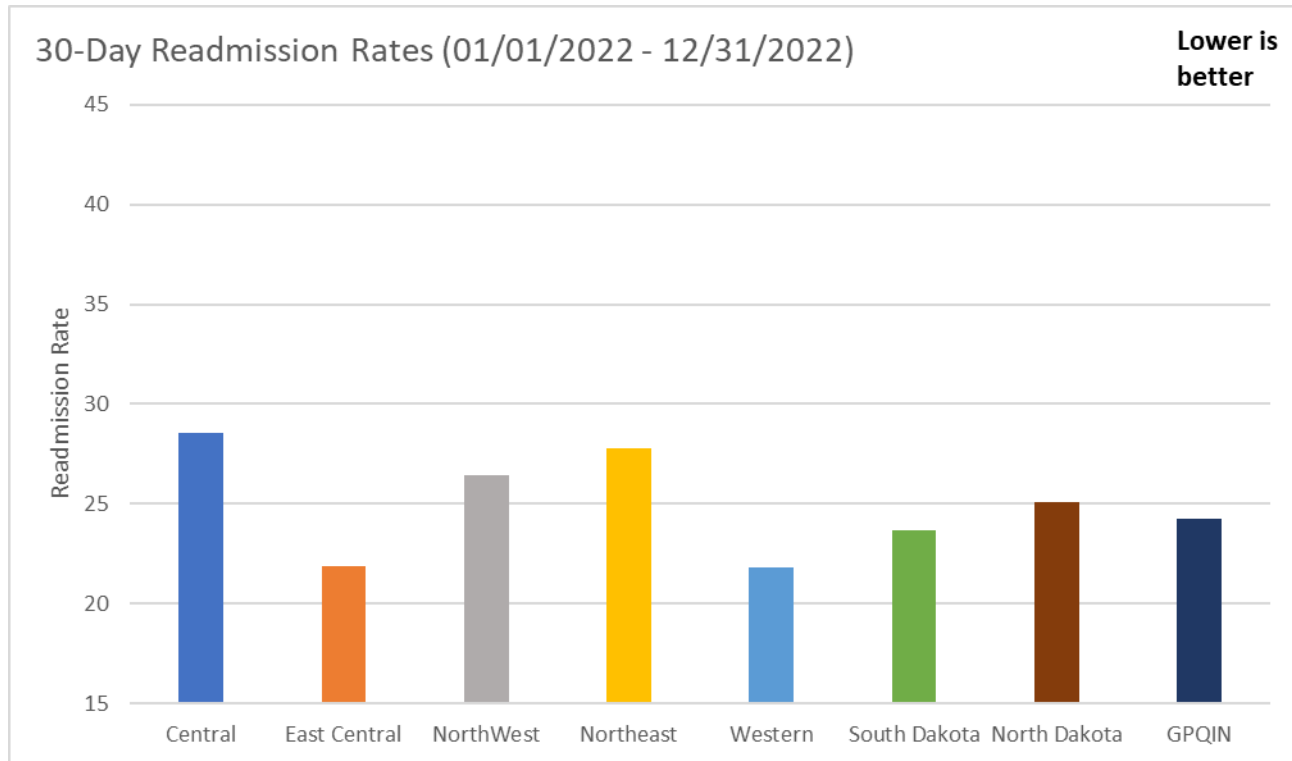
Community	DRG Bundle Description	DRG Bundle 30-Day Readmissions	Community 30-Day Readmissions	Percent of Community 30-Day Readmissions
Bismarck	HEART FAILURE & SHOCK	87	929	9.36%
	SEPTICEMIA OR SEVERE SEPSIS	67	929	7.21%
	SIMPLE PNEUMONIA & PLEURISY	43	929	4.63%
	RENAL FAILURE	36	929	3.88%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	30	929	3.23%
Fargo	HEART FAILURE & SHOCK	67	1,032	6.49%
	SEPTICEMIA OR SEVERE SEPSIS	56	1,032	5.43%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	55	1,032	5.33%
	ACUTE MYOCARDIAL INFARCTION	48	1,032	4.65%
	PSYCHOSES	44	1,032	4.26%
Grand Forks	SEPTICEMIA OR SEVERE SEPSIS	53	549	9.65%
	HEART FAILURE & SHOCK	30	549	5.46%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	26	549	4.74%
	SIMPLE PNEUMONIA & PLEURISY	25	549	4.55%
	PULMONARY EDEMA & RESPIRATORY FAILURE	15	549	2.73%
Minot	HEART FAILURE & SHOCK	45	582	7.73%
	SEPTICEMIA OR SEVERE SEPSIS	43	582	7.39%
	SIMPLE PNEUMONIA & PLEURISY	41	582	7.04%
	PULMONARY EDEMA & RESPIRATORY FAILURE	21	582	3.61%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	18	582	3.09%
North Dakota	HEART FAILURE & SHOCK	288	3,843	7.49%
	SEPTICEMIA OR SEVERE SEPSIS	256	3,843	6.66%
	SIMPLE PNEUMONIA & PLEURISY	198	3,843	5.15%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	157	3,843	4.09%
	ACUTE MYOCARDIAL INFARCTION	109	3,843	2.84%
Great Plains QIN	SEPTICEMIA OR SEVERE SEPSIS	3,226	38,947	8.28%
	HEART FAILURE & SHOCK	2,433	38,947	6.25%
	SIMPLE PNEUMONIA & PLEURISY	1,665	38,947	4.28%
	PSYCHOSES	1,594	38,947	4.09%
	CHRONIC OBSTRUCTIVE PULMONARY DISEASE	1,170	38,947	3.00%

**ED Visits among Super-Utilizers Rate:** ("Super Utilizers" are Medicare Beneficiaries who have at least 4 inpatient discharges or at least 5 ED visits, observation stays, and inpatient discharges combined in the 12-month period immediately preceding the performance period)





### 30-Day Readmissions Rates:



For questions on this report, please contact a member of our Great Plains Quality Innovation Network team; visit the Who We Are page (<https://greatplainsqin.org/about-us/who-we-are/>) for a listing of team members and contact information.