



## NEWS RELEASE

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### **N.J. Hospitals Make Strides in Reducing Readmissions**

*CMS: 13.3 Percent Improvement 2<sup>nd</sup> Highest Nationwide*

New federal data shows that New Jersey hospitals are making tremendous progress in one of the most stubborn healthcare challenges – reducing the rate of hospital readmissions.

New Jersey hospitals have reduced their readmission rate 13.3 percent between 2010 and 2015, according to data released yesterday by the U.S. Centers for Medicare and Medicaid Services. Only one other state – Hawaii, with a 13.4 percent reduction – outpaced New Jersey’s improvement.

“Readmissions” occur when a patient is readmitted to the hospital within 30 days of a previous hospital stay. In some instances, a readmission is unavoidable or even planned for further care, but sometimes a readmission signals a poor outcome, medical complication or failure of care coordination or follow-up after the patient leaves the hospital. They’re also costly; CMS says hospital readmissions cost the nation’s Medicare system \$17 billion annually.

New Jersey hospitals have been engaged in a focused effort to reduce avoidable readmissions as part of Partnership for Patients-New Jersey, a quality improvement initiative led by the New Jersey Hospital Association’s Institute for Quality and Patient Safety. The latest CMS data shows their efforts have yielded measurable results.

“This is great news for New Jersey patients. It shows dramatic progress in supporting patients and making sure their recoveries stay on-track once they leave the hospital,” said NJHA President and CEO Betsy Ryan. “That’s something that has been a challenge for our state, quite

frankly, and we've been working very hard to improve. It's most rewarding to see that work pay off."

The national data, reported yesterday in a CMS blog post, <https://blog.cms.gov/2016/09/13/new-data-49-states-plus-dc-reduce-avoidable-hospital-readmissions/> shows that New Jersey's 2015 readmission rate stands at 17.6 percent. Its rate is lower than or the same as nine other states and the District of Columbia. That's a significant change from the 2010 report, when New Jersey's rate was 20.3 and ranked as the second highest in the country.

"New Jersey has had difficulty with this issue for a variety of reasons, including socioeconomics, demographics, cultural diversity and a multitude of languages spoken here, among others," said Aline Holmes, RN, DNP, NJHA senior vice president and director of the Institute for Quality and Patient Safety. "But what we see in the past five years of data is that New Jersey is not only improving its own rate, its progress surpasses many other states. That shows real success as New Jersey healthcare providers deliver better care in the hospital and better continuing care and support once a patient leaves the hospital."

NJHA and its members – both hospitals and post-acute care providers – have been engaged in a number of strategies to reduce hospital readmissions. In addition to NJHA's leadership as a federally designated "hospital engagement network" leading the Partnership for Patients-New Jersey effort, other readmissions activities have included:

- NJHA's Collaborative to Reduce Readmissions, a two-year initiative launched in 2010 that brought together hospitals, nursing homes, home health and hospice providers in a joint effort to identify best practices, apply them to their organizations and share data to measure results. This work was the precursor to NJHA's ongoing Partnership for Patients effort.
- Education programs and conferences in partnership with other healthcare stakeholders including Horizon Blue Cross Blue Shield of New Jersey and Healthcare Quality Strategies Inc.
- NJHA's development of Well on Track, a web-based tool that helps hospitals organize and track follow-up with patients that are discharged from the hospital.
- New Jersey's CARE Act, which defined processes for hospitals to work with patients, families and caregivers to ensure they have the information and support they need before being discharged from the hospital. NJHA worked collaboratively with policymakers to craft the bill and with AARP to promote implementation.