Relative Improvement Rate in Hospital 30-day Readmission
A Monitoring Measure of the Texas Hospital Quality Improvement Award Program

There are potentially three different measures used to track and monitor the 30-day readmission rate for your facility: A) the rate calculated to monitor progress toward the Texas Hospital Quality Improvement Award Program, B) the rate calculated for the TMF Readmissions Reduction Project and C) the rate calculated and displayed on the PEPPER (Program for Evaluating Payment Patterns Electronic Report). Below is a description of the rate used for the Texas Hospital Quality Improvement Award. Access more information about the Readmissions Reduction Project and PEPPER.

1. **The hospital 30-day readmission rate** is the percentage of discharges of all medical causes from an acute care hospital or critical access hospital among Medicare Fee-For-Service beneficiaries residing in Texas resulting in rehospitalization within 30 days.

   **Denominator of the 30-day readmission rate:** Discharges of all medical causes from an acute care hospital or critical access hospital excluding patients who expired in the hospital or who were transferred to another acute care hospital or critical access hospital on the same day (discharge data same as next admission date).

   **Numerator of the 30-day readmission rate:** The denominator hospital discharges that have a readmission occurring within 30 days of their discharge dates (which means 0 < readmission admission date – index discharge date <= 30).

2. The hospital 30-day readmission rate for the award is calculated quarterly with three months worth of claims. For TMF’s Readmissions Reduction project, the same rate is calculated with six months worth of claims.

3. **The relative improvement rate in hospital 30-day readmission** is the percentage of difference between the baseline and current 30-day readmission rates over the baseline rate. This measures the relative change in 30-day readmissions from the baseline. A positive value indicates that the hospital has performed better from the baseline. A negative value suggests that the hospital has not showed improvement from the baseline.

This material was prepared by TMF Health Quality Institute, the Medicare Quality Improvement Organization for Texas, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents do not necessarily reflect CMS policy. 10SOW-TX-C7-13-32